

MNCHP Network Bulletin



best start
meilleur départ

by/par health **nexus** santé

The MNCHP Bulletin is a monthly electronic bulletin that highlights current trends, new resources and initiatives, upcoming events and more in the preconception, prenatal and child health field. Our primary focus is the province of Ontario, Canada but the bulletin also includes news and resources from around the world. Wherever possible, we include resources that are available for free. For more information about this bulletin, [click here](#).

March 7, 2014

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I. NEWS & VIEWS

1. New Supports for Youth Leaving Care: Ontario (available in French)

The Government of Ontario (2014, February 27) announced that 50 Youth-in-Transition worker positions will be created across the province. The Youth-in-Transition workers will help young people ages 16 to 24 by:

- Securing local affordable housing.
- Finding education and employment resources to help cover the cost of postsecondary education and training, or to find a job.
- Identifying skills training, such as financial literacy courses and meal planning.
- Accessing health and mental health services like being connected with a family doctor and counselling.
- Locating legal services, including advice for youth in the justice system.

The province is also investing in a new Aftercare Benefits Initiative. Starting this summer, eligible young people ages 21 to 24, who were previously in the care of a Children's Aid Society, can access:

- Health and dental services, including prescription drugs, vision care and hearing aids.
- Extended health services, such as physiotherapy, psychotherapy, acupuncture, and chiropractic treatment.
- Additional benefits, including therapy and counselling.

EN: http://news.ontario.ca/mcys/en/2014/02/new-supports-for-youth-leaving-care.html?utm_source=children_and_youth_services&utm_medium=rss_click&utm_campaign=rss_feed&utm_reader=feedly

FR: <http://news.ontario.ca/mcys/fr/2014/02/de-nouveaux-soutiens-pour-les-jeunes-quittant-la-prise-en-charge.html>

2. United Arab Emirates (UAE) Requires Mothers to Breastfeed for First Two Years

The UAE passed a law requiring mothers to breastfeed their children until they are two years old. The social affairs minister warns it could mean that husbands can sue wives who do not breastfeed.

<http://www.theguardian.com/world/2014/feb/07/uae-law-mothers-breastfeed-first-two-years>

II. RECENT REPORTS AND RESEARCH

* indicates journal subscription required for full text access

3. Parenting and Child Support after Separation or Divorce

Sinha, M. (2014). Parenting and child support after separation or divorce. *Statistics Canada*. Retrieved from <http://www.statcan.gc.ca/pub/89-652-x/89-652-x2014001-eng.pdf>

EXCERPT:

The article examines parenting and child support after separation or divorce, looking at those who have separated or divorced within the last 20 years. Included is a national and regional overview of separated or divorced parents, as well as an examination of parenting decisions in the wake of a marital or common-law breakup (child residency, time-sharing, and decision-making) and financial support arrangements for the child.

EN: <http://www.statcan.gc.ca/pub/89-652-x/89-652-x2014001-eng.htm>

FR: <http://www.statcan.gc.ca/pub/89-652-x/89-652-x2014001-fra.htm>

4. Acetaminophen Use During Pregnancy, Behavioral Problems, and Hyperkinetic Disorders*

Liew, Z., Ritz, B., Rebordosa, C., Lee, P.-C., & Olsen, Jorn. (2014). *JAMA Pediatrics*. doi:10.1001/jamapediatrics.2013.4914

ABSTRACT:

Importance: Acetaminophen (paracetamol) is the most commonly used medication for pain and fever during pregnancy in many countries. Research data suggest that acetaminophen is a hormone disruptor, and abnormal hormonal exposures in pregnancy may influence fetal brain development.

Objective To evaluate whether prenatal exposure to acetaminophen increases the risk for developing attention-deficit/hyperactivity disorder (ADHD)–like behavioral problems or hyperkinetic disorders (HKDs) in children.

Design, Setting, and Participants: We studied 64 322 live-born children and mothers enrolled in the Danish National Birth Cohort during 1996-2002.

Exposures: Acetaminophen use during pregnancy was assessed prospectively via 3 computer-assisted telephone interviews during pregnancy and 6 months after child birth.

