***The MNCHP Bulletin is a monthly electronic bulletin that highlights current trends, new resources and initiatives, upcoming events and more in the preconception, prenatal and child health field. Our primary focus is the province of Ontario, Canada but the bulletin also includes news and resources from around the world. Wherever possible, we include resources that are available for free. For more information about this bulletin,*** [***click here***](#_About_This_Bulletin)***. To manage your subscription, unsubscribe from the list-serv and access the list archives,*** [***click here***](http://beststart.org/services/information.html)***.***

# July 11, 2014

# *The next bulletin will be released August 8, 2014.*

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# I. NEWS & VIEWS

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# More support on the way for Ontario families: Ontario Child Benefit to increase in July

# (available in French)

# Starting this month, July 2014, The Ontario government will offer an increase of up to $100 per child annually to the Ontario Child Benefit (OCB) payment for Ontario families, making the maximum OCB payment $1310. A news release from the Ministry of Children and Youth Services (June 30, 2014) situates this increase as part of a larger poverty reduction plan. If the proposed budget is passed, the plan also includes tying OCB payments to inflation rates to ensure Ontario families can keep pace with the current cost of living.

# EN: <http://news.ontario.ca/mcys/en/2014/06/more-support-on-the-way-for-ontario-families.html>

# FR: <http://news.ontario.ca/mcys/fr/2014/06/les-familles-ontariennes-vont-beneficier-dun-plus-grand-soutien.html>

# Bilingualism boosts the brain at all ages

# This report from CBC News (June 29, 2014) summarizes current research conducted at York University and emphasizes the fortifying effect of bilingualism on the brain as an individual ages. York psychology professor Ellen Bialystock draws a link between the skills one practices when they switch between two languages and high level cognitive processes such as multitasking and assigning focus. Learning a second language also helps to develop the brain’s frontal system, which is the first area of the brain to decline as one enters old age.

# <http://www.cbc.ca/news/health/bilingualism-boosts-the-brain-at-all-ages-1.2690362?cmp=rss>

# Survey sounds alarm: Canadian doctors have ‘suboptimal’ breastfeeding knowledge

# This article (Janus, June 11, 2014) reports on a recent study conducted by CHEO that assesses the breastfeeding knowledge of pediatricians, family doctors and medical residents across Canada. The mean score of responses was less than the acceptable level, with a lack of knowledge identified particularly in the areas of breastfeeding techniques, and how to recognize a successful latch. While the Canadian Pediatric Society emphasizes that it should be the physician’s responsibility to monitor breastfeeding issues, only 45% of physicians viewed the evaluation of breastfeeding as their responsibility. Until physician breastfeeding education programs can be improved, the study recommends that mothers be aware of this potential deficiency in their physician’s knowledge and be prepared to seek additional assistance if necessary.

# <http://www.ctvnews.ca/health/survey-sounds-alarm-canadian-doctors-have-suboptimal-breastfeeding-knowledge-1.1862997>

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# II. RECENT REPORTS AND RESEARCH

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# *\* indicates journal subscription required for full text access*

# Effect of smoke-free legislation on perinatal and child health: A systematic review and meta-analysis\*

# Been, J.V., Nurmatov, U.B., Cox, B., Nawrot, .S., van Schayck, C.P., & Sheikh, A. (2014). Effect of smoke-free legislation on perinatal and child health: A systematic review and meta-analysis. *The Lancet, 383*(9928), 1549-1560. doi:10.1016/S0140-6736(14)60082-9

# SUMMARY:

### Background

Smoke-free legislation has the potential to reduce the substantive disease burden associated with second-hand smoke exposure, particularly in children. We investigated the effect of smoke-free legislation on perinatal and child health.

### Methods

We searched 14 online databases from January, 1975 to May, 2013, with no language restrictions, for published studies, and the WHO International Clinical Trials Registry Platform for unpublished studies. Citations and reference lists of articles of interest were screened and an international expert panel was contacted to identify additional studies. We included studies undertaken with designs approved by the Cochrane Effective Practice and Organisation of Care that reported associations between smoking bans in workplaces, public places, or both, and one or more predefined early-life health indicator. The primary outcomes were preterm birth, low birthweight, and hospital attendances for asthma. Effect estimates were pooled with random-effects meta-analysis. This study is registered with PROSPERO, number CRD42013003522.

