

Please note that the next MNCHP bulletin will be released on January 16, 2009.

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### ----- I. NEWS & VIEWS -----

#### ONTARIO

##### 1. GOVERNMENT OF ONTARIO AMENDS CHRISTOPHER'S LAW TO BETTER MONITOR SEX OFFENDERS

(also available in French)

In response to the December 2007 report of the Auditor General into the Ontario Sex Offender Registry, new measures will enable police to better monitor sex offenders and keep Ontario communities safer. The new amendments to Christopher's law will require sex offenders to register if they are: (1) serving an intermittent sentence (e.g., on weekends), (2) released on a temporary absence pass, (3) found not criminally responsible on account of mental disorder and are released on a day pass, or (4) released on bail pending an appeal.

English: <http://ogov.newswire.ca/ontario/GPOE/2008/12/05/c7301.html?lmatch=&lang= e.html>

French: <http://ogov.newswire.ca/ontario/GPOF/2008/12/05/c7313.html?lmatch=&lang= f.html>

##### 2. ONTARIO GOVERNMENT MEETS CLASS SIZE TARGET

(also available in French)

The government of Ontario (2008, December 3) reports that all Junior Kindergarten to Grade 3 classes have 23 or fewer students and over 90% of primary classes have 20 or fewer students. Primary class sizes at local schools can be checked using the government's "Class Size Tracker".

English: <http://ogov.newswire.ca/ontario/GPOE/2008/12/03/c6232.html?lmatch=&lang= e.html>

French: <http://ogov.newswire.ca/ontario/GPOF/2008/12/03/c6244.html?lmatch=&lang= f.html>

Class-Size Tracker: <http://www.edu.gov.on.ca/eng/cst/>

French: <http://www.edu.gov.on.ca/fre/cst/index.html>

#### CANADA

##### 3. LATEST PRODUCT RECALLS

(also available in French)

Note: Products that are recalled for containing lead or barium are in excess of the allowable level per the Canadian Hazardous Products Act (CHPA).

- Kool Charmz Pop Charm: Contains lead.
- Kids' "Erwin" Beanies and "Poseidon" Beanies (hats): Eyeballs may come loose, posing a choking hazard.
- Necklaces with Frog Pendants: Pendants contain lead.
- Necklace with Coloured thong (Sandal) Pendant: Pendants contain lead.
- Playgro Toy Box Musical Pullstring: Propeller can detach, posing a choking hazard.
- Animal Adventure Holiday Costume Bear Plush Toy: Buttons and eyes can detach, posing a choking hazard.
- BOOeauty Spiky Ball Yo-yo Ball Toy: Poses a risk of strangulation.
- Groovy Fashions Sassy Jammies Doll Clothing Sets: Surface paint contains lead.
- Yo-yo Water Ball Toy: Poses a risk of strangulation.

- Young Colours Children's Hooded Jackets: Drawstrings can pose entanglement and strangulation hazards.
- Toy Gun/Assault Rifle: Paint contains lead.
- Illuminated Star Necklace: Necklace may break apart, posing a choking hazard.
- Children's Sleepwear: Does not meet flammability requirements.
- IKEA IRIS and ALVINE Roman Blinds: Pose strangulation hazard.

English: [http://healthycanadians.gc.ca/pr-rp/pr-rp\\_e.php](http://healthycanadians.gc.ca/pr-rp/pr-rp_e.php)

French: [http://healthycanadians.gc.ca/pr-rp/pr-rp\\_f.php](http://healthycanadians.gc.ca/pr-rp/pr-rp_f.php)

#### 4. HEALTH CANADA: CHILDREN UNDER SIX SHOULD NOT GET COUGH AND COLD MEDICATION (also available in French)

This article (The Canadian Press, 2008, December 18) reports that Health Canada is advising that children under six years of age should not be treated with over-the-counter cough and cold medications because the potential risks outweigh any possible benefits. Manufacturers of the products will be required to have their products relabelled to reflect the new recommendations. The Health Canada "Cough and Cold Medicine for Children" website includes the public advisory, a list of frequently asked questions, background information on the decision, and a PDF of posters and information tear sheets about the decision that can be printed and posted on public information boards.

