

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](#). To manage your subscription, unsubscribe from the list-serv and access the list archives, [click here](#).

October 10, 2014

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I. NEWS & VIEWS

1. Challenging communities to create a healthy Ontario

(available in French)

As part of Ontario's Healthy Kids Strategy, the Ontario government recently launched the Healthy Kids Community Challenge, through which 45 Ontario communities will work to develop services that aim to promote children's health (Ministry of Health and Long-Term Care, 2014). The government will provide each community with funds, necessary training and promotional support as they work to establish activities surrounding proper nutrition, physical activity and healthy lifestyles. Communities including Thunder Bay, Sault Ste. Marie, Ottawa, Hamilton, as well as parts of Toronto will spend the next four years engaging children in programs such as dietitian-led cooking classes, park tours and organized sports activities. More information can be found on the [Healthy Kids Community Challenge](#) website.

EN: <http://news.ontario.ca/mohlrc/en/2014/09/challenging-communities-to-create-a-healthy-ontario.html>

FR: <http://news.ontario.ca/mohlrc/fr/2014/09/appel-a-laction-communautaire-pour-favoriser-la-sante-en-ontario.html>

2. Children's eating patterns seem set in infancy

This article (CBC News, 2014) reports on a [recent study](#) that encourages parents to introduce a variety of healthy food to children when they are young. The study emphasizes that eating patterns established in late infancy are often carried throughout childhood. Dr. Sharon Unger, a neonatologist at Toronto's Mount Sinai Hospital and a member of the Canadian Pediatric Society's nutrition committee emphasizes the parents' role in ensuring their child's healthy eating habits. She recommends that parents demonstrate good eating through their food choices, suggesting they include lots of fruits and vegetables in their own diets, and drink primarily water. She also highlights the addictive nature of sweet foods, and emphasizes the importance of giving children the opportunity to appreciate a variety of tastes.

<http://www.cbc.ca/news/health/children-s-eating-patterns-seem-set-in-infancy-1.2753407>

3. Mental illness best detected early in schools, doctors say

Drawing attention to the high numbers of Canadian children and youth who suffer from mental illness, this article (CBC News, 2014) emphasizes the importance of developing a national strategy to identify mental health problems early and to support interventions to help children treat mental illness appropriately. Dr. Mina Fazel from the University of Oxford and Dr. Marshall Korenblum of the Hincks-Dellcrest Centre recommend integrating mental health education into the school system, and suggest that teachers receive training regarding how to identify signs of mental illness and how best to deal with mental health issues in the classroom. Some Toronto schools are already addressing these issues by organizing yoga sessions to help students better manage their stress. Ottawa teachers promote to students the HealthyMinds mood tracker app, developed by the Royal Ottawa Mental Health Centre. The app allows students to take control of their mental health through breathing and problem solving exercises. While these individual initiatives are important, it is crucial that mental health screening and intervention become standard to better ensure healthy child development.

<http://www.cbc.ca/news/health/mental-illness-best-detected-early-in-schools-doctors-say-1.2791671?cmp=rss>

II. RECENT REPORTS AND RESEARCH

** indicates journal subscription required for full text access*

4. Improving medicines for children in Canada

(available in French)

Council of Canadian Academies. (2014). Improving medicines for children in Canada: The expert panel on therapeutic products for infants, children, and youth. Ottawa, ON: The Council of Canadian Academies. Retrieved from

<http://www.scienceadvice.ca/en/assessments/completed/therapeutic-products.aspx>

SUMMARY:

Recognizing the importance of developing safe and effective medicines specifically for children, the Minister of Health, on behalf of Health Canada, asked the Council of Canadian Academies to provide an evidence-based and authoritative assessment of the state of research and regulations leading to the approval of therapeutic products for children, in Canada and abroad. Specifically, this assessment examines the following questions:

- What is the state of clinical pharmacology, in Canada and abroad, that can be applied to the ethical development of safe and effective pharmaceuticals and biologics labelled as therapies for infants, children, and youth?

- How does human development from infancy to youth alter clinical pharmacology and therefore inform pediatric drug investigations?
- What are best practices to ethically conduct scientifically sound but adaptive drug studies to confirm the safety and effectiveness of drugs for infants, children, and youth?
- When the participation of infants, children, and youth in drug studies is not feasible, what are the best practices to confirm drug safety and effectiveness in these populations?
- What are Canada's strengths to contribute to global pharmacovigilance efforts for drugs that may benefit infants, children, and youth?