### Findings

We identified 11 eligible studies (published 2008—13), involving more than 2·5 million births and 247 168 asthma exacerbations. All studies used interrupted time-series designs. Five North American studies described local bans and six European studies described national bans. Risk of bias was high for one study, moderate for six studies, and low for four studies. Smoke-free legislation was associated with reductions in preterm birth (four studies, 1 366 862 individuals; −10·4% [95% CI −18·8 to −2·0]; p=0·016) and hospital attendances for asthma (three studies, 225 753 events: −10·1% [95% CI −15·2 to −5·0]; p=0·0001). No significant effect on low birthweight was identified (six studies, >1·9 million individuals: −1·7% [95% CI −5·1 to 1·6]; p=0·31).

### Interpretation

Smoke-free legislation is associated with substantial reductions in preterm births and hospital attendance for asthma. Together with the health benefits in adults, this study provides strong support for WHO recommendations to create smoke-free environments.

<http://www.thelancet.com/journals/lancet/article/PIIS0140-6736%2814%2960082-9/abstract>

PDF: <http://www.cufrad.it/pdf_news/19040.pdf>

1. **Effectiveness of nutrition training of health workers toward improving caregivers’ feeding practices for children aged six months to two years: A systematic review**

# Sunguya, B.F., Poudel, K.C., Mlunde, L.C., Shakya, P., Urassa, D.P., Jimba, M., & Yasuoka, J. (2013). Effectiveness of nutrition training of health workers toward improving caregivers’ feeding practices for children aged six months to two years: A systematic review. *Nutrition Journal, 12*(66). doi:10.1186/1475-2891-12-66

# ABSTRACT:

#### Background

#### Nutrition training of health workers can help to reduce child undernutrition. Specifically, trained health workers might contribute to this end through frequent nutrition counseling of caregivers. This may improve child-feeding practices and thus reduce the risk of undernutrition among children of counseled caregivers. Although studies have shown varied impacts of health workers’ nutrition training on child feeding practices, no systematic review of the effectiveness of such intervention has yet been reported. Therefore, we conducted this study to examine the effectiveness of nutrition training for health workers on child feeding practices including feeding frequency, energy intake, and dietary diversity among children aged six months to two years.

#### Methods

We searched the literature for published randomized controlled trials (RCTs) and cluster RCTs using medical databases including PubMed/MEDLINE, CINAHL, EMBASE, and ISI Web of Knowledge, and through WHO regional databases. Our intervention of interest was nutrition training of health workers. We pooled the results of the selected trials, evaluated them using the Grades of Recommendation, Assessment, Development, and Evaluation (GRADE) criteria, and calculated the overall effect size of the intervention in meta-analyses.

#### Results

Ten RCTs and cluster RCTs out of 4757 retrieved articles were eligible for final analyses. Overall, health workers’ nutrition training improved daily energy intake of children between six months and two years of age. The pooled evidence from the three studies reporting mean energy intake per day revealed a standardized mean difference (SMD) of 0.76, 95% CI (0.63-0.88). For the two studies with median energy intake SMD was 1.06 (95% CI 0.87-1.24). Health workers’ nutrition training also improved feeding frequency among children aged six months to two years. The pooled evidence from the three studies reporting mean feeding frequency showed an SMD of 0.48 (95% CI 0.38-0.58). Regarding dietary diversity, children in intervention groups were more likely to consume more diverse diets compared to their counterparts.

#### Conclusion and recommendations

Nutrition training for health workers can improve feeding frequency, energy intake, and dietary diversity of children aged six months to two years. Scaling up of nutrition training for health workers presents a potential entry point to improve nutrition status among children.

# <http://www.nutritionj.com/content/12/1/66>

# Social determinants of children’s health in Canada: Analysis and implications

Raphael, D. (2014). Social determinants of children’s health in Canada: Analysis and implications. *International Journal of Child, Youth & Family Studies, 5*(2): 220-239. Retrieved from: <http://journals.uvic.ca/index.php/ijcyfs/article/view/12899>

# ABSTRACT:

The health of Canada’s children when placed in comparative perspective with other wealthy developed nations is mediocre at best. Much of this has to do with the social determinants of children’s health (SDCH) in Canada being of generally lower quality and more inequitably distributed than is the case in most other wealthy developed nations. The SDCH are of two kinds: (a) those to which their parents are exposed, and (b) those specifically related to societal support for early child development. In both cases Canada’s support of the SDCH through the making of health promoting public policy is lacking. Much of this has to do with the political ideology of ruling governments consistent with Canada being identified as a liberal welfare state where intervention in the unbridled operation of the market system is frowned upon. There are means of improving the situation. These involve a wide range of activities from more responsive clinical practice through to advocacy and political action.

