

FEW Notes



From the President...

Reflections & Highlights

By Debbie L. Miller

As summer transitions into fall, we are enjoying the cooler temperatures by participating in activities with family and friends. Whether time is shared through attendance at a sporting event, school functions, shopping or dining at your favorite restaurant, it is important to remember that EACH day is a gift. Treasuring each day is vital to those families whose relatives or friends are diagnosed with breast cancer. October is Breast Cancer Awareness Month and various GOKC chapter members are participating in fundraising activities associated with the Susan G. Komen Breast Cancer Foundation as well as planning a Breast Cancer Survivor event. The primary objective of the National Breast Cancer Awareness Month (NBCAM) program is to educate women about breast cancer by emphasizing the importance of early detection through screening mammography.

Breast cancer has touched my family and dearest friends. Luckily, detection allowed treatment at the earliest stages to eradicate cancer from their bodies and they are now cancer free. I would like to stress the importance of scheduling yearly mammograms because finding breast cancer at an early stage greatly improves the chances of successful treatment. I am thankful early diagnosis allowed these women in my life to courageously win the battle.

It is important to note that the third Friday in October is National Mammography Day. On this day, participating radiologists and/or radiology facilities provide discounted or even free mammogram screenings. Several national organizations will have a list of the facilities that participate in National Mammography Day. To find a place near you, call either the American Cancer Society at 1-800-ACS-2345 or the Susan G. Komen Breast Cancer Foundation at 1-800-IM-AWARE. Let us all continue to pray for a cure.

Just a quick update on the upcoming 2007 Southwest Regional Training Program (RTP). As RTP hosts, the GOKC chapter members have been diligently working to complete the requirements necessary to achieve a successful RTP. Details are being finalized and our chapter hopes to distribute the RTP information packets NLT mid-December 2006, if not sooner.

Next Scheduled Board Meeting
October 16, 2006
Holiday Inn Airport
5:00 p.m.

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Federally Employed Women Inc.
Greater Oklahoma City
Chapter, No. 30

P.O. Box 890718
Oklahoma City, OK 73189-0718

Editor: Catherine Ortiz
Prs_bbbluez@cox.net

National Breast Cancer Awareness Month

Submitted by Brenda Hagar

Breast cancer is the most common cancer diagnosed in women in America. When breast cancer is detected early and treated promptly, suffering and ultimately the loss of life can be significantly reduced. Women are encouraged to ask their doctors and other health care providers about mammography screening. Mammography (an x-ray picture of the breast) is the single most effective method to detect breast changes that may be cancer, long before physical symptoms can be seen or felt. For early stage breast cancer, there are more treatment options, treatment can be less disfiguring and less toxic, and survival is improved.

As women age, their risk of breast cancer increases. For most women, high quality mammography screening should begin at age 40. As risk factors vary in everyone, each woman and her doctor should discuss the plan that's right for her. Most organizations recommend screening every 1 to 2 years; some recommend it take place every year. Screening should continue throughout a woman's lifetime.

In addition to the use of mammography, health care providers should also examine a woman's breasts, called a clinical breast examination (CBE), as part of routine health care to search for any abnormalities that may be missed by mammography. Breast self-examination (BSE) may alert a woman to any changes in her breasts, but it is not a substitute for mammography screening. The value of BSE is that it helps a woman become familiar with how her breasts normally feel and to notice any changes.

Breast Cancer FAQ's

Is mammography reliable?

In 1992, the U.S. Congress passed the Mammography Quality Standards Act to ensure that mammography facilities throughout the country are of high quality and are reliable. To lawfully perform mammography, each facility must prominently display a certificate issued by the U.S. Food and Drug Administration (FDA). This certificate serves as evidence that the facility meets quality standards.

What should women expect when they have a mammogram?

