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.

June 15, 2012

The next bulletin will be released June 29, 2012.

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1. City Kids Much More Likely to Have Food Allergies than Rural Ones

Children living in urban centers have a much higher prevalence of food allergies than those living in rural areas, according to a new study, which is the first to map children’s food allergies by geographical location in the United States. In particular, kids in big cities are more than twice as likely to have peanut and shellfish allergies compared to rural communities.

The study will be published in the July issue of Clinical Pediatrics.


2. Pregnancy blood test can identify Down's syndrome

Testing whether a fetus has Down's syndrome is getting easier - and less risky. Several companies, all based in California, are launching tests that work on a pregnant woman’s blood, rather than requiring an invasive procedure.
3. New Study to Explore Link Between Breastfeeding, Better Infant Nutrition and Preventing Childhood Obesity

The longest-running pregnancy cohort study, the Raine Study, will be used by medical researchers from 36 academic institutions over the next five years to unravel the link between early life nutrition and obesity later in life. The study includes 1500 participants being monitored over 20 years of their life and revolves around the assessment of growth and weight from infancy to early adulthood. The study begins as childhood obesity of children under the age of five is growing at an increasingly alarming rate across the developed world.

Some experts have suggested that babies fed with infant formula are more prone to childhood obesity than babies who are breastfed. The World Health Organisation and the Australian National Health and Medical Research Council encourage exclusive breastfeeding for 6 months for a variety of medical reasons.

4. Kids taste success in obesity battle

Making the program a family affair is one of the benefits that Tiffany Romano, 16, a participant since late April, most enjoys.

"I like how the family is involved and how we do activities," said Tiffany. "We have family meetings, take family walks and learn about food together."

When Tiffany attends weekly sessions, her father, Bryant Romano, is there to back her up. At age 50, her father said he's been watching his health, too, and he's shed 48 pounds while accompanying his daughter.

"I think the key to this program is understanding foods and supporting our children," Romano said. "As parents, we've got to first lead by example, so we're doing this together as a family."

Read more here: http://www.sacbee.com/2012/06/10/4550602/hed-here-to-fill-for-centerpiece.html?storylink=lingospot_related_articles#storylink=cpy

5. Saving Mothers, Giving Life: Public-Private Partnership

New Partnership with U.S. and Norwegian Governments and the Private Sector Formed to Save the Lives of Mothers and Their Newborn Children

The global partnership for Saving Mothers, Giving Life – a unique public-private partnership consisting of founding partners that includes the United States Government, Merck's initiative Merck for Mothers, the Government of Norway, the American College of Obstetricians and Gynecologists (The College), and Every Mother Counts (EMC) – is being announced in the United States in conjunction with the Child Survival Call to Action event. The partnership aims to aggressively reduce maternal mortality in places where women are dying at alarming rates during pregnancy and childbirth. Maternal and child survival are inextricably linked. As of today, the founding partners have pledged more than $200 million USD in financial resources and additional in-kind resources.

http://www.sacbee.com/2012/06/14/4561696/new-partnership-with-us-and-norwegian.html#storylink=cpy
6. Birth Control That Uses Combined Hormones Raises Heart Risk: Study

Sweeping new research comparing various forms of hormonal contraception -- including birth control pills, vaginal rings and skin patches -- suggests that the risk for heart attacks and strokes is twice as high among users of combined estrogen-progestin versions. These include brands such as Yasmin and Yaz pills, the NuvaRing vaginal ring and Ortho Evra patches. The overall odds of suffering such debilitating effects, however, are still quite low. Analyzing 15 years of observational data from more than 1.6 million women aged 15 to 49, Danish scientists found that those taking low-dose estrogen birth control pills combined with various progestins suffered heart attacks and strokes between 1.5 and 2 times more often than women not using hormonal contraception. The risks were between 2.5 and 3 times higher among users of vaginal rings and transdermal patches compared to non-users.  

7. Promote breast-feeding or face sanctions, Indonesian healthcare providers told

Health Ministry director-general for nutrition and maternal and infant health Slamet Riyadi Yuwono said mothers should breast-feed their babies exclusively for six months after birth unless there was a specific medical condition or emergency.  
http://www.thesundaily.my/news/402917

8. New Brunswick putting More than $38 million to be invested in early childhood services

The provincial government unveiled a new, three-year $38-million action plan, Putting Children First, aimed at better preparing young children for the future.  