To address the charge, the Council assembled a multidisciplinary panel of 14 experts (the Panel) from Canada and abroad. The Panel's composition reflects a balance of expertise, experience, and demonstrated leadership in academic, clinical, pharmaceutical industry, regulatory science, and medical fields. Each member served on the Panel as an informed individual rather than as a representative of a discipline, patron, organization, region, or particular set of values.

From its review of the current state of the evidence, the Panel identified five key findings that serve to answer the charge put forward by Health Canada. The following is a summary of those findings; a more detailed discussion continues in the Panel's full report.

EN:http://www.scienceadvice.ca/uploads/eng/assessments%20and%20publications%20and%20news%20releases/therapeutics/therapeutics_fullreporten.pdf

FR:http://sciencepourlepublic.ca/uploads/fr/assessments%20and%20publications%20and%20news%20releases/therapeutics/therapeutics_fullreportfr.pdf

5. Children vulnerable in areas of early development: A determinant of child health

(available in French)

Canadian Institute for Health Information. (2014). Children vulnerable in areas of early development: A determinant of child health. Retrieved from:

<https://secure.cihi.ca/estore/productFamily.htm?locale=en&pf=PFC2688&lang=en>

EXCERPT:

The indicator Children Vulnerable in Areas of Early Development is a reflection of health and well-being among 5-year-olds (the average age of children in kindergarten). It measures developmental outcomes and milestones achieved during the first five years of life within the context of early experiences. It is also an important determinant of health and well-being in later life. How children develop as they grow depends on many factors, such as prenatal and postnatal environments, effective parenting, and the social and economic circumstances in which a child lives and grows up. Research shows that all of these factors have a vital impact on the way the brain develops. Early life experiences affect a person's learning skills, coping skills, resiliency and even overall health as an adult.

EN:https://secure.cihi.ca/free_products/Children_Vulnerable_in_Areas_of_Early_Development_EN.pdf

FR :https://secure.cihi.ca/free_products/Children_Vulnerable_in_Areas_of_Early_Development_FR.pdf

6. Process-oriented training in breastfeeding for health professionals decreased women's experiences of breastfeeding challenges

Blixt, I., Martensson, L.B., Ekstrom, A.C. (2014). Process-oriented training in breastfeeding for health professionals decreases women's experiences of breastfeeding challenges. *International Breastfeeding Journal*, 9(15). doi:10.1186/1746-4358-9-15

ABSTRACT:

Background

The World Health Organization recommends promoting exclusive breastfeeding for six months. Women often end breastfeeding earlier than planned, however women who continue to breastfeed despite problems often experience good support and counselling from health professionals. The aim of this study was to evaluate the effects of a process-oriented training in breastfeeding support counselling for midwives and child health nurses, on women's satisfaction with breastfeeding counselling, problems with insufficient breast milk and nipple pain in relation to exclusive breastfeeding shorter or longer than 3 months.

Methods

An intervention through process-oriented training for health professionals regarding support in childbearing and breastfeeding took part in the south west of Sweden. This study was conducted in Sweden, in 2000 - 2003. Ten municipalities were paired, and within each pair, one was randomly assigned to the group of five intervention (IG) municipalities and one to the group of five control municipalities. Primiparas (n = 540) were invited to participate in a longitudinal study to evaluate the care they received. A survey was distributed at 3 days, 3 months and 9 months postpartum. Data collection for control group A (n = 162) started before the intervention was initiated. Data for control group B (n = 172) were collected simultaneously with the intervention group (IG) (n = 206). Women were also divided into two groups depending on whether they exclusive breastfed < 3 months or ≥ 3 months.

Results

Women in IG were more satisfied with the breastfeeding counselling (p = 0.008) and felt the breastfeeding counselling was more coherent (p = 0.002) compared to control groups, when exclusive breastfeeding was < 3 months. In addition fewer women in the IG, among the group exclusively breastfeeding < 3 months, had problems with insufficient breast milk compared to the control groups (p = 0.01).

Conclusion

A process-oriented training for health professionals in support influenced women's ability to solve breastfeeding problems such as the experience of insufficient breast milk production. Women with exclusive breastfeeding lasting ≥ 3 months more often had

breastfeeding duration in line with their planned breastfeeding duration, compared to women who had breastfeeding duration < 3 months.

