

MNCHP Network Bulletin



best start
meilleur départ

by/par health **nexus** santé

The MNCHP Bulletin is a bi-weekly 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 & resources from around the world. For more information about this Bulletin, [click here](#).

July 13, 2012

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I. NEWS & VIEWS

1. **Health Canada Warns Parents and Caregivers about the Dangers of Miniature Detergent Packs/Santé Canada avise les parents et les gardiens des dangers associés aux petits sachets de détergent**

Health Canada is aware of incidents of children ingesting miniature laundry detergent packs. The lightweight, colourful single use detergent plastic packets dissolve in water. These brightly coloured packets with their squishy texture are attractive to children.

Laundry detergents are powerful cleaning products that may contain ingredients which can lead to harmful health effects upon ingestion. Children who swallow the detergent packs may experience a variety of serious symptoms including severe abdominal pain, vomiting, or breathing difficulty.

http://www.hc-sc.gc.ca/ahc-asc/media/advisories-avis/_2012/2012_112-eng.php

Santé Canada sait que des enfants avalent parfois le contenu des petits sachets de détergent à lessive. Ces petits sachets en plastique légers et colorés à usage unique se dissolvent dans l'eau. Leur couleur vive et leur texture agréable attirent les enfants.

Les détergents à lessive sont des produits de nettoyage puissants qui peuvent contenir des ingrédients pouvant compromettre la santé s'ils sont ingérés. Les enfants qui avalent des sachets de détergent peuvent ressentir divers symptômes graves comme des douleurs abdominales, des vomissements ou de la difficulté à respirer.

http://www.hc-sc.gc.ca/ahc-asc/media/advisories-avis/_2012/2012_112-fra.php

2. Contraceptive Use Averts 272,000 Maternal Deaths Worldwide

Contraceptive use likely prevents more than 272,000 maternal deaths from childbirth each year, according to a new study led by researchers at the Johns Hopkins Bloomberg School of Public Health. Researchers further estimate that satisfying the global unmet need for contraception could reduce maternal deaths an additional 30 percent. Their findings were published July 10 by *The Lancet* as part of a series of articles on family planning.

“Promotion of contraceptive use is an effective primary prevention strategy for reducing maternal mortality in developing countries. Our findings reinforce the need to accelerate access to contraception in countries with a low prevalence of contraceptive use where gains in maternal mortality prevention could be greatest,” said the study’s lead author, Saifuddin Ahmed, MBBS, PhD, associate professor in the Bloomberg School’s departments of Population, Family and Reproductive Health, and Biostatistics.

“Vaccination prevents child mortality; contraception prevents maternal mortality.”

http://www.jhsph.edu/news/news-releases/2012/ahmed_contraception.html

3. Early birth linked to an increase in psychiatric illness

Premature birth appears to be related to hospitalizations for a range of psychiatric illnesses as the child becomes an adult, including depression and bipolar disorder, a recent study found.

The study, which was published in the June issue of *Archives of General Psychiatry*, examined about 1.3 million babies born in Sweden between 1973 and 1985. The researchers found that being born early was associated with an increased chance of admittance as an adult to the hospital for psychiatric condition

<http://www.chicagotribune.com/health/ct-x-premature-births-study-20120711,0,7189577.story>

4. H1N1 Flu Shot Appears Safe During Pregnancy

But Shot May Slightly Increase Risk for Guillian-Barre Syndrome in People 6 Months or Older
New research brings reassuring news for women who received the swine flu vaccine while pregnant during the H1N1 flu pandemic of 2009.

Infants born in Denmark whose moms got the H1N1 shot were no more likely to have major birth defects or to be born too early than infants whose moms did not get the vaccine during their pregnancies.

<http://www.webmd.com/baby/news/20120710/h1n1-flu-shot-appears-safe-during-pregnancy>

5. A pet boosts a child's health, doctors say

Babies who live with dogs and cats during their first year of life may be less susceptible to respiratory infections, such as the common cold, according to new research.