9. Higher taxes and smoke-free policies are reducing smoking among mothers-to-be

Higher taxes and smoke-free policies are reducing smoking among mothers-to-be, a new study by Emory University finds. The results will be published by the American Journal of Preventive Medicine. The researchers evaluated smoking bans and taxes on cigarettes, along with the level of tobacco control spending, and found that state tobacco control policies can be effective in curbing smoking during pregnancy, and in preventing a return to smoking within four months on average, after delivery.  
http://esciencecommons.blogspot.ca/2012/06/higher-tax-lowers-smoking-in-pregnancy.html
II. RECENT REPORTS AND RESEARCH

10. The manufacture of lifestyle: The role of corporations in unhealthy living
Nicholas Freudenberg, City University of New York School of Public Health at Hunter College, 2180 Third Avenue, New York, NY 10035, USA
Recently, researchers have debated two views on the connection between lifestyle and health. In the first, health-related lifestyles including tobacco and alcohol use, diet, and physical activity are seen as primary influences on health. In the second, social stratification is the dominant influence with lifestyles simply markers of social status. Neither approach leads to interventions that can reverse the world’s most serious health problems. This article proposes that corporate practices are a dominant influence on the lifestyles that shape patterns of health and disease. Modifying business practices that promote unhealthy lifestyles is a promising strategy for improving population health. Corporations shape lifestyles by producing and promoting healthy or unhealthy products, creating psychological desires and fears, providing health information, influencing social and physical environments, and advancing policies that favor their business goals. Public officials and health professionals can promote health by advocating policies to modify these corporate practices.
http://www.palgrave-journals.com/jphp/journal/v33/n2/abs/jphp201160a.html


BACKGROUND:
Identifying neighborhood environment attributes related to childhood obesity can inform environmental changes for obesity prevention.

PURPOSE:
To evaluate child and parent weight status across neighborhoods in King County (Seattle metropolitan area) and San Diego County differing in GIS-defined physical activity environment (PAE) and nutrition environment (NE) characteristics.

METHODS:
Neighborhoods were selected to represent high (favorable) versus low (unfavorable) on the two measures, forming four neighborhood types (low on both measures, low PAE/high NE, high PAE/low NE, and high on both measures). Weight and height of children aged 6-11 years and one parent (n=730) from selected neighborhoods were assessed in 2007-2009. Differences in child and parent overweight and obesity by neighborhood type were examined, adjusting for neighborhood-, family-, and individual-level demographics.

RESULTS:
Children from neighborhoods high on both environment measures were less likely to be obese (7.7% vs 15.9%, OR=0.44, p=0.02) and marginally less likely to be overweight (23.7% vs 31.7%, OR=0.67, p=0.08) than children from neighborhoods low on both measures. In models adjusted for parent weight status
and demographic factors, neighborhood environment type remained related to child obesity (high vs low on both measures, OR=0.41, p<0.03). Parents in neighborhoods high on both measures (versus low on both) were marginally less likely to be obese (20.1% vs 27.7%, OR=0.66, p=0.08), although parent overweight did not differ by neighborhood environment. The lower odds of parent obesity in neighborhoods with environments supportive of physical activity and healthy eating remained in models adjusted for demographics (high vs low on the environment measures, OR=0.57, p=0.053).

CONCLUSIONS:
Findings support the proposed GIS-based definitions of obesogenic neighborhoods for children and parents that consider both physical activity and nutrition environment features.


12. A Point-of-Purchase Intervention Featuring In-Person Supermarket Education Affects Healthful Food Purchases

Brandy-Joe Milliron et al.

Objective
This study tested the efficacy of a multicomponent supermarket point-of-purchase intervention featuring in-person nutrition education on the nutrient composition of food purchases.

Design
The design was a randomized trial comparing the intervention with usual care (no treatment).

Setting and Participants
A supermarket in a socioeconomically diverse region of Phoenix, AZ. One hundred fifty-three adult shoppers were recruited onsite.

Intervention
The intervention consisted of brief shopping education by a nutrition educator and an explanation and promotion of a supermarket point-of-purchase healthful shopping program that included posted shelf signs identifying healthful foods, sample shopping lists, tips, and signage.