<http://www.internationalbreastfeedingjournal.com/content/9/1/15>

7. Promotion of family-centred birth with gentle cesarean delivery

Magee, S.R., Battle, M.P.H., Morton, J., Nothnagle, M. (2014). Promotion of family-centred birth with gentle cesarean delivery. *Journal of the American Board of Family Medicine*, 27(5): 690-693. doi:10.3122/jabfm.2014.05.140014

ABSTRACT:

Purpose: In this commentary we describe our experience developing a “gentle cesarean” program at a community hospital housing a family medicine residency program. The gentle cesarean technique has been popularized in recent obstetrics literature as a viable option to enhance the experience and outcomes of women and families undergoing cesarean delivery.

Methods: Skin-to-skin placement of the infant in the operating room with no separation of mother and infant, reduction of extraneous noise, and initiation of breastfeeding in the operating room distinguish this technique from traditional cesarean delivery. Collaboration among family physicians, obstetricians, midwives, pediatricians, neonatologists, anesthesiologists, nurses, and operating room personnel facilitated the provision of gentle cesarean delivery to families requiring an operative birth.

Results: Among 144 gentle cesarean births performed from 2009 to 2012, complication rates were similar to or lower than those for traditional cesarean births. Gentle cesarean delivery is now standard of care at our institution.

Conclusion: By sharing our experience, we hope to help other hospitals develop gentle cesarean programs. Family physicians should play an integral role in this process.

PDF: <http://www.jabfm.org/content/27/5/690.full.pdf+html>

<http://www.jabfm.org/content/27/5/690.full>

8. Breastfeeding and risk of infections at 6 years

Ruowei, L., Dee, D., Chuan-Ming, L., Hoffman, H.J., Gummer-Strawn, L.M. Breastfeeding and risk of infections at 6 years. *Pediatrics*, 134:S13. DOI: 10.1542/peds.2014-0646D

SUMMARY:

BACKGROUND: Previous studies have shown that breastfeeding is associated with reductions in the risk of common infections among infants; however, whether breastfeeding confers longer term protection is inconclusive.

METHODS: We linked data from the 2005–2007 IFPS II (Infant Feeding Practices Study II) and follow-up data collected when the children were 6 years old. Multivariable logistic

regression was used, controlling for sociodemographic variables, to examine associations of initiation, duration, exclusivity of breastfeeding, timing of supplementing breastfeeding with formula, and breast milk intensity (proportion of milk feedings that were breast milk from age 0–6 months) with maternal reports of infection (cold/upper respiratory tract, ear, throat, sinus, pneumonia/lung, and urinary) and sick visits in the past year among 6-year-olds ($N = 1281$).

RESULTS: The most common past-year infections were colds/upper respiratory tract (66%), ear (25%), and throat (24%) infections. No associations were found between breastfeeding and colds/upper respiratory tract, lung, or urinary tract infections. Prevalence of ear, throat, and sinus infections and number of sick visits differed according to breastfeeding duration, exclusivity, and timing of supplementing breastfeeding with formula ($P < .05$). Among children ever breastfed, children breastfed for ≥ 9 months had lower odds of past-year ear (adjusted odds ratio [aOR]: 0.69 [95% confidence interval (95% CI): 0.48–0.98]), throat (aOR: 0.68 [95% CI: 0.47–0.98]), and sinus (aOR: 0.47 [95% CI: 0.30–0.72]) infections compared with those breastfed >0 to <3 months. High breast milk intensity ($>66.6\%$) during the first 6 months was associated with lower odds of sinus infection compared with low breast milk intensity ($<33.3\%$) (aOR: 0.53 [95% CI: 0.35–0.79]).

CONCLUSIONS: This prospective longitudinal study suggests that breastfeeding may protect against ear, throat, and sinus infections well beyond infancy.

http://pediatrics.aappublications.org/content/134/Supplement_1/S13.abstract

PDF: http://pediatrics.aappublications.org/content/134/Supplement_1/S13.full.pdf+html

III. CURRENT INITIATIVES

9. Child Abuse Prevention Month

Throughout the month of October, Child Abuse Prevention Month, the Ontario Association of Children's Aid Societies (OACAS) is promoting the community's role in preventing child abuse. Visit the [OACAS website](#) to learn how to detect when a child is being abused, and about the proper channels through which to report an instance of abuse. Under Section 72 of the Child and Families Services Act, every Ontarian is legally required to inform their Children's Aid Society if they are suspicious of abuse. Ontario Association of Children's Aid Societies:

<http://www.newswire.ca/en/story/1420618/it-takes-a-community-to-keep-kids-safe-from-fear-harm-and-violence>

Related resources:

- **Use Your Voice** (available in French): A website developed by the Ontario Association of Children's Aid Societies to highlight avenues for community involvement including volunteering, adoption and foster care.

