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

ONTARIO

GOVERNMENT OF ONTARIO DOUBLES ITS FUNDING OF THE STUDENT NUTRITION PROGRAM

The Government of Ontario (2008, May 22) announced that they will be helping more children eat breakfast so they are ready to learn in class. An additional \$32 million dollars will be invested in the student nutrition program across the province over 3 years for the creation of approximately 700 new breakfast programs and the expansion of 300 existing programs in communities with the highest need. The funding also includes one-time funds to help new programs buy items like fridges, stoves, and dishwashers.

[http://ogov.newswire.ca/ontario/GPOE/2008/05/22/c3258.html?lmatch=&lang=\\_e.html](http://ogov.newswire.ca/ontario/GPOE/2008/05/22/c3258.html?lmatch=&lang=_e.html)

CANADA

LATEST PRODUCT RECALLS

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

- Little Tikes Chit 'N Chat toy cell phone: Hinge cover can detach, posing a choking hazard
- Pirates of the Caribbean sleeping bags: Surface paint on zipper pull contains lead
- Tinker Bell wand: Paint on the pearl beads in the flowers contains lead
- Magnetic blocks: Pose a choking hazard
- Lil' Snugglers children's blankets: Satin edge can come loose, posing a strangulation hazard

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

- Mommy's Bliss Nipple Cream: Can be harmful to infants (U.S. Food and Drug Administration)

<http://www.fda.gov/bbs/topics/NEWS/2008/NEW01839.html>

- Foreign toothpaste containing diethylene glycol: may cause nausea, abdominal pain, dizziness, urinary problems, kidney failure, breathing problems, lethargy, convulsions, coma, and even death when ingested

<http://news.gc.ca/web/view/en/index.jsp?articleid=401649>

NEW BRUNSWICK GOVERNMENT TO REGULATE AND FUND MIDWIVES IN 2009

The New Brunswick Government will regulate and fund midwives in the province beginning in 2009 (Canadian Press, 2008, May 28). The legislation will allow midwives with a minimum of a bachelor's degree in midwifery, to order tests, prescribe and administer certain drugs, and perform certain procedures.

<http://www.cbc.ca/cp/health/080528/x052806A.html>

INTERNATIONAL

PAINT CHEMICALS 'MAY HARM SPERM'

This article (BBC News, 2008, May 23) reviews the findings of a UK study that examined more than 2,000 men attending 14 fertility clinics. The researchers questioned 2 groups of men attending fertility clinics (those with sperm motility problems and those without) about their jobs, lifestyles, and potential exposure to chemicals (including glycol ethers widely used in water-based paints). The findings revealed that there was a 250% increase in risk of sperm motility problems among those men exposed to glycol ethers. Study author Dr. Andy Povey notes "our work suggests they are still a workplace hazard and further work is needed to reduce such exposure".

<http://news.bbc.co.uk/2/hi/health/7416405.stm>

## U.S. FOOD AND DRUG ADMINISTRATION (FDA) URGES ASTHMA PATIENTS TO SWITCH TO NEWER INHALERS

The FDA is urging individuals with asthma to switch to new hydrofluoroalkane (HFA)-propelled albuterol inhalers. The old-fashioned asthma inhalers containing chlorofluorocarbons (CFCs) are harmful to the Earth's protective ozone layer and will no longer be available in the U.S. as of December 31, 2008. The FDA is advising patients to talk to their health care providers and notes that the HFA-propelled albuterol inhalers may taste and feel different than the CFC-propelled albuterol inhalers.