A woman who still menstruates should schedule the mammogram for one week after her menstrual period begins, when the breasts will be the least tender. Women are asked to avoid using deodorant and lotions on the day of the mammogram and should wear two-piece clothing to make undressing more convenient. A specially trained radiologic technologist will perform the

mammogram. The woman will be asked to undress from the waist up only and stand next to the x-ray machine. Two flat surfaces will compress one breast first, then the other for a few seconds. Compression is necessary to produce the best pictures using the lowest amount of radiation possible.

What barriers keep women from getting mammograms on a routine basis?

Studies have identified a number of barriers to mammography screening. Some can be overcome with health education; others require programs to make mammography more accessible for women. The top four barriers, in women's words, are:

- "I don't need a mammogram because my doctor has never recommended I have one."
- "I've never thought about it."
- "I have no breast problems, so mammography isn't necessary."
- "I don't have enough time."

Other barriers include:

- Fear about pain from the procedure.
- Fear of a diagnosis of breast cancer.
- Concerns about screening costs.
- Concerns about the financial burden of diagnostic procedures and treatment, if needed.
- No recent clinical breast examination or Pap test.
- No routine source of health care.
- Difficulty taking time off from work to be screened.
- Living a far distance from the screening site.

* Source: The Manual of Intervention Strategies to Increase Mammography Rates, Centers for Disease Control and Prevention with the Prudential Center for Health Care Research.

Is mammography screening the only way to detect breast cancer?

Mammography screening remains the best available method to detect breast cancer early. However, no medical test is always 100 percent accurate, and mammography is no exception. Research is under way to improve the technology to lead to better accuracy and to create new technologies.

For more information about mammography screening, please refer to American Cancer Society's Website at www.cancer.org.

Will health insurance pay for screening mammograms?

Regular screening mammograms are covered by the U.S. government's Medicare and Medicaid programs and other private health insurance plans (women should check their own insurance plans for individual

details). Free or low-cost mammograms are available for women without health insurance in many locations. For a program near you, contact the Centers for Disease Control and Prevention (CDC) at (888) 842-6355.

Will Medicare pay for screening mammograms?

Yes. Medicare covers mammography screening every year for women age 40 and older who are Medicare recipients. Yet, eligible women and their doctors may not know about this important benefit. A series of publications regarding this benefit are available in English and Spanish. For more information about Medicare coverage, contact the Medicare toll-free hotline at (800) MEDICARE or the Medicare Website, www.medicare.gov.

How can women get low-cost or free mammograms?

For information on low- or no- cost mammography screening, contact CDC at (888) 842-6355 or visit their Web site at www.cdc.gov. Women seeking mammograms at a reduced rate are urged to make their appointment early in the year, as space may be limited. To find a breast-imaging facility, contact the National Cancer Institute at (800) 4-CANCER. For more information, visit www.nbcam.org.

Source:

National Breast Cancer Awareness Month
National Breast Cancer Awareness Month Board of Sponsors
233 North Michigan Avenue, Suite 1400
Chicago, IL 60601
(312) 596-3400
nbcaminfo@yahoo.com
www.nbcam.org/about_nbcam.cfm

Senate Resolution 508 Designating October 20, 2006 As National Mammography Day

Mr. BIDEN submitted the following resolution; which was referred to the Committee on the Judiciary:

S. Res. 508

Whereas, according to the American Cancer Society, in 2006, 212,920 women will be diagnosed with breast cancer and 40,970 women will die from that disease;

Whereas it is estimated that about 2,000,000 women were diagnosed with breast cancer in the 1990s, and that, in nearly 500,000 of those cases, the cancer resulted in death;

Whereas African-American women suffer a 30 percent greater mortality rate from breast cancer than White women and more than a 100 percent greater mortality rate from breast cancer than women from Hispanic, Asian, and American Indian populations;

Whereas the risk of breast cancer increases with age, with a woman at age 70 having twice as much of a chance of developing the disease as a woman at age 50;

Whereas at least 80 percent of the women who get breast cancer have no family history of the disease;

Whereas mammograms, when operated professionally at a certified facility, can provide safe screening and early detection of breast cancer in many women;

Whereas mammography is an excellent method for early detection of localized breast cancer, which has a 5-year survival rate of more than 97 percent;

Whereas the National Cancer Institute and the American Cancer Society continue to recommend periodic mammograms; and

Whereas the National Breast Cancer Coalition recommends that each woman and her health care provider make an individual decision about mammography: Now, therefore, be it

Resolved, That the Senate--

(1) designates October 20, 2006, as "National Mammography Day"; and (2) encourages the people of the United States to observe the day with appropriate programs and activities.