EN: <http://useyourvoice.ca/en/>

- FR : <http://useyourvoice.ca/fr/>
- **Tweet to Stop Child Abuse 2014:** This campaign, initiated by the Family and Children's Services of Frontenac, Lennox and Addington, aims to promote the dangers of child abuse through Twitter. Participants are encouraged to tweet their support to end child abuse on October 17th.
<http://www.facsfla.ca/tweet-now>
 - **Is it OK to spank children?:** This recent broadcast on CBC's All in a Day draws attention to the issues surrounding child discipline and corporal and emotional punishment of children. Host Alan Neal interviews Best Start Resource Centre consultant Louise Choquette and child protection consultant Ron Ensom who emphasize the continued prevalence of physical discipline and its negative impact on children.
<http://www.cbc.ca/player/AudioMobile/All+in+a+Day/ID/2519484948/>
 - **The Spectrum of Neglect – Four Types of Unresponsive Care:** This series of four videos developed by the Center on the Developing Child depict four different forms of neglect and their impact on a young child. Different types of neglect include occasional inattention, chronic under-stimulation, severe neglect in a family context and severe neglect in an institutional setting.
http://developingchild.harvard.edu/index.php/resources/multimedia/interactive_features/

10. World Breastfeeding Week in Canada

(available in French)

World Breastfeeding Week in Canada was celebrated this year from October 1 to 7. This year's theme, Breastfeeding: A Winning Goal – For Life!, highlights the long-term benefits of breastfeeding for both maternal and child health. A statement by Minister of Health Rona Ambrose draws attention to the immense efforts of health professionals, organizations, researchers, policy makers and community programs in creating supportive spaces for breastfeeding and encourages all Canadians to follow this example. For World Breastfeeding Week, the Public Health Agency of Canada is promoting several useful resources to aid in breastfeeding promotion, and to help mothers breastfeed successfully. See the guides: [10 Great Reasons to Breastfeed Your Baby](#), and [10 Valuable Tips for Successful Breastfeeding](#).

EN: http://www.phac-aspc.gc.ca/about_apropos/2014/2014_10_01-eng.php

FR : http://www.phac-aspc.gc.ca/about_apropos/2014/2014_10_01-fra.php

Related resources:

- **It's OK to Breastfeed in Public:** A short video developed by Toronto Public Health for World Breastfeeding Week that aims to reduce stigma surrounding public breastfeeding, and asks the question: "What if eating a sandwich in public got the same reaction as breastfeeding in public?"
http://www1.toronto.ca/wps/portal/contentonly?vqnextoid=7f274485d1210410VgnVCM10000071d60f89RCRD&WT.rd_id=tph.to/breastfeeding
- **Global Breastfeeding Challenge 2014:** Hosted annually by the Quintessence Foundation during World Breastfeeding Week, the Global Breastfeeding Challenge invites cities to compete to see how many breastfeeding babies can be latched on in the same place at the same time.

- <http://www.babyfriendly.ca/Challenge/results-home.aspx>
- **Nature's first functional food:** A recent article in Science Magazine that explains clearly and in great detail the science behind the benefits of breast milk. <http://mills.ucdavis.edu/science-milk-bioactives>
- **Baby-Friendly Initiative in Canada – Status Report:** A report issued by the Breastfeeding Committee of Canada (BCC) that documents the efforts and progress made by the Baby-Friendly Initiative in Canada over the past two years, including the BCC's involvement in developing key nutrition-related reports for the government of Canada, and province-specific updates and developments. <http://breastfeedingcanada.ca/documents/BFI%20Status%20Report%202014%20with%20WHO%20Country%20report.pdf>