The study of nearly 400 children found that dogs were especially protective, and the babies who lived with dogs during their first year were about one-third more likely to be healthy during their first year, compared to babies who didn't have a pet in the home. Babies with dogs in the home were 44 percent less likely to develop an ear infection, and 29 percent less likely to need antibiotics than their petless peers.

http://www.nlm.nih.gov/medlineplus/news/fullstory_127040.html

6. Neonatal Morbidities and Developmental Delay in Moderately Preterm-Born Children

Moderately preterm-born children (32–356/7 weeks' gestation) are at risk for both neonatal morbidities after birth and developmental delays in early childhood. It is unknown whether neonatal morbidities contribute to the developmental delays of this particular group.

Of all neonatal morbidities commonly seen in moderately preterm-born children, only hypoglycemia increased the risk of developmental delay after moderately preterm birth. A concerted effort to prevent hypoglycemia after birth might enhance developmental outcome in this group.

<http://pediatrics.aappublications.org/content/early/2012/07/03/peds.2012-0079d.abstract?papetoc>

7. Edmonton's Grey Nuns hospital named as breast milk depot

The Grey Nuns Community Hospital will serve as a depot for Edmonton mothers looking to donate their extra breast milk. The Breastfeeding Action Committee of Edmonton had been working on the plan, seen as huge help to mothers of premature babies who need human milk and can't drink infant formula.

The depot will store milk from local donors and ship it all to the newly opened Calgary Mothers' Milk Bank, which provides screened, pasteurized breast milk to Alberta hospitals.

<http://www.edmontonjournal.com/health/Edmonton+Grey+Nuns+hospital+named+breast+milk+depot/6900069/story.html>

8. Drawstring deaths down

The number of child deaths caused by clothing getting caught on vehicles or playground equipment has dropped dramatically thanks to voluntary measures adopted by manufacturers, according to U.S. researchers.

http://www.msnbc.msn.com/id/48098413/ns/health-childrens_health/

9. First early childhood development centre opens in Serbia

The first Early Childhood Development (ECD) centre in Serbia was formally opened today. It is located in the premises of the RODITELJ ("Parent") Association in Belgrade's municipality of Zemun.

The centre in Zemun and a sister centre in Nis are the first of their kind in Serbia. They were established with the assistance of UNICEF, partially using the funds provided by IKEA and UNICEF National Ambassador to Serbia Novak Djoković.

In opening this Early Childhood Development Centre, Jelena Zajeganovic Jakovljevic from UNICEF emphasized the exceptional importance of a child's first years developmentally and in determining a healthy foundation for life. She said that in these critical years a child develops emotional stability, learns to trust other people, to build self-esteem and to master social and coping skills they will need later in school and, indeed, in life.

http://www.unicef.org/ceecis/media_20207.html

10. Good neighbours: 1,000 books in five years is child's play

1,000 books over the first five years of life adds up to huge benefits for children.

That's the basic idea behind a child and family literacy program called 1000 x 5. Give a child the chance to have 1,000 stories read to him or her by age five, and the chances of success in school rise considerably.

The 1000 x 5 Children's Book Recycling Project was created in 2008 by Daphne Macnaughton, a member of Peninsula Connections for Early Childhood. It focused on the development of literacy within the Saanich school district. The Saanich group has given out more than 50,000 picture books, valued at about \$500,000, and is still going strong.

<http://www.canada.com/news/Good+neighbours+books+five+years+child+play/6901172/story.html>

11. Fewer Iron Supplements During Pregnancy Work Just as Well for Preventing Anemia, Study Suggests

Taking iron supplements one to three times a week instead of every day is just as effective at preventing anemia in pregnant women, according to the findings of a new Cochrane systematic review. The authors of the review also showed that women experienced fewer side effects when taking iron supplements intermittently rather than daily.

<http://www.sciencedaily.com/releases/2012/07/120711074318.htm>

II. RECENT REPORTS AND RESEARCH

12. Is Your Child Safe? - Sleep Time/Votre enfant est-il en sécurité? - À l'heure du coucher

Health Canada, July, 2012

This guide focuses on safe sleep practices and everything that relates to a safe environment for sleeping.
http://www.hc-sc.gc.ca/cps-spc/alt_formats/pdf/pubs/cons/child-enfant/sleep-coucher-eng.pdf

Ce guide porte sur les pratiques de sommeil sécuritaires et sur tout ce qu'il faut pour créer un environnement de sommeil sans danger.

http://www.hc-sc.gc.ca/cps-spc/alt_formats/pdf/pubs/cons/child-enfant/sleep-coucher-fra.pdf

13. Persistent effects of women's parity and breastfeeding patterns on their body mass index: results from the Million Women Study

K L Bobrow et al.

