

MNCHP Network Bulletin



*best start
meilleur départ*

by/par health **nexus** santé

November 4, 2011

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I. NEWS & VIEWS

1. Latest Product Recalls

- **BUSA Children's Folding Tent/ Tente de jeu BUSA pliante pour enfants**

The steel wire frame of the tent can break in use. This can cause sharp wire ends to protrude through the tent fabric, creating a risk of a laceration or puncture wound injury to a child playing with the tent. IKEA has received three reports of wire frame breaking incidents in Europe and Asia regarding these children's tents, one has resulted in a minor injury.

English: http://cpsr-rspc.hc-sc.gc.ca/PR-RP/recall-retrait-eng.jsp?re_id=1434

Français: http://cpsr-rspc.hc-sc.gc.ca/PR-RP/recall-retrait-fra.jsp?re_id=1434&searchstring=&searchcategory=&searchyear=&StartIndex=1¤t=true

- **B.O.B.® single and double strollers/ Poussettes simples et doubles B.O.B.®**

In rare instances, it is possible for a child to remove the embroidery backing of the embroidered logo on the stroller canopy and put this material into their mouth, posing a potential choking hazard.

The firm has received six reports of children gaining access to, removing and inserting into their mouth, the embroidery backing of the stroller canopy's embroidered logo while seated in an infant car seat that has been attached to a B.O.B.® Infant Car Seat Adapter.

English: http://cpsr-rspc.hc-sc.gc.ca/PR-RP/recall-retrait-eng.jsp?re_id=1411

Français: http://cpsr-rspc.hc-sc.gc.ca/PR-RP/recall-retrait-fra.jsp?re_id=1411&searchstring=&searchcategory=&searchyear=&StartIndex=1¤t=true

- **LittleLife Discoverer Child Carriers/ Porte-bébé LittleLife Discoverer**

The carriers may have been sold without bolts that attach the carrier's main frame to the metal stand. Missing bolts cause the carrier to disconnect from the stand and fall backwards, posing a fall hazard to a child in the carrier.

English: http://cpsr-rspc.hc-sc.gc.ca/PR-RP/recall-retrait-eng.jsp?re_id=1436

Français: http://cpsr-rspc.hc-sc.gc.ca/PR-RP/recall-retrait-fra.jsp?re_id=1436&searchstring=&searchcategory=&searchyear=&StartIndex=1¤t=true

2. Programmed to be Fat? Premiering January 12, 2012 on CBC TV's "The Nature of Things" with David Suzuki.

In *Programmed to be Fat?*, the producers explore controversial new science that suggests being overweight is not just the result of too much food, too little exercise, and genetics. Exposure to environmental chemicals during fetal development may be changing our physiology forever. That, say some scientists, could explain why obesity has risen by more than 70 percent even among babies under six months of age.

<http://dreamfilm.ca/film/programmed-to-be-fat/>

3. BC Public Health Nurse visits to new moms to be cut back, support steered to young and poor

Routine visits by public health nurses to new B.C. mothers will be cut back as part of an overhaul that aims to steer more nursing support to young, poor, first-time mothers through a program called Healthy Start. The changes, to be rolled out next year, are among steps health authorities are taking to comply with a government directive to trim 10 per cent from public health budgets. The \$23-million Healthy Start program, announced last year, is being funded through a "realignment" of public health funds under that directive.

"What we are doing is reassessing current practice and figuring out, based on the evidence, what really is needed and what public health nurses should be delivering," Joan Geber, executive director of the Healthy Women, Children and Youth Secretariat in the provincial Health Ministry, said on Monday.

<http://www.theglobeandmail.com/news/national/british-columbia/nurses-visits-to-new-moms-to-be-cut-back-support-steered-to-young-and-poor/article2212320/>

4. Babies and toddlers should learn from play, not screens: American Academy of Pediatrics

The AAP first provided guidance on media use for children under age 2 in 1999. This consisted of a recommendation in the Academy's policy statement, "Media Education," which discouraged TV viewing for children in this age group.

At the time, there was limited data on the subject, but the AAP believed there were more potential negative effects than positive effects of media exposure for the younger set. Newer data bears this out, and the AAP stands by its recommendation to keep children under age 2 as "screen-free" as possible. More is known today about children's early brain development, the best ways to help them learn, and the effects that various types of stimulation and activities have on this process.