IV. UPCOMING EVENTS

15. Lessons in Literacy

November 3-5, 2014: Niagara-on-the-Lake, ON

This two-day conference organized by Speech Services Niagara offers an opportunity for educators, early literacy specialists, and other service providers to explore new avenues for promoting and developing literacy skills in young children. The conference will start with a keynote address by Dr. Jean Clinton, an Associate Clinical Professor at McMaster University in the Department of Psychiatry and Behavioural Neurosciences, who will discuss the mental mechanics that lead to a strong love of literacy. Other sessions will address ways in which play and games can be used to promote literacy, the increasing use of e-books and tablets, and their effect on a child's ability to develop literacy skills. A two-part workshop will explore strategies to improve literacy for English Language Learners and children from high-risk families. The conference will close with a session by Dr. Alyson Shaw from the Children's Hospital of Eastern Ontario (CHEO) who will discuss how physicians and the medical community can play a more integral role in literacy development. Ontario Early Literacy Specialists are also invited to a meeting prior to the conference.

https://gallery.mailchimp.com/e8c7408fd28657e533ecb7b13/files/Emergent_Literacy_Conference_2014.pdf

16. Anishinabek G7 FASD Conference

November 4-5, 2014: Sudbury, ON

The theme of the 5th Annual Anishinabek G7 FASD Conference is "Celebrating the Journey." Participants will learn how to develop accommodations for people with FASD, strategies for coping with stressful situations while living with the disorder and how memory and learning are affected by FASD. Presentations will be given by medical professionals, as well as those impacted by the disorder. For the first time, both service providers, and biological, extended, foster and adoptive families are invited to the conference. Keynote sessions will be given by Liz and Jodee Kulp, who will discuss how

to stay safe during a medical crisis, Morgan Fawcett, who will talk about her life with FASD, Dr. Edward Riley, who will explore how the brain is affected by FASD, and Myles Himmelreich, a motivational speaker with Fetal Alcohol Spectrum Disorder. For details related to conference registration, contact Kari Chiappetta, conference coordinator, at kcconsulting@shaw.ca
<http://www.skfasnetwork.ca/main/wp-content/uploads/2011/12/G7-FASD-Conference.pdf>

14. My Dad Matters: Engaging Men Raising the Next Generation

November 5, 2014: Timmins, ON

November 21, 2014: Ottawa ON

Dad Central Ontario, an organization that promotes the importance of father-child bonding, is offering two free workshops to teach practitioners the best strategies through which to involve fathers in family services and programs. The workshops will provide a general overview of the current research and issues pertaining to fathers, introduce participants to available services for fathers, and present Dad Central's *My Dad Matters* community development toolkit. Workshop attendees will learn how to create a practical Father Involvement Plan that can be easily implemented and adapted for their own communities, as well as tools through which to assess the efficacy of this plan. The event is free, and all registrants will receive a copy of the *My Dad Matters* manual.

November 5: <http://www.eventbrite.ca/e/my-dad-matters-community-training-timmins-tickets-12972411833>

November 21: <http://www.eventbrite.ca/e/my-dad-matters-ottawa-tickets-12972694679>

11. Mpower: Changing the world – one Mom at a time

November 12, 2014: Thornhill, ON

This one day conference organized by Life with a Baby will bring together practitioners and mothers to discuss ways in which mothers are making a difference. Themes include maternal and infant mental health, Maternal Health Initiatives, circles of support, and strategies for working with new families. Keynote addresses will be provided by Katherine Stone, the founder of *Postpartum Progress*, a leading blog on postpartum depression, and Annie, a blogger for *PhD in Parenting*, who will discuss parenting and identity in the social media age. Other sessions will feature testimonials from mothers who have launched their own peer support initiatives.

<http://www.lifewithababy.com/FallConference2014>

12. Prenatal Environmental Health Education (PEHE) Forum

November 20-12, 2014: Ottawa, ON

Hosted at the University of Ottawa, this forum will bring together prenatal health practitioners, researchers, educators, policy makers and environmental health experts, to discuss strategies to teach parents how to reduce their child's exposure to harmful environmental toxins, both prenatally and after birth. Through a series of panel discussions, participants will explore current environmental education strategies, challenges and barriers to equitable education, and next steps and opportunities. Keynote addresses by Dr. Bruce Lanphear and Dr. Marya Zlatnik will highlight how toxins impact fetuses and young children, and how Canada can learn from the United

States in developing strategies for incorporating environmental health education into standard prenatal care practice. The last day of the forum will provide an opportunity for participants to brainstorm and summarize conference topics in breakout groups, and will close with a final review of participant recommendations.

