CONCLUSIONS

The health practices of Peel parents of children aged 0 to 2 years are generally good. Most mothers are well-connected to services and seem to be aware of appropriate risk factors in the preconception period or during pregnancy. They also report good parenting practices as their children age. More focus needs to be placed on parents who are single, young, new immigrants or of low income in order to ensure that their children are given the resources and opportunities to develop to their fullest potential.

RECOMMENDATIONS

With respect to the administration of surveys to this population in the future, it would be beneficial to use selection strategies other than basing responses on the youngest child. For example, choosing the child with the date of birth closest to the date of call allows children of mixed ages to be included in the responses. This is important for a variety of questions, such as those relating to injuries, playground use, bicycle helmet use, disciplinary styles and dental health practices.

Peel Health should develop further communication and health promotion strategies for health issues such as folic acid use and alcohol abstinence to be targeted to women prior to and during pregnancy. Although these strategies should be aimed at all women of child-bearing years, there is some evidence to suggest a need to focus messages on young women. This is especially evident for folic acid supplementation. In addition, the issue of social drinking and long-term effects of alcohol on the child should be incorporated into program planning and communications.

Dental health messages for parents of young children need to include information about the consequences of children taking bottles containing sugary liquids to bed, the need to brush or supervise the brushing of children’s teeth, and when to take the child for their first dentist visit.

There is a need for continued education and promotion of appropriate use of car seats, particularly in terms of rear-facing versus forward-facing seats.

Families need to know where to access food support programs and these programs need to be run in such a way that those using them feel comfortable and not stigmatized.

There is also a need for the development and implementation of strategies that address barriers to reading to infants at an early age, particularly among mothers.
who are recent immigrants. Reading in any language, along with the physical contact associated with this action, has tremendous benefits to the child and needs to be encouraged.

Peel Health needs to target new Canadians with public health messages on pre-school aged children and health through the Newcomer Reception Centres, LINC classes and ethno-cultural and immigrant resettlement agencies.

It is important to include family members and child care providers as a target audience for key health messages relevant to young children, as the majority of mothers reported that their child was looked after by someone other than themselves for more than 30 hours per week.

The use of the Internet and walk-in clinics should also be considered when planning health promotion strategies, as the majority of mothers indicated having taking their child to a walk-in clinic or using the Internet.

Key messages on some of the problem issues such as folic acid use, dental health practices, bicycle helmet use, etc. need to be developed and disseminated through such communication vehicles as Health-Line Peel and Peel Health Call Centres. These messages play over the telephone as clients are waiting in the queue to have their telephone call answered.

Peel Health needs to develop strategies which involve collaborating with workplaces in order to distribute child health information to parents. Focusing on places of work in which there are higher proportions of young parents or young people who are thinking about pregnancy may be effective in this regard.