MNCHP Network Bulletin



best start **)** meilleur départ **)**

by/par health nexus santé

January 13, 2012

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I. NEWS & VIEWS

1. Latest Product Recalls

Build-A-Bear Colorful Hearts Teddy

All 13,200 Colorful Hearts Teddy bears sold in Canada are being recalled because of the risk of choking. Parents are being asked to take the affected Colorful Hearts Teddy bears away from children immediately because of the potential risk due to "substandard fabric which can tear around the eye."

http://cpsr-rspc.hc-sc.gc.ca/PR-RP/recall-retrait-eng.jsp?re_id=1504

- Ourson en peluche « Colorful Hearts Teddy » de Build-A-Bear Le présent rappel vise tous les oursons en peluche « Colorful Hearts Teddy ». Le corps blanc de ces oursons est couvert de coeurs multicolores. http://rspc-cpsr.hc-sc.gc.ca/PR-RP/recall-retrait-fra.jsp?re_id=1504
 - ANTILOP children's high chair belt by IKEA

The high chair belt can open unexpectedly when in use, creating a fall hazard. Ikea is aware of eight reports of belts opening, including three resulting in minor injury when a child fell from the high chair. Countries reporting incidents are the United States (5), Sweden (2) and Japan (1).

Health Canada has not received any reports of incidents or injuries to Canadians related to the use of these highchair belts.

http://cpsr-rspc.hc-sc.gc.ca/PR-RP/recall-retrait-eng.jsp?re_id=1488

La ceinture de sécurité de la chaise haute risque de se détacher accidentellement, ce qui pose un risque de chute.

Huit cas de détachement de la ceinture - dont trois cas où l'enfant est tombé et a subi des blessures mineures - ont été signalés à IKEA. Les cas signalés proviennent des États-Unis (5), de la Suède (2) et du Japon (1)

Aucun incident ni aucune blessure n'ont été signalés à Santé Canada relativement à l'utilisation de ces produits au Canada.

http://rspc-cpsr.hc-sc.gc.ca/PR-RP/recall-retrait-fra.jsp?re_id=1488

2. Exercise doesn't prevent pregnancy-related diabetes: study

Pregnant women who exercised regularly during the second half of their pregnancies did not lower their odds of developing pregnancy-related diabetes in a new clinical trial.

Researchers in Norway found that when they randomly assigned 855 pregnant women to either exercise three times a week or to stick with regular prenatal care alone, the exercisers were no less likely to develop gestational diabetes.

By the third trimester, seven percent of the exercise group had been diagnosed with gestational diabetes, versus six percent of the comparison group.

http://www.parentcentral.ca/parent/babiespregnancy/pregnancy/article/1108341--exercise-doesn-t-prevent-pregnancy-related-diabetes-study

3. Renewed Warning on Baby Acetaminophen

The FDA is renewing a warning about the potential for dosing errors with liquid acetaminophen products for infants, which may have been compounded by the recent introduction of a new 160 mg/5 mL strength.

http://www.medpagetodav.com/Pediatrics/GeneralPediatrics/30385

4. Nova Scotia mulls changes to rules, spending on care of children

The province has opened the door to exploring big changes in the child-care education system. Departments like Community Services have begun discussing reforms such as more spending on public daycare and a phasing out of public funding for private operators.

"It won't happen overnight," said Community Services Minister Denise Peterson-Rafuse, who joined representatives of the Canadian Union of Public Employees at a news conference Thursday. "It takes a long time to change a system, but I think there's a great appreciation in government that something needs to be done."

http://thechronicleherald.ca/novascotia/43335-ns-mulls-changes-rules-spending-care-children

5. Let parents, not ideology, choose daycare for their children

Source: Globe and Mail, December 15, 2011 (editorial)

Excerpt: "With a shortage of regulated daycare spaces frequently declared to be one of the most pressing public-policy issues in the country – estimates put the gap at up to 165,000 spaces – one might think the appearance of a new and energetic operator of daycares would be cause for widespread celebration. And yet the entry of the Alberta-based child care firm Edleun Group Inc. into Ontario this week has been met with hand-wringing from public sector unions and various child-care advocates. Chief among the complaints is that there's something unseemly or contradictory about looking after kids for a buck."

