



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 fields. 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.

**Please note that the Best Start Resource Centre does not endorse or recommend any events, training, resources, services, research or publications of other organizations.*

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I. News & Views



Toxic Chemicals Detected in Children's Toys

[CELA](#) and [HEJSupport International](#) are bringing public attention to toxic chemicals that appear in new products made out of recycled materials. Researchers have found that the circular economy fails to address concerns regarding toxic chemicals in products, including those intended for children. A 2017 study, for example, revealed elevated concentrations of globally targeted toxic flame retardants in plastic toys available in Canada and 25 other countries.

Learn more [here](#).

New Steps in Ontario's Action Plan for Healthcare for 2018

As part of their [Action Plan for Health Care](#), the Government of Ontario announced a series of actions to better support families at the critical stages of conception, pregnancy, childbirth and during newborns' first six weeks.

- A new Ontario Fetal Centre will support expectant families and fetuses requiring high-risk medical care and in utero surgeries with increased access to world-renowned specialists and ground-breaking surgeries.
- Over 27,000 people will be provided access to the Ontario Fertility Program, which helps people start and grow their families, including funding for a full round of in vitro fertilization
- The Rogers Hixon Ontario Human Milk Bank and the Pumps for Premature Babies Program, which gives premature babies who need surgery or who were born at a very low birth weight access to human milk, reducing the risk of potentially life-threatening complications, will be expanded.
- New parents will be offered a user-friendly 5-in-1 Newborn Bundle so they can start saving for their child's education right away and register their child's birth, request a birth certificate, apply for a Social Insurance Number (SIN) and register for Canada and Ontario Child Benefits all in one place.

Learn more [here](#).

Provincial Standards for Race-Based Data Collection

The Province of Ontario launched new Data Standards for the Identification and Monitoring of Systemic Racism. The standards set out guidelines on how public sector organizations in child welfare, education and justice areas must begin collecting, analyzing and reporting race-based information, to support consistent data, evidence-based decision making and public accountability. The Standards establish consistent, effective practices for producing reliable information to support evidence-based decision making and public accountability to help eliminate systemic racism and promote racial equity.

Learn more [here](#).

May 2nd, 2018 is World Maternal Mental Health Awareness Day

Managing Depression:

A Self-help Skills Resource for Women Living With Depression
During Pregnancy, After Delivery and Beyond



Participant Workbook

best start
meilleur départ
by your health nrcGS centre

Women, as well as their family and friends, need to know the signs of maternal mental ill-health and that they are not alone! They can find help and support for perinatal mental health problems. The campaign aims to raise awareness of maternal mental health issues so that more women will get treatment and fewer will suffer.

The key messages are:

- Maternal mental health matters. **#maternalMHmatters**.
- Women, as well as their family and friends, need to know the signs of maternal mental ill-health and that they are not alone!
- You can find help and support for perinatal mental health problems.

Learn [here](#) how to get involved.

Did you know? The Best Start Resource Centre offers [many resources on the topic of Maternal Mental Health!](#) (also available [in French](#))

II. Recent Reports & Research

Parent-Child Reading Interventions Have Positive Psychosocial Effects

Though parent-child book reading (PCBR) interventions have been demonstrated to positively affect a child's language and literacy development, less research has focused on how such interventions affect families and children in a broader scope. A meta-analysis of 18 studies involving the psychosocial benefits of early PCBR interventions on both children and their families revealed a number of benefits which may be linked to PCBR interventions: improved social-emotional competence, quality of life, and reading interest in children. Additionally, there were a number of possible benefits for parents, including improved parenting competence, improved attitudes toward reading with their children, improved quality of their relationships with children, decreased stress or depression in parents. These benefits were seen both across the age groups in which the interventions were performed as well as across the various ethnic and racial backgrounds of the families included in the study. Though the review was limited by marked heterogeneity of the studies included, the analysis does successfully extend the already known benefits of PCBR interventions.

[Access the article.](#)

Physical Activity and Sedentary Behavior Legislation in Canadian Childcare Facilities: An Update

Within the childcare sector, physical activity and sedentary behaviors are not legislated at a national level in Canada. The purpose of this paper was to provide an amended review of the legislative landscape, at the provincial and territorial level, regarding physical activity and sedentary behaviors (via screen-viewing) in Canadian childcare centers.

Individual childcare acts and regulations for each province and territory were collected and reviewed with a focus on sections devoted to child health, physical activity, screen time, play, and outdoor time. Of the 13 provinces and territories, 8 (62%) have updated their childcare regulations in the past 5 years. All provinces provide general recommendations to afford gross motor movement; but the majority give no specific requirements for how much or at what intensity. Only 3 provinces (Northwest Territories, Nunavut, and Nova Scotia) explicitly mentioned daily physical activity while all provinces' and territories' required daily outdoor play. Only 1 province (New Brunswick) made mention of screen-viewing.