Main Outcomes and Measures: To ascertain outcome information we used (1) parental reports of behavioral problems in children 7 years of age using the Strengths and Difficulties Questionnaire; (2) retrieved HKD diagnoses from the Danish National Hospital Registry or the Danish Psychiatric Central Registry prior to 2011; and (3) identified ADHD prescriptions (mainly Ritalin) for children from the Danish Prescription Registry. We estimated hazard ratios for receiving an HKD diagnosis or using ADHD medications and risk ratios for behavioral problems in children after prenatal exposure to acetaminophen.

Results: More than half of all mothers reported acetaminophen use while pregnant. Children whose mothers used acetaminophen during pregnancy were at higher risk for receiving a hospital diagnosis of HKD (hazard ratio = 1.37; 95% CI, 1.19-1.59), use of ADHD medications (hazard ratio = 1.29; 95% CI, 1.15-1.44), or having ADHD-like behaviors at age 7 years (risk ratio = 1.13; 95% CI, 1.01-1.27). Stronger associations were observed with use in more than 1 trimester during pregnancy, and exposure response trends were found with increasing frequency of acetaminophen use during gestation for all outcomes (i.e., HKD diagnosis, ADHD medication use, and ADHD-like behaviors; *P* trend < .001). Results did not appear to be confounded by maternal inflammation, infection during pregnancy, the mother's mental health problems, or other potential confounders we evaluated.

Conclusions and Relevance: Maternal acetaminophen use during pregnancy is associated with a higher risk for HKDs and ADHD-like behaviors in children. Because the exposure and outcome are frequent, these results are of public health relevance but further investigations are needed.

Abstract: <http://archpedi.jamanetwork.com/article.aspx?articleid=1833486>

Related news: <http://www.medscape.com/viewarticle/821006>

<http://www.cbc.ca/news/health/acetaminophen-use-in-pregnancy-studied-for-adhd-risk-1.2549806>

5. Girls with Major Mental Illness: A Population-Based Study*

Objective: Fertility rates among adolescents have decreased substantially in recent years, yet fertility rates among adolescent girls with mental illness have not been studied. We examined temporal trends in fertility rates among adolescent girls with major mental illness.

Methods: We conducted a repeated annual cross-sectional study of fertility rates among girls aged 15 to 19 years in Ontario, Canada (1999–2009). Girls with major mental illness were identified through administrative health data indicating the presence of a psychotic, bipolar, or major depressive disorder within 5 years preceding pregnancy (60 228 person-years). The remaining girls were classified into the comparison group

(4 496 317 person-years). The age-specific fertility rate (number of live births per 1000 girls) was calculated annually and by using 3-year moving averages for both groups.

Results: The incidence of births to girls with major mental illness was 1 in 25. The age-specific fertility rate for girls with major mental illness was 44.9 per 1000 (95% confidence interval [CI]: 43.3–46.7) compared with 15.2 per 1000 (95% CI: 15.1–15.3) in unaffected girls (rate ratio: 2.95; 95% CI: 2.84–3.07). Over time, girls with major mental illness had a smaller reduction in fertility rate (relative rate: 0.86; 95% CI: 0.78–0.96) than did unaffected girls (relative rate: 0.78; 95% CI: 0.76–0.79).

Conclusions: These results have key clinical and public policy implications. Our findings highlight the importance of considering major mental illness in the design and implementation of pregnancy prevention programs as well as in targeted antenatal and postnatal programs to ensure maternal and child well-being.

Abstract: <http://pediatrics.aappublications.org/content/early/2014/02/04/peds.2013-1761.abstract>

Related news: http://www.theglobeandmail.com/life/health-and-fitness/health/girls-with-mental-health-issues-at-greater-risk-of-pregnancy-study/article16748332/?utm_source=Shared+Article+Sent+to+User&utm_medium=E-mail:+Newsletters+/-+E-Blasts+/-+etc.&utm_campaign=Shared+Web+Article+Links

6. Improving Positive Parenting Skills and Reducing Harms and Abusive Parenting in Low- and Middle-Income Countries: A Systematic Review*

ABSTRACT:

Family and youth violence are increasingly recognized as key public health issues in developing countries. Parenting interventions form an important evidence-based strategy for preventing violence, both against and by children, yet most rigorous trials of parenting interventions have been conducted in high-income countries, with far fewer in low- and middle-income countries (LMICs). This systematic review, conducted in line with Cochrane Handbook guidelines, investigated the effectiveness of parenting interventions for reducing harsh/abusive parenting, increasing positive parenting practices, and improving parent-child relationships in LMICs. Attitudes and knowledge were examined as secondary outcomes. A range of databases were systematically searched, and randomized trials included. High heterogeneity precluded meta-analysis, but characteristics of included studies were described according to type of delivery mode and outcome. Twelve studies with 1580 parents in nine countries reported results favoring intervention on a range of parenting measures. The validity of results for most studies is unclear due to substantial or unclear risks of bias. However, findings from the two largest, highest-quality trials suggest parenting interventions may be feasible and effective in improving parent-child interaction and parental knowledge in relation to child development in LMICs, and therefore may be instrumental in addressing prevention of child maltreatment in these settings. Given the well-established evidence base for parenting interventions in high-income countries, and increasingly good evidence for their applicability across cultures and countries, there is now an urgent need for more rigorously evaluated and reported studies, focusing on youth outcomes as well as parenting, adapted for contexts of considerable resource constraints.

<http://www.ncbi.nlm.nih.gov/pubmed/23315023?dopt=Abstract>

7. Child Health in Canada: Social Determinants, Child and Youth Mental Health, Health System Performance and Investing in Children's Health

"This journal series – Child Health in Canada – was born out of a spirit of collaboration and a fierce determination to improve children's physical and mental well-being. It is also a call to action to address the specific issues that impede children's health. The goals of the series are not tame; its aims are to inform public policy and to improve systems of care across the country and, in so doing, to enhance child health outcomes." Mary Jo Haddad, (Past) President and CEO, The Hospital for Sick Children | editor in chief of this series.

Issue 1: [Social Determinants](#)

Issue 2: [Child and Youth Mental Health](#)

Issue 3: [Health System Performance](#)

Issue 4: [Investing in Children's Health](#)

III. CURRENT INITIATIVES

8. International Women's Day: March 8, 2014

There are many events happening across the province for International Women's Day. Here are just a few links taken from the Ontario Women's Health Network:

- [International Women's Day Toronto](#)
- [Feminist Art Conference, International Women's Day Exhibition and Conference, Toronto](#)
- [International Women's Day, Ottawa](#)
- [International Women's Day, Owen Sound: Speaking Engagement "The Difference YOU Make"](#)
- [International Women's Day Gala, Windsor](#)

<http://www.internationalwomensday.com/>

IV. UPCOMING EVENTS

9. Welcoming and Celebrating Sexual Orientation and Gender Diversity in Families: From Preconception to Preschool

March 20, 2014: Ottawa, ON

This interactive workshop is for service providers who work with young children, with parents of young children, or who have the opportunity to influence the health and

development of young children. This workshop will offer a great opportunity to begin a conversation about LGBTQ+ inclusive practice for service providers who work with families with young children.

http://www.beststart.org/events/2014/LGBTQ_March/index.html

10. Fostering Self-Regulated Learning

April 4, 2014: Toronto, ON

In this important seminar, Dr. Barrie Bennett will explore and demonstrate successful strategies to develop and enhance proficiency in self-regulation among students of all grades. Dr. Bennett will reference the most common instructional mistakes, as well as highlighting those teaching practices most successful in expanding and augmenting student self-regulation. He will refer to many studies and scenarios from both the elementary and the secondary school experiences, and propose an action plan for teachers to consider. Participants will be able to implement Dr. Bennett's strategies in their classrooms on their return to their schools.

<http://professionaldevelopmentseminars.ca/wp/fsrl-tor>

11. Mental Health & Obesity Conference 2014

May 14, 2014: Edmonton, AB

Save the date and check back on the website for more information.

<http://us5.campaign-archive2.com/?u=38a0d92fe7f01691f15ae5d36&id=9a827d93f2&e=059d1d44fe>

12. Creating Community Together: Inspiring Health and Wellbeing

June 23-25, 2014: Sudbury, ON

This conference will bring together over 250 service manager staff from across Ontario as well as provincial government staff and community organizations. The conference theme will allow delegates to explore the ways in which organizations must collaborate inter-sectorally to achieve common goals in community and individual health equity.