Objective:

To explore the long-term effects of women's childbearing patterns on their body mass index.

Design:

Cross-sectional analysis.

Setting:

Population-based study of UK women.

Participants:

740 628 postmenopausal participants in the Million Women Study who reported their height, weight, reproductive histories and other relevant factors.

Main Outcome Measures:

Standardized mean BMI (kg m^{-2}) in groups defined by their parity and breastfeeding history.

Results:

Women were aged 57.5 (s.d. 4) years on average, and had a mean BMI of 26.2 kg m^{-2} (s.d. 5); 88% were parous, with 2.1 (s.d. 1.2) children on average. The standardised mean BMI increased progressively with the number of births from 25.6 kg m^{-2} (95% confidence interval (CI): 25.5–25.6) in nulliparous women up to 27.2 kg m^{-2} (CI: 27.2–27.3) for women with four or more births, a difference of 1.7 kg m^{-2} (CI: 1.6–1.7). Among the parous women 70% had ever breastfed and their average total duration of breastfeeding was 7.7 (s.d. 8.8) months. At every parity level the standardised mean BMI was significantly lower among women who had breastfed than those who had not, decreasing by 0.22 kg m^{-2} (CI: 0.21–0.22) for every 6 months of breastfeeding, that is, women's mean BMI was 1% lower for every 6 months that they had breastfed. These associations were highly statistically significant ($P < 0.0001$) and independent of the effects of socioeconomic group, region of residence, smoking and physical activity.

Conclusions:

Childbearing patterns have a persistent effect on adiposity in this population. The reduction in BMI associated with just 6 months breastfeeding in UK women could importantly reduce their risk of obesity-related disease as they age.

<http://www.nature.com/ijo/journal/vaop/ncurrent/full/ijo201276a.html>

14. Maternal deaths averted by contraceptive use: an analysis of 172 countries

Dr [Saifuddin Ahmed](#) PhD et al.

Background

Family planning is one of the four pillars of the Safe Motherhood Initiative to reduce maternal death in developing countries. We aimed to estimate the effect of contraceptive use on maternal mortality and the expected reduction in maternal mortality if the unmet need for contraception were met, at country, regional, and world levels.

Method

We extracted relevant data from the Maternal Mortality Estimation Inter-Agency Group (MMEIG) database, the UN World Contraceptive Use 2010 database, and the UN World Population Prospects 2010 database, and applied a counterfactual modelling approach (model I), replicating the MMEIG (WHO) maternal mortality estimation method, to estimate maternal deaths averted by contraceptive use in 172 countries. We used a second model (model II) to make the same estimate for 167 countries and to estimate the effect of satisfying unmet need for contraception. We did sensitivity analyses and compared agreement between the models.

Findings

We estimate, using model I, that 342 203 women died of maternal causes in 2008, but that contraceptive use averted 272 040 (uncertainty interval 127 937—407 134) maternal deaths (44% reduction), so without contraceptive use, the number of maternal deaths would have been 1.8 times higher than the 2008 total. Satisfying unmet need for contraception could prevent another 104 000 maternal deaths per year (29% reduction).

Interpretation

Numbers of unwanted pregnancies and unmet contraceptive need are still high in many developing countries. We provide evidence that use of contraception is a substantial and effective primary prevention strategy to reduce maternal mortality in developing countries.

Funding

Bill and Melinda Gates Foundation.