http://www.theglobeandmail.com/news/opinions/editorials/let-parents-not-ideology-choose-daycare-for-their-children/article2273031/

6. Debate over who needs a thyroid check in pregnancy

Numerous studies since 1999 have found that an underactive thyroid can raise a woman's risk of miscarriage, premature birth, or a lower IQ for her baby — even if it's so mildly sluggish that she feels no symptoms.

http://yourlife.usatoday.com/parenting-family/pregnancy/story/2012-01-02/Debate-over-who-needs-a-thyroid-check-in-pregnancy/52336108/1

7. Mead Johnson infant formula given all clear by US feds

No traces of Cronobacter have been found at the Mead Johnson infant formula plant and there is no need for a product recall, said US safety bodies last week as part of an investigation into four babies infected with the bacteria - two of whom have died.

http://www.foodproductiondaily.com/Quality-Safety/Mead-Johnson-infant-formula-given-all-clear-by-US-feds

8. Peers to help moms learn breastfeeding

Last week, the first five peer counselors graduated from a training course that includes breast-feeding basics and counseling skills.

http://www.omaha.com/article/20120102/LIVEWELL01/701029945/1161

9. Mothers with hepatitis B can breastfeed their newborn babies

Mothers with hepatitis B can breastfeed their newborn babies without having to fear that the disease will spread to their children as long as they receive proper immunoprophylaxis. http://www.foodconsumer.org/newsite/Non-food/Lifestyle/hepatitis b breastfeeding 0101121116.html

10. Experts Issue Warning About Cold Medications in Pregnancy

Experts in pregnancy and breastfeeding health at the California Teratogen Information Service (CTIS) Pregnancy Health Information Line warn expectant moms about the potential dangers of common cold medicines during pregnancy.

http://www.newswise.com/articles/experts-issue-warning-about-cold-medications-in-pregnancy

II. RECENT REPORTS AND RESEARCH

11. The 6 Most Important Child Development Research Studies of 2011

Although many important studies were published this year, some stand out because they not only offer new information; they also affect our way of thinking about parenting and child development.

http://www.parents.com/kids/development/important-child-development-research-studies-2011/

12. Understanding and Improving Aboriginal Maternal and Child Health in Canada

In January and February of 2011, the Health Council of Canada held a series of seven regional sessions across Canada to learn what programs and strategies are making a difference in the health of Aboriginal mothers and young children. A large proportion of participants were frontline health care workers; the commentary offers a window into the experiences and insights of people who work with and provide care to Aboriginal women and young children. The goal of the report is to create a better understanding of and support for programs and initiatives that have the potential to reduce health disparities between Aboriginal and non-Aboriginal Canadians.

http://www.healthcouncilcanada.ca/docs/rpts/2011/abhealth/HCC_AboriginalHealth_FINAL1.pdf

En janvier et en février 2011, le Conseil canadien de la santé a tenu une série de sept séances régionales à travers le Canada pour savoir quels programmes et quelles stratégies font une différence dans la santé des mères et des jeunes enfants autochtones. Le rapport vise à mieux comprendre et à soutenir les programmes et les initiatives susceptibles d'atténuer les disparités entre la santé des Autochtones et celle des non-Autochtones du Canada. http://www.healthcouncilcanada.ca/docs/rpts/2011/abhealth/HCC AboriginalHealth FR FINAL1 .pdf

13. Curbing Childhood Obesity: A Federal, Provincial and Territorial Framework for Action to Promote Healthy Weights

New report on the progress that has been made since the Declaration on Prevention and Promotion and Curbing Childhood Obesity: A Federal, Provincial and Territorial Framework for Action to Promote Healthy Weights (Framework) were endorsed by the Ministers of Health in September 2010.

http://www.phac-aspc.gc.ca/hp-ps/hl-mvs/framework-cadre/2011/overview-resume-eng.php