<http://www.cbc.ca/cp/health/080530/x053006A.html>

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

### CANADA

#### 2005 ORGANIZED SPORTS PARTICIPATION: CHILDREN IN CANADA

This article (Clark, 2008) examines trends in organized sports participation of children aged 5 to 14, and the important role that the family plays. The findings suggest that participation in organized sports has declined from 57% in 1992 to 51% in 2005, this drop being most pronounced among boys (66% in 1992 to 56% in 2005). The research identified several factors that influence children's participation in sports including: (1) parental involvement in sports, (2) socio-demographic characteristics of the family, and (3) geography. In two-parent families, children's sports participation rates were highest (75%) if both parents were involved in sports themselves (e.g., as participants, coaches, referees, sports administrators, members of sports clubs or organizations, or even as spectators). The rates of participation decreased to 49% when only one parent was involved and to 22% when neither parent was involved in sports. Socio-demographic characteristics of the family was associated with sports participation, with children from households with higher incomes and education levels much more likely to participate in organized sports than those from families with lower incomes and education levels. The research also revealed that children in the largest cities were the least likely to participate in organized sports. By region, children in Atlantic Canada were the most involved in organized sports in 2005 (61%) compared to B.C. with the lowest rates of participation (44%).

Press release: <http://www.statcan.ca/Daily/English/080603/d080603a.htm>

Article: <http://www.statcan.ca/english/freepub/11-008-XIE/2008001/article/10573-en.pdf>

#### 2006 PARTICIPATION AND ACTIVITY LIMITATION SURVEY: CHILDREN WITH DISABILITIES IN CANADA

The Participation and Activity Limitation Survey (PALS) is a national survey that gathers information about adults and children whose daily activities are limited by a physical, mental, or other health-related condition or problem. Statistics Canada (2008, May 27) released information based on 2006 data, highlighting the education experiences of children with disabilities. According to the report, more than 40% of Canadian children with disabilities aged 5 to 14 received some form of special education during the 2005/2006 school year. In fact, a total of 163,730 children with disabilities attended school in 2005/2006. Of this group, 43.1%, (70,600 children) were attending special education classes (62.4% part-time; 37.6% full-time). The survey found that the prevalence of disability among children has increased during the past 5 years from 4.0% in 2001 to 4.6% in 2006 and the rate was higher among boys. The findings also indicate that about one-quarter or 24.3% of children (36,600) with disabilities attending schools, whose parents believed that there was a need for special education, did not in fact receive this type of schooling. Nearly half of the children in this group that did not receive special education had severe or very severe disabilities, and nearly two-thirds had undergone a professional assessment of their educational needs. Nearly half (49.0%) had parents who reported experiencing difficulty obtaining special education services. A total of 90% of children (nearly 62,400) were using one or more educational aids. The majority of children with disabilities had their educational needs met to some degree; however, many did not have the aids that they required at school. Three-quarters of parents (75.3%) reported a lack of funding within the school system as a reason that their child did not

receive the necessary educational aids. Nearly one-half (48.7%) of children aged 5 to 14 with disabilities in Ontario received some form of special education service during the 2005/2006 school year, which was the highest proportion among the provinces and territories.

Press release: <http://www.statcan.ca/Daily/English/080527/d080527a.htm>

Publication: <http://www.statcan.ca/bsolc/english/bsolc?catno=89-628-XWE>

## INTERNATIONAL

### EXPRESSING AND BREASTFEEDING FOR A PREMATURE OR SICK BABY: 50 WOMEN'S EXPERIENCES

The baby charity Bliss (2008) conducted a survey of 500 women whose babies had been in neonatal care in the UK in the last 3 years. The findings indicate that 38% of mothers did not breastfeed despite most of them being aware of the benefits of breast milk and having expressed milk to begin with. A total of 17% of mothers reported that they did not breastfeed because of a lack of support from staff. In fact, 12% noted that nobody showed them how to position and attach their baby to the breast; 34% said they were not helped to have skin-to-skin contact with their babies; only 28% were shown how to hand express; and only 21% had access to portable pumps for cot-side expressing. Bliss reports that the most worrying finding was that 5% of the respondents reported that they felt under pressure from hospital staff to stop breastfeeding and give their baby bottles. Bliss recommends that (1) New mothers should be empowered by all hospital staff to make informed decisions about feeding their premature or sick baby, and supported in the choice to fully breastfeed if that is their wish; (2) There should be adequate equipment and facilities available to support a mother in the decision to provide breast milk for her baby; (3) A member of staff should help every new mother to express by hand as soon as she is able after the birth of her baby, and to support her to express regularly thereafter; (4) Hospitals should have a clear policy on who is responsible for showing mothers to express, helping them make the transition to breastfeeding, and supporting them throughout the process; (5) A baby's discharge plan must be flexible enough to avoid situations where mothers are encouraged to give their babies bottles to speed up the process, when their intention was in fact to breastfeed; and (6) Once a premature or sick baby has gone home from the hospital, the mother must continue to have access to ongoing breastfeeding advice and support from a health professional who understands the particular needs of premature and sick babies.