Main Outcome Measures
Outcomes included purchases of total, saturated, and trans fat (grams/1,000 kcal), and fruits, vegetables, and dark-green/yellow vegetables (servings/1,000 kcal) derived through nutritional analysis of participant shopping baskets.

Analysis
Analysis of covariance compared the intervention and control groups on food purchasing patterns while adjusting for household income.

Results
The intervention resulted in greater purchasing of fruit and dark-green/yellow vegetables. No other group differences were observed.

Conclusions and Implications
Long-term evaluations of supermarket interventions should be conducted to improve the evidence base and to determine the potential for influence on food choices associated with decreased chronic disease incidence.

http://www.jneb.org/article/S1499-4046%2811%2900393-9/abstract

Richard Fletcher, Emily Freeman, Stephen Matthey
Men's Studies Press, Volume 9, Number 3 / Fall 2011
Behavioural parent training programs have been developed to address child behaviour problems through improvement in parenting practices. Ideally, programs would demonstrate effectiveness with all parents. The Triple P-Positive Parenting Program is widely reported as an effective, evidence-based program for parents. However, in this meta-analysis we demonstrate that there are significant differences in program effectiveness for mothers and fathers. We show that while Triple P has a large positive effect on mothers' parenting practices, it has a smaller effect on fathers' parenting practices. Considering that fathers make a significant and unique contribution to child development, we argue that it is important for parenting programs to assess their effectiveness with fathers as well as mothers.

http://www.mensstudies.com/content/120394/?p=b27f4dd2f11a42ff8b27fc8483858ca1&pi=0

14. Rethinking Services for Young Fathers

Jean-Martin Deslauriers, Ph.D et al
This article presents research results concerning the relationships young fathers have with social service organizations, in particular, those which offer assistance specifically tailored to young fathers' needs or those responsible for child and youth protection. These results are drawn from a broader qualitative study in which interview and focus-group data were collected from fathers who had had a child at an early age. A literature review first provides an overview of various facets of the experience of young fathers and of the services they need. The literature and the voices of young fathers together point to key issues, which are highlighted in the discussion.

Fathering: A Journal of Theory, Research, and Practice about Men as Fathers, Volume 10, Number 1 / Winter 2012
http://www.mensstudies.com/content/1j55312572t42367/?p=768257b84f60421b85a55e31c0b1250a&pi=4

15. Predicting Language Change Between 3 and 5 Years and Its Implications for Early Identification

James Law et al.

BACKGROUND AND OBJECTIVE:
Early language delays across the preschool period have important implications for children, parents, and services raising the significance of early identification. Screening tests are an appealing solution but have proved problematic. A combined risk model would seem promising but has yet to be tested. The goal of this study was to examine the factors that predict language change in a nationally representative sample of children between 3 and 5 years when most children are identified as being in need of services.

METHODS:
By using data from children (n = 13 016) in the Millennium Cohort Study (a national UK birth cohort), linear regression was used to predict 5-year performance from 3-year test performance data coupled with sociodemographic and within-child factors and indicators of parental concern. Patterns of change were identified and logistic regression was used to predict the difference between children for whom profiles change and those for whom they do not.

RESULTS:
The final model (predicting 32% of the variance) included maternal education, pattern construction, behavior, language concerns, and 3-year vocabulary. Four change patterns were identified: one consistently low (n = 201), one consistently high (n = 12 066), a group that is resilient (n = 572), and one
with a declining profile \((n = 177)\). The models accurately predicted 71% of the declining group and 99% of the resilient group. Maternal education (odds ratio: 0.49) and behavior (odds ratio: 0.9) were significant predictors for the former and maternal education (odds ratio: 0.6) and pattern construction (odds ratio: 1.03) the latter.

**CONCLUSIONS:**

Early identification of delayed language remains problematic but, once identified, there are key indicators that predict which children are likely to be more or less at risk across time. The implications are discussed in terms of policy and practice.

