***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***](#_About_This_Bulletin)***. To manage your subscription, unsubscribe from the list-serv and access the list archives,*** [***click here***](http://en.beststart.org/services/information-exchange)***.***

# February 6, 2015

# *The next bulletin will be released March 13, 2015.*

# This special bulletin contains some recent information related to disability. To continue the discussion about this important topic, we invite you to share other information relevant to disability on this listserv.

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# I. NEWS & VIEWS

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# 1. The Ontario Ministry of Child and Youth Services: Special needs

The Ontario Ministry of Child and Youth Services website provides links to information and services for professionals and families caring for children and youth with special needs. Links related to autism, developmental and other disabilities, mental health, rehabilitation, respite, home-based services, rural children, Aboriginal children, special education and assistive devices are provided.

<http://www.children.gov.on.ca/htdocs/English/topics/specialneeds/index.aspx>

# 2. Ontario teachers seek smaller class sizes, especially with more special-needs kids

This article, published in the Toronto Star (Rushowy, 2014), discusses the recommendations provided in the Elementary Teachers' Federation of Ontario’s education agenda, *Building Better Schools*. The Elementary Teachers’ Federation of Ontario believes that with the increasing number of children with identified special needs being integrated into regular classrooms, and the loss of special assistants in the classroom, capping class sizes in Grades 4 to 8 (as well as younger grades) is vital to ensure every student gets the attention needed. Find more information about *Building Better Schools* at their website: <http://buildingbetterschools.ca/>

<http://www.thestar.com/yourtoronto/education/2014/04/02/ontario_teachers_seek_smaller_class_sizes_especially_with_more_specialneeds_kids.html>

# 3. Special needs kids often told to stay home from school, says People for Education report

After hearing numerous complaints from parents about schools forcing their special needs children to stay home, the research and advocacy group People for Education conducted a study of Ontario schools. The findings from this study are highlighted in this article published in the Toronto Star (Rushowy, 2014). It was found that half of elementary school principals have at some point told students with special needs to stay home from school for all or part of a day due to a lack of adequate help available for them. People for Education recommends that the Ontario government invest enough resources in schools so that this practice doesn’t continue.

<http://www.thestar.com/yourtoronto/education/2014/04/28/special_needs_kids_often_told_to_stay_home_from_school_says_people_for_education_report.html>

Related resource:

* **Special Education Support**: This short video, produced by People for Education, attempts to destigmatize special education and highlights strategies to help parents advocate for their child’s specific learning needs in the classroom.

<https://www.youtube.com/watch?v=fR0V8rbMYFY&feature=youtu.be>

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# II. RECENT REPORTS AND RESEARCH

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# 4. Access and barriers to educational services for Canadian children with disabilities

# Kohen, D., Uppal, S., Khan, S., & Visentin, L. (2010). *Access and barriers to educational services for Canadian children with disabilities*. Ottawa, ON: Statistics Canada. Retrieved from <http://www.ccl-cca.ca/pdfs/OtherReports/201009KohenUppalKhanVisentinFullReport.pdf>

# BACKGROUND:

There have been a number of educational reforms for children and youth with disabilities since the early 1980s. This report describes both American and Canadian public policy changes related to education and disability and examines the issues related to access and barriers to educational services for Canadian children living with disabilities. The report also describes trends related to access to educational services by children with disabilities (including data related to children’s geographic location and the type and complexity of disability experienced).

<http://www.ccl-cca.ca/CCL/Reports/OtherReports/201009KohenUppalKhanVisentinAccessBarriers.html>

# 5. Strengthening communities for Canadian children with disabilities

Snowdon, A. (2012). *Strengthening communities for Canadian children with disabilities*. Toronto, ON: The Sandbox Project. Retrieved from <http://www.sandboxproject.ca/>

This discussion document highlights the findings from the Strengthening Communities for Canadian Children with Disabilities project. This project aims to engage key stakeholders to examine the capacity for creating community environments that strengthen social development for children and youth who face significant challenges due to disability.

