

From determination of the weight status of a child to handling a child's feelings of self-worth, the reader is encouraged to proceed in a positive manner. Throughout the booklet parents are encouraged to serve as good role models for food choices and activity habits. The importance of selecting appropriate food plans for the entire family rather than singling out the child with a weight problem is also reviewed. One of the most valuable messages of the booklet is the encouragement to parents to show their love and acceptance of a child regardless of his or her weight.

The final pages of the booklet are devoted to foods in five basic food groups: milk and milk products; meat, poultry, fish, eggs, beans and nuts; breads and cereals; fruits and vegetables; and sweets, fats and snack foods. Within each food group, foods are listed according to recommended use: often, sometimes, rarely. The author carefully points out that foods need not be restricted, but some foods may be encouraged "often" while others should be used "rarely." The importance of regular and planned mealtimes is emphasized.

The booklet would be helpful for parents who have a child with a weight problem, as well as those interested in developing positive feelings toward food and weight in their children. It is well worth the price.

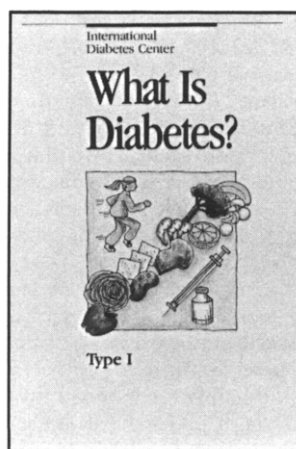
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PROFESSIONAL/CONSUMER Low Literacy Preview Packet, Nemanic, A., G. Kuath Morin and J. Ostrom Joynes, eds. 1988. From Diabetes Center, Inc., P.O. Box 739, Wayzata, MN, 55391, 17 booklets, \$19.95 + \$1.50 P/H. ISBN 0-937721-45-x.

How can health-care practitioners teach diabetic patients with low literacy skills to effectively control their blood sugar levels? This Low Literacy Series on diabetes (17 booklets, 20-30 pages each) has been designed as a teaching aid to introduce diabetics with low literacy skills to various aspects of self-management treatment. Pamphlet titles include: "Blood Sugar Testing," "Giving Insulin," "Healthy Eating," "Diabetes and Exercise," "Foot Care," and "Diabetes and Alcohol."

Visual aids are used very effectively. Almost every sentence of text is accompanied by a clear drawing. For instance, next to the advice to "eat less sugar and sweets" is a drawing of a slice of layer cake with a red "X" through the cake.

There are, however, several areas of



weakness, such as listing white bread in the section on foods "good for you." Perhaps more attention should be paid to a high fiber regime, such as the one developed by Anderson *et al.* (University of Kentucky, Lexington). Also, the booklet on exercise suggests that vigorous exercise may be started immediately following eating. Walking may be all right after eating, but many people need to postpone vigorous exercise for several hours after eating.

These, however, are relatively minor problems. Overall, the booklets are well-written and easy to understand. Diabetes educators will find the material useful for one-on-one counseling or for use with small groups. Modifications, if needed, may be easily hand-written into each booklet to reflect different counselor's ideas about diabetes management. I would recommend this resource.

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PROFESSIONAL/CONSUMER Post Transplant Diet, 1988. From Department of Dietary Services, Patient Education Materials, Duke University Medical Center, Box 3713, Durham, NC 27710, 10 pp., booklet, \$0.75 each.

This easy-to-read booklet outlines a high-protein, sodium- and carbohydrate-restricted diet for the post-transplant patient. The format is a modification of the American Diabetes Association's food exchange list.

Children and marginally educated adults who have undergone a kidney transplant will find that the booklet clearly summarizes what they can and cannot eat for up to three months after surgery. While a much longer treatment of the subject, including a full week of menu suggestions, might be an appropriate adjunct to this pamphlet, the booklet stands on its own as a low-cost, non-threatening piece of patient literature.

There is space for customizing the booklet according to each patient's needs (e.g., "If you are taking cyclosporin, you may need _____ cups of low fat chocolate milk each day to take your medicine").

A product of the Duke University Medical Center in North Carolina, this booklet reflects regional Southern cookery and includes such foods as cowpeas, grits, poke and Crowder peas. If adapted for use elsewhere, the same care should be used to include foods indigenous to that region.

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REPORTS

PROFESSIONAL

Canada's Health Promotion Survey: Technical Report. Health and Welfare Canada, 1988. From Publication Unit Health Services and Promotion Branch, 5th Floor, Jeanne Mance Bldg., Tunney's Pasture, Ottawa, Ontario, K1A 1B4, 243 pp., write to publisher for price. ISBN 0-662-15981-0.

Canada's Health Promotion Survey adds a new dimension to the Canadian database for health promotion by focusing on health orientation and behavior, rather than focusing solely on health status. The objectives of this survey were: (1) to describe the prevalence of health practices, attitudes, beliefs, and intentions; and (2) to examine the relationships among these variables. A broad range of topics are addressed in this report: tobacco use, alcohol use, drug use, high blood pressure screening, pap smear screening, breast examination, safety and accident prevention, safety and health promotion at work, nutrition, exercise, health status, and potential health status (perceived need to change, need for health information, and intentions to change).

The survey was conducted in June of 1985. Over 11,000 Canadians were contacted by telephone, and each interview consisted of 109 questions. The response rate was 82%. The target population was all persons over 14 years of age living in Canada, excepting residents of the Northwest Territories and full time residents of institutions.

Comparisons can be made with numerous other surveys, including the Canada Health Survey (1981) and the