Mr. BIDEN. Mr. President, today I am submitting a resolution designating October 20, 2006, as "National Mammography Day." I might note that I have submitted a similar resolution each year since 1993, and on each occasion the Senate has shown its support for the fight against breast cancer by approving the resolution.

Each year, as I prepare to introduce this resolution, I review the latest information from the American Cancer Society about breast cancer. For the year 2006, it is estimated that nearly 213,000 women will be diagnosed with breast cancer and nearly 41,000 women will die of this disease.

In past years, I have often commented on how gloomy these statistics were. But as I review how these numbers are changing over time, I have come to the realization that it is really more appropriate to be optimistic. The trend over time is that the number of deaths from breast cancer is actually stable or falling from year to year. Early detection of breast cancer continues to result in extremely favorable outcomes: 97 percent of women with localized breast cancer will survive 5 years or longer. New digital techniques make

the process of mammography much more rapid and precise than before. Government programs will provide free mammograms to those who can't afford them, as well as Medicaid eligibility for treatment if breast cancer is diagnosed. Just last year, the headline on the front page of the Washington Post trumpeted a major improvement in survival of patients with early breast cancer following use of modern treatment regimens involving chemotherapy and hormone therapy. This year, we learned that newer anti-estrogen drugs are effective in preventing breast cancer in high-risk women. Information about treatment of breast cancer with surgery, chemotherapy, and radiation therapy has exploded, reflecting enormous research advances in this disease. So I am feeling quite positive about our battle against breast cancer. A diagnosis of breast cancer is not a death sentence, and I encounter long-term survivors of breast cancer nearly daily.

In recent times, the newspapers have been filled with discussion over whether the scientific evidence actually supports the conclusion that periodic screening mammography saves lives. It seems that much of this controversy relates to new interpretations of old studies, and the relatively few recent studies of this matter have not clarified this issue. Most sources seem to agree that all of the existing scientific studies have some weaknesses, but it is far from clear whether the very large and truly unambiguous study needed to settle this matter definitively can ever be done.

So what is a woman to do? I do not claim any expertise in this highly technical area, so I rely on the experts. The American Cancer Society, the National Cancer Institute, and the U.S. Preventive Services Task Force all continue to recommend periodic screening mammography, and I endorse the statements of these distinguished bodies.

On the other hand, I recognize that some women who examine these research studies are unconvinced of the need for periodic screening mammography. However, even those scientists who do not support periodic mammography for all women believe that it is appropriate for some groups of women with particular risk factors. In agreement with these experts, I encourage all women who have doubts about the usefulness of screening mammography in general to discuss with their individual physicians whether this test is appropriate in their specific situations.

So my message to women is: have a periodic mammogram, or at the very least discuss this option with your own physician.

I know that some women don't have annual mammograms because of either fear or forgetfulness. It is only human nature for some women to avoid mammograms because they are afraid of what they will find. To those who are fearful, I would say that if you have periodic routine mammograms, and the latest one

comes out positive, even before you have any symptoms or have found a lump on self-examination, you have reason to be optimistic, not pessimistic. Such early-detected breast cancers are highly treatable.

