



lifes little treasures

## *What's Inside:*

- **Welcome from the President**
- **Editors Note**
- **The Committee**
- **Our Vision & Aims**
- **Diary Dates**
- **Tracey Spicer's Story**
- **Buddy Programme**
- **Summer Sausage Sizzle**
- **Free Infant Pneumococcal Vaccination Program**
- **Feature Articles**
  - Why do women deliver early?
  - Why does early intervention work?
  - Who will deliver early?
- **Noahs Ark Early Intervention Programme**
- **How to Contact us**

## President's Welcome

Hi Everyone!!

First of all, a warm welcome to all our new members. Thank you so much for your support.

What a busy three months it has been. LLT recently appointed myself as president, previously vice president, and Parool as vice president, previously a much valued committee member. We both look forward to our new roles. I would like to take this opportunity to thank Rachael for her time as President and look forward to her continued support.

Father's day was hopefully a special day for all families. We managed to get away and spend some quality family time together. We took the twins aged 2 1/2 to Queensland. Many of our friends thought we were mad for taking two year olds away for such a long time. The first week saw Zac burst both his ear drums and then he had an allergic reaction to the antibiotics and cried for 3 days. At this point we thought the holiday was not such a great idea. Zac recovered and we all had a fantastic time. The twins now continually ask 'when are we going on holidays'.

It was great to meet several new mums and bubs at our morning teas. We now have two locations, Armadale and Sunbury, so hopefully this enables people to join us without traveling too far away from home.

An exciting event that is coming up is our 'Picnic in the Park' at St Vincents Gardens, Albert Park. Please keep January 22<sup>nd</sup> 2006 free as this promises to be a great day that is open to not only members of LLT, but all friends and family. Please pass on the details as listed in the newsletter to any Prem families that you know and ask them to join us for this special day. Please remember to RSVP LLT for catering purposes.

With Christmas just around the corner LLT is putting up a Christmas tree on the ninth floor at the Royal Women's Hospital. Hopefully this brings some Christmas cheer to those families who will be spending this special day with a loved one in NICU/ SCU.

From everyone at Lifes Little Treasures I would like to wish all prems and their families a Merry Christmas and a safe and prosperous new year.

Best regards  
Allison



Molly-Rose, Elysee, Hayley, Zac and Luke – so who's The guilty one?!

## Whats New from the Editor

Since the last newsletter, the committee has been busy with lots of new things happening. We have received a lot of support and encouragement from the community which has resulted in one of our members being a speaker at a Victorian Employers Chamber of Commerce and Industry (VECCI) conference. This was a great success with interest from another organisation in providing us with a grant. We also want to thank Telstra who have provided us with a substantial grant and Energetix who have kindly sponsored us – without both of them it would have been difficult for us to get some of our projects underway.

We have also had some success in the media with Hume/Sunbury Leader running an article on us and the Stonnington Leader featuring Lifes Little Treasure as their cover story in one of their September editions!

Tracey Spicer, a well know media personality has also given us her support and has kindly provided us with her 'story' for this newsletter. Thank you very much for taking the time to write and send this story to us. I am sure it will inspire and help many other parents out there who are going through or have been through this emotional journey.

If there are other parents out there who have a story to tell or information, poems, photos that they would like to share, we would be delighted to hear from you! Please feel free to email us at [lifslittle\\_treasures@yahoo.com.au](mailto:lifslittle_treasures@yahoo.com.au) or write to us at our correspondence address.

Christmas is now round the corner so we are busy organising christmas festivities (see diary dates) and working on some new projects for the new year. We have a few busy months ahead of us so I had better get cracking on all the other work that needs to be done!!

## The Committee

President and Fundraising:	Allison Webb
Vice President and Newsletter Editor:	Parool Shah
Treasurer:	Robyn Singleton
Secretary:	Shusannah Morris
Support Programmes	Anne-Marie Hammon
General Committee Member:	Rachel Waites

If you would like to contact any of the above members, please either email us at [lifslittle\\_treasures@yahoo.com.au](mailto:lifslittle_treasures@yahoo.com.au) or call us on 0437 254 360

## Welcome to New Members

Leah Negrin  
Sharyn McKellar  
Lisa McMeiken  
Monica Velasquez

Michelle Summerhill  
Samantha Chandler  
Leanne Hemburrow  
Janelle Watkins

Annie Langford  
Wendy Taverna  
Laura Nation  
Sue Pearce

## VISION & AIMS

### Who We Are

We are a group of mothers who have experienced the roller coaster ride of N.I.C.U. & Special Care Nurseries, who would like to provide you with support and friendship.