<http://content.yudu.com/Library/A1xtq4/TheSandboxProject/resources/index.htm?referrerUrl=http%3A//free.yudu.com/item/details/565280/The-Sandbox-Project%3Fedit_mode%3Don>

# 6. The value of caregiver time: Costs of support and care for individuals living with autism spectrum disorder

Dudley, C., & Emery, H. (2014). The value of caregiver time: Costs of support and care for individuals living with autism spectrum disorder. *The School of Public Policy Research Papers*, *7*(1), 1-48.

SUMMARY:

Autism is the most common neurological condition diagnosed in children and it is now estimated that one in 88 children will be diagnosed with an autism spectrum disorder. Yet, across Canada, there are significant gaps in the publicly provided support system, leaving the cost burden to be picked up by families. In this article, Dudley and Emery provide a Canadian perspective on the costs of care for individuals living with autism as well as information on a variety of provincial programs that are available for individuals living with autism spectrum disorders.

<http://www.policyschool.ucalgary.ca/sites/default/files/research/emery-autism-costs.pdf>

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# 7. Health-related quality of life of children with physical disabilities: A longitudinal study

[Law, M](http://www.ncbi.nlm.nih.gov/pubmed?term=Law%20M%5BAuthor%5D&cauthor=true&cauthor_uid=24476085)., [Hanna, S](http://www.ncbi.nlm.nih.gov/pubmed?term=Hanna%20S%5BAuthor%5D&cauthor=true&cauthor_uid=24476085)., [Anaby, D](http://www.ncbi.nlm.nih.gov/pubmed?term=Anaby%20D%5BAuthor%5D&cauthor=true&cauthor_uid=24476085)., [Kertoy, M](http://www.ncbi.nlm.nih.gov/pubmed?term=Kertoy%20M%5BAuthor%5D&cauthor=true&cauthor_uid=24476085)., [King, G](http://www.ncbi.nlm.nih.gov/pubmed?term=King%20G%5BAuthor%5D&cauthor=true&cauthor_uid=24476085)., & [Xu, L](http://www.ncbi.nlm.nih.gov/pubmed?term=Xu%20L%5BAuthor%5D&cauthor=true&cauthor_uid=24476085). (2014). Health-related quality of life of children with physical disabilities: A longitudinal study. *BMC Pediatrics, 30*(14), 26. doi:10.1186/1471-2431-14-26

ABSTRACT:

**BACKGROUND:** Outcomes of health and rehabilitation services for children and youth with disabilities increasingly include assessments of health-related quality of life (HRQoL). The purpose of this research was to 1) describe overall patterns of HRQoL, 2) examine changes in parent's perceptions of child's HRQoL across 18 months and 3) explore factors that predict these changes.

**METHODS:** Participants in this study included 427 parents of children (229 boys and 198 girls) with a physically-based disability between the ages of 6 to 14 years. The Child Health Questionnaire (CHQ) was administered three times, at nine month intervals. Comparisons to the CHQ normative data were analyzed at Time 1 using t-tests, and change over time was examined using linear mixed-effects models. Possible predictors were modeled: 1) child's factors measured by the Activities Scale for Kids, Strengths and Difficulties Questionnaire, and general health measured by SF-36, 2) family characteristics measured by the Impact on Family Scale and 3) environmental barriers measured by the Craig Hospital Inventory of Environmental Factors.

**RESULTS:** CHQ scores of the study's participants demonstrated significantly lower summary scores from the normative sample for both CHQ Physical and Psychosocial summary scores. On average, children did not change significantly over time for physical summary scores. There was an average increase in psychosocial health that was statistically significant, but small. However, there was evidence of heterogeneity among children. Environmental barriers, behavioral difficulties, family functioning/impact, general health and child physical functioning had negative and significant associations with physical QoL at baseline. Change in physical QoL scores over time was dependent on children's behavioral difficulties, family functioning and environmental barriers. Environmental barriers, behavioral difficulties, family functioning/impact and general health had significant associations with psychosocial scores at baseline, but none served as predictors of change over time.