<http://pehe-forum.com/>

V. RESOURCES

15. Active for Life Lesson Plans

Active for Life has a new series of physical literacy activities and lesson plans for parents, caregivers, and childcare professionals at their website. These excellent resources are available for free download in the Resources section. Parents, caregivers, and childcare professionals can use the activities and lesson plans to develop motor skills with infants and toddlers ages 0-3 years and children ages 3-5 years. There are also activities and lesson plans for developing more advanced movement skills with older children ages 5-8 and 8-12 years. To promote healthy child development, the key is to start with early movement and exploratory free play. With that in mind, Active for Life is working to get these resources into as many daycares, childcare centres, and after-school programs as possible. If you would like to know more about these physical literacy resources, please email Jim Grove (jagrove@shaw.ca).

<http://activeforlife.com/lesson-plans-and-resources/>

16. CBC Radio Series: Falling FASD

CBC's Kitchener-Waterloo Morning Edition aired a series of nine broadcasts from September 22 to September 29 designed to bring to light the challenges facing families and children who are affected by Fetal Alcohol Spectrum Disorders. Host Craig Norris and correspondent Melanie Ferrier interview regional FASD experts, including Dr. Louise Scott, FASD Support Group Coordinator Bonnie Holmes, and RN Mary Mueller to discuss strategies for preventing FASD, barriers to diagnosing the disorder and ways that communities are trying to support struggling families. In Waterloo, the *Reach For It* program pairs Waterloo Regional Police Officers with children with FASD, providing mentors for the children while, at the same time, educating police officers about the disorder. While strides have been taken to improve care, interviews with families indicate that understanding and acceptance of the disorder, as well as the implementation of appropriate support systems, has yet to be achieved.

Access each segment by following the links below:

- [FASD Fact and Fiction](#)
- [Waterloo Regional Police Get Schooled on FASD](#)
- [Guelph mother told she knew more about FASD than doctors](#)
- [Fetal alcohol disorder largely undiagnosed in Ontario](#)
- [Rebecca Dawe says FASD Diagnosis an obstacle to employment](#)

- [Lack of FASD services has devastating impact on Guelph couple](#)
- [After 20 years, FASD services remain inaccessible](#)
- [Ontario only province without a FASD strategy](#)
- [Preventing FASD](#)

<http://www.cbc.ca/player/Radio/Local+Shows/Ontario/The+Morning+Edition+-+K-W/>

18. Mommy Meds

This website, founded by Dr. Thomas Hale, the lead researcher at the American InfantRisk Center, aims to provide a reliable place where new and expecting mothers can find current, evidence-based information related to the safety of medications and certain diseases while pregnant or breastfeeding. Topics currently discussed on the site include drinking alcohol while pregnant, dangerous infections during pregnancy, and the benefits of breastfeeding to reduce the infant's risk of disease.

<http://mommymeds.com/>

19. Recent videos:

- **Be Sweet to Babies: Reduce your infant's pain during newborn blood tests** (available in French): This short informational video, produced by the Children's Hospital of Eastern Ontario, discusses strategies mothers can use to help lessen their baby's pain during injections. The video particularly highlights the effectiveness of breastfeeding, skin-to-skin contact, and sugar water.
EN: <https://www.youtube.com/watch?v=eLZQsFjnqtk&feature=youtu.be>
FR : <https://www.youtube.com/watch?v=eF6vQzqdFVc&index=14&list=UUQdmVr7jeIWxsQLJ97ZauyQ>
- **Saving Brains: A Grand Challenge**: An animated video that visually depicts the importance of introducing positive elements and reducing toxic stress during the first 1000 days in a child's life to promote healthy brain development and, ultimately, ensure a child's future success.
<https://www.youtube.com/watch?v=vw0TkwjipZU&feature=youtu.be>
- **An Unnecessary Cut?**: A report produced by the New Yorker that discusses the prevalence of cesarean-section births in North America and the option of a VBAC or vaginal-birth after c-section.
<http://video.newyorker.com/watch/a-reporter-at-large-moving-beyond-the-cesarean-section>

VI. FEATURED BEST START RESOURCES

20. Sleep Well, Sleep Safe Booklet (available in French)

This booklet is for parents of infants from 0-12 months and for all who care for infants. The booklet provides information on healthy sleep tips for infants and for parents. It also provides information on safe sleep tips on how to reduce the risks of Sudden Infant Death Syndrome (SIDS) and other sleep related causes of infant death.