### Vision Statement

To improve the quality of life for NICU & Special Care premature and full term babies and their parents by providing support, encouragement & friendship from parents who have been through the process and understand what it is like.

### Aims

- To introduce support programs which provide practical and emotional support to families and friends, who have babies that have spent time in intensive/special care nurseries.
- To provide easily accessible and relevant information for families.
- To offer continued assistance to families to ease the transition from hospital to home environment.
- To increase community awareness of the unique issues faced by families of these special babies.


## Why Do Women Deliver Early?

In nearly half of premature births, the cause is unknown. However, researchers have made some progress in learning the causes of prematurity. Studies suggest that there may be **four main routes** leading to premature labor.

1. **Maternal or fetal stress.** Chronic psychosocial stress in the mother or physical stress (such as insufficient blood flow from the placenta) in the fetus appears to result in production of a stress-related hormone called corticotropin-releasing hormone (CRH). CRH may stimulate production of a cascade of other hormones that trigger uterine contractions and premature delivery.
2. **Infections.** Studies suggest that premature labor is often triggered by the body's natural immune response to certain bacterial infections, such as those involving the genital and urinary tracts and fetal membranes. Even infections far away from the reproductive organs, such as periodontal disease, may contribute to premature delivery.
3. **Bleeding.** The uterus may bleed, due to problems such as placental abruption (when the placenta peels away, partially or almost completely, from the uterine wall prior to delivery). Bleeding triggers the release of various proteins involved in blood clotting, which also appear to stimulate uterine contractions.
4. **Stretching.** The uterus may become overstretched by the presence of two or more babies, excessive amounts of amniotic fluid, or uterine or placental abnormalities, leading to release of chemicals that stimulate uterine contractions.

The finding that there are several routes that can result in premature delivery may help explain why prematurity is so difficult to prevent. Now that scientists have a better handle on possible pathways to prematurity, they may be able to develop more effective interventions that can halt the various chemical cascades that lead to it. But first they must identify the women who need these treatments.

"Copyright 2005 March of Dimes. Used by permission.)

Diary Dates 



**Coffee Mornings**

Due to our growing membership and request for more get togethers, we are pleased to announce that we will be holding a coffee morning on the 1<sup>st</sup> and 3<sup>rd</sup> Fridays of every month, at two different venues. Dates and details are as below:

	<b>Allison's house</b>	<b>Parool's house</b>
Date:	2 <sup>nd</sup> Dec, 6 <sup>th</sup> Jan	18 <sup>th</sup> Nov, 16 <sup>th</sup> Dec, 20 <sup>th</sup> Jan
Time:	10.30am – 12.30pm	10.30am – 12.30pm
Venue:	No 7 Mallee Court Sunbury Vic 3129	72 Sutherland Rd Armadale Vic 3143
Tel no:	0437 254 360	0437 254 360



**Morning Tea at RWH and Frances Perry House**

First Wednesday of every month at 10.30am on the 9<sup>th</sup> floor at RWH and second Wednesday of every month at Frances Perry House. Dates for the next month are 7<sup>th</sup> Dec for RWH and 14<sup>th</sup> Dec for FPH. Dates for the new year are yet to be confirmed.

Buddy Programme 

Support Network: If you would like to talk to someone about any of your concerns or just want a chat, you can contact any of these people below who have varied experiences with prem babies:

Anne- Marie Hammon	Hannah Byrne born 24wks 5 days Weighing 675gms, haemorrhaging and infection behind placenta	Ascot Vale
Parool Shah	Luke Harrington born 27wks, 915gms, apnoea and Bradycardia, delay in gross motor Development	Armadale
Shusannah Morris	Molly-Rose born 25 weeks, 880grms IVF with complications, hospitalized for term of pregnancy, severe haemorrhaging. Chronic lung, respiratory & feeding issues, Stage 4 ROP & complications. Home on O2	Malvern
Allison Webb	Twins born at 26 weeks 955grms & 915grms, home oxy, chronic lung, Mild, Cerebral P, glasses	Sunbury



## Cook's Corner



Here is another delicious recipe to tantalize the tastebuds of your bubs and their friends at their next birthday party! It's a winner!!