Then there is forgetfulness. I certainly understand how difficult it is to remember to do something that only comes around once each year. I would suggest that this is where National Mammography Day comes in. On that day, let's make sure that each woman we know picks a specific date on which to get a mammogram each year, a date that she won't forget: a child's birthday, an anniversary, perhaps even the day her taxes are due. On National Mammography Day, let's ask our loved ones: pick one of these dates, fix it in your mind along with a picture of your child, your wedding, or another symbol of that date, and promise yourself to get a mammogram on that date every year. Do it for yourself and for the others that love you and want you to be part of their lives for as long as possible.

And to those women who are reluctant to have a mammogram, I say let National Mammography Day serve as a reminder to discuss this question each year with your physician. New scientific studies that are published and new mammography techniques that are developed may affect your decision on this matter from one year to the next. I encourage you to keep an open mind and not to feel that a decision at one point in time commits you irrevocably to a particular course of action for the indefinite future.

Mr. President, I urge my colleagues to join me in the ongoing fight against breast cancer by co-sponsoring and voting for this resolution to designate October 20, 2006, as "National Mammography Day."

Source: Library of Congress. Senate -June 13, 2006

FAA Honors Outstanding Contribution

*A*t the Federal Aviation Administration 29th Annual Administrator's Awards for Excellence in Equal Employment Opportunity ceremony on Tuesday, April 11, Cynthia Corbett was recognized with the Equal Employment Opportunity Superior Achievement Award by FAA Administrator Marion Blakey, for her leadership role as Federal Women's Program (FWP) Manager, Mike Monroney Aeronautical Center, Oklahoma City, OK. The Superior Achievement Award is the highest honor given to FAA employees and is a testament to organizational excellence and outstanding contribution.

Cynthia was also commended for helping to revitalize the interagency Oklahoma Federal Executive Board's FWP that had been defunct since 2001, along with

Tammie Kierstead of the Veterans Administration Medical Center, and for being actively involved in a host of outreach and recruitment events, among many other activities that demonstrate her extraordinary personal commitment to the principles of EEO.

Mr. Nick Sabatini, Associate Administrator for Aviation Safety, and Dr. Fred Tilton, Office of Aerospace Medicine Federal Flight Surgeon, accepted the award at FAA Headquarters, Washington, DC on Cynthia's behalf. Dr. Jim Whinnery, Aerospace Medical Research Division Manager, presented the award on Thursday, September 28, 2006. Cynthia offered her apologies to Ms. Blakey for not attending the Awards ceremony in April. She was vacationing with her family in Maui at the time.



Dr. Fred Tilton, left, and Mr. Nick Sabatini accept FAA Administrator's Award for Excellence on Cynthia Corbett's behalf.

Cynthia Corbett and Tammie Kierstead are members of the GOKC Executive Board. We are very proud of them.

October is National Disability Employment Awareness Month

*W*hat is National Disability Employment Awareness Month?

Congress designated each October as National Disability Employment Awareness Month (NDEAM). The Office of Disability Employment Policy has the lead in planning NDEAM activities and materials to increase the public's awareness of the contributions and skills of American workers with disabilities. Various programs carried out throughout the month also

highlight the specific employment barriers that still need to be addressed and removed.

This effort to educate the American public about issues related to disability and employment actually began in 1945, when Congress enacted a law declaring the first week in October each year "National Employ the Physically Handicapped Week." In 1962, the word "physically" was removed to acknowledge the employment needs and contributions of individuals with all types of disabilities. In 1988, Congress expanded the week to a month and changed the name to "National Disability Employment Awareness Month."

Disabilities come in different ways. You can't always see them. Make yourself aware and be courteous of those around you.

The Statue of Liberty

Submitted by Carolyn Delong

*L*ocated on a 12 acre island, the Statue of Liberty Enlightening the World was a gift of friendship from the people of France to the people of the United States and is a universal symbol of freedom and democracy. The Statue of Liberty was dedicated on October 28, 1886, designated as a National Monument in 1924 and restored for her centennial on July 4, 1986.