<http://www.theglobeandmail.com/servlet/story/RTGAM.20081218.wcough1218/BNStory/National/?page=ss&id=RTGAM.20081218.wcough1218>

Cough and Cold Medicine for Children Website: <http://www.hc-sc.gc.ca/dhp-mps/medeff/res/cough-toux-eng.php>

French: <http://www.hc-sc.gc.ca/dhp-mps/medeff/res/cough-toux-fra.php>

#### 5. CANADA FIRST COUNTRY TO ADOPT NEW WORLD HEALTH ORGANIZATION (WHO) RECOMMENDATIONS REGARDING MELAMINE IN FOOD (also available in French)

The Honourable Leona Aglukkaq, Minister of Health, announced (2008, December 10) that Canada will adopt the recommendations that arose from the WHO scientific meetings in Ottawa on the toxicological effects of melamine and cyanuric acid. Gathered experts recommended that the tolerable daily intake (TDI) be set at 0.2 mg per kg of bodyweight per day. Health Canada is adopting this new TDI and will be taking the additional measure of lowering its allowable level for melamine in infant formula from 1 ppm (parts per million) to 0.5 ppm to ensure that exposures stay within this new TDI.

English: [http://www.hc-sc.gc.ca/ahc-asc/media/nr-cp/\\_2008/2008\\_181-eng.php](http://www.hc-sc.gc.ca/ahc-asc/media/nr-cp/_2008/2008_181-eng.php)

French: [http://www.hc-sc.gc.ca/ahc-asc/media/nr-cp/\\_2008/2008\\_181-fra.php](http://www.hc-sc.gc.ca/ahc-asc/media/nr-cp/_2008/2008_181-fra.php)

## ----- II. RECENT REPORTS AND RESEARCH RESULTS -----

### ONTARIO

#### 6. THE COST OF POVERTY

The Ontario Association of Food Banks (OAFB) collaborated with a group of eminent thinkers (2008) to produce the first estimates of the costs of poverty to all Ontarians. The report includes information about Ontario's children and families such as: "(1) Poverty hits Ontarians with disabilities, Ontario's children, Aboriginal Ontarians, single parents, and new Canadians much greater than the provincial average; (2) There is a relationship between poverty and poor health outcomes, lower productivity, lower educational attainment, and children's future income; and (3) Poverty has a significant cost for the federal and Ontario government and for every household in Ontario" (OAFB, 2008, p.4). The extra costs are due to our health care system, the costs of crime, the cost of social assistance, the loss of tax revenue that accompanies low earnings, and the intergenerational costs that flow from the likelihood that a significant number of children from poor families will also be poor when they grow up. The authors (2008) suggest

that reducing poverty with targeted policies and investments over the life course generates an economic return. Some of the proposed investments include early intervention initiatives focusing on low-income populations and child care.

<http://www.oafb.ca/assets/pdfs/CostofPoverty.pdf>

## **CANADA**

### **7. HEALTH HUMAN RESOURCES PROJECT ON INTRAPARTUM EMERGENCY OBSTETRICAL CARE**

(also available in French)

The Society of Obstetricians and Gynaecologists of Canada (SOGC) (2008, December 4) released a report "Health Human Resources (HHR) Project on Intrapartum Emergency Obstetrical Care". The project was made up of three parts: (1) learning about women's experiences and expectations around pregnancy and childbirth; (2) obstetrician and resident surveys, including obstetrics and gynaecology (Ob/Gyn) HHR projections 2008 - 2021; and (3) University Health Centre Education Survey. SOGC members including residents and heads of Ob/Gyn at Canada's 17 medical schools were surveyed about birthing care. The findings indicate that: "The changing face of obstetrical medicine in Canada may put women and their babies who need emergency obstetrical care at risk. As the current generation of Ob/Gyns retires, residents and new graduates have signalled that they are not willing to sacrifice family life and put in long and demanding hours that currently characterize the practice of obstetrics" (SOGC, 2008). Specifically, respondents said that they are planning to: work fewer hours per week than their predecessors; severely limit their on-call duty to a fraction of the hours assumed by Ob/Gyns practicing today; job share with other physicians, making "one-in, one-out" retirement replacement scenarios unrealistic; and take two to three maternity and/or paternity leaves in order to fulfill parenting responsibilities. The study also included a survey of Canadians who recently had a baby or who are planning to have one. The findings suggested women want continuity of care throughout their pregnancy, a role in prenatal and birthing decisions, and to give birth as close to home as possible. According to Dr. André Lalonde, Executive Vice President of the SOGC: "This research proves there is a major disconnect between what women expect and what is actually possible... Canadians assume that their local hospital can take care of them when they have a baby. Increasingly, that is just not possible; women in smaller cities, towns and in the rural areas with no choice but to travel away from their homes to ensure a safe and healthy delivery". The report provides SOGC's recommendations, which include: (1) immediate government action, (2) adopting "A National Birthing Initiative for Canada" and "An Aboriginal Birthing Initiative for Canada", (3) Ob/Gyn education including increasing the number of teachers, researchers, and Ob/Gyn resident positions by 30% annually for the next three years and by further increments of 10% for the following three years, and rotations into smaller cities and towns to encourage residents to consider permanently settling in smaller centres; and (4) Canadian Institute for Health Research (CIHR) and Statistics Canada working with SOGC and other maternity care providers to upgrade information on intrapartum care in Canada and develop strategies that will disseminate this information in a more timely fashion.