<http://journals.uvic.ca/index.php/ijcyfs/article/view/12899>

# “Giving voice”: Evaluation of an integrated telehealth community care model by parents/guardians of children diagnosed with fetal alcohol spectrum disorder in Manitoba\*

# Hanlon-Dearman, A., Edwards, C., Schwab, D., Millar, MC, & Longstaffe, S. (2014). “Giving voice”: Evaluation of an integrated telehealth community care model by parents/guardians of children diagnosed with fetal alcohol spectrum disorder in Manitoba. *Telemedicine and e-Health, 20*(5): 478-84. doi: 10.1089/tmj.2013.0161

# ABSTRACT:

#### BACKGROUND:

#### In 2000, Manitoba began utilizing telehealth services for the assessment, diagnosis and follow-up of fetal alcohol spectrum disorders (FASDs). Since that time, the use of telehealth in Manitoba has expanded to the delivery of education and support to families caring for children with FASD in rural and remote areas of the province. The purpose of this study was to expand on a previous evaluation through a focus on the participant experience. Our objectives were thus to explore the experience of families with the telehealth process and to examine the use of telehealth in diagnostic assessment as well as follow-up post-clinical assessment.

#### MATERIALS AND METHODS:

Sixteen semistructured interviews were conducted with families who had participated in at least one diagnostic assessment and/or individual or group follow-up via telehealth offered through the Manitoba FASD Centre.

#### RESULTS:

The majority of participants reported being happy with their experience(s) using telehealth for assessment, diagnosis, and/or follow-up support. Two general themes emerged from the data. The first theme is focused on the value of telehealth use for families with children living with FASD, whereas the second theme presents various needs of this client group.

#### CONCLUSIONS:

This study provides support for the use of telehealth as an effective technology beyond diagnosis for individuals with FASD and their families. Families support the utilization of this technology and, despite its minor shortcomings, appreciate the flexibility of telehealth, which allows them to remain in their home communities, connected to their families and support systems.

<http://www.ncbi.nlm.nih.gov/pubmed/24568178>

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# III. CURRENT INITIATIVES

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# 8. Enjoy the Outdoors and Keep Active This Summer

# (available in French)

# As part of Ontario’s Action Plan for Health Care, the Ontario Ministry of Health and Long-Term Care is promoting participation in outdoor activities to help families and children stay healthy in the summer heat. Encouraging consistent hydration and sunscreen application, the Ministry also proposes engaging in a variety of activities including camping trips, swimming, or making a visit to a local farm.

# EN: <http://news.ontario.ca/mohltc/en/2014/06/enjoy-the-outdoors-and-keep-active-this-summer.html?utm_source=ondemand&utm_medium=email&utm_campaign=p>

# FR: <http://news.ontario.ca/mohltc/fr/2014/06/cet-ete-profitez-de-lexterieur-et-restez-en-forme.html>

# Visit the following links for more family summer activity ideas:

# Ontario Children’s Outdoor Charter: Developed in 2011, the Charter comprises provincial aims and principles that promote the importance of children spending time outdoors. Children can print out an Activity Passport with outing ideas that they can complete throughout the summer months.

# EN: <http://www.childrensoutdoorcharter.ca/en/downloads>

# FR : <http://www.childrensoutdoorcharter.ca/fr/telechargements>

# The ParticipACTION Play List : ParticipACTION has created a “summer bucket list” of unstructured, easy-to-accomplish activities to help keep children active during their break from school.

# EN: <http://www.participaction.com/a-foolproof-formula-for-fun-the-participaction-play-list/>

# FR : <http://www.participaction.com/fr/encore-plus-didees-pour-bouger-en-famille-cet-ete/>

# Canada’s Parks Day : The 3rd Saturday of July every year, Canada celebrates Parks Day. This July 19th, visit a park near you to participate in a variety of educational family activities including scavenger hunts and guided tours. Activities will vary by park.