The idea to give the Statue to the people of the United States was conceived at a dinner party in France in 1865. The structural engineer was Gustave Eiffel (famous for the Eiffel Tower). The construction of the Statue began in France in 1875 and was completed in June 1884.

The statue was presented to America by the people of France on July 4, 1884. She was then dismantled and shipped to the United States in early 1885. The number of individual pieces shipped to America was 350, using 214 crates.

The Statue rests on the largest 19th century concrete structure in the United States. It weighs 27,000 tons and is 13,300 cubic yards.

President Grover Cleveland accepted the Statue on behalf of the United States.

Women-owned Firms Increase Nearly 20 Percent

*L*eanndra Martinez states that the number of women-owned businesses grew at almost three times

the national rate between 1997 and 2002, according to a new study released Aug. 17 by the Office of Advocacy of the U.S. Small Business Administration. The number grew by 20 percent, while all the number of U.S. businesses grew by 7 percent.

Despite that growth, the actual number of women-owned business is still dwarfed by male-owned ones. In 2002, women owned 29 percent (6.5 million) of non-farm U.S. businesses, compared to the 59 percent reporting as man-owned and the 12 percent owned by men and women. Among Hispanics, women owned a little more than a third of businesses in 2002, up from 28 percent in 1997.

In the report *Women in Business: A Demographic Review of Women's Business Ownership*, Office of Advocacy senior economist Dr. Ying Lowrey used new U.S. Census data to show the increase of women in business and their effect on the economy. Dr. Lowrey found that the majority of women-owned businesses were in wholesale and retail trade manufacturing, but also noted a significant number in professional, scientific, and technical services, as well as in health care and social assistance.

"Women are some of the most resilient and dedicated entrepreneurs, which explains their phenomenal growth rate," commented Rep. Nydia Velazquez, the ranking Democrat on the House Small Business Committee. She depicted the gains as coming in a tough time for overall small businesses seeking federal assistance, a theme she frequently sounds.

"The most impressive aspect is that the growth has occurred while the Bush Administration has refused to implement the Women's Procurement Program and cut programs that promote women entrepreneurship, including the Microloan and Women's Business Centers. One can only imagine the growth in women entrepreneurs under a more supportive administration."

Of all women-owned firms, 82.5 percent earned at least \$50,000 in receipts in 2002.

More than 14 percent of the women-owned firms had paid employees, although on the whole these were still small companies: 84 percent of these "employer companies" had fewer than 10 employees. Among the larger women-owned employer firms, 7,240 had 100 employees or more and accounted for \$275 billion in gross receipts, which is 34.2 percent of receipts from all women-owned firms. During the study period, middle-sized businesses – those with 10 to 499 employees -- increased while the number, employment, and payroll of large women-owned businesses decreased.

In comparison with male-owned businesses, women retained and increased their employee pool. The 48-

page study showed that businesses owned by women increased their employment by 70,000 people. Firms owned by men, on the other hand, lost 1 million employees. Those jointly owned by men and women reported a loss of 2.6 million employees.

All told, women-owned business with employees accounted for 7.1 million workers and \$173.7 billion in annual payroll. Demographically, Anglo women dominated business ownership in 2002, accounting for 85.95 percent of women business owners. Of all women business owners, 8.43 percent were African American, 8.33 percent were Hispanic, 5.25 percent were Asian, 1.23 percent were American Indian and Alaska Natives, and 0.18 percent were Native Hawaiian and other Pacific Islander.

Although minorities account for a small portion of business owners compared to Anglos, the report showed that minorities — especially women — are increasing their presence. Among Anglo-owned businesses, for example, women account for 28 percent of owners. But among minorities the share is higher – 46 percent among African Americans, 34 percent among Hispanics and 31 percent among Asian Americans. In addition, more than 14 percent of women business owners report themselves as minorities while fewer than 10 percent of male business owners are minorities.

