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## **MNCHP NETWORK BULLETIN AUGUST 14 / 09**

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Please note that this is the last MNCHP bulletin for the summer. The next bulletin will be released September, 11, 2009.

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## ----- I. NEWS & VIEWS -----

### ONTARIO

#### 1. STRESS DURING PREGNANCY MAY LOWER BABY'S IQ

Recent British research reveals that severe stress during pregnancy can put the child at greater risk of anxiety, depression, and Attention Deficit Hyperactivity Disorder in adolescence. A total of 250 women at 17 weeks gestation completed questionnaires about their anxiety levels and their cortisol levels (stress hormone) and the amount seeping into their amniotic fluid was monitored. The results indicate that high levels of anxiety were associated with more cortisol in the amniotic fluid. If the mother was more stressed while she was pregnant the baby scored significantly lower on the mental developmental index. Canadian research is corroborating the British findings and Suzanne King, an associate professor of psychiatry at McGill University, highlights: "If there's anything that we all agree on, it's that the fetus is incredibly vulnerable and fragile, and that even subtle perturbations in the mother's mood or her objective circumstances can have measurable effects on the fetus that last for years" (Bielski, 2009, July 5). Glover also highlights that it is important for service providers to determine the emotional state of women in pregnancy and provide appropriate help.

<http://www.theglobeandmail.com/life/family-and-relationships/stress-during-pregnancy-may-lower-babys-iq/article1207163/>

### CANADA

#### 2. LATEST PRODUCT RECALLS

(also available in French)

Note: Products that are recalled for containing lead or barium are in excess of the allowable level per the Canadian Hazardous Products Act (CHPA).

- Expansion on Inflatable Baby Floats by Aqua-Leisure Industries: The leg straps in the seat of the float can tear, posing a risk of drowning.
- My Pal Scout Electronic Plush Toy Dog by LeapFrog: Decals on the paws of the plush toy can be removed, posing a choking hazard.
- Babysitter Balance Bouncer Seats: There are small metal pieces in the padded area of both the Babysitter Balance and Babysitter Balance Air's fabric seat, potentially posing a risk of injury.
- Fun Ice Chewy Teether by Munchkin: Gel filling of the teether may be contaminated with the bacteria *Bacillus cereus*.
- Plush "Squeaky Puppet" by Canasia Toys & Gifts: Eyes of the puppet can detach and the squeaker can be removed from the puppet, posing a choking hazard.
- Fishing Game by Biokido: Storage box can crack when dropped and release small pieces of wood, posing a choking hazard.
- Take Along Thomas & Friends Neville Die Cast Metal Engine: Small component may break off from the toy when dropped, posing a choking hazard.
- Take Along Nicelodean Diego Wave Scooter Die Cast Metal Vehicle: Small component may break off from the toy when dropped, posing a choking hazard.
- Simplicity Cribs with Drop Side Rails: Crib's plastic hardware can break or deform, causing the drop side to detach. When the drop side detaches, it creates a space between the drop side and the crib mattress. Infants and toddlers can roll into this space and become entrapped which can lead to suffocation.
- Kolcraft Play Yards: Side-rail on the play yard can fail to latch properly. When a child pushes against the rail it can unlatch unexpectedly, posing a fall hazard.

English: [http://healthycanadians.gc.ca/pr-rp/pr-rp\\_e.php](http://healthycanadians.gc.ca/pr-rp/pr-rp_e.php)

French: [http://healthycanadians.gc.ca/pr-rp/pr-rp\\_f.php](http://healthycanadians.gc.ca/pr-rp/pr-rp_f.php)

- 'BPA-free' baby bottle contains toxic chemical: Health Canada

<http://www.canada.com/health/free+baby+bottle+contains+toxic+chemical+Health+Canada/1881628/story.html>

- Bisphenol A traces found in baby food: Health Canada

<http://www.cbc.ca/health/story/2009/07/10/bisphenola-bpa-baby-food-bottled-water-health-canada.html?ref=rss>

### 3. CANADIAN WOMEN UNDER-USING IUDs

Jennifer Blake, Chief of Obstetrics and Gynaecology at Sunnybrook and Women's College Hospitals notes that Canadian women are under-using the intrauterine device (IUD) (Crawford, 2009, July 22). She explains that the Dalkon Sheild IUD that was pulled from the Canadian market in 1974 because of infections, infertility, miscarriages, and even death resulted in women in North America turning away from all IUDs. She highlights that safe and effective alternative models have been developed and are increasingly popular throughout the world. According to the United Nations Department of Economic and Social Affairs (2007), only 2.9% of Canadian women and 1.8% of U.S. women use IUDs for birth control compared to roughly 15% of all women throughout the world choosing the IUD.