Among many key findings, unstructured play time is more valuable for the developing brain than electronic media. Children learn to think creatively, problem solve, and develop reasoning and motor skills at early ages through unstructured, unplugged play. Free play also teaches them how to entertain themselves.

<http://www.aap.org/pressroom/mediaunder2.pdf>

5. American Academy of Pediatrics expands guidelines for infant sleep safety and sids risk reduction

The policy statement and technical report provide global recommendations for education and safety related to SIDS risk reduction. In addition, the American Academy of Pediatrics is providing recommendations on a safe sleeping environment that can reduce the risk of all sleep-related infant deaths, including SIDS. Three important additions to the recommendations include:

- Breastfeeding is recommended and is associated with a reduced risk of SIDS.
- Infants should be immunized. Evidence suggests that immunization reduces the risk of SIDS by 50 percent.
- Bumper pads should not be used in cribs. There is no evidence that bumper pads prevent injuries, and there is a potential risk of suffocation, strangulation or entrapment.

For a full list of the recommendations: <http://www.aap.org/pressroom/sids.pdf>

6. FDA Drug Safety Communication: Updated information about the FDA-funded study on risk of blood clots in women taking birth control pills containing drospirenone

The U.S. Food and Drug Administration (FDA) is informing the public that it has not yet reached a conclusion, but remains concerned, about the potential increased risk of blood clots with the use of drospirenone-containing birth control pills. FDA has completed its review of the two 2011 studies that evaluated the risk of blood clots for women who use drospirenone-containing birth control pills, previously mentioned in FDA's Drug Safety Communication issued on May 31, 2011.

FDA is continuing its review of a separate FDA-funded study that evaluated the risk of blood clots in users of several different hormonal birth control products (contraceptives). Preliminary results of the FDA-funded study suggest an approximately 1.5-fold increase in the risk of blood clots for women who use drospirenone-containing birth control pills compared to users of other hormonal contraceptives.

Given the conflicting nature of the findings from six published studies evaluating this risk, as well as the preliminary data from the FDA-funded study (See Data Summary), FDA has scheduled a joint meeting of the Reproductive Health Drugs Advisory Committee and the Drug Safety and Risk Management Advisory Committee on December 8, 2011 to discuss the risks and benefits and specifically the risk of blood clots of drospirenone-containing birth control pills.

In Canada drospirenone is sold under the name Yasmin (or its sister pill Yaz) — all manufactured by Bayer AG.

For more information: <http://www.fda.gov/Drugs/DrugSafety/ucm277346.htm>

7. Acid reflux drugs called overprescribed in infants

Frequent spitting up, irritability, and unexplained crying in infants can be very distressing to parents. Pediatricians often prescribe acid-suppressing drugs for these symptoms in an effort to treat infants for gastroesophageal reflux disease (GERD); however, GERD is an uncommon cause of these symptoms in otherwise thriving infants. In a soon to be published Commentary in The Journal of Pediatrics, Eric

Hassall, MBChB, FRCPC, FACG, cautions against the over-diagnosis of GERD and over-prescription of acid-suppressing drugs in infants

The Journal of Pediatrics (www.jpeds.com), DOI 10.1016/j.jpeds.2011.08.067

<http://www.jpeds.com/webfiles/images/journals/ympd/HassallArticle.pdf>

8. Canadian Public Health Association: Call for Abstracts/Oral or Poster Presentations for Annual Conference, Edmonton, June 11-14/12

Public health and environmental health professionals, researchers, policy-makers, academics and students from across the country and around the world will meet in Edmonton, Alberta for the 2012 Annual Conference of the Canadian Public Health Association (CPHA). The theme for the conference is “*Creating and Sustaining Healthy Environments.*”

Abstracts accepted for the CPHA 2012 Annual Conference may be presented in the form of either an Oral or Poster Presentation. Online submission site is now open. Deadline for submissions: Friday, December 2, 2011.