**CONCLUSIONS:** Children with physical disabilities differ from the normative group on parent ratings of their physical and psychosocial health. While there was little average change in CHQ scores over 18 months, there is evidence of heterogeneity among children. Factors such as environmental barriers, family functioning/impact, child physical functioning and behavioral difficulties and general health significantly influence QoL scores as measured by the CHQ.

<http://www.biomedcentral.com/1471-2431/14/26>

PDF: <http://www.biomedcentral.com/content/pdf/1471-2431-14-26.pdf>

# 7. Identifying autism in a brief observation

Gabrielsen, T. P., Farley, M., Speer, L., Villalobos, M., Baker, C. N., & Miller, J. (2015). Identifying autism in a brief observation. *Pediatrics, 135*(2). doi: 10.1542/peds.2014-1428

**BACKGROUND**: Pediatricians, neurologists, and geneticists are important sources for autism surveillance, screening, and referrals, but practical time constraints limit the clinical utility of behavioral observations. We analyzed behaviors under favorable conditions (i.e., video of autism evaluations reviewed by experts) to determine what is optimally observable within 10-minute samples, asked for referral impressions, and compared these to formal screening and developmental testing results.

**METHODS**: Participants (n = 42, aged 15 to 33 months) were typically developing controls and children who screened positive during universal autism screening within a large community pediatric practice. Diagnostic evaluations were performed after screening to determine group status (autism, language delay, or typical). Licensed psychologists with toddler and autism expertise, unaware of diagnostic status, analyzed two 10-minute video samples of participants’ autism evaluations, measuring 5 behaviors: Responding, Initiating, Vocalizing, Play, and Response to Name. Raters were asked for autism referral impressions based solely on individual 10-minute observations.

**RESULTS**: Children who had autism showed more typical behavior (89% of the time) than atypical behavior (11%) overall. Expert raters missed 39% of cases in the autism group as needing autism referrals based on brief but highly focused observations. Significant differences in cognitive and adaptive development existed among groups, with receptive language skills differentiating the 3 groups.

**CONCLUSIONS**: Brief clinical observations may not provide enough information about atypical behaviors to reliably detect autism risk. High prevalence of typical behaviors in brief samples may distort clinical impressions of atypical behaviors. Formal screening tools and general developmental testing provide critical data for accurate referrals.

<http://pediatrics.aappublications.org/content/early/2015/01/07/peds.2014-1428>

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# III. CURRENT INITIATIVES

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# 8. Ontario’s Special Needs Strategy

The Ontario government has developed a *Special Needs Strategy* as part of its commitment to increased support for children and families with special needs. Through the Strategy, the government aims to undertake three primary activities with the goal of ensuring accessibility to services for special needs children and youth. These activities include:

* Early identification of kids with special needs and earlier access to help and support.
* Coordinating the planning of services amongst providers for children with multiple special needs.
* Providing integrated and seamless access to rehabilitation services throughout a child’s life.

<http://www.children.gov.on.ca/htdocs/English/topics/specialneeds/strategy/index.aspx>

# 9. The Learning Disabilities Association of Ontario (LDAO)

The Learning Disabilities Association of Ontario is a registered charity devoted to supporting individuals with learning disabilities, including children. The LDAO works to develop partnerships, policy and products that support the full participation of individuals with learning disabilities in society. The Association offers online courses, available on its website, for parents, students and professionals to learn about topics including learning styles, IEPs, and how to effectively work with schools and advocate for a child’s best interests. Further, the association provides updates on current research conducted regarding learning disabilities.

<http://www.ldao.ca/>

# 10. The [Child Disability Benefit (CDB)](http://www.cra-arc.gc.ca/cdb/)

# Families with children who have a “severe and prolonged impairment in mental or physical functions” may be eligible for the Child Disability Benefit. The benefit is tax-free and can offer families up to $2 650 a year in support. To apply, the child’s disability must be certified by a doctor.

<http://www.servicecanada.gc.ca/eng/goc/cdb.shtml>



# IV. UPCOMING EVENTS

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# 11. Annual CANGRANDS conference and camp out

# Date TBD: Ameliasburgh, ON

CANGRANDS is a not-for-profit organization devoted to providing kinship support for caregiver families across Canada. Many of the children in these families have special needs and are being raised by a grandmother or an aunt who is retired with a very low income. The 13th annual conference featured workshops for caregivers and fun activities for children.