<http://www.thelancet.com/journals/lancet/article/PIIS0140-6736%2812%2960478-4/fulltext>

15. Barriers, Facilitators, and Recommendations Related to Implementing the Baby-Friendly Initiative (BFI): An Integrative Review

Sonia Semenic, McGill University et al. sonia.semenic@mcgill.ca

Despite growing evidence for the positive impact of the Baby-Friendly Initiative (BFI) on breastfeeding outcomes, few studies have investigated the barriers and facilitators to the implementation of Baby-Friendly practices that can be used to improve uptake of the BFI at the local or country levels. This integrative review aimed to identify and synthesize information on the barriers, facilitators, and

recommendations related to the BFI from the international, peer-reviewed literature. Thirteen databases were searched using the keywords Baby Friendly, Baby-Friendly Hospital Initiative, BFI, BFHI, Ten Steps, implementation, adoption, barriers, facilitators, and their combinations. A total of 45 English-language articles from 16 different countries met the inclusion criteria for the review. Data analysis was guided by Cooper's five stages of integrative research review. Using a multiple intervention program framework, findings were categorized into sociopolitical, organizational-level, and individual-level barriers and facilitators to implementing the BFI, as well as intra-, inter-, and extraorganizational recommendations for strengthening BFI implementation. A wide variety of obstacles and potential solutions to BFI implementation were identified.

Findings suggest some priority issues to address when pursuing Baby-Friendly designation, including the endorsements of both local administrators and governmental policy makers, effective leadership of the practice change process, health care worker training, the marketing influence of formula companies, and integrating hospital and community health services. Framing the BFI as a complex, multilevel, evidence-based change process and using context-focused research implementation models to guide BFI implementation efforts may help identify effective strategies for promoting wider adoption of the BFI in health services.

<http://jhl.sagepub.com/content/early/2012/06/06/0890334412445195>

16. Process evaluation for the FEeding Support Team (FEST) randomised controlled feasibility trial of proactive and reactive telephone support for breastfeeding women living in disadvantaged areas

Pat Hoddinott, University of Aberdeen et al.

Objective

To assess the feasibility, acceptability and fidelity of a feeding team intervention with an embedded randomised controlled trial of team-initiated (proactive) and woman-initiated (reactive) telephone support after hospital discharge.

Design

Participatory approach to the design and implementation of a pilot trial embedded within a before-and-after study, with mixed-method process evaluation.

Setting

A postnatal ward in Scotland.

Sample

Women initiating breast feeding and living in disadvantaged areas.

Methods

Quantitative data: telephone call log and workload diaries. Qualitative data: interviews with women (n=40) with follow-up (n=11) and staff (n=17); ward observations 2 weeks before and after the intervention; recorded telephone calls (n=16) and steering group meetings (n=9); trial case notes (n=69); open question in a telephone interview (n=372). The Framework approach to analysis was applied to mixed-method data.

Main outcome measures

Quantitative: telephone call characteristics (number, frequency, duration); workload activity.

Qualitative: experiences and perspectives of women and staff.

Results

A median of eight proactive calls per woman (n=35) with a median duration of 5 min occurred in the 14 days following hospital discharge. Only one of 34 control women initiated a call to the feeding team, with women undervaluing their own needs compared to others, and breast feeding as a reason to call. Proactive calls providing continuity of care increased women's confidence and were highly valued. Data demonstrated intervention fidelity for woman-centred care; however, observing an entire breast feed was not well implemented due to short hospital stays, ward routines and staff–team–woman communication issues. Staff pragmatically recognised that dedicated feeding teams help meet women's breastfeeding support needs in the context of overstretched and variable postnatal services.

Conclusions

Implementing and integrating the FEeding Support Team (FEST) trial within routine postnatal care was feasible and acceptable to women and staff from a research and practice perspective and shows promise for addressing health inequalities.

<http://bmjopen.bmj.com/content/2/2/e001039.full>

17. Does obesity really matter? The impact of BMI on embryo quality and pregnancy outcomes after IVF in women aged ≤38 years**Background**

The increasing prevalence of obesity in women of child-bearing age is of growing concern in the health community. Obesity is associated with sub-optimal reproductive performance; therefore, it is understandable that the number of young women with elevated body mass index (BMI) accessing assisted reproductive treatment (ART) is on the rise. Consequently, this study not only assessed the impact of BMI on fertilisation rates, embryo development and freezing during ART in women aged ≤38 years but also determined their subsequent pregnancy and delivery rates.