News release: <http://news.bbc.co.uk/2/hi/health/7392595.stm>

Report findings: [http://www.bliss.org.uk/pdfs/BF\\_survey\\_report\\_low.pdf](http://www.bliss.org.uk/pdfs/BF_survey_report_low.pdf)

### METHADONE MAINTENANCE AND BREASTFEEDING IN THE NEONATAL PERIOD

This study (Jansson et al., 2008) examined a sample of methadone-maintained breastfeeding women and a matched group of formula-feeding women to evaluate the concentrations of methadone in breast milk and in maternal and infant plasma. A total of 8 lactating women, methadone maintained with a dose of 50-105 mg/day, provided blood and breast milk specimens 6 times over a 30-day period after delivery including specimens of foremilk and hindmilk. The 8 matched formula-feeding participants provided blood samples on the same days and infant blood samples were obtained for both groups on day 14. The findings indicate that the concentrations of methadone in breast milk were low (21.0-462.0 ng/mL) and not related to maternal dose. However, there was significant increase in methadone concentrations in breast milk over time. Concentrations of methadone in infant plasma were low (range: 2.2-8.1 ng/mL) in all samples and the researchers did not find any significant effects of breastfeeding on infants' neurobehavioral outcomes. Fewer infants in the breastfed group required pharmacotherapy for neonatal abstinence syndrome, but this was not a statistically significant finding. The authors concluded that the results contribute to the recommendation of breastfeeding for methadone-maintained women.

Abstract: <http://pediatrics.aappublications.org/cgi/content/extract/121/4/869>

### STRATEGIES TO REDUCE THE HARMFUL USE OF ALCOHOL: REPORT ADOPTED AT THE 61<sup>ST</sup> WORLD HEALTH ASSEMBLY

The World Health Organization (WHO) (2008, May 28) reports that the disease burden attributable to the harmful use of alcohol is significant. In many countries public health problems caused by harmful use of

alcohol represent a substantial health, social, and economic burden. As a result, reduction of harmful use of alcohol is becoming a priority area for national, regional, and global levels. WHO (2008, May 28) suggests that alcohol-related harm can be reduced through the implementation of proven alcohol strategies. At the 61<sup>st</sup> World Health Assembly in Geneva, the report “strategies to reduce the harmful use of alcohol” was submitted and a resolution was adopted that calls for the development of a draft global strategy to reduce the harmful use of alcohol. One of the strategies and policy element options to reduce alcohol related harm in the report highlights that “to be effective, strategies and policy element options should address levels, patterns, and context of alcohol consumption through a combination of measures that target the population at large, vulnerable groups, such as young people and pregnant women, affected individuals and particular problems such as drink-driving and alcohol-related violence. Alcohol policies or action plans to reduce alcohol-related harm should take into account several major issues, such as the strength of evidence, cultural sensitivity, adaptation to local needs, and contexts, ensuring a sustainable and intersectoral approach, and provision for adequate monitoring and evaluation” (WHO, p.3).

News release: [http://www.who.int/mediacentre/events/2008/wha61/issues\\_paper3/en/index.html](http://www.who.int/mediacentre/events/2008/wha61/issues_paper3/en/index.html)

Report: [http://www.who.int/gb/ebwha/pdf\\_files/A61/A61\\_13-en.pdf](http://www.who.int/gb/ebwha/pdf_files/A61/A61_13-en.pdf)

