



n e w s

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Leaders in women's health

Women's health and the women who work to promote it were honored at a State House ceremony on March 7. Women's Health Week, March 6-10, was planned by the Department's Women's Health Unit as part of the larger celebration of International Women's Day, March 8. Ten women and organizations received Women's Health Leadership Awards from the Department and citations from the Governor (presented by Vivien Li, Governor's Advisor on Women) for their outstanding contributions to the health of women in the Commonwealth.

Candace Waldron, Director of the Women's Health Unit, explained that the recipients were chosen for their long-standing work with women of all ages, races, and cultures. "To work in this field — sometimes for as long as 10 to 15 years, with little monetary reward — requires particular dedication," Waldron remarked. The women and groups honored were:

The **Caucus of Women Legislators**, for providing the driving force behind many laws and programs promoting women's health.

Centro de Educación Durante el Embarazo (Center for Education During Pregnancy) in Holyoke, which provides community and home-based health education to pregnant Latina women, and is staffed entirely by bilingual and bicultural women.

Doretta Dorrington, Program Coordinator for the Young Women's Health Education Project (a joint venture of DYS and DPH), who provides health education for young women who have been in trouble with the law.

Lisa Gallatin, Founder and Director of the Office Technology Education Project (the first DPH-funded occupational health project for women), who spearheaded efforts to provide health and safety training for clerical workers exposed to health risks by new office technologies.

Maria Morales-Loebl, an active member of the Massachusetts Nutrition Board who has worked on nutrition outreach programs for women and children, and has been an advocate for health care for Latinas in Western Massachusetts.



Commissioner Prothrow-Stith with award recipients at the State House ceremony.

Mujeres Unidas en Acción (Women United in Action), a community-based, collectively run, innovative health education program serving primarily low-income Latina women in Dorchester and Roxbury.

The **New Bedford Women's Center**, which works to prevent teenage pregnancy, reduce sexually transmitted diseases, and prevent cervical and breast cancer in the diverse population it serves.

The **Older Women's League**, an advocacy group that focuses on the rights and needs of the state's older women, and emphasizes women as health care providers.

Elizabeth Price, Co-Founder and Executive Director of Prospect House,

continued on page 3

spotlight

Maria Idali Torres, the newest member of the Public Health Council, is also the first representative of the Latino community appointed to serve on the Council and the first member chosen from western Massachusetts in many years.

"My appointment is a huge accomplishment for the Latino community and Latino advocates in Massachusetts," Torres said. "It reflects the state's recognition that this community is growing and has very specific needs which must be met. Many of these needs are related to the linguistic and cultural differences between the continental U.S. and Latinos' native lands. The only way to address these needs is to incorporate people from different cultures into the process."

While Torres is new to the Council, she is no stranger to public health. She coordinated school health programs in her native Puerto Rico for several years before moving to Massachusetts in 1978. She has also worked as program director for the Holyoke/Westfield WIC Program, senior research associate for an NCI-funded project to prevent smoking among Puerto Rican adolescents in the Greater Boston area, and coordinator of the SPRANS Prenatal Care Project in Holyoke. Torres has a Bachelor's degree in health education as well as a Master's degree in public health. She is currently an assistant professor of community health at Springfield College, where she teaches both graduate and undergraduate courses.

As a public health activist who has established roots in the western part of the state, Torres believes that her

continued on page 2

Serving more with the same budget

When federal funds are being cut back and food costs are rising, how can the Department enroll more low-income women and children in the state's WIC program? The answer, according to Mary Kelligrew Kassler, Director of the Massachusetts WIC Program, is the Infant Formula Price Enhancement System (IFPES). This system, now operating in 25 other states, will start in Massachusetts on May 1.

What this means is that 8,400 more of the state's eligible women, infants and children will receive nutrition counseling and food assistance from the Special Supplement Food Program for Women, Infants and Children (WIC), at no additional cost to taxpayers. IFPES makes this no-cost expansion possible through a competitive bidding system for the purchase of infant formula. DPH accepted the bid from Mead-Johnson, which offered the highest per-can rebate.