Methods

Data were retrospectively analysed from all cycles initiated in 2006/2007 for women aged ≤38 years. The BMI categorisations were as follows: normal – 18.5–24.9 kg/m²; overweight – 25–29.9 kg/m²; obese – 30–34.9 kg/m²; morbidly obese class I – 35–39.9 kg/m²; morbidly obese class II – ≥40 kg/m².

Results

Obese and morbidly obese women required a significantly higher follicle stimulating hormone start dose than normal BMI women; however, they obtained significantly fewer oocytes (P < 0.05). Although BMI did not affect embryo development, morbidly obese class II women had significantly reduced pregnancy rates compared to normal BMI women (30.5 vs 41.7%, respectively; P < 0.05). Furthermore, increasing BMI was positively correlated to increasing rates of preterm delivery (P < 0.05). Increasing BMI was also positively correlated to increasing delivery rates of singleton term macrosomic offspring (≥4000 g).

Conclusion

Obesity in women aged ≤38 years does not affect embryo development; however, it does reduce clinical pregnancy rates in women with a BMI ≥40 and increases rates of preterm labour and delivery of macrosomic offspring.

<http://onlinelibrary.wiley.com/doi/10.1111/j.1479-828X.2012.01453.x/abstract>

III. CURRENT INITIATIVES

18. Modernizing Child Care in Ontario

Ontario is looking to modernize the child care sector to ensure it remains strong and will help families experience a seamless transition to full-day kindergarten (FDK). The province is releasing a discussion paper, *Modernizing Child Care in Ontario*, to begin a conversation that will help move Ontario towards a high quality, accessible and co-ordinated early learning and care system for all children. The paper was developed to encourage feedback from the sector and families to help guide the modernization of the child care sector so it works effectively with FDK, once fully implemented in 2014-15. Modernizing child care is part of the McGuinty government's plan to create a more integrated early learning and child care system to ensure children get the best possible start."

<http://bit.ly/MakingChildCareWorkforFamilies>

Modernizing Child Care in Ontario discussion paper:

http://www.edu.gov.on.ca/childcare/Modernizing_Child_Care.pdf

18. Needs Assessment: Service Providers working with Aboriginal Peoples

The Best Start Resource Centre is planning initiatives to meet the needs of service providers working with Aboriginal Peoples. Through this survey, we would like learn how we can support you in your work with our services and resources. We may not be able to meet all of your needs but will try to address the priorities. The initiatives may be phased in over the next 2-3 years. Each initiative may take 1 or 2 years to complete.

This survey focuses on our mandate regarding reproductive health and early childhood development in Aboriginal communities. **Responses will be collected up to August 2nd, 2012**, to determine the needs of service providers regarding their support to Aboriginal populations. The survey takes about 10-15 minutes to complete. There are 17 questions.

Here is the link to the survey: <http://www.surveymonkey.com/s/5G6MYXY>

Thank you! Nia:wen! Meegwetch!

20. Canadian Nurses Association: A Nursing Call to Action

A report from the Canadian Nurses Association's National Expert Commission, suggests a fundamental shift in how health and health care is funded, managed and delivered in Canada.

Within a 9-Point Plan of Action, the report argues for a patient- and family-centred system of primary health care with a strong focus on health promotion and prevention that is based close to Canadians in their homes and communities. The Commission's consultations and research highlight that the system's current focus on the provision of acute care services in hospitals is no longer adequate for a population challenged by more chronic disease, greater cultural diversity and the complex needs of an aging

population. The Commission contends that community-based care involving teams of health professionals, including nurses and doctors working to the full scope of their practice, must be the model that Canadians and their governments support to create a sustainable national system for the future.

<http://www.cna-aiic.ca/expertcommission/#.UAAqnpGwU4o>

21. Australian Breastfeeding Association launches: The Online Breastfeeding Café (OBC)

The Online Breastfeeding Café (OBC) is a brand new breastfeeding website and forum designed especially for today's parents.

Featuring both 'mums' and 'dads' forums, it's the perfect place to share, discover and chat about your own breastfeeding and related early parenting experience.