#### RESEARCH FROM THE INTERNATIONAL MEETING FOR AUTISM RESEARCH 2008: EXAMINING THE LINK BETWEEN AUTISM AND VACCINATION

This website offers an “Online Abstract Book” of all of the research presented at the International Meeting for Autism Research (2008, May 15-17). Three studies examined the impact of the recommended combined childhood vaccine regimen (measles-mumps-rubella vaccine, 1994-1999) on primates (macaques) using a sample group receiving the vaccine and a control group. The first study (Hewitson et al., 2008) compared early infant cognition and behaviour with amygdala size (brain region vital to emotional arousal and the formation of long-term memories) in macaques receiving vaccines. Macaques were administered the vaccines and primate development, cognition, and social behaviour were assessed for both vaccinated and unvaccinated infants using standardized tests as well as amygdala growth and binding by MRI and PET before and after the administration of the vaccine. The findings indicate that vaccinated animals had significantly neurodevelopmental deficits (e.g., survival reflexes, tests of color discrimination and reversal, learning sets, attenuation of amygdala growth and differences in binding, aberrant social and non-social behaviours) than nonexposed animals. The second study (Wakefield et al., 2008) compared brain stem volume (part of the brain connecting the spinal cord with the hemispheres of the brain that controls involuntary functions) and opioid binding in macaques receiving the vaccines. Macaques were administered vaccines and brainstem volume and opioid binding was measured by MRI and PET. The findings revealed significant differences between exposed and unexposed animals, with delayed acquisition of root, suck, clasp hand, and clasp foot reflexes. The authors concluded that brainstem anomalies were evident in vaccinated animals that may be relevant to some aspects of autism. The third study (Walker & Klein, 2008) evaluated potential alterations in normal growth and development of the gastrointestinal (GI) tract from the vaccine regimen. Infant male macaques were vaccinated and biopsy tissue of the GI tract was collected from the animals at three points in time. The findings revealed that vaccinated animals exhibited progressively severe chronic active inflammation and fewer expressed genes than unexposed animals. The authors concluded that there were many significant differences in the GI tissue gene expression profiles between vaccinated and unvaccinated animals. Overall, the authors of these three studies suggest that “the findings raise important safety issues while providing a potential animal model for examining aspects of causation and disease pathogenesis in acquired neurodevelopmental disorders”.

<http://imfar.confex.com/imfar/2008/webprogram/start.html>

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

WALK4JUSTICE: ABORIGINAL WOMEN WALK FROM B.C. TO OTTAWA

“Walk4Justice”, an initiative by Aboriginal women, will take place between June 21<sup>st</sup> and September 15<sup>th</sup>. The women will walk to Ottawa from B.C. to raise awareness and ask for accountability for the missing and murdered Aboriginal women in Canada.

<http://www.walk4justice.piczo.com/?cr=6>

<http://www.petitiononline.com/glradek/petition.html>

#### SAFE KIDS WEEK: MAY 26 TO JUNE 2

“Safe Kids Week” is part of a national project for Safe Kids Canada, which aims to prevent unintentional injuries to children and youth. This year’s theme is “Safe Roads, Safe Kids” because a new review of child pedestrian research (Safe Kids Canada, 2008) reveals that more child pedestrian injuries take place on residential roads than anywhere else, and the danger is greatly increased as speed increases. In fact, child pedestrian incidents are a leading cause of injury-related death for Canadian children under the age of 14. Hundreds of community events took place across the country to educate drivers and parents about child pedestrian safety. The Safe Kids Canada website provides program updates, resources and tools, and information about public policy and advocacy.

<http://www.sickkids.ca/SKCForPartners/section.asp?s=Safe+Kids+Week+2008&SID=22840>

#### AFTER SCHOOL GRANTS PROGRAM

The Royal Bank of Canada (RBC) is funding after-school programs that offer structured supervised activities in an environment that provides safety, social skills, and self-esteem. The 2007-2008 After-School Grant Recipients can be viewed on the RBC website.

<http://www.rbc.com/community/donations/after-school/index.html>

#### CONSULTATION: NEW LABELS FOR CANADIAN FOODS

The Government of Canada (2008, May 21) announced a plan to modernize the federal guidelines governing the use of “Product of Canada” and “Made in Canada”. The current food labelling guidelines do not clearly reflect the actual Canadian content in foods sold in Canada. Under the proposed new guidelines, when a label says “Product of Canada,” both the contents and processing of that food must be Canadian. When a product label says “Made in Canada”, it means the products are manufactured or processed in Canada but can contain imported ingredients.