# EN: <http://www.parks-parcs.ca/english/cpc/parksday.php>

# FR : <http://www.parks-parcs.ca/french/cpc/parksday.php>

**9.** **#EducateYourself**

In preparation for the upcoming FASD Awareness Day on September 9th, the FASD Support Network of Saskatchewan is launching its #EducateYourself campaign. The campaign encourages people to learn more about Fetal Alcohol Spectrum Disorder. To mark the beginning of the campaign, the Network has released a video titled “What do you know about FASD? #EducateYourself.” In the video, people on the street are asked basic questions about FASD to address common misconceptions.

<http://www.skfasnetwork.ca/main/>



# IV. UPCOMING EVENTS

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# 12. Healthy Kids Strategy Webinar Series

# July 17 & July 29, 2014: Toronto, ON

# A series of webinars that discuss the three Healthy Kids Strategies proposed in the report, “No Time to Wait: The Healthy Kids Strategy.” The report was compiled in 2013 by the Healthy Kids Panel which was established by the Ontario government to propose ways to ensure children maintain healthy weights. While the first webinar, which discussed the recommendation to “start all kids on the path to health,” has already taken place, the second and third webinars are scheduled for the coming weeks. The second webinar, moderated by Christina Tran, a consultant from the Nutrition Resource Centre, will focus on the report’s second proposed strategy: “Change the Food Environment.” Panelists including public health dietitians, agrologists and nutrition researchers will discuss how their work addresses this recommendation. The third webinar will revolve around the report’s strategies for creating healthy communities and will feature presentations from four panel members outlining current capacity-building initiatives.

# <http://www.hclinkontario.ca/index.php/events/events.html>

# 11. Infant Mental Health IMH-101: The Basics

# Sept. 5, 2014: Toronto, ON

# Presented by Director of Infant Mental Health Promotion Chaya Kulkarni at the Hospital for Sick Children, the second annual iteration of this workshop will provide an introduction to child brain development and outline how early intervention can prevent future mental health problems. Aimed at practitioners in a variety of roles including early learning and care practitioners, home visitors, and child welfare workers, this workshop will address topics including attachment and self-regulation, how to respond to challenging behaviours, and how to identify concerns before they develop.

# <http://www.cvent.com/events/infant-mental-health-imh-101-the-basics-2014/event-summary-9a6fabb2711c45a8aff239de4b6726ea.aspx>

# PDF: <http://www.imhpromotion.ca/Portals/0/IMHP%20PDFs/Workshops/Workshop_IMH-101_2014.pdf>

# 12. Ophea Healthy Schools Conference

# Oct. 16-17, 2014: Toronto, ON

# Ophea recently announced a slew of new workshops for its upcoming Healthy Schools Conference. The conference features presentations detailing strategies for teachers, administrators, education consultants and public health professionals to help children adopt healthy active lifestyles. This year’s conference includes workshops related to mental health, physical literacy, and how to effectively teach games.

# EN: <http://conference.ophea.net/>

# FR: <http://conference.ophea.net/fr>

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# V. RESOURCES

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**13.** **NEW Menu Assessment Tool for Child Care Settings**

(available in French)

The Eastern Ontario Health Unit is proud to offer the NEW Menu Assessment Tool for Child Care Settings**.** With the help of local child care providers, this easy-to-use tool was designed by registered dietitians to help child care providers determine if their menus meet section 40 (1) and (2) of the Day Nurseries Act and recommendations in Canada’s Food Guide. The information will also help child care settings staff members provide balanced meals and snacks to their young clients to ensure that they are receiving nutritious foods that they enjoy eating. A video summary of the *Menu Assessment Tool for Child Care Settings* is available on the Eastern Ontario Health Unit website. This video should be shared with staff members involved in menu planning, assessment and revision. This video can be shared during an in-service training or sent to employees via email. You can find this short video in the Daycares section of the EOHU website.

EN: <http://eohu.ca/menu_assessment_tool/index_e.htm>

FR : <http://eohu.ca/menu_assessment_tool/index_f.htm>

**14.** **A Practical Workbook to Protect, Promote and Support Breastfeeding in Community Based Projects**

(available in French)

This workbook, which represents the joint vision of the Breastfeeding Committee for Canada and the Canada Prenatal Nutrition Program (CPNP), serves as a guide to help community-based prenatal projects, including the CPNP, protect and promote breastfeeding through their work. The workbook outlines a series of nine strategies to assist these projects and identifies concrete actions through which each strategy can be practically implemented. The strategies and actions were developed from a population health perspective which takes into account the socioeconomic factors that may impact a woman’s understanding of and success breastfeeding. While the Breastfeeding Committee for Canada and the CPNP recognize that many women may not view ideal breastfeeding practices as feasible, through the workbook, they hope to ensure that adopting best breastfeeding practices eventually becomes the easiest option.