<http://www.onlinebreastfeedingcafe.com.au/>

IV. UPCOMING EVENTS

22. Free webinars on its upcoming awareness campaign “Healthy Baby Healthy Brain”

The Best Start Resource Centre will be offering webinars on its upcoming awareness campaign “Healthy Baby Healthy Brain”. These webinars will offer service providers some background information on the campaign and help them use the campaign materials in their programming. The webinars are offered free of charge and service providers only need to attend one of them, at their convenience.

- Two webinars open to all service providers are available on **Tuesday, September 11**. An English one is available from 1 to 2 p.m. and a French one is available from 3 to 4 p.m. Registration for these webinars is available on the Best Start website at: http://beststart.org/index_eng.html
- An additional webinar will be offered specifically for Healthy Baby Healthy Children staff on **Wednesday, September 12**, from 1 to 2 p.m. Registration for this webinar is only available through this link: http://www.beststart.org/events/2012/webinar_hbhb/hbhb_sept12.html

The Healthy Baby Healthy Brain campaign will be launched on October 3rd. You are encouraged to plan events related to early brain development in the fall. Information on the strategies is available at:

<http://www.beststart.org/healthybabyhealthybrain/index.html>.

23. NeuroDevNet: Third Annual Brain Development Conference

Toronto, September 21-23, 2012

With increasing momentum, NeuroDevNet is bringing together researchers with passion and expertise in autism spectrum disorder, cerebral palsy and fetal alcohol spectrum disorder, along with experts in

brain development at the cellular and molecular level; the interaction of genetics and the environment; neuroeducation; knowledge translation and policy.

Highlights of this year's conference program include the first Fraser Mustard Memorial Lecture, to be given by Dr. Clyde Hertzman of the Human Early Learning Partnership at the University of British Columbia, and a keynote address by Dr. Thomas Insel, Director of the US National Institute of Mental Health. Fascinating sessions will follow, exploring the sciences of self-regulation, neuroeducation, strategies and success stories in knowledge translation, featuring Sir Albert Aynsley Green, former Children's Commissioner for England, and the movement of knowledge into action through a public forum on FASD.

<https://www.signup4.net/public/ap.aspx?EID=NEUR30E&TID=FXXshY1321QAoBLRWdsLUg%3d%3d>

24. Children's Mental Health Ontario 40th Anniversary Conference: "Partnering and Leading in Innovation and Transformation"

November 19, 2012 to Tuesday, November 20, 2012

Location: Marriott Toronto Downtown Eaton Centre Hotel

The Conference theme "Partnering and Leading in Innovation and Transformation" will provide an opportunity for us to share knowledge, new experiences and build community networks that will lead to a better mental health system for children and youth.

http://www.kidsmentalhealth.ca/news_and_events/events.php?action=detail&aid=985

25. SAVE THE DATE: 2013 Best Start Conference /Conférence annuelle de Meilleur départ 2013

Wednesday, February 6- Friday February 8, 2013

Hilton Suites Toronto/Markham Conference Centre

<http://www3.hilton.com/en/hotels/ontario/hilton-suites-toronto-markham-conference-centre-and-spa-YYZAPHF/index.html>

Program details will be released in the early fall.

26. Exhibitors Wanted: 2nd Annual Rural Health Fair

NorWest Recreation Centre, Kakabeka Falls, Ontario.

August 15, 2012

NorWest Community Health Centres with the communities of Conmee, Gillies, Neebing, Nolalu, O'Connor, and Oliver Paipoonge would love for you to attend the Rural Health Fair scheduled for August 15th from 2 pm to 8 pm. The fair will be held at the NorWest Recreation Centre at the corner of HWY 11/17 & HWY 588 in Kakabeka Falls, Ontario.

The theme: **Pathways to Healthy Families**, has a focus across the lifespan. The fair is free for all and offers health screenings and activities for all ages as well.

Exhibits will focus on health services; spiritual & mental well-being; healthy eating & food security; social services; and fun, fitness & education.