For more information: <http://www.cpha.ca/en/conferences/conf2012/callabstracts.aspx>

Pour la Conférence annuelle 2012, nous acceptons les résumés d'exposés oraux et d'affiches. En soumettant un résumé, la ou le signataire s'engage à s'inscrire à la conférence, à payer les frais d'inscription demandés et à donner sa présentation au moment convenu. Pour la Conférence annuelle 2012, nous acceptons les résumés d'exposés oraux et d'affiches. Le système de soumission en ligne est maintenant accessible. Date limite de soumission des résumés : vendredi 2 décembre 2011

Pour de plus amples informations: <http://www.cpha.ca/fr/conferences/conf2012/callabstracts.aspx>

9. Best Start 2012 Annual Conference Toronto, ON, February 28-March 1/12~ Conférence annuelle de Meilleur départ 2012, 28 février au 1er mars, 2012

Registration is [Now Open!](#)/Inscription [est Ouverte!](#)

This year's comprehensive program addresses preconception through to child health. Participants will find sessions relevant to many areas of their work and interest. Speakers will offer the latest information and research and share innovative strategies and programs. There will be ample opportunity to meet new colleagues and network with old friends.

Nous offrons aussi des ateliers en français et une session Réseautage en français pendant la soirée.

For more information about the conference program/Pour de plus amples informations
<http://www.beststart.org/events/detail/bsannualconf12/program.htm>

II. RECENT REPORTS AND RESEARCH

10. VITAL COMMUNITIES, VITAL SUPPORT: HOW WELL DO CANADA'S COMMUNITIES SUPPORT PARENTS OF CHILDREN?

Phase 1 and Phase 2 reports of the Vital Communities, Vital Support study, an exploration of how well Canada's communities support parents of young children - from the parents' are linked below. The reports are the work of Invest in Kids, a national charitable organization focused on transforming the way Canada educates and supports parents of young children. Unfortunately Invest in Kids closed in October 2010, just as the Phase 2 report was nearing completion. Fortunately, The Phoenix Centre for Children and Families assumed leadership for many of Invest in Kids' products, including this study's reports. With the generous assistance of The Lawson Foundation, the Phoenix Centre is able to provide you with both Phase 1 and Phase 2 reports of the Vital Communities, Vital Support study.]

Phase 1: What Is Known: <http://bit.ly/WhatIsKnown>

Phase 2: What Parents Tell Us: <http://bit.ly/WhatParentsTellUs>

11. Impact of Early-Life Bisphenol A Exposure on Behavior and Executive

Function in Children, Joe M. Braun, MSPH, PhD, Amy E. Kalkbrenner, MPH, PhD, Antonia M. Calafat, PhD, Kimberly Yolton, PhD, Xiaoyun Ye, PhD, Kim N. Dietrich, PhD, Bruce P. Lanphear, MD, MPH

Objectives: To estimate the impact of gestational and childhood bisphenol A (BPA) exposures on behavior and executive function at 3 years of age and to determine whether child gender modified those associations.

Methods: We used a prospective birth cohort of 244 mothers and their 3-year-old children from the greater Cincinnati, Ohio, area. We characterized gestational and childhood BPA exposures by using the mean BPA concentrations in maternal (16 and 26 weeks of gestation and birth) and child (1, 2, and 3 years of age) urine samples, respectively. Behavior and executive function were measured by using the Behavior Assessment System for Children 2 (BASC-2) and the Behavior Rating Inventory of Executive Function-Preschool (BRIEF-P).

Results: BPA was detected in >97% of the gestational (median: 2.0 µg/L) and childhood (median: 4.1 µg/L) urine samples. With adjustment for confounders, each 10-fold increase in gestational BPA concentrations was associated with more anxious and depressed behavior on the BASC-2 and poorer emotional control and inhibition on the BRIEF-P. The magnitude of the gestational BPA associations differed according to child gender; BASC-2 and BRIEF-P scores increased 9 to 12 points among girls, but changes were null or negative among boys. Associations between childhood BPA exposure and neurobehavior were largely null and not modified by child gender.

Conclusions: In this study, gestational BPA exposure affected behavioral and emotional regulation domains at 3 years of age, especially among girls. Clinicians may advise concerned patients to reduce their exposure to certain consumer products, but the benefits of such reductions are unclear.