For each can of Mead-Johnson formula bought by Massachusetts WIC participants, the company gives WIC a \$1.225 rebate. The WIC program, in turn, uses this rebate to lower WIC food costs so more eligible people can be served. According to Kassler, approximately 74,000 eligible women, infants and children in Massachusetts are not receiving WIC support because of limited funding.

"Stricter federal funding regulations that reward states with lower food costs, plus the skyrocketing costs of infant formula, encouraged the state to initiate the new purchasing method," Kassler explained. "Formula takes the largest percentage — over one third — from the annual Massachusetts WIC food budget, so it was the logical place to start. The wholesale cost of infant formula has increased by over 150% since 1976."

WIC's goal is to reduce infant mortality by preventing nutrition-related health problems during critical periods of growth. WIC programs provide nutritious foods and nutrition counseling for low-income pregnant and postpartum women and their children under five who are at risk. A recent

federal study showed conclusively that WIC is working. The program is credited with producing bigger babies, increasing prenatal care, and decreasing anemia, miscarriages, and premature births among participants. Another study has shown that every dollar WIC spends on food and education saves more than three that would otherwise be spent on neonatal intensive care for premature and low-birthweight babies.

Kassler and her staff are excited that after two years of preliminary work and an inordinate amount of dedicated administrative effort, the IFPES program will soon show concrete results. With the extra funds available, the Department will be able to open new WIC sites and expand services at established programs in communities where the need is greatest.

At the same time, Kassler emphasized that breastfeeding remains the WIC program's recommendation for infant feeding. WIC will continue to stress the nutritional importance of breastfeeding in all its communications with participants and providers.

FAT BUSTERS

You've heard the advice so many times you could recite it. Fat is the biggest enemy in our diet. Fat increases your risk for heart disease, the #1 killer of Americans. Eat less saturated fat and cholesterol, eat more grains and vegetables. By now, you might have begun to think that you're supposed to stop eating everything but gerbil food.

It doesn't always come across clearly, but the nutritionists and dieticians actually want you to widen the variety of foods you eat, not narrow your options.

"Easier said than done," you say? It's only hard if you try to completely overhaul your diet in one fell swoop. Start slowly by paying attention to the foods you eat. Make note of those that are high in fat and how often you eat them. If your favorite meal is very high in fat, you don't have to swear off eating it for all eternity. You can eat it less often, eat smaller portions of it, or maybe cook it differently so

it's not so fatty. If you've always hated vegetables, check out the fresh produce at your local grocer's and try some you've never had before. Some vegetables that are usually served cooked, like spinach and peas, actually taste completely different raw.

One mistake people make is cutting out vitamins and minerals along with fat. Most Americans eat way too much protein and can easily afford to eat smaller portions of leaner cuts of meat and switch to low- and no-fat dairy products. You can also substitute poultry, fish or beans for some of the red meat you've been eating. Another good way to cut down on fat is by dumping the empty calories along with the fat in chips, donuts, pastries and snack crackers. Try unbuttered popcorn or unsalted pretzels if you like starchy snacks, fruit or raw vegetables if you generally go for sweet ones.

For more fat-busting tips that won't make every meal an ordeal, call the Massachusetts Nutrition Hotline at 1-800-322-7203.

spotlight (continued)

experience allows her to bring a unique perspective to the Public Health Council. During her term as a Council member, she hopes to see the Department begin measuring the impact community programs have on their clients. She would also like to see an even greater emphasis on prevention in DPH activities.

"There is definitely a social side to today's health problems. When you look at the problems we address in public health today, most of them are preventable. We have to look at the difference we can make in the quality of peoples' lives. This is at the base of most prevention activities."

