Alberta Fetal Alcohol Spectrum Disorder (FASD) Cross-Ministry Committee
2009-2010 Annual Report
EXECUTIVE SUMMARY

The Cross-Ministry Committee on FASD (FASD-CMC) developed Alberta’s FASD 10-Year Strategic Plan (the plan) to acknowledge that the provision of supports and services to individuals with Fetal Alcohol Spectrum Disorder (FASD) and their caregivers is a shared responsibility. FASD spans multiple Ministry mandates, across the lifespan. Strategies identified in the plan work to strengthen the capacity and self-reliance of communities to deliver services that support the well-being of families affected by FASD. The plan is designed to provide services in the areas of awareness and prevention, assessment and diagnosis and supports for individuals and caregivers. The plan also outlines activities in the areas of research, strategic planning and training and education in order to provide the infrastructure necessary to provide appropriate services. All services and activities are built on a foundation of stakeholder engagement.

In 2007/2008, $4 million in funding was secured to begin implementation of the Plan. This funding was used to develop the FASD Service Network Program (network program) across the province. In 2008/2009 and 2009/2010 (years two and three of implementation), $16.5 million was allocated annually to further support implementation of the plan. In addition to provincial FASD initiatives and programs, partnering Ministries have used proportioned funding received under the plan to implement a number of Ministry-specific FASD initiatives.

Key accomplishments of the FASD-CMC include:

- The establishment of 12 functioning FASD Service Networks operating across the province that provide mentoring services (prevention), assessment and diagnosis and direct supports and services for individuals affected by FASD and their caregivers across the lifespan.
- Increased access to FASD assessment and diagnosis services for adults and children through the development of multidisciplinary teams. In the last two years the number of clinics providing assessment and diagnostic services in Alberta has increased from 11 to 20 with an additional 8 intended to become operational in 2010/2011.
- Increased FASD prevention through expansion of the Parent-Child Assistance Program (PCAP) from 11 to 21 programs in Alberta. PCAP is an intensive relationship-based support for women at risk of giving birth to children with FASD.
- Increased access to services through the FASD Service Network Program. For example, between Quarter 3 and 4 of 2009/2010, the number of adults who accessed services rose by 18%, from 153 to 181. (Note: Full Network reporting data was not required until July 2009).
The Fetal Alcohol Spectrum Disorder Cross-Ministry Committee (FASD-CMC) Annual Report 2009-2010 outlines the many ways the FASD initiative is making a difference in the lives of Albertans affected by FASD across their lifespan.

**BACKGROUND**

FASD describes a cluster of birth defects caused by prenatal exposure to alcohol. Difficulties experienced by individuals affected with FASD include health issues, speech and language problems, learning difficulties and behavioural problems. Since 1996, various provincial government departments and agencies have been actively involved in the prevention of alcohol-related birth defects and support of individuals affected by prenatal exposure to alcohol.

In 2003, the Alberta FASD Cross-Ministry Committee (FASD-CMC) was formed with the mandate to act as the primary vehicle to support a collaborative approach to plan and deliver provincial government programs and services associated with FASD. The FASD-CMC developed a 10-Year FASD Strategic Plan (the plan) that was signed by the 10 partnering Ministers and approved by the Standing Policy Committee on Health and Community Living in September 2006.

The plan was designed as a direction-setting document to provide a broad framework for the co-ordination, planning and delivery of relevant FASD services across the lifespan throughout the province in the areas of:

- **Awareness and prevention**: services that educate and inform about the dangers of drinking alcohol while pregnant, the effects of FASD and increase overall awareness about healthy pregnancy. Services are for both the general population and at-risk populations.

- **Assessment and diagnosis**: services including medical, cognitive and behavioural screening and referrals by a physician and/or multidisciplinary diagnostic team. Assessment and diagnosis services may or may not lead to a confirmed diagnosis under the spectrum of FASD, which includes full fetal alcohol spectrum (FAS), partial FAS, alcohol-related neurodevelopmental disorder (ARND) and alcohol-related birth defects (ARBD).

- **Supports for individuals and caregivers**: support programs and services that promote the development and well-being of individuals affected by FASD and caregivers. These services help keep them safe and protected, help them to reach their potential and encourage healthy communities.
In addition to the three service pillars, the plan identifies action in the areas of:

- **Research and evaluation**: basic scientific and applied research leading to increased understanding of Fetal Alcohol Spectrum Disorder (FASD), its epidemiology, best practices and the development of standards in the service areas identified above.

- **Training and education**: technology and programs to support formal education, pre-service and in-service training programs.

- **Strategic planning**: the range of activities performed by government that are aimed at recommending priority areas for government policy and action.

- **Stakeholder engagement**: a wide range of activities that support information-sharing among government, practitioners and the FASD client population to facilitate informed and balanced decisions regarding government priorities and actions.

Initial operational funding to support the implementation of the plan was received in 2007 and resulted in the development of the FASD Service Network Program (network program) and the establishment of seven FASD Service Networks. These networks comprised of government and community agencies, have been tasked with developing or expanding services to fill existing gaps across the lifespan and align with the strategic directions set out in the service delivery pillars of the plan. The network program has been in operation since May 2007 under the leadership of the FASD-CMC and facilitated by the Provincial FASD Service Network Program Coordinator. Operational funding in 2008/2009 enabled the expansion of the network program to 12 networks and the implementation of provincial and Ministry-specific initiatives.

In 2009/2010, $16.5 million was designated to implement the plan. This operational funding was used to support the network program and to continue and expand initiatives (both provincially and within each Ministry) that support the plan’s strategic pillars.
**FASD Service Network Program**

Alberta’s FASD Service Network program consists of 12 individual service networks—groups of government and community agencies—that co-ordinate the delivery of FASD services across Alberta in alignment with the service delivery pillars of the plan. The networks provide community-based solutions and a regional single point of access to FASD programs and services. They are recognized for their diversity and are in varying stages of development. All of the networks engage community partners to provide a continuum of co-ordinated services to help meet the needs of people living with FASD and their caregivers across the lifespan.