<http://www.cangrands.com/campout.htm>

# 12. Claiming Full Citizenship: Self Determination, Personalization and Individualized Funding 2015 International Conference

# October 15-17, 2015: Vancouver, BC

# This conference, organized by the Centre for Inclusion and Citizenship in collaboration with Interprofessional Continuing Education, will aim to discuss the impact of two key documents on the lives of those living with disabilities: the [Seattle 2000 Declaration on Self Determination and Individualized Funding](http://members.shaw.ca/individualizedfunding/Declaration.htm), and the [UN Convention of the Rights of Persons with Disabilities](http://www.un.org/disabilities/convention/conventionfull.shtml). The conference invites participants from a variety of sectors and with different experiences, individuals with disabilities and their family members, to come together, tell their stories, share best practices and learn from mistakes. Through participation in the conference, attendees will work together to develop plans to implement the UN Convention of the Rights of Persons with Disabilities. Abstracts for sessions are currently being accepted.

# <http://interprofessional.ubc.ca/ClaimingFullCitizenship2015/>

# 13. 16th Annual Meeting – Fetal Alcohol Canadian Expertise (FACE) Research Network

# September 2015: Ottawa, ON

# Held in conjunction with NeuroDevNet’s Annual Brain Development Conference, the FACE Research Network Meeting will bring together clinicians, researchers and government officials to discuss current research regarding the effects of alcohol during pregnancy and lactation. FACE is currently accepting abstracts for plenary presentations at the meeting on the topic of fetal alcohol research. The meeting will feature eight 30 minute lectures. All accepted abstracts will be published in the official FACE Research Network journal, [Fetal Alcohol Research](http://www.motherisk.org/FAR/index.jsp). For more information about abstract format and submission, contact Susan Santiago at [susan.santiago@sickkids.ca](mailto:susan.santiago@sickkids.ca).

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# V. RESOURCES

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# 14. The SpeciaLink Early Childhood Inclusion Quality Scale

# This tool, used to assess inclusion quality in early childhood centres, was first developed in 1992. Most recently updated in 2009 to accommodate user feedback, the tool is now available as a free download from the SpeciaLink website. Constantly evolving, the tool promotes an approach to inclusion quality that can accommodate the increasing number of children with special needs in community-based centres. Mandatory in some provinces, the tool is used by over 3000 early childhood professionals. Through the tool early childhood centres are evaluated through both a Principles scale (the effectiveness of the Centre’s policy and practice) and a Practices measure (which assesses how well the Centre’s practices promote inclusion).

<http://www.specialinkcanada.org/about/rating%20scales.html>

# 15.The Autism Parent Resource Kit

# This collection of services, websites, books and other resources was developed by the Ontario government to provide families a comprehensive understanding of autism and Autism Spectrum Disorders. The resource kit was designed to bring together in a central location key information and services to help children with autism and Autism Spectrum Disorders throughout each stage of their development. The kit was developed in conversation with families who are affected by Autism Spectrum Disorder, and it incorporates the experiences and feedback of these families. The toolkit is organized into two key sections. The Tools tab contains information that responds to various aspects of caring for a child with autism. The Resources tab provides a comprehensive list of programs offered by the Ontario government to support children with ASD. The entire kit is also available as a downloadable PDF.

<http://www.children.gov.on.ca/htdocs/English/topics/specialneeds/autism/index.aspx>

1. **Participation 101: Tip sheets**

Created by the CanChild Centre for Childhood Disability Research, the Participation 101 Tip Sheets were designed to encourage the successful participation of children and youth in a wide range of activities. Participation in games, sports, and arts and crafts are important to a child’s healthy development, and it’s important to make sure that everyone has the opportunity to participate. Tip sheets designed for parents cover a variety of topics pertinent to participation including accessibility, how to successfully engage in a new activity, and when to move on from an activity that’s not working. The “I want to participate in…” tip sheets can be given to children before they start a new activity. The sheets help children set goals as to what they would like to achieve by participating in the activity and gauge their skill level and interest in the subject.