Torres said that her primary focus is to continue promoting good health among the state's various minority communities and its western residents. As a Public Health Council member, she hopes to persuade her colleagues on the Council to make the needs of the state's minorities and poor one of their highest priorities.

the corner office

March is Latino Health Month at DPH. In keeping with this theme, I am pleased to announce the creation of the Massachusetts Latino Health Council, whose mission is twofold. The primary purpose of this council is to help improve the health of Latinos in the state by developing and implementing new policies and programs at the Department. The second half of the council's mission is to improve access to existing health services for the Latino community, which often faces language and cultural obstacles as well as economic barriers to care.

The first task of the Latino Health Council will be to assist the Department in developing a Latino health agenda and offer us guidance and support in carrying it out. The members will begin by reviewing existing DPH policies and programs, and

recommending ways to make these more responsive to the needs of Latinos.

We already know that some of these needs are not being met. For example, the Latino community has the highest teen birth rate and one of the lowest prenatal care usage rates in Massachusetts. Latinos in this state are more likely than whites to live in densely populated, poor urban areas, where homicide rates are highest. Nine percent of the state's AIDS cases are diagnosed among Latinos, even though they represent only an estimated 4-6% of the population. Even such a small amount of information makes it clear that this state's Latino residents are at high risk for poor health.

One priority of the Latino Health Council will be to help us improve our ability to collect health data on Latinos so we can ensure that their service needs are being met to the

best of our ability. The Bureau of Health Statistics, Research and Evaluation has already begun this work and expects to issue its first chartbook on Hispanic birth data next month. Council members will also monitor our progress in hiring, retaining and promoting Latinos within the Department, and will review our service contracts to ensure that they are meeting the health needs of Latinos in Massachusetts.

Based on recommendations made by the Latino Health Network, I will appoint the council's 20 members by the end of this month. I am very pleased to be able to participate in the formation of the Massachusetts Latino Health Council, which has an important role to play in the planning of this state's public health agenda for the coming decade.



Deborah Prothrow-Stith

women's health (continued)

a multicultural agency in Worcester that provides comprehensive substance abuse services for people of color and women.

Yorn Sarin of Chelsea has acted on her own as an advocate for the growing Cambodian population by sponsoring refugees who have no relatives in the U.S., and by counseling, sheltering, and referring battered and sexually abused women.

In effect, the award ceremony was also a celebration of the outstanding work of the Women's Health Unit, which has grown from a program of one staff member and an intern working on diethylstilbestrol (DES) to a unit of eight, plus interns. In the past seven years, the unit has developed programs for Latina women, incarcerated women, women exposed to occupational health hazards, and women subjected to rape and domestic violence.

"Women's health, which is so vital to the entire family and community, is often neglected," Commissioner Prothrow-Stith said when presenting the awards. "Women's health is basic to guaranteeing a healthy family." The Department plans to make the women's health celebration and presentation of awards an annual event.

inside dph

Immigration Act

Despite reminders to supervisors, the Immigration Reform and Control Act of 1986 continues to be forgotten by many. With a few narrowly defined exceptions, the law makes it unlawful to knowingly hire anyone who is not authorized to work in the U.S. The law also requires all employers to check the identity and employment eligibility of all individuals to be hired. Supervisors should stress the importance of this law to new employees. At orientation, new employees will be asked for a U.S. passport, Certificate of U.S. Citizenship, Certificate of Naturalization, Alien Registration Card with photograph, or unexpired foreign passport with INS Employment Authorization attached. If none of these is available, the employee may substitute a U.S. Military ID card or a state-issued ID card or driver's license with photograph and an original Social Security number card, birth certificate, or unexpired INS Employment Authorization.

If new hires do not have the documents needed, supervisors should notify them that they must

write to an appropriate agency or person to request the documents. A copy of this request must be given to the Division of Human Resources within the first three days of employment.

Immigration and Naturalization Services has the right to inspect the documents kept by DPH and may fine the Department up to \$1,000 per employee for failure to abide by the law. Therefore, it is extremely important that supervisors notify applicants of this law when discussing job possibilities. If you have any questions about the law or the required documents, please call Marge Reid, Director of Human Resources, at (617) 727-2638.