EN: <http://breastfeedingcanada.ca/documents/Breastfeeding%20Workbook%202014.pdf>

FR :<http://www.breastfeedingcanada.ca/documents/Guide%20Allaitement%20Maternel%202014.pdf>

**15.** **Caring for Kids New to Canada**

(available in French)

This website was developed by the Canadian Pediatric Society, in consultation with experts in newcomer health, with the goal of lessening, and ultimately eliminating, health disparities for children new to Canada. The site offers evidence-based information to keep health professionals abreast of the unique health issues facing immigrant and refugee children and their families. Content revolves around topics including assessing child development, pertinent medical conditions, health promotion, and specific care provision strategies. The site addresses health issues beyond the clinical environment, including cultural, social and environmental effects. Visitors new to the site should start by exploring the [Getting Started](http://www.kidsnewtocanada.ca/about/getting-started) page, which provides a list of key resources that serve as an introduction to the health issues facing newcomer children.

EN: <http://www.kidsnewtocanada.ca/>

FR : <http://www.enfantsneocanadiens.ca//>

**16.** **Genetics and Paediatric Health Module**

(available in French)

Produced by The Health of Canada’s Children and Youth, a profile of the Canadian Institute of Child Health (CICH), this module outlines key topics related to genetics and paediatric health for parents or practitioners new to the field. The module is divided into 8 sections and starts off by providing a brief introduction of the genetics landscape as it pertains to child health. Subsequent sections delve into genetic conditions, genetic services available to parents, the differences between genetic testing and screening, common congenital anomalies, and emerging issues in the field of genetics. As the field of genetics expands, it is important that new parents and couples looking to conceive understand the genetic services options available to them, and the types of genetic testing appropriate to their needs.

EN: <http://profile.cich.ca/en/index.php/chapter2>

FR : <http://profile.cich.ca/fr/index.php/chapter2/>

1. **Provincial/Territorial Jurisdictions Regarding Adult to Child Ratio for Licensed Child Care Centres and Licensed Family Child Care Centres**

The Atkinson Centre for Society and Child Development recently compiled a chart outlining guidelines related to licensed child and family child care centres for each Canadian province and territory. This comprehensive resource lists key information including staff-child ratios, maximum program sizes, educational requirements for caregivers, and expectations for formal support.

<http://www.oise.utoronto.ca/atkinson/UserFiles/File/Resources_Topics/Childcare/Provincial-Territorial_Adult_Child_Ratio_Table-3_June_2014.pdf>

1. **Recent videos:**
* **How family resource centres can make a difference**: Released by the Canadian Association of Family Resource Programs (FRP Canada), this video features testimonials from parents about their experiences with, and the support they receive from family resource centres.

<https://www.youtube.com/watch?v=LoZpZiVq_Os>

* **FIND: Using science to coach caregivers**: This video highlights the FIND program, “Filming Interactions to Nurture Development,” developed by researchers from the University of Oregon and Oregon Social Learning Center. The program uses videos to model positive interactions between parents and babies for caregivers.

<http://developingchild.harvard.edu/index.php/resources/stories_from_the_field/innovation_in_action/find_using_science_to_coach_caregivers/>



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# VI. FEATURED BEST START RESOURCES

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### 16. Welcoming and Celebrating Sexual Orientation and Gender Diversity in Families from Preconception to Preschool

The focus of this resource is on issues related to sexual orientation and gender identity, as they apply to preconception, prenatal and child health. It asks you to think about and take action to better serve families that are led by people who identify as lesbian, gay, bisexual, trans and/or queer (LGBTQ). It also asks you to consider the needs of children who are sometimes called gender variant – children whose dress, behaviour or identity does not match traditional gender norms. This resource is about the diversity that exists amongst people and how, as service providers, we can make our programs for families, parents and children, into spaces that honour and celebrate this diversity.