<http://www.omssa.com/education/conferences/2014-learning-symposium/call-for-proposals/>

13. Expanding Horizons for the Early Years: Looking Back to Transform the Future - National Institute on Infant Mental Health

April 21-22, 2015: Toronto, ON

Practitioners in the field of infant mental health often find themselves working with children and families who are in a vulnerable state, at risk due to any number of social determinants or adverse experiences. The theme of "**Looking Back to Transform the Future**" speaks not only to examining a child's early experience, parental mental health and trauma issues, but also to our own personal narratives and experience as practitioners and service providers. Through this event we will consider the value of reflection, research and innovation in practice. Each person working with infants, toddlers and families carries a unique knowledge and perspective built on their past experience. So, how can we as practitioners build on past knowledge and resources to integrate what we have learned into practice, and innovate to improve practice within systems that serve young children and families?

<http://www.imhpromotion.ca/Events/ExpandingHorizonsfortheEarlyYears2015.aspx>

V. RESOURCES

14. Infographic on the Burden of Injury

This Infographic illustrates the burden of injuries in Canada.

<http://www.phac-aspc.gc.ca/media/nr-rp/pdf/bi-fb-eng.pdf>

15. New Key Message from the Encyclopedia on Early Childhood Development: Play

This key message released February 2014, provides information about how important play is, what we know about play, what can be done, and a section with articles from the experts.

<http://www.child-encyclopedia.com/en-ca/child-play/how-important-is-it.html>

16. National Collaborating Centre for Aboriginal Health: Promoting Healthy Vision for Children

Children and Their Vision: What Parents and Teachers Need to Know focuses on the need for regular comprehensive eye examinations as part of every child's health care, just like visits to the doctor and dentist.

http://www.nccah-ccnsa.ca/415/Promoting_Healthy_Vision_for_Children.nccah

VI. FEATURED BEST START RESOURCES

17. Giving Birth in a New Land – A Guide for Women New to Canada and their Families - Updated

The Best Start Resource Centre has updated its resource "Giving Birth in a New Land - A guide for women new to Canada and their families". This resource now consists of four handouts containing information for newcomer women who are pregnant and expect to deliver their baby in Ontario. It includes information on local practices related to the prenatal and postnatal period, as well as services and resources available. The four handouts can be downloaded separately or as one handout. They are available in the following languages: English, French, Arabic, Chinese, Filipino, Hindi, Punjabi, Spanish, Tamil and Urdu. This resource is only available in downloadable, PDF format from the Best Start website.

http://www.beststart.org/resources/rep_health/index.html

18. Obesity in Preconception and Pregnancy

This report provides current information about the prevalence of, risk factors for, and implications of obesity in the preconception and perinatal periods in Ontario. Additional information is presented concerning approaches that have been effective in addressing obesity in the preconception and prenatal periods. Evidence-based practices are limited at this time and additional research is needed.

http://www.beststart.org/resources/preconception/BSRC_obesity_report_Jan2014.pdf

19. Post Conference Coverage

The 2014 Best Start Resource Centre Annual Conference took place February 26-28, 2014. Please see the post conference coverage for FREE access to new information, strategies, and more!

NEW this year we have YouTube videos of three of our sessions:

- Cultural Safety in Preconception, Prenatal and Child Health Services – *Dr. Margo Greenwood*
- Early Childhood Visual Development – *Dr. Catherine Chiarelli*
- Optimizing Maternal-Fetal Outcomes – The Value of Appropriate Weight Gain For All Women and Their Children – *Dr. Zachary Ferraro*

The post conference coverage includes photos and PDF copies of some of the speakers' presentations or handouts (with permission of the speakers):