<http://www.parentcentral.ca/parent/article/669657>

## ----- II. RECENT REPORTS AND RESEARCH RESULTS -----

### ONTARIO

#### 4. NEIGHBOURHOOD INCOME AND HEALTH OUTCOMES IN INFANTS

This study (Wang, Guttman, To, & Dick, 2009) examined the effect of socioeconomic status (SES) on health outcomes during the first year after newborn discharge among infants in Ontario with complex chronic conditions insured with a universal health plan. The researchers found that among nearly 12,000 infants born with complex medical problems (e.g., heart defects, lung disease, and Down syndrome) those from lower-income neighbourhoods had higher risks of hospitalization and death. The authors concluded that "despite universal health insurance, SES-related inequality affects hospitalization and, possibly, mortality rates among medically vulnerable infants" (Wang, Guttman, To, & Dick, 2009).

Abstract: [http://archpedi.ama-](http://archpedi.ama-assn.org/cgi/content/abstract/163/7/608?maxtoshow=&HITS=10&hits=10&RESULTFORMAT=1&author1=Wang+&andorexacttitle=and&andorexacttitleabs=and&andorexactfulltext=and&searchid=1&FIRSTINDEX=0&sortspec=relevance&fdate=1/1/2009&resourcetype=HWCIT)

[assn.org/cgi/content/abstract/163/7/608?maxtoshow=&HITS=10&hits=10&RESULTFORMAT=1&author1=Wang+&andorexacttitle=and&andorexacttitleabs=and&andorexactfulltext=and&searchid=1&FIRSTINDEX=0&sortspec=relevance&fdate=1/1/2009&resourcetype=HWCIT](http://archpedi.ama-assn.org/cgi/content/abstract/163/7/608?maxtoshow=&HITS=10&hits=10&RESULTFORMAT=1&author1=Wang+&andorexacttitle=and&andorexacttitleabs=and&andorexactfulltext=and&searchid=1&FIRSTINDEX=0&sortspec=relevance&fdate=1/1/2009&resourcetype=HWCIT)

News:

<http://www.reuters.com/article/healthNews/idUSTRE56L6O620090722?feedType=RSS&feedName=healthNews>

### CANADA

#### 5. MARRIAGES

(also available in French)

Statistics Canada (2009, July 15) released statistical tables on the number and rates of marriage in Canada, the provinces, and the territories. In 2004, there were a total of 146,242 marriages registered in Canada, a 0.8% drop from 2003. The mean age of all types of marriage in Canada for males was 34.9 for males and 32.4 for females. Data that can be retrieved includes: (1) marriages, by type of marriage and month; (2) mean age and median age of males and females, by type of marriage and marital status; (3) crude marriage rates, all marriages; (4) age-specific marriage rates, all marriages; (5) total first marriage rates and age-specific first marriage rates, all marriages; and (6) marriages, by type of marriage and type of officiant.

English: <http://www.statcan.gc.ca/bsolc/olc-cel/olc-cel?catno=84F0212X&lang=eng>

French: <http://www.statcan.gc.ca/bsolc/olc-cel/olc-cel?catno=84F0212XWF&lang=fra>

## 6. REACHING A HARD-TO-REACH POPULATION SUCH AS ASYLUM SEEKERS AND RESETTLED REFUGEES IN CANADA

This article (Wahoush, 2009) focuses on the challenge for health professionals in resettlement communities in reaching newcomers, particularly refugees and asylum seekers who may be isolated by language or lack of knowledge about the local health-care system. "Newcomers who are unfamiliar with the health-care system may interpret relatively innocent events as evidence of discrimination or racism if they are not clearly explained by health providers. For example, waiting in an emergency department to be seen by a relatively junior physician may be interpreted negatively as discrimination and can lead to subsequent avoidance of seeking health care" (Wahoush, unpublished data, 2009). Wahoush argues that new approaches are needed for public health communication to reach newcomers and other hard-to-reach populations and ethnic media is an underused vehicle. She concludes that public health information and building relationships and communication skills may provide better outcomes than cultural competency training alone.