American Academy of Pediatrics, 2011-1673

http://pediatrics.aappublications.org/content/early/2012/06/06/peds.2011-1673

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**III. CURRENT INITIATIVES**

16. **2012 nominations: 3M Health Leadership Award**

The deadline for the 2012 nominations of the 3M Health Leadership Award is quickly approaching. We encourage you to check out the award website for more information about the award and the process, and **nominate your leader before June 22**.

http://www.healthnexus.ca/leadershipaward/index.html

17. **Province Releases ‘Thrive! Plan for Healthier Nova Scotia’**

The province is addressing childhood obesity and preventable chronic disease with a plan that focuses on healthy eating and physical activity. Premier Darrell Dexter and Health and Wellness Minister David Wilson, released “Thrive: a plan for a healthier Nova Scotia”. The government-wide effort has 34 main points and $2.045-million in new funding for 2012-13.


18. **The American Family Assets Study**

The American Family Assets Study presents a compelling national portrait of families. It introduces a new framework of Family Assets—relationships, interactions, opportunities, and values that help families thrive.

http://www.search-institute.org/familyassets/study

19. **Healthy Start, Healthy Future Announces the Life with A Baby Volunteer Of The Year Award**
Healthy Start Healthy Future is pleased to announce its new Life with a Baby Volunteer of the Year award, which will recognize dedicated community volunteers who have a significant impact on the lives of children 0-6 years old and/or their parents. Three award recipients will be chosen based on the following criteria: impact, reach, and communities served. The prizes include over $2000 in cash and a new iPad. Nominate yourself or someone you know who and help us salute volunteerism in Canada.

For more information and to enter visit:
https://www.facebook.com/LifeWithABaby/app_360445997355351

This contest is sponsored by Head Start For Baby, a not for profit organization dedicated to providing information for families related to education, budgeting, and financial planning through all stages of life.

**About Life With A Baby:**
Since 2009, the Life With A Baby volunteer based program has supported over 2,600 families. In the latest evaluative study regarding LWAB’s performance, the findings revealed that ‘peer support’ and an increase in social networks were ranked the highest and most important among the benefits participants received from the program. Participants claimed that the LWAB program “helped to decrease feelings of isolation by increasing their social network and providing activities to attend outside of the house.” Of equal importance is the fact that LWAB’s use of its online community also “helped to keep participants connected and involved in the community.”

LWAB is a three-tiered support-system that offers:
1. Local, community-based social events where parents may build relationships with their peers;
2. Online support and interactive open forums for communication among members;
3. Multi-lingual parenting programs with a focus on peer-support.

For more information, please contact:
Claire Kerr-Zlobin, Executive Director, Healthy Start, Healthy Future
416-833-3860 / info@lifewithababy.com

**20. Right to Play Grant for First Nations**

The PLAY Program is being implemented in partnership with First Nations communities across Ontario.

The PLAY Program is a multi-faceted program designed to use sport and play activities as a tool to build on the strength of Aboriginal children, youth and their communities, supporting the value of culture and identity. Each component of the PLAY Program is tailored to the specific needs of the community, designed in partnership with the community and aims to develop and strengthen essential life skills in children and youth. The design and implementation of the overall PLAY program is based on a thorough community-focused structure, which is exemplified by the following processes:

Application: **Deadline is June 29th, 2012**

To find out more:
http://www.righttoplay.com/canada/our-impact/Pages/PLAYProgram.aspx

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**IV. UPCOMING EVENTS**
21. Webinar: Action on the Social Determinants of Health: What is the optimal role for Ontario health units?

June 27, 2012; 1:00 pm - 2:00 pm
Action on the Social Determinants of Health: What is the optimal role of Ontario Health Units
This webinar provides a brief introduction to the social determinants of health and implications for health promotion practice. Topics covered include an overview of the determinants, definitions of key terms, the mechanisms by which the determinants of health affect the health of individuals and communities, and examples of good practice.

**Presenter: Brian Hyndman**

Brian Hyndman is a Senior Planner with the Health Promotion, Chronic Disease and Injury Prevention Section at Public Health Ontario. He has over 20 years’ experience with planning and evaluating health promotion initiatives. This was gained through a variety of roles, including twelve years as a consultant with the Health Communications Unit at the Centre for Health Promotion, University of Toronto (1994-2005). Brian has also held key leadership positions in the Canadian public health sector, including President of the Ontario Public Health Association (1997-1999) and Citizen Representative on the Toronto Board of Health (2001-2007).