Pediatrics 2011; peds.2011-1335; published ahead of print October 24, 2011, doi:10.1542/peds.2011-1335

<http://pediatrics.aappublications.org/content/early/2011/10/20/peds.2011-1335>

12. Official language proficiency and self-reported health among immigrants to Canada/ Connaissance des langues officielles et état de santé autodéclaré des immigrants au Canada

Authors: Edward Ng, Kevin Pottie and Denise Spitzer, Statistics Canada

New immigrants to Canada initially report better health than does the Canadian-born population. With time, this “healthy immigrant effect” appears to diminish. Limited ability to speak English or French has been identified as a possible factor in poor health. This analysis explored the relationship between self-reported official language proficiency and transitions to poor self-reported health.

English: <http://www.statcan.gc.ca/pub/82-003-x/2011004/article/11559-eng.htm>

Lorsque les immigrants arrivent au Canada, ils sont généralement en meilleure santé que leurs homologues nés au Canada. Toutefois, cet « effet de l’immigrant en santé » peut diminuer avec le temps. À partir de recherches antérieures concernant l’adaptation des immigrants, la présente étude repose sur l’hypothèse qu’une connaissance limitée d’une langue officielle peut être associée à la santé des immigrants.

Version Française: <http://www.statcan.gc.ca/pub/82-003-x/2011004/article/11559-fra.htm>

13. Mother’s Postpartum Oxycodone Use: No Safer for Breastfed Infants than Codeine

Jessica Lam, BSc, Lauren Kelly, MSc, Catherine Ciszkowski, MSc, Marieke L.S. Landsmeer, MD, Marieke Nauta, MD, Bruce C. Carleton, PharmD, Michael R. Hayden, MD, PhD, Parvaz Madadi, PhD, and Gideon Koren, MD

Doctors have been prescribing codeine for postpartum pain management for many years, and, until recently, it was considered safe to breastfeed while taking the opioid. But the death of an infant exposed to codeine through breast milk has many health care providers questioning the safety of the drug when used by breastfeeding mothers. Because of the potential risks, some doctors have begun the practice of prescribing oxycodone as an alternative to codeine; however, a new study soon to be published in *The Journal of Pediatrics* finds that oxycodone is no safer for breastfed infants than codeine.

To estimate the risks to babies breastfed by mothers taking either codeine or oxycodone, Dr. Gideon Koren of The Hospital for Sick Children (SickKids) in Toronto, and colleagues from institutions in both Canada and The Netherlands, pooled data from the Motherisk Program, a Teratology Information Center at SickKids that counsels women about the safety of using medication during pregnancy and breastfeeding. The researchers surveyed 533 women who had contacted the program with questions about using acetaminophen, codeine, or oxycodone for pain management while breastfeeding.

The mothers were asked to report their experiences with central nervous system (CNS) depression, as well as those of their infants, during the time they were taking one of the drugs and breastfeeding. According to Dr. Koren, “Typical symptoms of CNS depression include sleepiness, lethargy, and – in the infant’s case – trouble breastfeeding.” Of the 210 mothers who took codeine while breastfeeding, 16.7% reported symptoms of CNS depression in their child. Moreover, 20% of the 139 mothers who took oxycodone described these symptoms in their child. In contrast, only 0.5% of the 184 women who took acetaminophen while breastfeeding reported symptoms of CNS depression in their child. Additionally, mothers of symptomatic infants who took either codeine or oxycodone were significantly more likely to report CNS depression symptoms in themselves.

“The strong concordance between maternal and infant symptoms may be used to identify babies at higher risk of CNS depression,” Dr. Koren notes. He suggests that health care providers should perform follow-up examinations on breastfed babies whose mothers are receiving either codeine or oxycodone, and he stresses that these drugs “cannot be considered safe during breastfeeding in all cases.”

The Journal of Pediatrics, DOI 10.1016/j.jpeds.2011.06.050
<http://www.jpeds.com/content/JPEDSLam>

14. Play: It’s Serious Business

A Discussion Paper by the Alberta Recreation and Parks Association (ARPA)

Over the past three decades there has been a tripling of childhood obesity rates in the country, a fact that is heightening concern at the federal level, and indeed among all orders of government. Some have said the loss of PLAY time and unscheduled activity may be linked to childhood obesity because when there is a gap in scheduled programs many children revert to sedentary activities such as television and computers. This paper recognizes the PLAY deficit and makes recommendations to support change. It takes the position that no significant progress will be made without new policy development on children and PLAY, without involving children in designing playspaces and activities and without cross-sector leadership.