<http://news.gc.ca/web/view/en/index.jsp?articleid=399939>

#### ----- 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

##### THE STRUGGLE FOR NON-STATUS RIGHTS: A CROSS-SECTORAL INITIATIVE ON WOMEN WITH PRECARIOUS IMMIGRATION STATUS IN THE SHELTER SYSTEM

June 11, 2008: Toronto, ON

Hosted by: The Rights of Non-Status Women Network

<http://www.beststart.org/events/otherevents.php>

##### HEALTH PROMOTING HOSPITALS: INTEGRATING HEALTH PROMOTION INTO HOSPITALS AND HEALTH SERVICES

June 12-13, 2008: Toronto, ON

Hosted by: Ontario Hospital Association

[http://oha.ca/Client/OHA/OHA\\_LP4W\\_LND\\_WebStation.nsf/050afa7e7ae5094485256f190071afc3/48124f4fb71fe31b8525741a00667de8!OpenDocument&Date=2008-06-12](http://oha.ca/Client/OHA/OHA_LP4W_LND_WebStation.nsf/050afa7e7ae5094485256f190071afc3/48124f4fb71fe31b8525741a00667de8!OpenDocument&Date=2008-06-12)

#### ONTARIO CHILD CARE RALLY

June 14, 2008: Whitby, ON (free buses from various Ontario cities)

Hosted by: Ontario Coalition for Better Child Care

[http://www.childcareontario.org/action/rally\\_jun08/index.html](http://www.childcareontario.org/action/rally_jun08/index.html)

#### CANADIAN NURSES ASSOCIATION (CNA) ANNUAL MEETING AND BIENNIAL CONVENTION

June 16-18, 2008: Ottawa, ON

Hosted by: CNA

[http://www.cna-nurses.ca/CNA/news/events/convention/default\\_e.aspx](http://www.cna-nurses.ca/CNA/news/events/convention/default_e.aspx)

#### SEXUAL HEALTH TRAINING FOR SHELTER AND GROUP HOME WORKERS

June 20, 2008: Toronto, ON

Facilitated by: Toronto Public Health, Planned Parenthood Toronto, Eva's Phoenix, and YouthLink

<http://www.beststart.org/events/otherevents.php>

#### "BELIEVE IN OUR YOUTH" INSTRUCTOR TRAINING – LEVEL 1: FOR FIRST NATIONS, MÉTIS, INUIT, AND URBAN ABORIGINAL ORGANIZATIONS

June 23-25, 2008: Toronto, ON

Hosted by: Believe In Our Youth

<http://www.believeinyouryouth.com/wellnesseminarinstructortraining.html>

#### CANADA

##### ALBERTA BREASTFEEDING COMMITTEE: ANNUAL GENERAL MEETING

June 12, 2008: Edmonton, AB

Hosted by: Alberta Breastfeeding Committee

<http://www.breastfeedingalberta.ca/conferences.htm>

##### ANNUAL MARCH FOR WOMEN'S HOUSING AND MARCH AGAINST POVERTY

June 14, 2008: Vancouver, BC

Hosted by: Downtown Eastside Women Centre Power of Women Group

[www.povnet.org/node/2737](http://www.povnet.org/node/2737)

#### INTERNATIONAL

##### THE CENTRE FOR EQUITY AND INNOVATION IN EARLY CHILDHOOD'S 8<sup>TH</sup> INTERNATIONAL CONFERENCE: YOUNG CITIZEN(S), NEW CITIZENSHIP(S)

November 13-15, 2008: Melbourne, Australia

Hosted by: The Centre for Equity and Innovation in Early Childhood

<http://www.edfac.unimelb.edu.au/ceiec/conferences/conf08/index.html>

#### ----- V. RESOURCES -----

##### FORUMS BASED ON "UNNATURAL CAUSES": FORUM #1 ABOUT NEIGHBOURHOODS, COMMUNITY ORGANIZATIONS, LABOUR, FAMILY, AND EARLY CHILDHOOD