<http://beststart.org/resources/howto/pdf/LGBTQ_Resource_fnl_online.pdf>

**17.** **When Compassion Hurts: Burnout, Vicarious Trauma and Secondary Trauma in Prenatal and Early Childhood Service Providers**

(available in French)

This manual (Best Start Resource Centre, 2012) focuses on the relationship between early childhood service providers and the people that they serve. It explores the stress that is created as workers help mothers, fathers, and infants deal with frequently distressing and painful situations. Caseloads invariably include people who are living with the impact of trauma, death, violence, fear, poverty, depression, hopelessness, helplessness and a myriad of other physical and mental health issues. This resource was recently translated into French, and upcoming French webinars on Oct. 7 and Oct. 8 will explore some its themes in depth.

To register for the Oct. 7th webinar: <http://www.meilleurdepart.org/events/detail/webinaire_oct/webinaire_07_october.html>

To register for the Oct. 8th webinar:

<http://www.meilleurdepart.org/events/detail/webinaire_oct/webinaire_08_october.html>

EN: <http://beststart.org/resources/howto/pdf/Compassion_14MY01_Final.pdf>

FR: <http://www.meilleurdepart.org/resources/howto/pdf/Compassion_FR_Final_2014.pdf>

# About This Bulletin

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# Contact Us

**Best Start Resource Centre**: http://beststart.org/index\_eng.html

**Health Nexus**: http://en.healthnexus.ca/

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**Stay connected!**

The free weekly [**Ontario Health Promotion E-mail bulletin (OHPE)**](http://www.ohpe.ca/) offers a digest of news, events, jobs, feature articles on health promotion issues, resources, and much more, to those working in health promotion.

[**Click4HP**](https://listserv.yorku.ca/archives/click4hp.html) is an international dialogue on health promotion. Participants exchange views on issues and ideas, provide leads to resources, and ask questions about health promotion.

[**The Maternal Newborn and Child Health Promotion (MNCHP) Network**](http://www.beststart.org/services/MNCHP.html) **-** A province-wide electronic forum for service providers working to promote preconception, prenatal and child health.

[**Health Promotion Today**](http://en.healthnexus.ca/)- 0ur blog keeps you informed of news and topics related to health promotion.

Follow us on[**Twitter**](https://twitter.com/Health_Nexus) to stay up to date on all things related to health promotion.

View our video resources on [**YouTube**](http://www.youtube.com/user/healthnexussante) and [**Vimeo**](https://vimeo.com/user9493317)

[**The Best Start Aboriginal Sharing Circle (BSASC) Network**](http://lists.beststart.org/listinfo.cgi/bsasc-beststart.org) is a distribution list designed for service providers working with Aboriginal Peoples in areas of preconception, prenatal and child health. The network is a forum to share news, ideas, questions and best practices.

We encourage you visit the website of our new [**3M Health Leadership Award**](http://www.healthnexus.ca/leadershipaward) **to** find out how you can support community health leadership and honour your own community leader by nominating them for this national award.

**En français:**

**Restez branché!**

Le bulletinfrancophone [**Le Bloc-Notes**](http://www.leblocnotes.ca/) est un outil indispensable pour les intervenants professionnels qui aiment être à l'affût des nouveautés dans le domaine de la promotion de la santé.

Le[**Bulletin de santé maternelle et infantile**](http://www.meilleurdepart.org/services/bulletins.html) est un bulletin électronique mensuel à l’intention des fournisseurs de services œuvrant dans le domaine de la promotion de la santé maternelle et infantile.

[**Promotion de la santé aujourd’hui**](http://fr.nexussante.ca/)– Notre blogue sur lequel on partage des nouvelles et réflexions liées à la promotion de la santé.

Suivez-nous sur[**Twitter**](https://twitter.com/Nexus_Sante) pour demeurer au fait de tout ce qui concerne la promotion de la santé.

Visionner nos ressources vidéo sur[**YouTube**](http://www.youtube.com/user/healthnexussante) et [**Vimeo**](https://vimeo.com/user9493317)

Nous vous encourageons à visiter le site Web de notre nouveau [**Prix 3M de leadership en santé**](http://www.nexussante.ca/prixdeleadership/index.html)  pour découvrir de quelle façon vous pouvez appuyer le leadership en santé communautaire et honorer un chef de file de votre milieu en présentant sa candidature à ce prix national.