Hispanic women showed a greater jump than men in business ownership between 1997 and 2002. In 1997, 337,708 businesses were owned by Hispanic women. By 2002, Hispanic women owned 540,909, a 60 percent gain that allowed them to increase their share of Hispanic ownership from 28 percent to 34 percent. In comparison, Hispanic men owned 666,486 business in 1997 and 921,963 by 2002, a gain of 38 percent.

The number of businesses owned by native Hawaiian/Pacific Island women increased 103 percent between 1997 and 2002, while their male counterparts saw an 80 percent increase. Asian American women-owned businesses had a 77 percent survival rate, the highest out of the other minority groups. African American women added 75 percent more businesses.

Equality Day Forum

Submitted by Carolyn Delong

The Dallas Area Chapter hosted their 6th Annual Women's Equality Day Forum on Thursday, August 31 in Dallas, Texas. Brenda Hagar and I traveled to Dallas to attend this event.

The forum was excellent! The Legislative Breakfast guest speaker was Cecelia Davis, National VP for

Congressional Relations. Cecelia presented an informative speech.

Cecelia told us that FEW had conducted a survey to discover which of our Legislative Agenda issues were most important to the members. Here are the results:

- 1. Cuts to retirement benefits through the Government Offset (GPO) and Windfall Elimination Provision (WEP)
- 2. Passage of the Equal Rights Amendment (ERA)
- 3. Effective/Efficient Government Reform
- 4. Paid Parental leave which would allow both mothers and fathers time off with the birth or adoption of a baby in addition to annual or sick leave
- 5. Premium Conversion Bill which would allow retirees to buy health insurance with pretax dollars

Cecelia also discussed the benefits of the Capwiz system which is available to all FEW members from the national website. Capwiz is an effective and easy to let your congressional representatives know your position on legislative issues.

Women in Elective Office 2006

*I*n 2006, 81 women serve in the U.S.

Congress. Fourteen women serve in the Senate, and 67 women serve in the House. The number of women in statewide elective executive posts is 79, while the proportion of women in state legislatures is at 22.8 percent.

Congress: Women hold 81, or 15.1%, of the 535 seats in the 109th US Congress — 14, or 14.0%, of the 100 seats in the Senate and 67, or 15.4%, of the 435 seats in the House of Representatives. In addition, three women serve as Delegates to the House from Guam, the Virgin Islands and Washington, DC.

Statewide Elective Executive: In 2006, 78 women hold statewide elective executive offices across the country; women hold 24.8% of the 315 available positions. Among these women, 35 are Democrats, 39 are Republicans, one is an independent, and 3 were elected in nonpartisan races.

State Legislature: In 2006, 1,686, or 22.8%, of the 7,382 state legislators in the United States are women. Women hold 408, or 20.8%, of the 1,971 state senate seats and 1,278, or 23.6%, of the 5,411 state house

seats. Since 1971, the number of women serving in state legislatures has increased more than four-fold.

Sweetest Day – October 21, 2006

Submitted by Debbie L. Miller

*S*weetest Day is always celebrated on the third Saturday in the month of October. Sweetest Day observance originated in Cleveland in 1922 when Mr. Herbert Birch Kingston, a philanthropist and candy company employee, wanted to bring happiness into the lives of orphans, shut-ins and others who were forgotten. With the help of friends, he began to distribute candy and small gifts to the underprivileged.

In time, the Sweetest Day idea of spreading cheer to the underprivileged was broadened to include everyone from family members to sweethearts, and co-workers to acquaintances. Greeting cards, tokens of affection and appreciation, gifts, and spending time together are ways that people celebrate Sweetest Day. In addition to remembering those sometimes forgotten and showing appreciation for family and friends, Sweetest Day also has become very much a romantic day in most locations.

Primarily a regional observance celebrated in the Great Lakes region and the Northeast, Sweetest Day is gradually spreading to other areas of the country. People tend to take the Sweetest Day tradition with them when they move. This year, Sweetest Day will be observed on Oct 21st. FEW members know the importance of valuable friends in the workplace—surprise someone by acknowledging how special they are on this special day!