EN:http://www.beststart.org/resources/hlthy_chld_dev/pdf/BSRC_Sleep_Well_resource_FNL_LR.pdf

FR:http://www.meilleurdepart.org/resources/develop_enfants/pdf/BSRC_Sleep_Well_resource_FR_LR.pdf

21. Populations with Lower Rates of Breastfeeding: A Summary of Findings (available in French)

Although breastfeeding initiation in Ontario is 91.8% there are populations with lower rates of breastfeeding. The Best Start Resource Centre has completed four research validation strategies to confirm populations with lower rates of breastfeeding in Ontario as well as breastfeeding strategies that are effective with these populations. The resulting report highlights information about trends in Ontario, barriers, effective and promising strategies, and recommendations to reach populations with lower rates of breastfeeding.

EN:http://www.beststart.org/resources/breastfeeding/BSRC_Breastfeeding_Summary_EN_fnl.pdf

FR:http://www.meilleurdepart.org/resources/allaitement/BSRC_Breastfeeding_Summary_FR_fnl.pdf

22. Breastfeeding in Ontario Factsheets (available in French)

A series of four fact sheets that explore issues related to breastfeeding including trends in Ontario, the relationship between breastfeeding and socioeconomic status, strategies to address lower rates of breastfeeding among young single mothers, how peer support can help address barriers for women unsure of breastfeeding.

- **Notable Trends within the Province**
EN:http://www.beststart.org/resources/breastfeeding/BSRC_Breastfeeding_factsheet_1_ENG.pdf
FR:http://www.beststart.org/resources/breastfeeding/BSRC_Breastfeeding_factsheet_1_FR.pdf
- **Breastfeeding and Socioeconomic Status:**
EN:http://www.beststart.org/resources/breastfeeding/BSRC_Breastfeeding_factsheet_2_ENG.pdf
FR:http://www.beststart.org/resources/breastfeeding/BSRC_Breastfeeding_factsheet_2_FR.pdf
- **Breastfeeding Among Young Single Mothers:**
EN:http://www.beststart.org/resources/breastfeeding/BSRC_Breastfeeding_factsheet_3_ENG.pdf
FR:http://www.beststart.org/resources/breastfeeding/BSRC_Breastfeeding_factsheet_3_FR.pdf
- **Breastfeeding Peer Support:**

EN:http://www.beststart.org/resources/breastfeeding/BSRC_Breastfeeding_factsheet_4_ENG.pdf

FR:http://www.beststart.org/resources/breastfeeding/BSRC_Breastfeeding_factsheet_4_FR.pdf

23. Breastfeeding Matters

(available in French)

This booklet, which helps women and their families explore breastfeeding, has now been translated into 16 additional languages including Arabic, Filipino, Hindi, Punjabi, Spanish, Simplified Chinese, Tamil, Urdu, Bengali, Gujarati, Korean, Persian, Russian, Serbian (Cyrillic), Somali, and Vietnamese. Topics include: making an informed decision, getting started, learning to breastfeed, common concerns, frequently asked questions, and where to get help. Access all of the languages on Best Start's [Breastfeeding resources](#) page.

EN:http://www.beststart.org/resources/breastfeeding/pdf/BreastfeedingMatters_2013_low_rez_reference.pdf

FR :http://www.meilleurdepart.org/resources/allaitement/breastfeeding_matters_FR_Nov_2013_fnl.pdf

24. Breastfeeding for the Health and Future of Our Nation

This booklet, which was created to support Aboriginal women with the art of breastfeeding, has now been translated into Cree and Ojibway. The Medicine Wheel is used to symbolize the balance needed to support breastfeeding women. Access all versions of the resource on Best Start's [Breastfeeding](#) and [Aboriginal child development](#) pages.

http://www.beststart.org/resources/breastfeeding/BFHFN_sept26.pdf

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.

Information on the MNCHP Network: Email mnchp@healthnexus.ca or visit <http://www.beststart.org/services/information.html>

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Best Start Resource Centre: http://beststart.org/index_eng.html

Health Nexus: <http://en.healthnexus.ca/>

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Stay connected!

The free weekly [Ontario Health Promotion E-mail bulletin \(OHPE\)](#) 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.