The variability in childcare regulations results in different physical activity requirements across the country. By providing high-level targets for physical activity recommendations, by way of provincial/territorial legislation, staff would have a baseline from which to begin supporting more active behaviors among the children in their care. Future research is needed to support translating physical activity policies into improved activity levels among young children in childcare and the role of screen-viewing in these venues.

[Read the review](#)

The Forgotten Parent: Fathers' Representation in Family Interventions to Prevent Childhood Obesity

Despite recognition that parents are critical stakeholders in childhood obesity prevention, obesity research has overwhelmingly focused on mothers. In a recent review, fathers represented only 17% of parent participants in >600 observational studies on parenting and childhood obesity. The current study examined the representation of fathers in family interventions to prevent childhood obesity and characteristics of interventions that include fathers compared with those that only include mothers. Eligible studies included family-based interventions for childhood obesity prevention published between 2008 and 2015 identified in a recent systematic review. Out of 85 eligible interventions, 31 (37%) included mothers and fathers, 29 (34%) included only mothers, 1 (1%) included only fathers, and 24 (28%) did not provide information on parent gender. Of the interventions that included fathers, half included 10 or fewer fathers. Across all interventions, fathers represented a mere 6% of parent participants. Father inclusion was more common in interventions targeting families with elementary school-aged children (6–10 years) and those grounded in Ecological Systems Theory, and was less common in interventions focused on very young children (0–1 years) or the prenatal period and those targeting the sleep environment. This study emphasizes the lack of fathers in childhood obesity interventions and highlights a particular need to recruit and engage fathers of young children in prevention efforts.

[Access the article](#)

Early-Life Antacid, Antibiotic Exposure May Increase Later Allergy Risk

Infants who received antacids during the first six months of life were twice as likely to have food allergies and had a 50% higher likelihood of developing drug allergies, anaphylaxis or hay fever in early childhood, compared with those who didn't, according to a study in JAMA Pediatrics. Researchers also found a twofold higher asthma risk and 50% increased odds of anaphylaxis, allergic rhinitis, allergic conjunctivitis and dust allergies among those who were given antibiotics in the first six months of life.

[Access the article](#)

Preconception Health: Series of Reviews in The Lancet

The preconception period can be seen in three different ways: from a biological standpoint as the days and weeks before embryo development; from the individual perspective as the time of wanting to conceive; and through a population lens as any time a woman is of childbearing age. This series of three papers highlights the importance and summarizes the evidence of preconception health for future health and suggests context-specific interventions. They are:

- Origins of lifetime health around the time of conception: causes and consequences
- Before the beginning: nutrition and lifestyle in the preconception period and its importance for future health
- Intervention strategies to improve nutrition and health behaviours before conception

[Access the articles](#) (Fully accessible once you register for free).

Parent Distraction Can Hinder Babies' Language Skills

Although parents are often concerned about the effects of too much screen time on young children, it may be the adults who need to set aside their devices. Recent research reveals the detrimental effects of parent screen time on their 2-year-old children's language development.

In this within-subjects design, 38 mothers taught their 2-year-olds (M 27.15 months) 2 novel words, 1 at a time. One teaching period was interrupted by a cell phone call. Children learned the word when the teaching was not interrupted, but not when it was interrupted. Critically, the number of times each target word was

spoken did not differ by condition. This finding supports the literature on responsiveness, offering experimental evidence that interruptions in social interactions can affect learning outcomes
[Read the study.](#)

Fewer Toys Lead to Richer Play Experiences

Any parent knows how toys seem to magically multiply and take over a house. Do children need so many toys? A team of University of Toledo researchers studied whether the number of toys in a toddler's environment influenced their quality of play.

Each 36 participants engaged in supervised, individual free play sessions under two conditions: Four Toy and Sixteen Toy. With fewer toys, participants had fewer incidences of toy play, longer durations of toy play, and played with toys in a greater variety of ways. This suggests that when provided with fewer toys in the environment, toddlers engage in longer periods of play with a single toy, allowing better focus to explore and play more creatively. This can be offered as a recommendation in many natural environments to support children's development and promote healthy play

[Read the article.](#)

What interventions are being used to prevent preterm birth and when?

Objective

This study sought to determine the proportions of women at risk of preterm birth who received progesterone, elective and rescue cerclage, or pessary to prevent preterm birth, by using medical records. The authors also sought to determine whether these proportions differed among primary-, secondary-, and tertiary-level centres.

Methods

The authors conducted a retrospective cohort study and extracted data from consecutive medical charts of women with an estimated date of confinement over 3 months in primary-, secondary-, and tertiary-level centres in Southern Ontario. The study identified women with a previous spontaneous preterm birth or a short cervix and determined whether they were offered and whether they received a preventive intervention for preterm birth. Descriptive statistics and Fisher exact tests were calculated.