Let's Say Thanks

Submitted by Brenda Hagar

*T*his program is sponsored by Xerox. If you go to this web site, <http://www.letsaysaythanks.com/Home1024.html>, you can pick out a thank you card and Xerox will print it out and it will be sent to a soldier that is currently serving in Iraq. You can't pick out who gets it, but it will go to some member of the armed services.

How amazing it would be if we could get everyone we know to send one!!! This is a great site. Please send a card – it's FREE.

October Stress Busters of the Month: Health Tips to Fight Stress

"Stress depresses immune system resistance to infections and viral-linked illnesses, ranging from the common cold and herpes, to AIDS and certain cancers," said Dr. Paul Rosch, president of The American Institute of Stress. Stress reduction strategies can prevent or minimize heart attacks and high blood pressure, "particularly in patients who are depressed or extremely anxious," said Rosch.

So instead of curling up with a pint of ice cream or an alcoholic beverage, try a few things that improve health and fight stress:

1. Exercise. A few rounds with the punching bag at the gym can do wonders for your soul, not to mention your cardiovascular health.

2. Limit alcohol and caffeine. While these familiar crutches can feel soothing at the time, the adrenaline rush from caffeine only ratchets up the anxiety. Also the thumping headache and queasy stomach from excess alcohol are stress-inducing themselves.

3. Get adequate sleep. Easier said than done, make a serious effort to hit the hay. Nearly 60 percent of people in the U.S. say they don't get enough sleep.

4. Make time for yourself. Turn off the cell phone and don't check your e-mail. Take a few minutes in this over-connected world to take a walk or go to lunch. For a little while, make yourself completely unavailable to anyone.

5. Eat healthy food. When you're stressed, it's all too easy to grab a greasy burger or a quick candy bar. Resist. Fast food joints now offer healthier fare, or you can stock your desk or kitchen with food that's quick and healthy.

6. Quit smoking. If you're a smoker, the thought of kicking the habit may be stress-inducing. But do you have time for this addiction? Between running outside to light up -- and increased colds and infections -- the answer is probably no.

7. Yoga. About 22 percent of people turn to yoga, stress management, or relaxation techniques to cope with stress. If you're intimidated by pretzel-like yoga fanatics at the local gym, look around. Try Pilates, Tai Chi, or other ways to relieve stress.

8. Check in with the dentist. Studies have linked workplace stress with tooth grinding, and financial stress to gum disease. Dental problems can cause jaw pain and loose or broken teeth, or can even contribute

to heart disease and diabetes complications. It's worth a checkup.

9. Neck massage. While about 20 percent of adults say they get neck or shoulder massages to combat stress, women and those under 65 are more likely to do so. All those people may be on to something. Try it, and see if you like it!

10. Attitude adjustment. Some studies suggest that a positive attitude can counteract some of the health effects of stress. Studies have linked hostility to heart attacks and psychological distress to Alzheimer's, and have shown that people with positive attitudes toward aging live longer than those with a more negative outlook.

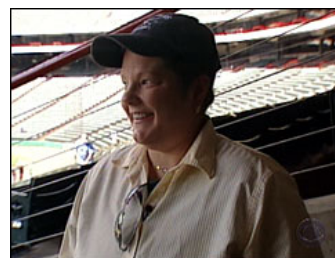
Source: Michelle T. Shinseki, Health Editor
www.lhj.com

National Boss's Day – October 16, 2006

Workplace surveys confirm that one of the most important elements of job satisfaction is a positive relationship between a supervisor and worker. National Boss' Day on October 16th offers an opportunity for employees that are FEW members to recognize their supervisors within their workplace. Supervisors who continually support FEW members by providing opportunities for professional growth through leadership and supporting attendance at NTPs/RTPs to enhance career development deserve to be acknowledged on their special day. Remember—a verbal acknowledgement is a simple act and can be just as meaningful as a card.