Deferred compensation

Isn't it time to get your retirement plans off the ground? The Deferred Compensation Plan, administered by the Public Employees Benefit Services Corporation (PEBSCO), can show you how. Deferred compensation is a voluntary, supplemental, long-term retirement savings program available to all state employees. The program allows employees to set aside a por-

continued on page 4

compensation (continued)

tion of their pre-tax earnings in either a savings or an investment program with a current interest rate of 9.3%. Both state and federal taxes on this money are deferred until the money is withdrawn. The program assumes that the money will not be withdrawn until retirement, when the employee is expected to be in a lower tax bracket.

Employees can contribute to the Deferred Compensation Plan through payroll deductions at a minimum of \$10 per week. Deductions are limited to a maximum annual contribution of 25% of gross pay or \$7,500, whichever is less. Employees can change the amount of money being deferred at any time simply by contacting their PEBSCO Plan coordinator. When

employees retire, leave state service, or encounter financial emergencies (determined by PEBSCO), they can collect all or part of the deferred money, plus accrued interest. In any case, withdrawals are taxable in the year received.

For more information on the Deferred Compensation Plan, please call PEBSCO at 1-800-732-3760 or (617) 741-0850. Central Office employees should ask for representative George Sommer, or talk with him in person at 150 Tremont on the first Tuesday of any month. (Sommer's location is posted by the elevators on the day of his visit.) If you'd prefer, you can write to PEBSCO at One Salem Green, Suite 410, Salem, MA 01970.



Calendar

March 29

Have your nutritional status and eating habits evaluated at the Nutrition Awareness Fair, 11 am - 1 pm in the Public Health Council Room. Remember: If you want to have your blood cholesterol level checked at the fair, you must call the Office of Nutrition (7-9283) to make an appointment.

Civil Service exams are tentatively scheduled on the following dates.

April 1	Institution Security Officer II, III & IV
April 22	Mental Health Coordinator I, II & III
April 29	Mental Health Worker III & IV
May 13	Social Worker II & III
May 20	Clerk III
May 27	Dental Hygienist
	Dentist
	Nurse Practitioner
	Pharmacist I
	Service Coordinator I & II
June 17	Senior Physical Therapist
	Public Health Nursing Advisor I & II
	Health Care Facility Inspector I
June 24	Day Care Services Specialist I & II
June 30	Social Worker IV
July 15	Administrative Assistant I & II
August 12	Food Service Supervisor I & II

For more information on these and other exams, please call the Civil Service Board at (617) 727-2293, or check the bulletin board outside the Division of Human Resources on the second floor at 150 Tremont. Applications for Civil Service exams are available from your personnel liaison, your hospital Personnel Office, or the receptionist in the Division of Human Resources.

April 7

World Health Day. This year's theme is "Health for All: Pass It Along." Come to the State House (Room F2, first floor) at 1:30 pm and listen to a multi-ethnic panel discuss how they "pass along" health information in their communities. This World Health Day seminar is sponsored by DPH and the panel discussion will be moderated by Dr. Howard Spivak, Deputy Commissioner for Health Promotion Sciences.

by the way

Use it or lose it

Check with your attendance clerk to find out if you have any vacation leave that will be forfeited if not taken before July 1, 1989. The maximum vacation leave which can be carried over to July 1, 1989, is one year's time (credited on July 1, 1988) for bargaining unit employees. Managers, who accrue vacation leave on a different schedule, may carry over two years' vacation leave (credited between July 1, 1987 and June 30, 1989).

Employees should also remember that personal leave cannot be carried over into the following fiscal year.

Tax time

Are you having a hard time trying to figure out your taxes on your own? The Central Library at 150 Tremont Street can help. In addition to the many tax forms and instruction booklets on hand, the library now has the new 1988 IRS Tax Video available. If you want to see this video, please call Cathy Moore at (617) 727-7022. (Note to cable subscribers: This video will not be seen on MTV.)



DON'T FORGET

to pick up your Magic Kingdom Club card and Membership Guide

TODAY!

Contact:

Heather MacBean

(617) 727-2638

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