Questions were generated from the public about racial and socioeconomic inequities in health following the broadcast of "Unnatural Causes". The responses by the experts were divided into six forums: (1) Healthy Communities, which includes discussions about neighbourhoods, community organizations, labour, family, and early childhood; (2) Genetics, Race, and Disease, which explores how biology and genetics impact health and our ideas about race; (3) Myths about Health Inequities, which includes discussions about diet, universal health care, the economic costs of poor health, the "healthy immigrant

effect," and the difference between health disparities and health inequities; (4) Divided We Fall, which covers racism, hope, diabetes, infant mortality and industry-driven health care; and (5) Your Position in Society, which addresses chronic stress, the wealth-health gradient, unemployment, and why women live longer than men. The organizers suggest that individuals explore multiple forums for different perspectives on the issues.

[http://www.unnaturalcauses.org/ask\\_the\\_experts.php](http://www.unnaturalcauses.org/ask_the_experts.php)

#### NEW WEBSITE: POVERTY WATCH ONTARIO

Poverty Watch Ontario is a joint initiative of the Social Planning Network of Ontario and Ontario CAMPAIGN 2000, which will attempt to monitor and inform on cross-Ontario activity on the poverty reduction agenda. The website will also maintain a log of community events on poverty reduction across the province and provide opportunities for further discussion of the issues and policy approaches raised at these events.

<http://povertywatchontario.ca/>

#### NEW BOOK - "DAILY STRUGGLES: THE DEEPENING RACIALIZATION AND FEMINIZATION OF POVERTY IN CANADA"

This book (Wallis & Kwok, 2008) provides a critical perspective on poverty by highlighting gender and race analyses simultaneously. This book connects human rights, political economy perspectives, and citizenship issues to other areas of social exclusion, such as class, sexuality, and disability. Part 1 includes theoretical frameworks that examine the racialization processes at work in Canada, with special attention to the consequences relevant to gender. Part 2 explores the economic consequences of race and gender while Part 3 looks at how poverty, race, and gender are criminalized. Parts 4 and 5 provide information about the additional consequences of the racialized and gendered nature of poverty—consequences that have a fundamental impact on quality of life.

<https://www.cspi.org/motion.asp?siteid=100366&lqid=1&menuid=5376&prodid=119322&cat=9869>

#### WASHINGTON LEARNING SYSTEMS

This website offers information about evidence-based programs that promote early literacy, language, cognitive, and social development. Resources can be ordered for a fee such as: (1) a program for training preschool teachers and parents to promote early language and literacy, including video programs and a resource guide; and (2) a mediated learning preschool curriculum with more than 200 full-days of activities, designed to support inclusion of children with disabilities. Some of the resources are available in English, Spanish, Vietnamese, and Mandarin.

<http://www.wlearning.com/index.html>

#### ATTACHMENT: CULTURALLY RESPONSIVE RESOURCES

This website and a print toolkit were developed as part of the project "Attachment across Cultures". These concrete resources are designed to help service providers in supporting parents to maintain effective attachment practices. Topic areas include: (1) attachment across cultures, (2) beliefs, values, and practices, (3) impact of migration, and (4) maintaining effective practices.

Resources: <http://www.attachmentcrosscultures.org/resource/index.html>

Toolkit: [http://www.attachmentcrosscultures.org/about/toolkit\\_eng.pdf](http://www.attachmentcrosscultures.org/about/toolkit_eng.pdf)

#### DADDY I NEED YOU: A FATHER'S GUIDE TO EARLY CHILDHOOD BRAIN DEVELOPMENT

This resource (Father Involvement Initiative – Ontario Network, 2008) aims to help father make sense of early childhood brain development and help them to understand the role they can play in supporting their child's development. The booklet provides information about (1) the baby's brain, (2) the father-child connection, (3) the importance of father involvement in daily care, (4) how fathers can support their child's emotional development, and (5) how fathers can help to build brains through play.

[http://www.cfii.ca/fiion/booklets/booklet\\_6.pdf](http://www.cfii.ca/fiion/booklets/booklet_6.pdf)