## Lemon Vanilla Biscuits

## Ingredients

3 Eggs

125g butter

300ml sour cream

2 cups caster sugar

1 pkt Hoyts vanilla sugar (25g)

1 lemon rind

4 cup self raising flour

pure icing sugar

- Melt butter.
- Mix together the eggs, caster sugar, vanilla sugar and lemon rind.
- Add melted butter. Then add sour cream. Add 4 cups self raising flour. Mix with mixer.
- Cover with glad wrap and refrigerate overnight.
- Next day, pre-heat oven to 200degrees Celsius. Roll into balls and roll in icing sugar.
- Bake approx 10 mins, or until golden brown.

Makes about 50 biscuits. Delicious!



## Happy Birthday!



Lifes Little Treasure would like to say a big congratulation to the following children on their birthday:

Christian 2yrs on 1<sup>st</sup> Nov

Angus 2yrs on 14<sup>th</sup> Dec

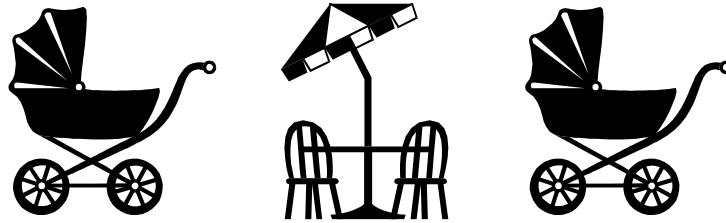
Hannah 3yrs on 30<sup>th</sup> Jan

Sophie 1yr on 5<sup>th</sup> Dec

## Thank you to our Sponsors

On behalf of the Management Committee and members of Lifes Little Treasures, we would like to thank our following sponsors for their generosity and support.





Parents of Premature  
Babies/Children, Family & Friends  
Are invited to  
Life's Little Treasures annual

'PREMS IN THE PARK'

A great opportunity to meet new families

Sunday 22<sup>nd</sup> January 2006, 12pm – 2pm  
St Vincents Gardens, Albert Park, Melway Ref pg57 3F

Near playground look for pink & blue balloons  
(junction of St Vincents Place North South and St Vincents Street)

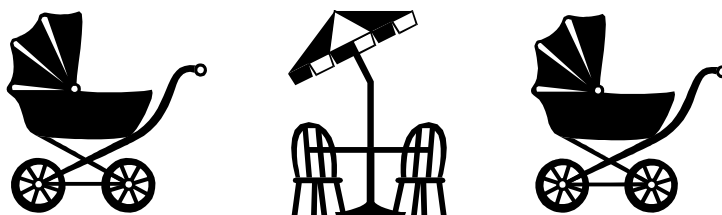
Free Sausage Sizzle, prizes,  
Lots of fun

BYO Chairs / Picnic Rug

RSVP for catering purposes 10<sup>th</sup> Jan

[Lifesslittle\\_treasures@yahoo.com.au](mailto:Lifesslittle_treasures@yahoo.com.au)

Ph: 0437 254 360



## Tracey Spicer's Story

Channel 10 Newsreader



"It was as though someone had punched his tiny chest in. A gaping hollow, the size of a man's hand, sucked back to his spine every time he tried to draw breath. Then, there was the sound. A death rattle. He was just 34 hours old".

Taj Jack Thompson was born at the Mater Misericordiae Hospital on the 6th of December 2004. His arrival was heralded by a massive bleed, due to a pregnancy complication which had left me bedridden for the previous two months. The obstetrician had warned me about the dangers of Complete Placenta Praevia. But he thought a flight from Sydney to Melbourne at 25 weeks gestation would be safe enough.

I almost fainted when I began bleeding four days into the trip. Of course, I blamed myself. It was all that walking, shopping along Chapel Street! How could I do this to my unborn child! The situation worsened when I arrived at the Royal Women's Hospital. The Head of Obstetrics calmly told me that, if I didn't stop bleeding within days, I would be staying in Melbourne to have the baby. Early. Very early. My husband began making contingency plans to move our lives interstate indefinitely.