22. 2012 Ophea Conference

Thursday, October 11 – Friday, October 12
Nottawasaga Inn, Alliston ON
The 2012 Ophea Conference is an invaluable professional learning experience for leaders who support the health and learning of children and youth in Ontario’s schools and communities. The early bird deadline is June 28th - register today and save! For more information and to register:

[https://conference.ophea.net/](https://conference.ophea.net/)

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## V. RESOURCES

23. Every Body Walk!

Every Body Walk! is an online educational campaign aimed at getting Americans up and moving. Through the help of our partners, we are working to spread the message that walking 30 minutes a day, five days a week really can improve your overall health and prevent disease. We provide news and resources on walking, health information, walking maps, how to find walking groups, a personal pledge form to start walking, as well as a place to share stories about individual experiences with walking.

24. Health and Sustainable Development Toolkit

The Health and Sustainable Development Toolkit was designed to strengthen the capacity of advocates, program managers, policy makers, donors, and others to plan, implement, evaluate, promote, and scale up Health and Sustainable Development programs and to advocate for changes to national policy and service delivery guidelines. This Toolkit contains a strategic set of tools and resources selected for high quality information as an instrument of evidence to support the World Conference RIO + 20.


25. The Possible Dream: What Families in Distressed Communities Need to Help Youth Thrive

This research report offers foundational information about opportunities and challenges for encouraging and supporting asset building in families in distressed neighborhoods. In an informative, practical style, the report presents strategies for reaching families and strengthening systems that support them. It includes:

- Profiles of families and family asset building in one urban and one rural community.
- Findings on reaching families that typically do not access formal support systems in communities.
- Key sources of strength and support for asset building in families.
- Concrete strategies for strengthening the systems that support asset building in families.

https://www.searchinstitutestore.org/product_p/e632-w.htm

26. WHO Clinical Guidance News: Gonorrhea becoming more antibiotic-resistant

Millions of people with gonorrhea may be at risk of running out of treatment options unless urgent action is taken, according to the World Health Organization.

In guidance issued June 6, the WHO called for greater vigilance on the correct use of antibiotics and more research into alternative treatment regimens for gonococcal infections. The WHO’s "Global Action Plan" to control the spread and impact of antimicrobial resistance in Neisseria gonorrhoeae also calls for increased monitoring and reporting of resistant strains and better prevention, diagnosis and control of gonococcal infections.

http://whqlibdoc.who.int/publications/2012/9789241503501_eng.pdf

27. Report to the U.S. Congress on the Outcomes of the Nonmotorized Transportation Pilot Program Submitted by the Federal Highway Administration, April 2012

In August 2005, the Department of Transportation allocated $25 million dollars to four pilot communities for a Nonmotorized Transportation Pilot Program (NTPP). The NTPP ran for four years, in Columbia, Missouri, Marin County, California, Minneapolis, Minnesota, and Sheboygan County,
Wisconsin. The program mission was “to construct...a network of nonmotorized transportation infrastructure facilities, including sidewalks, bicycle lanes, and pedestrian and bicycle trails, that connect directly with transit stations, schools, residences, businesses, recreation areas, and other community activity centers”. The program resulted in increased biking and walking, millions of miles of averted driving, and an increase in the number of biking and walking trips that also included transit. http://www.fhwa.dot.gov/environment/bicycle_pedestrian/ntpp/2012_report/final_report_april_2012.pdf

28. Special Section: Fathering Resources

The Fathering Project, Australia

The Fathering Project is a University of Western Australia-based non-profit team of professionals whose aim is to help fathers realise how important they are in a child’s life and to give them advice on how to encourage their children. Their work is also aimed at father figures such as grandfathers, stepfathers, uncles, mentors, youth leaders, teachers, pastors and coaches, knowing that many children do not have much father contact at all. http://www.thefatheringproject.org/about-the-fathering-project

The Canadian Father Involvement Initiative: Dad Central/Papa Centrale

Committed to strong, healthy children by affirming and valuing the bond between fathers and their children, The Father Involvement Initiative - Ontario Network works to provide relevant and well-crafted information for fathers and for individuals, agencies, and programs working with fathers. http://www.cfii.ca/