Report: [http://www.sogc.org/projects/pdf/hhr-survey-report\\_e.pdf](http://www.sogc.org/projects/pdf/hhr-survey-report_e.pdf)

French: [http://www.sogc.org/projects/pdf/hhr-survey-report\\_f.pdf](http://www.sogc.org/projects/pdf/hhr-survey-report_f.pdf)

Press release: [http://www.sogc.org/media/advisories-20081204\\_e.asp](http://www.sogc.org/media/advisories-20081204_e.asp)

French: [http://www.sogc.org/media/advisories-20081204\\_f.asp](http://www.sogc.org/media/advisories-20081204_f.asp)

### **8. FETAL ALCOHOL SPECTRUM DISORDER (FASD) PREVENTION: CANADIAN PERSPECTIVES**

(also available in French)

This report (Public Health Agency of Canada, 2008) describes what has been learned about prevention of FASD in the course of implementation of health promotion and prevention strategies across Canada. This document was created to assist those who are planning or extending FASD prevention programming to reach and support women of childbearing years. It reflects a pan-Canadian vision for both preventing FASD and improving the outcomes for those who are already living with it.

English: <http://www.phac-aspc.gc.ca/fasd-etcaf/cp-pc-eng.php>

French: <http://www.phac-aspc.gc.ca/fasd-etcaf/cp-pc-fra.php>

9. CANADIANS IN LOWER SOCIO-ECONOMIC GROUPS MORE LIKELY TO BE HOSPITALIZED FOR MENTAL ILLNESS, CHILD ASTHMA  
(also available in French)

This study (Canadian Institute for Health Information, 2008) is the largest of its kind to examine differences in health and health system use between Canadians in high-, average-, and low-socio-economic status groups. A total of 21 health-related indicators were compared between these three socio-economic status groups within and across 15 urban areas in Canada. The findings indicate that the lower an individual's socio-economic status, the more likely he or she is to be hospitalized for any number of health issues, from childhood asthma to mental illness to diabetes.

Press release: [http://secure.cihi.ca/cihiweb/dispPage.jsp?cw\\_page=media\\_24nov2008\\_e](http://secure.cihi.ca/cihiweb/dispPage.jsp?cw_page=media_24nov2008_e)

French: [http://secure.cihi.ca/cihiweb/dispPage.jsp?cw\\_page=media\\_24nov2008\\_f](http://secure.cihi.ca/cihiweb/dispPage.jsp?cw_page=media_24nov2008_f)

Report: [secure.cihi.ca/cihiweb/dispPage.jsp?cw\\_page=PG\\_1690\\_E&cw\\_topic=1690&cw\\_rel=AR\\_2509\\_E](http://secure.cihi.ca/cihiweb/dispPage.jsp?cw_page=PG_1690_E&cw_topic=1690&cw_rel=AR_2509_E)

French: [secure.cihi.ca/cihiweb/dispPage.jsp?cw\\_page=PG\\_1690\\_F&cw\\_topic=1690&cw\\_rel=AR\\_2509\\_F](http://secure.cihi.ca/cihiweb/dispPage.jsp?cw_page=PG_1690_F&cw_topic=1690&cw_rel=AR_2509_F)