Thankfully, due in part to the wonderful care at the Royal Women's, the bleeding abated. I hopped on a plane back to Sydney, only to begin bleeding again. Thus, the advice to stay flat on my back.

On the 6th of December, after several hospital stays and some gentle early contractions, I experienced "the big one". Rushing to hospital, I knew today was the day. Actually, I was thrilled bubby managed to stay put for 36 weeks.

Due to the placenta praevia, the obstetrician decided to do an elective caesarian. He mentioned in passing that this condition was the main reason women died in childbirth, prior to the advent of C-sections!

As any mother can testify, childbirth is an extraordinary experience. I looked at my son's face and realised that I would walk over cut glass for him. It's a love beyond mere words. He was four weeks premature and weighed only 2.2 kilograms (just under 5 pounds). But he was alive!

My husband, Jason, and I relaxed, thinking the worst was over. Surrounded by beautiful flowers and cards from friends and family, I was woken at midnight by a nurse with the news that Taj was having trouble breathing. I hobbled down to the Special Care Nursery, where my tiny son, encased in a humidicrib, struggled for life. The midwife said he was in respiratory distress suffering two lung complications, including hyaline membrane disease. This was unexpected, as he was able to breathe independently from birth. The pediatrician also detected an infection, from an unknown source. They planned to rush him to the Neonatal Intensive Care Unit at the Royal North Shore hospital. We peered into the crib, willing him to take each breath. It was as though we were trying to breathe for him.

I, too, was transferred to the Royal North Shore. It broke my heart to walk into the NICU and see Taj on a CPAP machine, tubes up his tiny nostrils, to force air into his damaged lungs. Canulas and drips and wires poking out of every limb. Incredibly, he never cried. The nurses said he was too weak. But we now know, it's because of his character. Stoic. Determined. A fighter.

The next 5 days remain a blur of expressing, praying, and nappy changing. The first nappy I ever changed, in my 37 years on this earth, was through the port holes of Taj's humidicrib, amid a tangled mass of wires, convinced I would accidentally pull out his life support!

But we were the lucky ones. Taj looked like a teenager among the really preemie babies. We spoke to one couple who had just moved from Sydney to Coffs Harbour, when baby decided to come at 23 weeks. They'd moved to a hotel around the corner, camping at the NICU for 12 hours each day, not knowing whether their baby boy would pull through.

The staff were amazing. We received wonderful support and encouragement from midwives, nurses and pediatricians who must inevitable experience compassion fatigue. They are saints on earth.

Finally, Taj was transferred back to the Mater Special Care Nursery. I'd been discharged from hospital, and so began the thrice daily drive from home to feed, cuddle and stare and my little boy. By this stage, he was out of the crib and in a bassinet. But he was still so weak, he would feed for two minutes at a time on my breast then fall asleep. He was simply too exhausted.

On the 22nd of December, we got the best news of our lives. Taj could come home on Christmas Eve! It was the greatest Christmas present anyone could wish for.

Now, it all seems like a nightmare. Somehow unreal. Once Taj learned to feed, he wouldn't stop. I breastfed him for 8 months. Now, he eats almost anything! As my 10 month old crawls around the floor, claps his hands and giggles wildly, I can't reconcile this vision with the shriveled, red baby, gasping for what seemed like his last breath.

I would like to thank all the staff at the Royal Women's Hospital, the Mater Hospital and the Royal North Shore Hospital for their love, support and compassion.

And to anyone going through the heartache of caring for a premature baby, my thoughts are with you. You are not alone.

Tracey Spicer.

Taj today



## Free Infant Pneumococcal Vaccination Program

On 31 December 2005 the infant pneumococcal vaccination catch up program will end. Parents of children born after 1 January 2003 have less than three months to take advantage of the Australian Government's free vaccination offer.

Children born from 1 January 2005 will continue to receive the infant pneumococcal vaccine as part of the standard immunisation schedule given at 2, 4 and 6 months of age. To find out more, speak to your local doctor or healthcare professional on your very next visit.

Extract taken from Wyeth Australia, fact sheet  
Wyeth Australia  
Baulkham Hills.,  
ABN 16 000 296 211., WLV 2004082

## Who Will Deliver Early?

It is very difficult to predict which women will deliver prematurely. Doctors know that certain women are at high risk of premature delivery, including women who have had a previous premature birth, those with multiple gestations (twins, triplets or more), and women with certain uterine malformations. But tests are not accurate in determining which of these women will actually deliver early. Available tests are even less helpful in identifying low-risk women who will have a premature delivery, and are generally not recommended for these women.