<http://www.who.int/bulletin/volumes/87/8/08-061085.pdf>

## 7. ADJUSTING THE BALANCE: FIXING CANADA'S ECONOMIC IMMIGRATION POLICIES

This report (Maytree, 2009) describes a number of recent changes to our immigration system, provides some constructive criticisms, and makes a number of recommendations. For example, these shifts suggest that the Foreign Temporary Worker Program, provincial nominee programs, and the Canadian Experience Class will soon overtake the Federal Skilled Worker Program, traditionally the cornerstone of immigration to Canada. This could make our immigration system less competitive internationally for attracting potential immigrants, and could have negative long-term consequences on our labour markets and economy. The report recommends that "the federal government articulate a national vision for economic immigration through public dialogue and debate, in which a revised Federal Skilled Worker Program becomes the priority... Fixing these policies and enhancing labour market services will help Canada to become the residence of choice for future citizens from around the world and to benefit from their enormous potential" (Maytree, 2009, July 22).

<http://www.maytree.com/policy>

## 8. COMPLIANCE REPORT ON CANADIAN CHILDREN'S FOOD AND BEVERAGE ADVERTISING INITIATIVE

Advertising Standards Canada (2009, July 14) released the first annual Compliance Report on the Canadian Children's Food and Beverage Advertising Initiative (CAI). Under the CAI, 18 of Canada's leading food and beverage advertisers committed to either not directly advertising primarily to children under the age of 12, or to shifting their advertising to products that are consistent with principles of sound nutrition guidance. The report details the progress made by the companies participating in this program. The Compliance Report covers 2008 and reveals that all of the participating companies fulfilled their program commitments and only two minor compliance issues were uncovered. Susan Linn, Ed.D., Director of the Campaign for a Commercial-Free Childhood at Judge Baker Children's Center and Instructor in Psychiatry, Harvard Medical School, responded to report and notes that "every company participating in the Children's Advertising Initiative chose its own nutrition standards and has created its own definition of what is considered to be advertising directed primarily to children under 12 years of age. But what we really need is a single set of standards across the border and bodies in the U.S. and Canada to enforce it".

English: <http://www.adstandards.com/en/childrensinitiative/default.htm>

French: <http://www.adstandards.com/fr/initiativeenfants/default.htm>

Response/News release: <http://www.newswire.ca/en/releases/archive/July2009/15/c6445.html>

## INTERNATIONAL

## 9. EFFECTS OF PRENATAL MULTIMICRONUTRIENT SUPPLEMENTATION ON PREGNANCY OUTCOMES: A META-ANALYSIS

The researchers of this study (Shah & Ohlsson, 2009) conducted a systematic review to examine whether supplementation with multimicronutrients during pregnancy reduces the risk of low birth weight, preterm birth, and small-for-gestational-age births compared with placebo and compared with iron–folic acid supplementation. The findings indicate that prenatal multimicronutrient supplementation was associated with a significantly reduced risk of low birth weight and with improved birth weight when compared with iron–folic acid supplementation (weighted mean difference 54 g). There was no significant effect of multimicronutrient supplementation on the risk of preterm birth or small-for-gestational-age infants between the three study groups.

<http://www.cmaj.ca/cgi/reprint/180/12/E99>

## 10. WOMEN'S HEALTH IN PRISON: URGENT NEED FOR IMPROVEMENT IN GENDER EQUITY AND SOCIAL JUSTICE

According to this article in the World Health Organization (WHO) bulletin (van den Bergh, Gatherer & Møller, 2009), the needs of women in prison have received little attention and continue to be neglected by health systems and prison authorities. There are major differences in the methods that countries use to address the special needs of women in the criminal justice system but there is clear and consistent evidence that current arrangements fail to meet their basic needs and are far short of what is required by human rights. The authors suggest prisons can be settings for useful protection and promotion works such as disease prevention and educational programs and treatment focusing on mental health and substance use problems. “The necessary changes will require political awareness and support, considerable gender-sensitivity training of all staff and policy-makers working in the criminal justice system and a real commitment to equity and social justice” (van den Bergh, Gatherer & Møller, 2009).