- Our Children's Mother Earth: A Fetal Alcohol Spectrum Disorder (FASD) Prevention and Children's Environmental Health (CEH) Collaborative Project – *Lynda Banning and Lyne Soramaki*
- Healthy Babies Healthy Children – *Dr. Stephen Hotz*
- Bilinguisme et exogamie – Défis et stratégies pour la petite enfance – *Roxane Bélanger, Claire Thibideau and Christine VanderByl*
- Management of Perinatal Prescription Opioid Use – *Dr. Alice Ordean*
- Early Childhood Visual Development – *Dr. Catherine Chiarelli*
- Overcoming Challenges on the Baby-Friendly Initiative Journey – *Susan Anderson, Joan Bueckert, Catharine Lowes and Linda Young*
- This (Maybe) Changes Everything: Men and the Adjustment to Fatherhood – *Brian Russell*
- Optimizing Maternal-Fetal Outcomes – The Value of Appropriate Weight Gain For All Women and Their Children – *Dr. Zachary Ferraro*
- Seeing the Unseen - An Introduction to Health Equity Impact Assessment – *Andrea Bodkin*
- Radon in Indoor Environments: What You Can Do to Protect Children from an Important Lung Cancer Risk – *Erica Phipps*
- Working with Families to Promote Safe Sleep for Infants 0 – 12 Months of Age: A New RNAO Best Practice Guideline – *Vicki Bassett, Christina Bradley and Dr. Monique Lloyd*
- *The Sacred Child Program* – *Elaine Kicknosway*
- Engaging and Supporting Families – *Janice MacAulay*

- Perinatal Mood Disorders: Translating Best Evidence into Practice: Current Research and the Northeastern Ontario Strategy – *Dr. Cindy-Lee Dennis, Linda Rankin, Jennifer Gordon and Kathleen Jodouin*
- Integrating Social Media in Your Work – Update on Tools, Current Public Health Examples, and the Next Steps – *Melissa Potvin and Robyn Kalda*
- How Community, Family and the Environment Shape Children and What We Can Do About It through A Social Pediatrics Approach – *Dr. Lee Ford-Jones*

Please note that additional presentations may be added in the coming weeks. Please check back on our website.

For access to the post conference coverage, go to

<http://www.beststart.org/events/2014/bsannualconf14/webcov/index.htm>

20. French Videos on Self-Regulation - Now available

Un DVD contenant 4 courtes vidéos pour les parents sur l'autorégulation. Un guide de l'animateur est inclus pour faciliter l'utilisation à travers un atelier sur l'autorégulation.

Les vidéos correspondent aux âges de 1 à 4 ans :

- Comment aider un enfant d'un an à se calmer?
- Comment aider un enfant de deux ans à maîtriser ses émotions?
- Comment aider un enfant de trois ans à gérer ses impulsions?
- Comment aider un enfant de quatre ans à bien s'affirmer au sein d'un groupe?

Le guide de l'animateur est inclus avec le DVD lorsque commandé.

Vous pouvez aussi le télécharger en format PDF: [Télécharger](#)

Vous pouvez visionner les vidéos en ligne : [YouTube](#) ou [Vimeo](#)

http://www.meilleurdepart.org/resources/develop_enfants/index.html

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.

Stay connected!

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.

[Click4HP](#) is an international dialogue on health promotion. Participants exchange views on issues and ideas, provide leads to resources, and ask questions about health promotion.

[The Maternal Newborn and Child Health Promotion \(MNCHP\) Network](#) - A province-wide electronic forum for service providers working to promote preconception, prenatal and child health.

[Health Promotion Today](#) - Our blog keeps you informed of news and topics related to health promotion.

Follow us on [Twitter](#) to stay up to date on all things related to health promotion.

View our video resources on [YouTube](#) and [Vimeo](#)

[The Best Start Aboriginal Sharing Circle \(BSASC\) Network](#) is a distribution list designed for service providers working with Aboriginal Peoples in areas of preconception, prenatal and child health. The network is a forum to share news, ideas, questions and best practices.

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

En français:

Restez branché!

Le bulletin francophone [Le Bloc-Notes](#) est un outil indispensable pour les intervenants professionnels qui aiment être à l'affût des nouveautés dans le domaine de la promotion de la santé.

Le [Bulletin de santé maternelle et infantile](#) est un bulletin électronique mensuel à l'intention des fournisseurs de services œuvrant dans le domaine de la promotion de la santé maternelle et infantile.

[Promotion de la santé aujourd'hui](#) – Notre blogue sur lequel on partage des nouvelles et réflexions liées à la promotion de la santé.

Suivez-nous sur [Twitter](#) pour demeurer au fait de tout ce qui concerne la promotion de la santé.

Visionner nos ressources vidéo sur [YouTube](#) et [Vimeo](#)

Nous vous encourageons à visiter le site Web de notre nouveau [Prix 3M de leadership en santé](#) pour découvrir de quelle façon vous pouvez appuyer le leadership en santé communautaire et honorer un chef de file de votre milieu en présentant sa candidature à ce prix national.