**For parents:** <http://participation-environment.canchild.ca/en/families_tip_sheets.asp>

**For children**: <http://participation-environment.canchild.ca/en/want_to_participate_tip_sheets.asp>



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# VI. FEATURED BEST START RESOURCES

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1. **Drinking alcohol while breastfeeding - Desk reference**

(available in French)

This desk reference is a tool for health care providers to assess and inform pregnant patients about the risk of alcohol use in pregnancy. It includes a table that illustrates the time clearance of alcohol from breast milk of women, according to mother's weight, amount of alcohol consumed and hours since consumption.

**EN:** <http://www.beststart.org/resources/alc_reduction/pdf/brstfd_alc_deskref_eng.pdf>

**FR**: <http://www.meilleurdepart.org/resources/alcool/pdf/desk_reference_fre.pdf>

# 18. Screening for alcohol use in pregnancy - Desk reference

(available in French)

This desk reference is a screening tool for physicians on how to assess risk status of pregnant women with regard to alcohol use. It includes contact information for the Motherisk Alcohol and Substance Use Helpline.

**EN:** <http://www.beststart.org/resources/alc_reduction/pdf/DR_alcohol_08.pdf>

**FR:** <http://www.meilleurdepart.org/resources/alcool/pdf/reference_consumption_alcool.pdf>

# 19. The On Track Guide

(available in French)

The purpose of this guide is to provide professionals who work with young children and families with some indicators of healthy child development from birth to 6 years of age. These indicators come from the five domains: social, emotional, physical language, and cognitive and from other areas of development. If a child does not meet the expected milestones for his age range, further investigation is required, and a referral can be made to the appropriate specialist or program. In the past, a “wait and see” approach was often adopted due to the wide range of individuality in development. This approach resulted in children with developmental concerns being identified later and the loss of valulable time when brain development can be positively and fundamentally influenced.

**EN:** <http://www.beststart.org/OnTrack_English/>

**FR:** <http://www.meilleurdepart.org/SurLaBonneVoie/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*](mailto: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.*

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The free weekly [**Ontario Health Promotion E-mail bulletin (OHPE)**](http://www.ohpe.ca/) offers a digest of news, events, jobs, feature articles on health promotion issues, resources, and much more, to those working in health promotion.

[**Click4HP**](https://listserv.yorku.ca/archives/click4hp.html) 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**](http://www.beststart.org/services/MNCHP.html) **-** A province-wide electronic forum for service providers working to promote preconception, prenatal and child health.

[**Health Promotion Today**](http://en.healthnexus.ca/)- 0ur blog keeps you informed of news and topics related to health promotion.

Follow us on[**Twitter**](https://twitter.com/Health_Nexus) to stay up to date on all things related to health promotion.

View our video resources on [**YouTube**](http://www.youtube.com/user/healthnexussante) and [**Vimeo**](https://vimeo.com/user9493317)

[**The Best Start Aboriginal Sharing Circle (BSASC) Network**](http://lists.beststart.org/listinfo.cgi/bsasc-beststart.org) 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**](http://www.healthnexus.ca/leadershipaward) **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 bulletinfrancophone [**Le Bloc-Notes**](http://www.leblocnotes.ca/) 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**](http://www.meilleurdepart.org/services/bulletins.html) 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**](http://fr.nexussante.ca/)– Notre blogue sur lequel on partage des nouvelles et réflexions liées à la promotion de la santé.

Suivez-nous sur[**Twitter**](https://twitter.com/Nexus_Sante) pour demeurer au fait de tout ce qui concerne la promotion de la santé.

Visionner nos ressources vidéo sur[**YouTube**](http://www.youtube.com/user/healthnexussante) et [**Vimeo**](https://vimeo.com/user9493317)

Nous vous encourageons à visiter le site Web de notre nouveau [**Prix 3M de leadership en santé**](http://www.nexussante.ca/prixdeleadership/index.html)  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.