<http://www.who.int/bulletin/volumes/87/6/09-066928/en/index.html>

### ----- III. CURRENT INITIATIVES -----

#### 11. PARTICIPACTION SUN LIFE – INSPIRE THE NATION TOUR (also available in French)

The “Inspire the Nation” tour is designed to inspire all Canadians to get active and join the physical activity movement. It will be stopping in 31 cities in Canada. Stops for August include Sudbury, Burlington, Hamilton, Mississauga, Windsor, London, Guelph, Toronto, and Waterloo. For a map of the tour stops and dates, visit the website.

English: <http://www.participaction.com/en-us/SunLifeInspireTheNation.aspx>

French: <http://www.participaction.com/fr-ca/SunLifeInspireTheNation.aspx?lang=fr-ca>

#### 12. INTERNATIONAL LITERACY DAY: SEPTEMBER 8 (also available in French)

Literacy for all children, youth, and adults is still an unaccomplished goal in the world. Universal literacy calls for more effective efforts, renewed political will, and for doing things differently at all levels, locally, nationally, and internationally.

English: <http://www.acdi-cida.gc.ca/CIDAWEB/acdicida.nsf/En/NAT-2282751-HSZ>

French: <http://www.acdi-cida.gc.ca/CIDAWEB/acdicida.nsf/Fr/NAT-2282751-HSZ?OpenDocument>

#### 13. FETAL ALCOHOL SPECTRUM DISORDER (FASD) AWARENESS DAY: SEPTEMBER 9

The first FASDay was celebrated on 9/9/99 to remind the world that during the nine months of pregnancy a woman should abstain from alcohol. Bells are rung at 9:09am in every time zone from New Zealand to

Alaska. People around the world gather for events to raise awareness about the dangers of drinking alcohol during pregnancy and the plight of individuals and families who struggle with FASD. This website provides links to resources and ideas for FASDay 2009.

<http://www.fasday.com/>

#### 14. WABANO CENTRE FOR ABORIGINAL HEALTH'S HIV/AIDS PROJECT: WALKING THE HEALING PATH

The Wabano Centre for Aboriginal Health's new project "Walking the Healing Path" incorporates principles of harm reduction and Aboriginal culture into HIV/AIDS information. The project will support Aboriginal People with HIV/AIDS by: (1) promoting the well-being and quality of life of those living with or closely affected by HIV/AIDS; (2) providing direct support services through the Home Visits Pilot Project; (3) offering transportation services; and (4) creating resources such as a medication calendar. Community-wide prevention will be promoted through: education workshop modules on sexual health and harm reduction for clients, service providers, and community members; education workshops for all community members including schools, treatment centres, and organizations; and poster campaigns. Posters are available for download on the Wabano Centre for Aboriginal Health's website.

<http://www.wabano.com/healingpath.html>

#### 15. CANADIAN PAEDIATRIC SOCIETY JOINS PARTNERSHIP ADDRESSING ENVIRONMENTAL EFFECTS ON CHILD HEALTH

The Canadian Partnership for Children's Health and Environment (CPCHE) (2009, June 24) announced that the Canadian Paediatric Society (CPS) is its newest partner. A total of 12 medical, public health, child care, and environmental groups are working to advance children's environmental health protection in Canada. Dr. Robin Walker, President of the Society's new Paediatric Environmental Health Section says that CPS has "concerns about how ongoing exposure to the numerous toxic chemicals and pollutants in our modern world may be affecting child health, and look forward to working with the CPCHE partners to address these issues". CPCHE notes that paediatricians are highly trusted members of the community who can play a key role in getting information to parents on how to protect children from the risks posed by toxic chemicals and pollution and are a powerful voice for policy change.

<http://www.newswire.ca/en/releases/archive/June2009/24/c9295.html>

### ----- IV. UPCOMING EVENTS -----

This section lists events that have not been included in earlier editions of the MNCHP bulletin or listserv postings. For the details of these events and a complete list of events noted in previous MNCHP bulletins and postings, including contact information, links to organizations, and descriptions, see <http://www.beststart.org/events/otherevents.php>

#### ONTARIO

##### 16. 2009 SOCIAL HOUSING AND HOMELESSNESS CONFERENCE

September 22-24, 2009: Toronto, ON

Hosted by: Ontario Municipal Social Services Association

<http://www.omssa.com/evts/result.asp?track=vs&eventsess=3406>

##### 17. 2009 KIDS' HEALTH CONFERENCE

October 15-17, 2009: Alliston, ON

Hosted by: Ontario Physical and Health Education Association (Ophea)