Results

The authors reviewed 1024 consecutive charts at primary, secondary, and tertiary centres and identified 31 women with a previous spontaneous preterm birth or a short cervix. Of these women, 42% received progesterone or cerclage for prevention of preterm birth, and none received pessary, 26% were not referred to an obstetrician or maternal-fetal medicine specialist in time for an intervention, and among those referred before 24 weeks of gestation, an intervention was offered to 57% of the women.

Conclusion

Less than half of women at risk of spontaneous preterm birth received progesterone, cerclage, or pessary, attesting to the importance of improving knowledge translation methods to encourage timely referral and use of progesterone for the prevention of preterm birth.

[Access the article.](#)

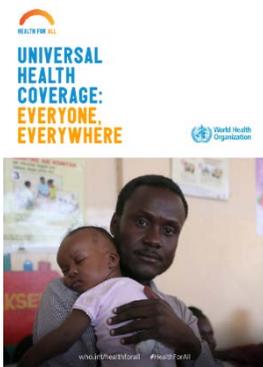
III. Current Initiatives

My Story is my Strength: Ottawa Digital Story Film Screening

CHEO partnered with Youville Centre to explore "health" through digital storytelling with a group of young moms in the Ottawa community. 18 young women participated in workshops that taught them how to create their own digital stories. The process of combining technology with the voices of this underrepresented population was powerful and the end results are inspiring. The videos are about mental health, discrimination and resilience.

[Learn more here.](#)

Universal Health Coverage: Everyone, Everywhere Campaign



In the spirit of [this year's World Health Day](#) theme (In French [here](#)), '*Universal health coverage: everyone, everywhere*', [WHO](#) have put together tools and essential messages to guide, motivate and inspire you to act.

- [Test your knowledge about universal health coverage \(UHC\)](#) and see if you can answer questions like: How many people in the world lack access to essential health services? What is UHC and what is it not? (In French [here](#))
- [Read the report](#) Tracking universal health coverage 2017
- [Get involved! Inspire](#)—by highlighting policy makers' power to transform the health of their nation, framing the challenge as exciting and ambitious, and inviting them to be part of the change! **Motivate**—by sharing examples of how countries are already progressing towards UHC and encourage others to find their own path! **Guide**—by providing tools for structured policy dialogue on how to advance UHC domestically or supporting such efforts in other countries (e.g. expanding service coverage, improving quality of services, reducing out-of-pocket payments)! (In French [here](#))
- [Spread the word!](#) The theme of World Health Day is: Universal health coverage: everyone, everywhere. The slogan is "Health for All". Use the hashtag #HealthForAll, and look out for posts using #WorldHealthDay as well. You can also download the [posters](#) and [infographics](#).

[Learn more here.](#)

The SOGC Urges Canadians to Avoid Cannabis Use During Pregnancy and Breastfeeding (Also Available in French)

The [Society of Obstetricians and Gynaecologists \(SOGC\)](#) has launched a public awareness campaign to inform those who are pregnant, breastfeeding, or of child-bearing age of the potential adverse effects associated with cannabis use during pregnancy and while breastfeeding.

[Learn more here](#) (and in French [here](#)).

IV. Upcoming Events



International Code of Marketing of Breastmilk Substitutes

[INFACT Canada](#), together with the IBFAN International Code Documentation Centre (ICDC), offers a training on the International Code of Marketing of Breastmilk Substitutes on **May 14, 15 and 16, 2018 in Toronto**.

The Code Training/Workshop will cover a range of topics, including: infant and young child feeding trends; the importance of breastfeeding for health, sustainability; understanding marketing; managing conflicts of interest; the Code and the BFI; the Code in emergencies; how formula feeding is a health risk for mothers and babies; and many others.

All information about the course, including online registration, can be found at the [Code Training Website](#).

National Forum on Teaching Competency In Family Medicine Maternity Care

Taking place **June 8-9 in Toronto**, this free 1.5-day conference is **for family physicians**, hosted by the College of Family Physicians of Canada. It is an opportunity to learn about your colleagues' programs across the country, refresh your teaching skills and network with like-minded professionals.



[Learn more](#) and [register](#).



Come in Curious - An Invitation to Honour Indigenous Ways of Knowing in Early Years Settings

What does it mean to honor Indigenous ways of knowing in early years settings? How can we see ourselves as participatory researchers, and research itself as an ethical practice that is mindful of seven generations? Come on **Thursday June 14 in London, ON** to think together about what it means to engage in participatory research with Indigenous early childcare professionals, who will share stories from their communities and early years contexts. This special session is hosted by [the Canadian Association of Young Children](#).

Learn more [here](#).