## INTERNATIONAL

10. MATERNAL CAFFEINE INTAKE DURING PREGNANCY AND RISK OF FETAL GROWTH RESTRICTION

This study (CARE Study Group, 2008) examined the association of maternal caffeine intake with fetal growth restriction (i.e., lower birth weight). A total of 2635 low risk pregnant women were recruited to participate in the study between 8 -12 weeks of pregnancy. The researchers measured caffeine intake with a validated caffeine assessment tool (i.e., caffeine in saliva). Smoking and alcohol were also assessed by self reporting and saliva. The findings indicate that caffeine consumption throughout pregnancy as low as 100 mg (the amount in an 8-ounce cup of coffee) was associated with an increased risk of fetal growth restriction. The authors (2008) recommend that women should be advised to reduce caffeine intake before conception and throughout pregnancy.

[http://www.bmj.com/cgi/reprint/337/nov03\\_2/a2332?maxtoshow=&HITS=10&hits=10&RESULTFORMAT=&fulltext=birth+weight+caffeine&searchid=1&FIRSTINDEX=0&volume=337&resourcetype=HWCIT](http://www.bmj.com/cgi/reprint/337/nov03_2/a2332?maxtoshow=&HITS=10&hits=10&RESULTFORMAT=&fulltext=birth+weight+caffeine&searchid=1&FIRSTINDEX=0&volume=337&resourcetype=HWCIT)

11. STRENGTHENING THE CASE: PRENATAL ALCOHOL EXPOSURE IS ASSOCIATED WITH INCREASED RISK FOR CONDUCT DISORDER

This study (Disney, Iacono, McGue, Tully, & Legrand, 2008) examined the relationship between alcohol exposure in pregnancy and offspring conduct disorder symptoms in adolescence. A total of 1252 adolescents and both their parents completed structured diagnostic interviews to generate lifetime psychiatric diagnoses. Mothers also completed interviewed about alcohol and nicotine use during pregnancy. The findings indicate that prenatal exposure to alcohol was associated with higher levels of conduct-disorder symptoms in offspring. Study author Dr. Elizabeth Disney concludes: "I hope that the sacrifice of giving up drinking for the nine months of pregnancy will be worth it in the long run for the payoff of having an easier and better behaved teenager" (Reuters Health, 2008, December 3).

<http://pediatrics.aappublications.org/cgi/reprint/122/6/e1225>

## ---- III. CURRENT INITIATIVES ----

12. CANADIAN CANCER SOCIETY INITIATIVE TO BAN CANDY-FLAVOURED CIGARILLOWS: ONTARIO GOVERNMENT PASSES BAN  
(also available in French)

The Canadian Cancer Society (2007, December 4) congratulates the Ontario government for putting an end to the marketing of cigarillos to youth and looks forward to the swift implementation of the new legislation. Cigarillos have been available in candy flavours (e.g., grape, chocolate, ice cream),

packaged in bright candy-like colours, and sold at one time for a dollar or less, which made them easily affordable for young people experimenting with smoking. Irene Gallagher Jones, the Senior Manager of Public Issues of the Ontario Division of the Canadian Cancer Society explains: "Our volunteers and staff who have advocated for this legislation are very pleased at the government's decision today to ban the use of flavouring in cigarillos and require they be sold in packs of 20... We know most smokers start before the age of 18 and that's why we are so concerned. The sooner we can stop the exposure of youth to easily accessible candy-flavoured tobacco products, the less likely young people will start smoking".

English: [http://www.cancer.ca/Ontario/About%20us/Media%20centre/OD-Media%20releases/Canadian%20Cancer%20Society%20congratulates%20gov%20re%20cigarillos%20ban.aspx?sc\\_lang=en](http://www.cancer.ca/Ontario/About%20us/Media%20centre/OD-Media%20releases/Canadian%20Cancer%20Society%20congratulates%20gov%20re%20cigarillos%20ban.aspx?sc_lang=en)

French: [http://www.cancer.ca/Ontario/About%20us/Media%20centre/OD-Media%20releases/Canadian%20Cancer%20Society%20congratulates%20gov%20re%20cigarillos%20ban.aspx?sc\\_lang=fr-CA](http://www.cancer.ca/Ontario/About%20us/Media%20centre/OD-Media%20releases/Canadian%20Cancer%20Society%20congratulates%20gov%20re%20cigarillos%20ban.aspx?sc_lang=fr-CA)

### 13. CANADA CELEBRATES HUMAN RIGHTS DAY (also available in French)

The Honourable Lawrence Cannon, Minister of Foreign Affairs, commemorated the 60<sup>th</sup> anniversary of the Universal Declaration of Human Rights: "On December 10, 1948, the United Nations adopted the Universal Declaration of Human Rights. The international community agreed and affirmed for the first time that everyone, regardless of colour, race, ethnicity or religious affiliation, has the right to basic dignity and justice" (Government of Canada, 2008, December 10).