<http://www.ophea.net/kidsconference.cfm>

##### 18. TRAIN-THE-TRAINER WORKSHOP ON PROBLEMATIC SUBSTANCE USE IN PREGNANCY

October 16-17, 2009: Thunder Bay, ON  
Hosted by: Pregnancy-Related Issues in the Management of Addictions (PRIMA)  
To register, please contact: [prima.medicine@utoronto.ca](mailto:prima.medicine@utoronto.ca)  
<http://www.addictionpregnancy.ca/Home.html>

19. LEADING CHANGE: HOW CONVERSATIONS MAKE STRONGER COMMUNITIES AND HEALTHIER DEMOCRACIES  
October 22-25, 2009: Toronto, ON  
Hosted by: Canadian Community for Dialogue and Deliberation and Toronto Community Housing  
<http://www.c2d2.ca/conference2009>

20. NATIONAL ABORIGINAL HEALTH ORGANIZATION (NAHO) CONFERENCE: OUR PEOPLE, OUR HEALTH  
November 24-26, 2009: Ottawa, ON  
Hosted by: NAHO  
<http://www.naho.ca/conference/english/index.php>

## **CANADA**

21. 10<sup>TH</sup> ANNUAL ADVANCES IN QUALITATIVE METHODS CONFERENCE  
October 8-10, 2009: Vancouver, BC  
Hosted by: Internal Institute for Qualitative Methodology  
<http://www.uofaweb.ualberta.ca/iqmq/AQM2009.cfm>

## **----- V. RESOURCES -----**

### **22. PROVINCIAL COUNCIL FOR MATERNAL AND CHILD HEALTH**

The roots of the Provincial Council for Children's Health (PCCH) are two groups, the Specialized Paediatric Coordinating Council (2002-06) and the Ontario Children's Health Network (2003-06). These groups merged to form the PCCH in December, 2006 which began transitioning to the Provincial Council for Maternal and Child Health (PCMCH) in the fall of 2008. The first meeting of the new Council was held on April 3, 2009. The work of the Council will reflect the importance of relationships and interfaces among providers and organizations across the continuum of care. The overall goal of the Council (2009) is to support the development of a system of care that provides timely, equitable, accessible, high quality, evidence-based, family-centred care in an efficient and effective manner. The Council currently has two advisory committees: the Child and Youth Advisory Committee (CYAC) and the Maternal – Newborn Advisory Committee (M-NAC). Terms of reference and membership lists for all three groups are available on the PCMCH website. It also includes news, publications, resources, e-newsletters, and contact information.

<http://www.pcmch.on.ca/index.htm>

### **23. CONNECTIONS: KNOWLEDGE EXCHANGE FOR AGENCIES SERVING WOMEN WITH SUBSTANCE USE ISSUES**

Connections is a new knowledge exchange network for agencies across Canada that serve women with substance use issues. It is funded by the Canadian Institutes of Health Research. Connections believes that women with substance use issues will receive better services if researchers and service providers work together to share information, network, and collaborate. You can sign up to join the Connections network on their website or by contacting Ainsley Smith at 1-905-521-2100 ext. 74671 or [assistant@connectionsCanada.ca](mailto:assistant@connectionsCanada.ca).  
<http://www.connectionsCanada.ca/>

## ----- VI. FEATURED BEST START RESOURCES -----

An article in the WHO bulletin (Wahoush, 2009) highlights the challenge for health professionals in resettlement communities in reaching newcomers (see Recent Reports and Research section of the bulletin). The following resource provides strategies for service providers working with newcomer women who are accessing reproductive health services.

### 24. GIVING BIRTH IN A NEW LAND – STRATEGIES FOR SERVICE PROVIDERS WORKING WITH NEWCOMERS

This manual shares information about the beliefs and practices of newcomer women when accessing reproductive health services. It explains strategies for service providers to offer services in a culturally competent manner.

[http://www.beststart.org/resources/rep\\_health/Newcomer\\_%20Guide\\_Final.pdf](http://www.beststart.org/resources/rep_health/Newcomer_%20Guide_Final.pdf)