Tests, such as cervical length measurements and fetal fibronectin, are most useful in determining which high-risk women or women having contractions are unlikely to deliver within the next two weeks. These tests can relieve worries and spare women unnecessary treatments.

Researchers continue to develop new tests for identifying women who will deliver prematurely. Many of the new tests measure biological markers associated with the various routes that lead to premature delivery, such as the stress-related hormone CRH or various immune and clotting factors. To date, tests that measure only one of these biological markers have not proven successful, but tests that measure a number of markers are showing some promise.

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# Premiepress



For Premature Babies and their Parents

The Parent-Infant Clinic in Heidelberg, Victoria provides the following services for parents and their babies who have been born prematurely

- **Beautiful Beginnings Therapeutic/Early Intervention Playgroups**

Learn how to use play as a way to provide early “enrichment” in your baby’s environment. The program includes activities and ideas that are known to help infant development. Cost: \$200 for 8 x 2 hour sessions. Sessions run by a paediatric Neuro psychologist.

- **Premiepress**

Parents of premature babies consistently seek resources to learn about their babies. This quarterly magazine is written to give parents the knowledge about prematurity issues known to the experts. It also contains parents’ stories, which are helpful to those who are trying to deal with all the personal and medical issues that can arise. Cost \$35 per year (4 editions)

- **Individual counselling**

Our team of psychologists and trainee psychologists help parents who find difficulties in the adjustment to parenthood. These include Post-natal depression plus the many other issues that often arise following a premature birth. Costs are calculated on a sliding scale, depending on family income and Medicare rebates apply.

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Contact the Parent-Infant Clinic on Tel: (03) 9496 4496 / Fax: (03) 9496 4148

Email: [carol.newnham@austin.org.au](mailto:carol.newnham@austin.org.au)

## Why Does Early Intervention Work?

A child’s development can be negatively affected essentially by three basic factors – something that interferes with the brain, something that interferes with the child’s body (and these two are often closely connected) and an environment that does not provide the essentials for the child to develop the skills that are commonly needed in our society. In relation to the environment, we are all essentially a Tarzan. Whatever home we are born into will be the one that moulds our skills.

*“Genie” was a deprived child who had been deliberately kept from normal social experience and stimulation. From the age of about 20 months she had been isolated in a small closed room, tied to a potty chair for most hours of the day, and sometimes also at night. She had been kept essentially naked, and when not in the potty chair, she was kept in a covered baby cot. The door was kept closed and the windows curtained. She had been fed only cereal and baby food by her mother and only minimally cared for. There was no radio or TV in the house. She was physically punished if she made any sounds. Genie was found and taken into police and then protective custody when she was 13 years and 9 months old. She was unsocialised, primitive, emotionally disturbed, unlearned and without language. She looked about half her age, was unable to stand up, could not chew even semi-solid food, had difficulty swallowing and was incontinent of faeces and urine. At birth and again at 11 months, according to the paediatrician’s notes, she had been a normal baby.*

*Language tests that were given 11 months after she was found showed that she could, by then, understand and produce several words. One problem in making words was that she did not have neuromuscular control over her vocal chords. While other babies were learning to play with and control their voice, she was learning to repress all sound. In addition, the absence of all but the most minimal stimulation and motor movement meant that her brain did not receive the normal impulses from the body to grow and make connections. Since there is a critical period for the development of most skills (including language), and Genie’s brain was actively inhibited from assuming its functions when the chance arose, she would probably stay in a disabled state for the rest of her life.*

Vulnerable children are those whose development is threatened by environmental or biological circumstances.

There are a large number of risk factors and therefore a large number of children who will potentially benefit from early intervention. The risk factors include – being born prematurely, being exposed to toxic substances, catching an infection that can affect a vital part of the body (like the brain or the heart), having parents who are neglectful, abusive or have limited abilities themselves, and children raised in poverty.