English: <http://news.gc.ca/web/article-eng.do?m=/index&nid=427439>

French: <http://nouvelles.gc.ca/web/article-fra.do?m=/index&nid=427439>

## ----- IV. UPCOMING EVENTS -----

This section lists events that have not been included in earlier editions of the MNCHP bulletin or listserv postings. For the details of these events and a complete list of events noted in previous MNCHP bulletins and postings, including contact information, links to organizations, and descriptions, see <http://www.beststart.org/events/otherevents.php>

### ONTARIO

#### 14. ONTARIO NEWBORN SCREENING PROGRAM REGIONAL WORKSHOP

January 30, 2009: To be announced

Hosted by: Ontario Newborn Screening Program

Note: This event is being held for Kingston and area hospitals and midwifery practices. Invitations will be sent in the New Year directly to hospitals and midwifery practices in the Kingston, Peterborough, Belleville, and Brockville areas. If you are located in one of these areas and have not received an invitation by January 8, 2009, please contact the Ontario Newborn Screening Program at (613) 738-3222 or [NewbornScreening@cheo.on.ca](mailto:NewbornScreening@cheo.on.ca)

<http://www.newbornscreening.on.ca/bins/index.asp>

#### 15. EXPANDING OUR HORIZONS: MOVING MENTAL HEALTH AND WELLNESS PROMOTION INTO THE MAINSTREAM

March 4-6, 2009: Toronto, ON

Hosted by: Clifford Beers Foundation and The Mental Health Commission of Canada

English: <http://www.toronto.cliffordbeersfoundation.co.uk/intro.htm>

French: [http://www.toronto.cliffordbeersfoundation.co.uk/fr\\_intro.htm](http://www.toronto.cliffordbeersfoundation.co.uk/fr_intro.htm)

#### 16. TOWARDS 2020: CANADA'S COMMITMENT TO CHILDREN & YOUTH

April 26-29, 2009: Ottawa, ON

Hosted by: Child & Youth Friendly Ottawa

English: <http://www.towards2020.ca/>  
French: <http://www.towards2020.ca/francais/index.php>

17. 31<sup>ST</sup> ANNUAL GUELPH SEXUALITY CONFERENCE: POSITIVE APPROACHES TO SEXUALITY AND SEXUAL HEALTH

June 15-17, 2009: Guelph, ON  
Hosted by: University of Guelph  
<http://www.open.uoguelph.ca/sexconf/>

**CANADA**

18. FIRST NATIONS HEALTH MANAGERS FORUM 2009

January 27-29, 2009: Vancouver, BC  
Hosted by: Assembly of First Nations  
[http://www.fnhealthmanagers.ca/html/conference2009\\_e.php](http://www.fnhealthmanagers.ca/html/conference2009_e.php)  
French: [http://www.fnhealthmanagers.ca/html/conference2009\\_f.php](http://www.fnhealthmanagers.ca/html/conference2009_f.php)

19. LOOKING BACK, THINKING AHEAD: USING SOCIAL DETERMINANTS RESEARCH TO IMPROVE POLICY AND PRACTICE IN WOMEN'S HEALTH

March 15-18, 2009: Halifax, NS  
Hosted by: The Atlantic Centre of Excellence for Women's Health in Halifax  
<https://acewh09.dal.ca/>

**----- V. RESOURCES -----**

20. PODCAST: "ABORIGINAL MIDWIFERY IN CANADA"

This podcast, produced by the National Aboriginal Health Organization (2008), provides information about "the movement to bring birth back to Aboriginal communities, through the training of local midwives, the establishment of birthing centers, and the integration of traditional and western practices". This movement developed in response to government policies that have required First Nation, Inuit, and Métis women to give birth in southern and urban centres rather than in their own homes and communities. This 20 minute documentary features First Nations, Inuit, and Métis midwives and representatives from organizations discussing the challenges, benefits, and significance of First Nations, Inuit, and Métis women taking control of this sacred ceremony and bringing it back home.  
<http://www.naho.ca/english/mwifPodcasts.php>