The Effects of Father Involvement: A Summary Of The Research Evidence

This is a document (Allen & Daly, 2007) that presents a number of key trends in the growing research literature around the impact of father involvement on men, their children, and their partners. This document illustrates the major implications for the social, emotional and cognitive development of their children, as well as their own, adult development. It also touches on implications for their partners and family. http://www.ecdip.org/docs/pdf/IF%20Father%20Res%20Summary%20(KD).pdf

Father Toolkit: Fatherhood: It's The Best Job On The Planet

This toolkit (My Daddy Matters Because, 2008) has been designed for any staff member of a CAPC/CPNP project or any other community organization interested in promoting father involvement. The kit is useful to any project along the father involvement continuum, including projects that have had father programs up and running for many years as well as projects that do not yet have any programs. English: http://www.mydad.ca/toolkits/nfp_toolkit_eng.pdf French: http://www.mydad.ca/toolkits/nfp_toolkit_frn.pdf
It Seems the Fertility Clock Ticks For Men, Too

This article published in the New York Times (2007), outlines the risks associated with advanced paternal age (fathering a child over the age of forty. Evidence suggests that as men age, they face a greater chance of fathering children with abnormalities. Men over the age of forty are more likely to experience a decline in fertility, as well as father children with common illnesses such as autism and schizophrenia.

http://query.nytimes.com/gst/fullpage.html?res=9D06E4DC1E3EF934A15751C0A9619C8B63&pagewanted=all

New Dad's Role in Delivery

This article (Baby Center, 2012) outlines the various ways in which men may be involved in their partner’s labour experience. Men may elect to attend childbirth classes to prepare for this role. The presence of doula or labour coach may help to make men feel more comfortable with attending to their partners during childbirth.

http://www.babycenter.com/0_a-dads-role-in-delivery_183.bc

Hands on Dad: A Guide For New Fathers

This guide (The Psychology Foundation of Canada, 2008) promotes positive parenting in the following areas:
- Getting Started: The first two weeks at home
- Your Baby: The amazing little stranger
- Your Partner: She needs you now more than ever
- Your Self: Here’s looking at you dad
- Your Family: New roles, new relationships


National Center for Fathering

The National Center for Fathering (Fathers.com) is a nonprofit educational organization that provides research-based training and resources so that men are equipped to address their children’s needs. Our goal is to reverse the cultural trend toward fatherlessness by helping every dad learn how to be a father.

http://fathers.com/

Dads Make A Difference

1 Page PDF handout

http://www.hamilton.ca/HealthandSocialServices/PublicHealth/Parenting/Fathering.htm

Promising Practices in Teen Fatherhood Programs, 2008

Elements of Promising Practice in Teen Fatherhood Programs: Evidence-Based and Evidence-Informed Research Findings on What Works, the research review from the US Department of Health and Human Services, offers insight into teen father programs through:
- 10 models of promising practices for teen father programs.
• Barriers that keep fathers from participating in programs.
• Emerging practices.
• Evaluating program outcomes through quality evaluation and what that entails.
http://www.bccf.ca/professionals/resources/promising-practices-teen-fatherhood-programs

VI. FEATURED BEST START RESOURCES

32. New Alcohol & Pregnancy Display

Best Start Resource Centre has a range of displays available for loan to service providers in Ontario. These displays provide a professional look and evidence-based information. They can be used at events such as health fairs, baby/prenatal fairs, workplace health events, workshops, FASD Day events etc. There is no cost for borrowing the displays, although you are responsible for the cost of return postage. These displays are popular, and do wear out over time. To replace a popular display about alcohol and pregnancy, Best Start Resource Centre has just released a new free standing pull-up display. It is bilingual and shares key message about alcohol and pregnancy.

To view this display, or to request to borrow a display, please visit:
http://beststart.org/resources/index.html#display
http://www.meilleurdepart.org/resources/index.html#display

Free Alcohol & Pregnancy Materials

Ensure your display is visited by offering free handouts to attract visitors!

➢ Booklet: Mocktails for Mom /Mocktails pour maman

➢ Bilingual Recipe Cards: Mocktails for Mom / Mocktails pour maman

(Limit 500 copies per order. Shipping and handling charges will be added)
http://www.beststart.org/resources/alc_reduction/index.html
About This Bulletin

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

In English:

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

In French:

- French distribution list – The free distribution list offers information in French on maternal, newborn, and child health promotion topics. http://www.meilleurdepart.org/index_fr.html