<http://s3.arpaonline.ca/docs/PLAY-discussion-paper-2011.pdf>

III. CURRENT INITIATIVES

15. The PREGNETS Project

The PREGNETS project at the Centre for Addiction and Mental Health (CAMH) is planning to conduct focus groups with women who smoke and are either planning to become pregnant within the next year, are currently pregnant or are up to 1-year postpartum.

The objective of the focus groups is to understand women's perspectives, opinions and attitudes regarding mobile and online communication (text messaging, email, websites, etc.) as a tool in smoking cessation. A total of 8 focus groups will be held with women who smoke.

Recruitment will be ongoing until the beginning of December. This is an invitation to assist with the recruitment of the target population. The focus groups will be conducted in the communities across Ontario from which at least 6 women agree to participate. All 6 women would have to belong to one of the sub-categories: smokers who are (a) planning a pregnancy; (b) pregnant and age 16-19; (c) pregnant and age 20+; (d) up to 1-year postpartum. In the case that less than 6 women are recruited from a community, telephone interviews will be held with the interested women instead. Women who are eligible and decide to participate will take part in group discussions lasting approximately 2 hours and will be reimbursed for their time with a \$30 Wal-Mart gift certificate. Child care, snacks and refreshments will be provided during the discussion. Women interested in participating can call toll-free to the following number: 1-855-600-2264.

If you have any questions or concerns, please feel free to contact Jenna Robinson at The PREGNETS project staff has also developed posters and flyers that can be used for recruitment. If you are interested in using posters or flyers at your location, please contact [Jenna Robinson](#).

16. National Child Day, November 20, 2011 /Journée nationale de l'enfant, 20 novembre, 2011

National Child Day is celebrated on November 20th each year. The date marks the occasion when Canada adopted the [United Nations Convention on the Rights of the Child \(UNCRC\)](#), spelling out the basic human rights for children and youth.

Chaque année, la Journée nationale de l'enfant est célébrée le 20 novembre. Cette date marque l'adoption par le Canada de la [Convention relative aux droits de l'enfant des Nations Unies](#), qui définit les droits fondamentaux des enfants et des jeunes du monde entier.

English: <http://www.phac-aspc.gc.ca/ncd-jne/index-eng.php>

En français: <http://www.phac-aspc.gc.ca/ncd-jne/index-fra.php>

IV. UPCOMING EVENTS

17. Skills for Health Promotion: An Introductory-level Workshop~ North Bay & Orillia

North Bay, ON

November 17th & 18th, Hampton Inn by Hilton, 950 McKeown Ave.

<http://skillsforhealthpromotion.eventbrite.com/>

Orillia, ON

December 6 & 7, 2011

Lakehead University, Orillia Campus, 500 University Avenue

<http://skillsforhealthpromoorillia.eventbrite.com/>

This is an introductory level series of workshops. They are designed for anyone new to health promotion seeking definitions, tools, resources and organized approaches to practice. Front line staff that need to plan, implement and/or evaluate programs and services, as well as managers or team leaders who train or advise staff about evidence-informed processes will find these sessions helpful. Participants have the choice to register for one day or both days.

18. International Conference: Models of Early Childhood Services

Centre of Excellence for Early Childhood Development: Montreal, June 5-6, 2012

This conference will focus on the various challenges faced while implementing best Early Child Development practices in the world. How should services be organized? How can best practices be provided on a large scale? How can these programs be funded?"

<http://bit.ly/CEECDConference>**19. Nonprofit Program Evaluation Workshop**

Date: Saturday, November 12th 2011

Time: 9AM to 5PM

Location: Schulich School of Business (Room:TBD)

Cost: \$100 (Paid NMA Members) / \$150 (Others)

For more information and the Register: <http://nma.schulich.yorku.ca/index.php/news/514>

The Non-profit Management and Leadership Program, with the assistance of the Nonprofit Management Association, is offering a one-day course in program evaluation to graduate students at Schulich, York University and the wider community. There is a growing demand for non-profit program evaluation and this workshop has been organized as a result of student demand for an introductory certificate program by employers in this area. Amanuel Melles, Director of Capacity Building at United Way will be teaching this course. All students who complete this workshop will receive a certificate in Non-profit Evaluation from the NMLP at the Schulich School of Business.