Early intervention programs aim to intervene as early as possible to (i) minimise the impact of the child’s disability (eg learn to use toes instead of fingers) (ii) minimise ongoing risk factors (eg. teach parents helpful ways of understanding and helping their child) (iii) to help present development go in the direction that will be the foundation for future development (eg. strengthen muscles that will help a child walk in the future) (iv) to strengthen families (eg help them cope with the stresses and strains).

The very early years of a child’s life provide a unique opportunity to influence their development. When children are still very small, many parts of their body are still developing, and that development can be pushed along in certain directions. The specialists select from various approaches to develop a program that is specific to the needs of each child and family, and that has the appropriate intensity and timing, plus ongoing evaluations of its effectiveness.

The intervention itself will depend on assessments that need to be made of the child and the family. The very first line of assessment is the Maternal and Child Health Nurse in your area. Then there are public and semi-private organizations that provide assessments and interventions. In the public system, the Department of Human Services provide teams of specialists in local areas so that parents (and the specialists) do not have to travel too far. In Victoria this is called Specialist Children’s Services, which has teams of specialists who may all assess the child and then work out an intervention that targets that child’s specific difficulties. Some organizations have been started by parents who have seen a need, and then grow to fit wider needs. Noah’s Ark started off as a toy library for disabled children and now has many centres throughout Victoria that provide a wide variety

of child and family interventions, including toys. There are similar organizations throughout Australia and generally the Western world.

## EFFECTIVENESS

Early intervention programs are mainly successful- results from large studies have found that they produce significant changes in children's development. However, outcomes depend on the area of disability. Early motor development seems to be determined mainly by biological factors, with medical, not environmental factors being the most reliable predictors of development. Yet even in motor development, studies by physiotherapists which are based on the latest understanding of how development proceeds are still underway. Cognitive and language development seem to be determined more by environmental than biological factors, which suggests that early intervention with families is really effective. The one area of research that has been relatively neglected is social competence, and new research is needed for that.

The one thing that early intervention centres have in common is that they struggle to be properly funded. Many welcome (financial and practical) help from parents and others. There are invariably frustrations with services that are underfunded, and these include long waiting lists. This should be an incentive to you to be quite proactive in following up any concerns you have so that you can be on that waiting list as soon as possible. Bureaucratic frustrations are a small price to pay for services that can make a difference to your child's future.

Article courtesy of Premmie Press September 2005

## VIC GOV Early Intervention Services

If you are interested in finding out more about the Early Intervention programmes in your area then Information on services can be obtained between 9am and 5pm Monday to Friday through the Department of Human Services statewide phone number 1800 783 783 (and ask for Specialist Children's Services). Early Childhood Intervention Services in your area (Better Health Channel, Vic Gov) <http://www.ecis.vic.gov.au/bhcv2/bhcorgn.nsf/ECIS?OpenView&count=200>

Alternatively, if you know which **Department of Human Services** region you live in, you can contact your local service using the following phone numbers:

### Eastern Metropolitan Region

Box Hill Phone (03) 9843 6238  
Ringwood Phone (03) 9845 8050

### Southern Metropolitan Region

Phone 1300 720 151

### Grampians Region

Phone (03) 5333 6530

### Gippsland Region

Phone (03) 5136 2400

### Hume Region

Phone 1300 650 152

### Northern Metropolitan Region

Phone (03) 9479 0578 / 9479 0121

### Western Metropolitan Region

Phone (03) 9275 7500

### Barwon South Western Region

Warrnambool Phone (03) 5561 9444  
Geelong Phone (03) 5226 4540

### Loddon-Mallee Region

Phone (03) 5444 9950



## Early Intervention Programme

Noah's Ark Early Childhood Intervention Program was established in 1971 and is an incorporated not for profit community organisation. It is the largest statewide agency in the early childhood intervention sector. The Noah's Ark **vision** is "a society where families and children are valued in their diversity and respected and included within their community"

Noah's Ark is a not for profit, statewide community organisation assisting children with disabilities and their families. It provides a range of services to children, young people and their families.

Services operate from 17 sites across Victoria and include -

**Early Childhood Intervention Programs** for babies and children up to 6 years of age including:

- ❖ Group programs
- ❖ Individual therapy / education
- ❖ Family Support
- ❖ Transition support to early childhood services and schools

Support to children and young people in **Commonwealth funded child care services includes:**

- ❖ Training
- ❖ Resource development
- ❖ Consultants supporting childcare services
- ❖ Additional resources
- ❖ Specialist equipment and toys

Toy and Equipment Library for children aged 0 to 6 years.