Freiner l'obésité juvénile : Cadre d'action fédéral, provincial et territorial pour la promotion du poids santé

Dans le cadre des efforts visant à faire avancer la Stratégie pancanadienne en matière de modes de vie sains, les ministres fédérale, provinciaux et territoriaux (FPT) responsables de la Santé, de la Promotion de la santé et des Modes de vie sains* (ministres de la Santé) ont fait de la promotion de la santé et de la prévention des maladies, des incapacités et des blessures une priorité. En septembre 2010, les ministres de la Santé ont témoigné de leur engagement à cet égard en approuvant la Déclaration sur la prévention et la promotion.

http://www.phac-aspc.gc.ca/hp-ps/hl-mvs/framework-cadre/2011/overview-resume-fra.php

14. Short-Term Impact Analysis of an Expansion of Regulated Early Learning and Care in Nova Scotia

Source: Centre for Spatial Economics, December 2011

Abstract: "This report provides an analysis of the short-term economic impact of an expansion of regulated early learning and care (ELC) as it is currently structured in the province of Nova Scotia. The report provides estimates of the impact on GDP, employment, government revenues and mothers' labour supply from an increase in ELC expenditure in Nova Scotia. It is found that the ELC sector provides more short-term economic stimulus than other major sectors in the Nova Scotia economy. Moreover, an expansion in the number of early childhood educators and spaces will have an additional positive effect on the economy via an increase in mothers' labour supply."

http://bit.ly/ShortTermImpact

15. Place-Based Approaches to Supporting Children and Families

Source: Royal Children's Hospital Centre for Community Child Health (CCCH), 2011 Excerpt: "Families are often faced with a range of different, complex health and psychosocial problems. Place-based approaches aim to address these complex problems by focusing on the social and physical environment of a community and on better integrated and more accessible service systems, rather than focusing principally on the problems faced by individuals. A place-based approach targets an entire community and aims to address issues that exist at the neighbourhood level, such as poor housing, social isolation, poor or fragmented service provision that leads to gaps or duplication of effort, and limited economic opportunities. By using a community engagement approach to address complex problems, a place-based approach seeks to make families and communities more engaged, connected and resilient."

http://www.rch.org.au/emplibrary/ccch/Policy Brief 23 - place-based approaches final web.pdf

16. Heightened neural reactivity to threat in child victims of family violence

Exposure to family violence affects a significant minority of children: estimates of physical abuse range from 4 to 16%, while intimate partner violence affects between 8 and 25% of children [1]. These maltreatment experiences represent a form of environmental stress that significantly increases risk of later psychopathology, including anxiety [1,2]. To date, no functional magnetic resonance imaging (fMRI) studies have probed the neural correlates of emotional processing in children exposed to family violence. Previous psychological and electrophysiological studies indicate a selective hyper vigilance to angry cues in physically abused children, which is in turn associated with elevated levels of anxiety [3]. Functional magnetic resonance imaging (fMRI) research has demonstrated increased reactivity of the anterior insula (AI) and amygdala to angry faces in individuals with anxiety disorder [4], and in psychiatrically healthy soldiers exposed to combat [5], making these regions plausible neural candidates for adaptation to threat. We demonstrated that children exposed to family violence (with normative levels of anxiety) show increased AI and amygdala reactivity in response to angry but not sad faces. While such enhanced reactivity to a biologically salient threat cue may represent an adaptive response to sustained environmental danger, it may also constitute a latent neurobiological risk factor increasing vulnerability to psychopathology. Current Biology, Volume 21, Issue 23, R947-R948, 6 December 2011

http://www.cell.com/current-biology/abstract/S0960-9822%2811%2901139-0

17. The Importance of Play in Promoting Healthy Child Development and Maintaining Strong Parent-Child Bond: Focus on Children in Poverty