Would you like to be an exhibitor? Register online at: www.surveymonkey.com/s/RHFexhibitor2012
Visit www.norwestchc.org or on Facebook at www.facebook.com/NorWestCHC

V. RESOURCES

27. Great Breastfeeding Blogs to Read!

Blogging has become an incredibly influential part of the media consumed by today's mothers. In BlogHer's 2012 Study of Women and Social Media, a sample of women were asked, "Do you trust the information and advice that you get from blogs?" and an overwhelming 98% said YES. The number of women, especially pregnant women and new mothers, who are seeking advice and guidance from bloggers is staggering. 45% of the sample said that blogs were more influential than Facebook status updates from their friends or celebrity endorsements. Clearly, it is a medium that breastfeeding advocates and supporters should be aware of. And with nearly 4 million "mommy bloggers" on the scene, finding the best of the best can be a challenge.

<http://lactationmatters.org/2012/06/19/great-breastfeeding-blogs-to-read/>

28. Healthy Eating Manual Orientation Videos on YouTube

Introducing the Healthy Eating Manual

A short 2 minute introduction that includes how to register to use the materials.

Web version: <http://www.youtube.com/watch?v=4-2mj2d2ywM>

HD version: <http://www.youtube.com/watch?v=ycELR7vGjE>

The Healthy Eating Manual: More about the lessons

This video is longer at 7 minutes and provides more detail on each of the 8 mini lessons.

Web version: http://www.youtube.com/watch?v=-J6bjpyEiQ&list=PL86BAB9A7394F979D&index=2&feature=plpp_video

HD version: <http://www.youtube.com/watch?v=VKsAni-N5L0>

All four videos can also be accessed via the Healthy Eating Manual Playlist:

http://www.youtube.com/playlist?list=PL86BAB9A7394F979D&feature=mh_lolz

Links to the videos will be soon be added to the Healthy Eating Manual website:

www.healthyeatingmanual.ca

29. Healthy living guidelines for early learning and child care centres on Prince Edward Island

The Government of Prince Edward Island and the Department of Education and Early Childhood Development believe the earlier healthy behaviors are established in life, the better. It is therefore critical that Healthy Living Guidelines supporting these positive behaviors be implemented in early learning and child care centres across Prince Edward Island.

The main purpose of these Healthy Living Guidelines is to provide Island early learning and child care centres with effective direction, meaningful advice, and where appropriate, specific instructions on how to create the healthiest and safest environments possible for children. Importantly, successful implementation requires that the Healthy Living Guidelines be modeled by both early childhood educators, staff and parents.

http://www.gov.pe.ca/photos/original/eecd_healthyviv.pdf

30. Association of Ontario Midwives: Summer 2012 issue of *Ontario Midwife*

This issue focuses on the growth of midwifery and includes:

- A report back from the May pay equity lobby day at Queen's Park
- An update on new Clinical Practice Guidelines
- Highlights from the 2012 AOM Annual General Meeting and Conference
- Profiles of three graduating midwives

Now available to download: <http://www.aom.on.ca/Communications/Newsletter/>

31. Exploring the Links between Early Environmental Exposures and Chronic Disease: Implications for Public Health Policy and Practice: Workshop Report

The report of the March 8th workshop "Exploring the Links Between Early Environmental Exposures and Chronic Disease: Implications for Public Health Policy and Practice," organized by CPCHE with the Environmental Health Institute of Canada serving as the lead CPCHE partner, is available on the early exposures-chronic disease project page on the CPCHE website. The project page also provides links to the Scoping Review (full report and Executive Summary), a video briefing on the report, presentations from the workshop, and other information of relevance to this topic.

<http://www.healthyenvironmentforkids.ca/collections/exploring-connections-between-early-environmental-exposures-and-chronic-disease>

VI. FEATURED BEST START RESOURCES

32. STEP BY STEP: Engaging Fathers in Programs for Families

The best time to reach fathers is when they are experiencing change and are looking for support. This manual is designed to give service providers a step-by-step guide for planning and implementing strategies for engaging fathers.

Each section of the manual provides ideas from fathers and practitioners.

There is an opportunity for reflection at the end of each section. Program perspectives are also provided for a look at effective programs. The manual is only available via download in PDF format..

To view or download the manual, go to: <http://beststart.org/resources/howto/index.html>

About This Bulletin

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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/>