Recreation activities and Camps for young people aged 7 to 21 years .

Activities for Siblings – weekend camps for 7 to 13 year olds.

Eligibility for Noah's Ark early childhood intervention services

A child is eligible for early childhood intervention services if he / she is:

- Under 6 years of age, and has a developmental delay which meets the following criteria:
- The delay is attributable to an intellectual, physical or sensory impairment.
- The delay has implications for long term significant functional limitations in one or more of the following areas:

Receptive and expressive language, Cognitive Development, Motor Development, Self care and independence and Social Behaviour

### GROUP PROGRAMS

Noah's Ark group programs are based on a philosophy of whole family inclusion, responsiveness to family needs whilst meeting the holistic needs of the child. Groups are facilitated by a team of professionals and may include, Occupational Therapist, Physiotherapist, Speech Pathologist, Early Childhood Teacher, Dance Movement Therapist and Social Worker.

Families who access Noah's Ark Early Childhood Intervention Programs are invited to identify the issues which are for them the most important at the time. Families and staff draw up a plan with shared goals for the child. Your child's developmental level and your priorities will assist you and staff in determining the most suitable services for you and your child.

For the nearest service to you please see [www.noahsarkvic.org.au](http://www.noahsarkvic.org.au) or phone Windsor on (03) 9529 1466



## Subscription Details

(ABN 94 232 874 269)

(Please print in BLOCK Letters)

TITLE \_\_\_\_\_ FAMILY NAME \_\_\_\_\_

GIVEN NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_ POST CODE \_\_\_\_\_

TEL (H) \_\_\_\_\_ (B) \_\_\_\_\_

MOB \_\_\_\_\_ EMAIL \_\_\_\_\_

YOUR CHILD'S NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

BIRTH WEIGHT \_\_\_\_\_

( We will be using birth dates for our birthday corner, please cross this box if you do not wish for your child to be included  )

(Subscription fee for 2005 is \$5 however the committee will review this on a yearly basis)

### METHOD OF PAYMENT

Please send cheque payable to "Lifes Little Treasures Inc" to the address below.

**Lifes Little Treasures Inc  
P O Box 476  
Chadstone Centre RP  
Vic 3148**

## Response Form

We would like to inform our members that there is no obligation to be actively involved with the committee once you have subscribed to become a member. However we would be delighted if any of our members would like to be involved in any of the following areas below. If so, can you put a cross in the box next to the area you would like to be involved with and send it to us at the same address as above.

SUPPORT / MORNING TEA PROGRAAME  FUNDRAISING  MEDIA AND MARKETING



Lifes Little Treasures Inc

CONTACT ADDRESS  
P O Box 476  
Chadstone Centre RP  
Vic 3148

Phone:  
0437 254 360

E-Mail:

[lifesslittle\\_treasures@yahoo.com.au](mailto:lifesslittle_treasures@yahoo.com.au)

ABN: 94232874269

A Perfect Choice

Finally, God passes a name to an angel and smiles, "Give her a premature child."

The angel is curious. "Why this one, God? She's so happy." 'Exactly, smiles God, 'Could I give a premature child to a mother who does not know laughter? That would be cruel.'

'But has she the patience?' asks the angel.

'I don't want her to have too much patience or she will drown in a sea of self-pity and despair.

Once the shock and resentment wear off, she'll handle it. I watched her today. She has that feeling of self and independence that is so rare and so necessary in a mother'

'But lord, I don't think she even believes in you.'

God smiles. 'No matter, I can fix that. This one is perfect. She has just enough selfishness.'

The angel gasp, 'Selfishness? Is that a virtue?'

God nods. 'If she can't separate herself from the child occasionally, she'll never survive.

Yes, there is a woman whom I will bless with a child in a less perfect way. She doesn't realize it yet, but she will be envied. She will never consider a 'step' ordinary. When her child says 'Mama' for the first time, she will be present at a miracle and know it! She will never be alone. I will be at her side every minute of every day of her life because she is doing my work as surely as she is here by my side.'

'And what about her patron saint? Asks the angel, his pen poised in mid-air.

God smiles. 'A mirror will suffice.'

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