20. Evaluating Community Impact: Capturing and Making Sense of Community Outcomes

The *Evaluating Community Impact: Capturing and Making Sense of Community Outcomes* workshop is a three-day, interactive learning event designed to increase the capacity of leaders involved in community change efforts to better understand and evaluate the outcomes of these efforts. This workshop is geared towards people involved in community change initiatives with an interest and some basic experience with evaluation. Delta Kitchener-Waterloo in Kitchener, Ontario November 29 - December 1, 2011

http://tamarackcommunity.ca/ECI_index.html

V. RESOURCES

21. CAMH – Addiction Toolkit: Alcohol Use in Pregnancy

The Centre for Addiction and Mental Health (CAMH) has an on-line toolkit for health care providers who work in a primary care setting and who have patients with substance use problems. They have recently added two new sections on Alcohol problems in women and Alcohol use in pregnancy.

http://knowledgex.camh.net/primary_care/toolkits/addiction_toolkit/alcohol/Pages/faq_pregnancy.aspx

22. Early Exposures to Hazardous Pollutants/Chemicals and Associations with Chronic Disease - A Scoping Review (video briefing)

Canadian Environmental Law Association, July 20, 2011

A 30-minute video of author Kathy Cooper presenting the early exposures/chronic disease scoping

report. <http://www.healthyenvironmentforkids.ca/resources/early-EE-and-CD-Scoping-Review-video-briefing>

VI. FEATURED BEST START RESOURCES

23. Displays For Loan/Présentoirs Disponibles Pour Prêt

Do you have an upcoming public event or looking to attract attention to your message? One of our most popular services at the Best Start Resource Centre is its lending of banners and table top displays for community fairs, trade shows or other public and professional events. In the last 6 months, the Resource Centre has loaned a total of 58 packages to communities all across Ontario. The most popular were on the topics of alcohol and pregnancy, safe infant sleep, and work and pregnancy.

For more information about borrowing a display: <http://www.beststart.org/resources/index.html>

Or call 1-800-397-9567/416-408-2249, ext. 2336

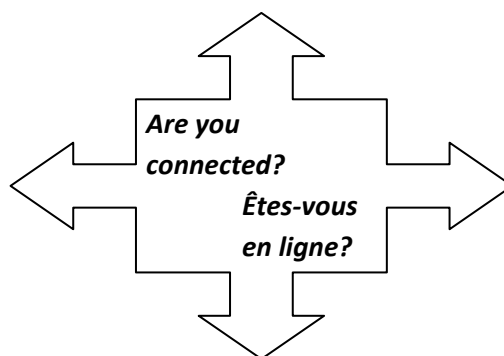
Vous avez un événement public et cherchez à attirer l'attention sur certains thèmes? Le Centre de ressource a quelques présentoirs disponibles pour prêt. La plupart sont de grandes affiches laminées sur papier qui peuvent se rouler dans un tube. Les frais d'envoi pour le retour devront être payés par les organisations qui emprunteront les présentoirs. Les présentoirs suivants sont disponibles en français: Cocktails sans alcool, Le tabagisme et votre famille, La santé avant la conception, et plusieurs d'autres.

Pour plus amples renseignements: <http://www.meilleurdepart.org/resources/index.html>

Ou composer le 1-800-397-9567/416-408-2249, poste 2336

About This Bulletin

The Best Start Resource Centre thanks you for your interest in, and support of, our work. Best Start permits others to copy, distribute or reference the work for non-commercial purposes on condition that full credit is given. Because our MNCHP bulletins are designed to support local health promotion initiatives, we would appreciate knowing how this resource has supported, or been integrated into, your work (mnchp@healthnexus.ca). Please note that the Best Start Resource Centre does not endorse or recommend any events, resources, or publications mentioned in this bulletin.



Click here to access Health Nexus' other e-bulletins and listservs:

In English:

- [OHPE](http://www.ohpe.ca/) - The free weekly Ontario Health Promotion E-mail bulletin (OHPE) offers a digest of news, events, jobs, feature articles on health promotion issues, resources, and much more, to those working in health promotion. <http://www.ohpe.ca/>
- [Click4HP](https://listserv.yorku.ca/archives/click4hp.html) - 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](http://www.blogs.healthnexusante.ca/) - 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.healthnexusante.ca/>

In French:

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