Play is essential to the social, emotional, cognitive, and physical well-being of children beginning in early childhood. It is a natural tool for children to develop resiliency as they learn to cooperate, overcome challenges, and negotiate with others. Play also allows children to be creative. It provides time for parents to be fully engaged with their children, to bond with their children, and to see the world from the perspective of their child. However, children who live in poverty often face socioeconomic obstacles that impede their rights to have playtime, thus affecting their healthy social-emotional development. For children who are under resourced to reach their highest potential, it is essential that parents, educators, and pediatricians recognize the importance of lifelong benefits that children gain from play.

http://pediatrics.aappublications.org/content/early/2011/12/21/peds.2011-2953

18. Parental Smoking and Vascular Damage in Their 5-year-old Children

Background: The relation between smoke exposure in early life, the prenatal period in particular, and the vascular development of young children is largely unknown.

Methods: Data from the birth cohort participating in the WHISTLER-Cardio study were used to relate the smoking of parents during pregnancy to subsequent vascular properties in their children. In 259 participating children who turned 5 years of age, parental smoking data were updated and children's carotid artery intima-media thickness (CIMT) and arterial wall distensibility were measured by using ultrasonography.

Results: Children of mothers who had smoked throughout pregnancy had 18.8 μ m thicker CIMT (95% confidence interval [CI] 1.1, 36.5, P = .04) and 15% lower distensibility (95% CI -0.3, -0.02, P = .02) after adjustment for child's age, maternal age, gender, and breastfeeding. The

associations were not found in children of mothers who had not smoked in pregnancy but had smoked thereafter. The associations were strongest if both parents had smoked during pregnancy, with 27.7 µm thicker CIMT (95% CI 0.2, 55.3) and 21% lower distensibility (95% CI 0.4, -0.03).

Conclusion: Exposure of children to parental tobacco smoke during pregnancy affects their arterial structure and function in early life.

http://pediatrics.aappublications.org/content/129/1/45

19. UNICEF UK Baby Friendly Initiative Statement on vitamin D supplementation for breastfed babies

Following recent media coverage, the Baby Friendly Initiative has received a number of queries relating to supplementation of vitamin D for babies that are breastfeeding. In response, they have consulted with relevant experts and produced a statement which supports the NICE recommendations as a sensible measure to prevent the rare occurrence of vitamin D deficiency in breastfed babies and to promote the health of lactating mothers. http://www.unicef.org.uk/BabyFriendly/News-and-Research/News/UNICEF-UK-Baby-Friendly-Initiative-Statement-on-vitamin-D-supplementation-for-breastfed-babies/

20. Parental Smoking Cessation to Protect Young Children: A Systematic Review and Meta-analysis

BACKGROUND: Young children can be protected from much of the harm from tobacco smoke exposure if their parents quit smoking. Some researchers encourage parents to quit for their children's benefit, but the evidence for effectiveness of such approaches is mixed.

OBJECTIVE: To perform a systematic review and meta-analysis to quantify the effects of interventions that encourage parental cessation.

METHODS: We searched PubMed, the Cochrane Library, Web of Science, and PsycINFO. Controlled trials published before April 2011 that targeted smoking parents of infants or young children, encouraged parents to quit smoking for their children's benefit, and measured parental quit rates were included. Study quality was assessed. Relative risks and risk differences were calculated by using the DerSimonian and Laird random-effects model.

RESULTS: Eighteen trials were included. Interventions took place in hospitals, pediatric clinical settings, well-baby clinics, and family homes. Quit rates averaged 23.1% in the intervention group and 18.4% in the control group. The interventions successfully increased the parental quit rate. Subgroups with significant intervention benefits were children aged 4 to 17 years, interventions whose primary goal was cessation, interventions that offered medications, and interventions with high follow-up rates (>80%).

CONCLUSIONS: Interventions to achieve cessation among parents, for the sake of the children, provide a worthwhile addition to the arsenal of cessation approaches, and can help protect vulnerable children from harm due to tobacco smoke exposure. However, most parents do not quit, and additional strategies to protect children are needed.

http://pediatrics.aappublications.org/content/129/1/141

21. Are We Doing Enough? A status report on Canadian public policy and child and youth health: Canadian Paediatric Society

To encourage policy-makers to examine their progress on child and youth issues and to foster discussion among Canadians, the Canadian Paediatric Society produces a biennial status report on public policy affecting children and youth. This report examines how well provincial/territorial and federal governments use their legislative powers to promote the health and safety of children and youth.