6th Annual Infant Mental Health (IMH-101) – The Basics

Taking place on **Monday, September 17, 2018 in Toronto**, this one day workshop will provide an overview of basic principles related to infant mental health and how this information is applicable to different professional settings and roles involved in caring for and serving this age group. Early learning and care practitioners (ECE's), home visitors, and child welfare workers in particular need to understand the impact of a young child's experiences on their mental health and emerging sense of self.

Learn more and register [here](#).

Face-to-Face Seminar: Self-Regulation: A Great Tool for Kindergarten Educators



Self-regulation is now an important concept in Kindergarten education, one of the four frames of early learning in [Ontario's Full-Day Early-Learning Kindergarten curriculum](#) (In French [here](#)). The challenge is that self-regulation means different things to different people. This Institute, taking place in **Toronto September 15th, 2018**, will address:

- A developmental understanding of self-regulation (the difference between self-regulation and “good behaviour” as well as the connection between the two)
- How self-regulation enables good behaviour
- The science behind [the Self-Reg view](#) of self-regulation
- The five domains of self-regulation and how stress affects children's behaviour and learning in each domain
- How self-regulation is central to not just one, but all four frames in the FDK curriculum
- How children develop self-regulation through play
- Introduction to Shanker Self-Reg, a framework and method for understanding stress and managing tension and energy

- Practical Self-Reg strategies that will enhance educators' ability to support and build self-regulation in early childhood settings
- Co-regulation: the importance of relationships in education
- Educator stress, why it matters and how to look at it compassionately

Learn more [here](#).

V. Resources

Webinar Recording: Compassion Hurts: Burnout, Vicarious Trauma and Secondary Trauma in Prenatal and Early Childhood Service Providers

Managers and organizations play a critical role in preventing and responding to vicarious trauma and burnout. Vicarious trauma, or compassion fatigue, results from witnessing or responding to the pain and suffering of people who we come into contact with. As a result, our ability to help becomes compromised and the helper is in danger of experiencing a trauma response. The recording of the [CMAS](#) webinar presented by Greg Lubimiv is accessible [here](#).

[Access the recording.](#)



Child and Family Poverty in Ontario. A practical guide for moving from stigma to empowerment is now also available in French!

Published by the Best Start Resource Centre in 2018 and recently translated, this manual is a reference for service providers working with families living in poverty who have children under age six. This edition includes updated statistics, policies and practices that can influence child and family poverty, examples of promising approaches to addressing various aspects of child and family poverty and current literature.

This manual was written with a wide range of service providers in mind, such as community workers, child protection workers, teachers, health care providers, early childhood educators, social workers and others who interact with families, parents or children. The manual offers an opportunity to reflect on how poverty is defined, the impacts of poverty on families, how service provider practices can help and suggest broader systemic and policy issues that influence families living in poverty.

Download it [in English](#) and [in French](#).

Social Assistance Summaries

Social assistance is the income program of last resort. It is intended for those who have exhausted all other means of financial support. Every province and territory has its own social assistance program(s) and no two are the same. The Social Assistance Summaries, the most recent one just released by [Maytree](#), tracks the number of recipients of social assistance (welfare payments) in each province and territory.

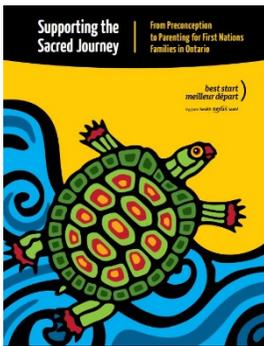
Read the [summary for Ontario](#) or [download the all Canada report](#)

Toolkit to increase unstructured play (also available in French)

Play is the business of childhood and is an integral part of every child's healthy development. It is play where children follow their own ideas without a defined purpose or outcome. Children and youth need time, appropriate space and opportunity to engage in quality play. It is crucial to children's mental and emotional health and it could minimize depression, anxiety, aggression and sleep problems. It improves children's physical, mental, and social health, and has a critical role in healthy development.

A [Canadian Public Health Association](#) toolkit provides evidence-based tools and resources to inform decision-making and reduce concerns in order to increase access to unstructured play in school and municipal settings. The toolkit also responds to common parent/guardian perceptions. Resources are available in French and English.

Learn more [here](#).



The Sacred Journey from Preconception to Parenting for First Nations Families in Ontario

Developed by the Best Start Resource Centre, this manual will help service providers who work with First Nations families understand some of the traditional teachings, barriers to practice and challenges facing First Nations people. The information can be used to ensure that evidenced-based practice is sensitive to cultural needs and practices.

Available [in print](#) and [PDF](#).



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Stay connected!

- [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.
- [Ontario Prenatal Education Network](#) - A space where professionals can share information and resources, ask questions and collaborate with peers on topics related to prenatal education.
- [Health Promotion Today](#) - Our blog keeps you informed of news and topics related to health promotion.
- [The Best Start Indigenous 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.

En français:

Restez branché!

- 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.