A Life-Saving Line Drive

Submitted by Brenda Hagar



Getting Hit by a Line Drive May Have Saved One Fan's Life

When Alfonso Soriano of the Texas Rangers hit a foul line drive into the seats during a game last May, he had no idea he'd end up making a save. As **Steve Hartman** describes in this week's Assignment America, the line drive didn't save a game ... it saved a life.

What happened at Ameritrust Field in Arlington, Texas, was either one of the most fortunate foul balls in baseball history — or a life-saving miracle.

"I do believe that I could have died and wouldn't be sitting here today," says Jenny Sorrell.

If it was a miracle, the instrument of God was Soriano, then an infielder for the Texas Rangers, who smoked a foul ball into the seats.

"It was so fast," says Sorrell.

The fans in the section where Jenny was seated put up their hands. But the ball never grazed a finger — it hit her right in the gut.

"I'm just trying to get air, you know — trying not to show how bad it hurts," she says.

Sorrell actually shook it off pretty well. She says the only reason she went to the hospital was to make sure she hadn't ruptured anything, which she hadn't. But the CAT scan did show something else — something a lot worse.

"When I took a look at her films and took a look at her exam, it was pretty clear that it was ovarian cancer," says Dr. John Schorge. Right below the bruise from Soriano's line drive, Schorge found 15 tumors — and he may have found them just in time.

"Every day that went by would have been a higher chance of this operation she had being less successful," he says.

Almost a year later, after surgery and chemo, Sorrell is in remission. She wants women to know that their yearly physical *doesn't* check for ovarian cancer. There is no screening test, and the symptoms are subtle. That's why she says there has to be more awareness.

"I wouldn't want anyone else to get hit by a baseball to find out," she says. Sorrell also has tickets for another game — in a section where she's not likely to get hit by another line drive. One miracle was enough.

National Adopt-A-Dog Month

If you have considered adding a new dog to your family, October is the time to do it. Each October, the American Humane Association partners with local animal shelters across the country in promoting Adopt-A-Dog Month, a massive national campaign to highlight wonderful homeless dogs waiting to be adopted. The event encourages people to visit

their local animal shelter first to adopt their new best friend.

Millions of loving dogs in every size and shape imaginable wait anxiously in local shelters for a home of their own. By choosing to adopt a dog during Adopt-A-Dog Month, pet lovers are working to decrease the number of animals left homeless each year -- a mission the American Humane Society strives for each day. Celebrate Adopt-A-Dog Month by visiting your local shelter today. It's the perfect time to save a pet's life and make a new friend!

Precious Gifts

Submitted by Alverzine Miles

Our Individual gifts are more precious than we know. If we are not afraid to use them, they can have more impact than we ever dreamed...

Happy Birthday

Kimberly Hare – October 2
Mary Holzer – October 3
Teri Jones – October 18

GOKC CHAPTER EXECUTIVE BOARD 2004-2006		
President	Debbie L. Miller	954-7825 (w) 691-2992 (h)
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VP Membership	Jennifer Mott	954-5558 (w) 650-6323 (c)
VP Programs	Tammie Kierstead	270-0501 (w) ext. 4115 620-1429 (h)
Secretary	Lynn Carroll	752-4535 (h)
Treasurer	Carolyn DeLong	691-5817 (h)
Nominations Chair	Peggy O'Neal	843-5938 (h)
Bylaws	Ellen McKenzie	954-2882 (w) 285-1296 (h)
Legislative	Jennifer Mott	954-5558 (w) 650-6323 (c)
Compliance/Diversity	Susan Arnett	736-3578 (w) 740-2400 (h)
Ways & Means	Marilyn Hampton	794-0905 (h)
Parliamentarian	Alverzine Miles	427-0588 (h)
Finance	Cynthia Corbett	954-7528 (w) 659-1802 (h)
Resolutions/Awards	Vacant	
Newsletter/Publicity	Catherine Ortiz	605-7258 (w) 677-6655 (h)