The fourth edition, released January 10, 2012, continues to assess key indicators of child and youth health and rates progress on these indicators since 2009. The report includes recommendations to improve public policy affecting children and youth, actions based both on need and evidence.

http://www.cps.ca/English/Advocacy/StatusReport.htm

En faisons-nous assez? Un rapport de la situation des politiques publiques canadiennes et de la santé des enfants et des adolescents : la Société canadienne de pédiatrie

Afin d'inciter les décideurs à examiner leurs progrès en santé des enfants et des adolescents et à favoriser les discussions entre Canadiens, la Société canadienne de pédiatrie produit un rapport de la situation bisannuel sur les politiques publiques qui touchent les enfants et les adolescents.

Ce rapport retrace avec quelle efficacité les provinces, les territoires et le gouvernement fédéral du Canada utilisent leurs pouvoirs législatifs pour promouvoir la santé et la sécurité des enfants et des adolescents.

La quatrième édition, publiée le 10 janvier 2012, continue d'évaluer les principaux indicateurs de la santé des enfants et des adolescents. Le rapport contient des recommandations pour améliorer les politiques publiques qui touchent les enfants et les adolescents, ainsi que des mesures fondées à la fois sur les besoins et les données probantes. http://www.cps.ca/français/defensedinterets/rapportpolitiques.htm

III. CURRENT INITIATIVES

22. SafeMinds Launches Mercury-Free Pregnancy Campaign

In a letter dated December 5, 2011, the CDC and 11 national organizations encouraged health professionals to advise their pregnant patients to get vaccinated against influenza during any trimester. However, they neglected, once again, to recommend readily available mercury-free vaccines or even to alert doctors that the majority of influenza vaccines still contain mercury.

http://www.marketwatch.com/story/safeminds-launches-mercury-free-pregnancy-campaign-2011-12-16

IV. UPCOMING EVENTS

23. Best Start Conference: EARLY BIRD REGISTRATION DEADLINE NEXT WEEK!

Register by January 20, 2012 to take advantage of the "early bird" special of \$275. (Regular registration fees of \$325.00 apply after January 20, 2012.)

Hilton Suites Toronto/Markham Conference Centre & Spa 8500 Warden Avenue, Markham, ON L6G 1A5 February 28-March 1

To find out more about the conference including: registration details, the agenda, speakers, venue, parking, and accommodations: http://www.beststart.org/events/detail/bsannualconf12/index.htm

We look forward to seeing you in February!

24. International Lactation Consultant Association Conference, July 25-29-Orlando, Florida

Registration is now open for this event.

A full registration brochure can be found on the ILCA website at www.ilca.org/2012ilca.

25. Workshop/Webinar: Motivational Interviewing With Parents of Infants at Risk

Infant Mental Health Promotion Events: Presented by Tom Walker, MSW, RSW Monday February 27, 2012, 9 am to 4 pm (EST)

Motivational Interviewing (MI) is an evidence-based counselling approach developed by clinical psychologists Stephen Rollnick and William Miller (1991). MI strategies involve a style of communicating which can be shown to resolve ambivalence, to decrease parental resistance to intervention, build motivation for behaviour change, and improve the practice of child and family workers.

http://www.imhpromotion.ca/Events/IMHPEvents.aspx

V. RESOURCES

26. Fact sheets on maternal mortality and severe morbidity

The Maternal Mortality in Canada fact sheet provides surveillance results on recent trends in maternal mortality in Canada for the years 1996-2010. Included are the rates of maternal mortality by year, associated diagnosis, age group and province and territory. http://www.phac-aspc.gc.ca/rhs-ssg/maternal-maternelle/mortality-mortalite/index-eng.php