21. DIRECTORY OF FETAL ALCOHOL SPECTRUM DISORDER (FASD) INFORMATION AND SUPPORT SERVICES IN CANADA  
(also available in French)

This revised resource, prepared by the Canadian Centre on Substance Abuse (2008), is a listing of organizations and individuals that provide an FASD-related service or initiative in Canada. Some organizations listed in this Directory provide services exclusively for FASD while others may provide an FASD service as one of many services. The Directory is available in electronic form as a PDF document and in print form in limited quantities free of charge.

English and French: <http://www.ccsa.ca/2008%20CCSA%20Documents2/ccsa-DirectoryFASD-20081103.pdf>

22. GUIDE TO HEALTH AND SAFETY IN CHILD CARE: 3<sup>RD</sup> EDITION OF WELL-BEINGS  
(also available in French)

The Canadian Paediatric Society (CPS) (2008) has launched a new edition of "Well Beings: A Guide to Health in Child Care". This reference for child care centres, agencies and home-based providers, early

childhood instructors and students, physicians, public health professionals, and parents provides information on the daily care, health, and safety of children from birth to preschool. According to Dr. Denis Leduc, the book's co-editor and a former CPS president who practices paediatrics in Montreal: "This new edition of *Well Beings* consolidates the recommendations of Canada's experts in paediatrics to establish the most current guidelines, and provides the gold standard for child care in this country...This invaluable resource will also enable health care providers to share the best information when making recommendations regarding children in child care settings". This book encourages meaningful inclusion of children with special needs and provides practical advice on how to help all children thrive and benefit from quality early childhood care. Topics include: healthy activities, nutrition, dental health, safety and injury prevention, managing and preventing infections, common and chronic conditions, emergencies, children's emotional well-being, including children with special needs, protecting children from maltreatment, and the physical and emotional health of caregivers.

English: <http://www.caringforkids.cps.ca/wellbeings/index.htm>

French: <http://www.soinsdenosenfants.cps.ca/bienetre/index.htm>

## ----- VI. FEATURED BEST START RESOURCES -----

The new reports "The Cost of Poverty" (Ontario Association of Food Banks, 2008) and "Reducing the Gaps in Health: A Focus on Socio-Economic Status in Urban Canada" (Canadian Institute for Health Information, 2008) noted in the "Recent Reports and Research Studies" section of the bulletin highlight the economic costs and health concerns related to socio-economic status. The following resources may be helpful to service providers in understanding and reducing the impact of poverty on pregnant women.

### 23. REDUCING THE IMPACT: WORKING WITH PREGNANT WOMEN LIVING IN DIFFICULT LIFE SITUATIONS

(also available in French)

This resource manual for service providers who work with pregnant women includes current research, strategies, recommendations, and references to further resources.

English: [http://www.beststart.org/resources/anti\\_poverty/index.html](http://www.beststart.org/resources/anti_poverty/index.html)

French: <http://www.meilleurdepart.org/resources/socio/index.html>

### 24. THE IMPACT OF POVERTY ON PREGNANT WOMEN: A GUIDE FOR PROGRAM MANAGERS

This resource assists program managers in supporting their frontline staff that work with pregnant women living in poverty and adds to the resource "Reducing the Impact: Working with Pregnant Women Living in Difficult Life Situations".

[http://www.beststart.org/resources/anti\\_poverty/index.html](http://www.beststart.org/resources/anti_poverty/index.html)

### 25. SOCIO-ECONOMIC STATUS AND PREGNANCY FACT SHEETS

These fact sheets provide practical tips for service providers on issues related to social economic status and pregnancy including: poverty, pregnancy, and culturally diverse women; helpful ways to work with pregnant women; food access issues; impact of violence on pregnant women; stats and facts about poverty and pregnancy; and poverty, pregnancy, and the determinants of health.

[http://www.beststart.org/resources/anti\\_poverty/index.html](http://www.beststart.org/resources/anti_poverty/index.html)