Le feuillet d'information Mortalité maternelle au Canada

Le feuillet d'information Mortalité maternelle au Canada fournit les résultats liés à la surveillance des tendances quant à la mortalité maternelle au Canada de 1996 à 2010. Il comprend les taux de morbidité grave par année, par diagnostic associé, par groupe d'âge ainsi que par province et territoire.

http://www.phac-aspc.gc.ca/rhs-ssg/maternal-maternelle/mortality-mortalite/index-fra.php

27. Video Presentation: Dr. Cory Neudorf: "Building Health Equity: The Role of Public Health" by Wellesley Institute

A few days ago, the Saskatoon Poverty Reduction Partnership, an intersectoral approach to poverty spearheaded by the Saskatoon Health Region, released an update of its progress over the past three years on health equity among its residents, and its plan for the next five years. The approach taken by the Saskatoon Health Region serves as an example of how collaborative efforts can work to solve some of the harder social problems we face. At a recent Health Equity Forum hosted by Wellesley Institute, Dr. Cory Neudorf, Chief Medical Health Officer for Saskatoon Health Region, described the lessons learned over the past five years in his city.

Presentation: http://vimeo.com/33354986

28. Fetal Alcohol Forum: December 2011 Issue available for download

The Fetal Alcohol Forum E-letter is the first international medical e-letter devoted exclusively to Fetal Alcohol research and medical issues for doctors, scientists and

health professionals. The first issue was published in May 2009, followed by December 2009, May 2010, November 2010, May 2011 and most recently in December 2011.

Copies can be downloaded from: http://www.nofas-uk.org/

29. Infant Mental Health Promotion launches new IMHP website

The new website will be the new home for Infant Mental Health Promotion membership, resources, calendar of events, registration and sales through the new IMHP E-Store. In addition to the resources available on the current IMHP website (www.sickkids.ca/imp) individual or agency members will have access to exclusive members resources including:

- IMPRINT The Newsletter of Infant Mental Health Promotion Online
- New IMHP Resources
- Online Learning Modules & Training Materials
- Community News, and Events
- Infant Mental Health Rounds Webcast Archives
- Online Discussion Forums
- IMHP Membership Network Directory, a searchable listing of links to fellow members, relevant services and programs

www.IMHPromotion.ca

VI. FEATURED BEST START RESOURCES

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30. Giving Birth in a New Land – A guide for women new to Canada and their families

A booklet containing information for newcomer women who are pregnant and expect to deliver their baby in Ontario. Includes information on local practices related to the prenatal and postnatal period, as well as services and resources available. (36 pages) Available in print and PDF. Download in English, French, Arabic, Filipino, Hindi, Punjabi, Spanish, Simplified Chinese, Tamil, Urdu

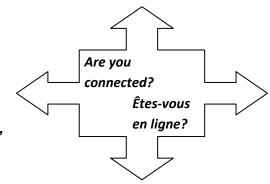
31. A Healthy Start for Baby and Me

A low literacy prenatal book suitable for women who have difficulty reading due to literacy or language. Includes information about pregnancy, labour, delivery, postpartum and early infant care.

Both resources can be ordered in print or downloaded for free in pdf format from: http://www.beststart.org/resources/rep health/index.html

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- <u>Click4HP</u> An open, facilitated public listserv, is an international dialogue on health promotion.
 Participants exchange views on issues and ideas, provide leads to resources, and ask questions about health promotion. https://listserv.yorku.ca/archives/click4hp.html
- Health Nexus Today Health Nexus Today is our Blog on health promotion. Find the latest on health
 promotion including breaking news, highlights, studies, and issues in health promotion and the
 determinants of health in Canada and internationally. http://www.blogs.healthnexussante.ca/

In French:

- <u>French distribution list</u> The free distribution list offers information in French on maternal, newborn, and child health promotion topics. http://www.meilleurdepart.org/index_fr.html
- <u>Le Bloc-Notes</u> The biweekly French language bulletin provides information on health promotion. http://leblocnotes.ca/