The 2009/2010 fiscal year was the second year of development for the original seven networks and the first year for the five new networks that were formed in 2008/2009. Forming community partnerships and building capacity were the main points of focus for the networks, particularly for the five new ones. Specifically, a needs assessment was conducted, which informed the revision of the FASD Service Network Program Guidelines. Issues related to funding, governance and conflict resolution were addressed in the revised guidelines. Networks engaged community partners to learn and report on gaps in service, and network leadership teams conducted strategic planning to enhance existing services and develop new services. In addition, a SharePoint Site and protocol was developed and implemented by the networks (Communication Working Group) to facilitate and improve inter-network communication.

Specific services offered in 2009/2010 under each service delivery pillar varied in each network but included:

**Awareness and Prevention**

- Enhanced support and mentoring programs for at-risk women are provided through the Parent-Child Assistance Program (PCAP); all networks ensure a PCAP model of service is available in their catchment area. This program provides support to women of child-bearing age who are at high risk of giving birth to children with FASD. The purpose of the program is to prevent FASD births.

- PCAP promotes healthy pregnancy, stable family lives and helps to ensure children are in safe homes. Trained and supervised case managers provide home visits and intervention services including: advocacy for families in need of intervention, assistance for clients in obtaining birth control, help with accessing housing and employment and assistance for clients in obtaining FASD assessment and diagnosis.
**Assessment and Diagnosis**

- Networks are required to use the services of a multidisciplinary team for diagnosis and assessment and all networks use the Canadian Guidelines for Diagnosis for screening and assessment.

**Supports for Individuals and Caregivers**

- Supports provided by the networks include programs and services which promote the development and well-being of individuals with FASD and their caregivers, help keep them safe and protected and promote healthy communities. This pillar of service delivery is based on individualized and diverse services.

- Supports may include one or more of the following intervention supports: co-ordination, advocacy, mentoring, in-home and outreach support, life skills programs and support groups.

- Emerging practices in this area of support include an emphasis on community capacity building, using a strength-based approach, tailoring programs to match interests and abilities of individuals, incorporating others (caregivers, communities) into program plans, individualized support and intervention plans and collaborating to support children, youth and adults and their support networks.

The total number of individuals served by the network program in 2009/2010 was 1,812, however individuals may have accessed services in more than one category. Approximately 144 (8%) individuals accessed prevention services, 413 (21%) accessed assessment and diagnostic services and 1,399 (72%) accessed supports for individuals and/or caregivers.

With funding through the FASD-CMC, the networks have developed a co-ordinated approach to the delivery of supports and services. Through the networks, individuals and families have an organized, central resource that can assist them in accessing services and programs and give them new hope for the future.

For more detailed information, please see the FASD Service Network Program 2009/2010 Annual Report.
INITIATIVES IN SUPPORT OF THE STRATEGIC PLAN

This section defines each of the strategies and provides details on the programs, services and supports that are under development or being continued by the FASD-CMC to help improve the quality of life for Albertans affected by FASD.

AWARENESS AND PREVENTION

Awareness and Prevention services are those that educate and inform Albertans about the risks of drinking alcohol while pregnant, the effects of FASD and increase overall awareness about healthy pregnancy. These range from broad information to the general public about the risks of substance abuse to specific strategies and services targeted to at-risk individuals such as targeted and indicated prevention strategies provided through the network program. They are developed to be culturally-appropriate for Aboriginal and other communities. These services are categorized into the following areas:

- Information
- Universal Prevention
- Targeted Prevention
- Indicated Prevention and Treatment

Initiatives Underway in Support of this Strategic Pillar

Parent-Child Assistance Program
Alberta Children and Youth Services

A home-visitation program for mothers at high-risk of abusing alcohol and drugs, the Parent-Child Assistance Program (PCAP) aims to prevent future births of alcohol and drug-exposed children, help mothers maintain healthy family lives and ensure that children are in safe and stable homes. Trained and supervised case managers provide home visits and intervention services including: advocacy for families in need of intervention, assistance for clients in obtaining birth control, help with accessing housing and employment and assistance for clients in obtaining FASD assessment and diagnosis.

The PCAP program is unique in terms of the length of the program (three-year mentorship) and the level of commitment (a woman is never asked to leave the program). Within the last year, the number of PCAP programs in operation in Alberta has increased from 11 to 21 and all networks use the PCAP model to support at-risk women. Alberta-based PCAP programs currently have the capacity to serve approximately 500 women.
Generating Awareness/Skills Development in Corrections
*Alberta Solicitor General and Public Security*

Solicitor General and Public Security (SGPS) has undertaken several initiatives to increase assessment capacity, increase awareness of FASD and incorporate behaviour and case management training for supervisors, sheriffs, probation officers and front-line staff in adult and young offender correctional centres and attendance centres. Two FASD program coordinators co-ordinate FASD initiatives and distribute resource materials for the Correctional Services Division and the Sheriffs Branch of SGPS. These initiatives include co-ordinating FASD experts in case management for high-risk young offenders, providing seminars incorporating practical skills for offender management and sharing of first-hand accounts of the challenges faced by FASD-impacted individuals for SGPS staff, partners and stakeholders.

**ASSESSMENT AND DIAGNOSIS**

“Assessment and diagnostic services include medical, cognitive, behavioural, communication, adaptive and executive functioning information provided by a multi-disciplinary team trained in the current best practice model. Referrals to the team require the history of prenatal alcohol exposure and areas of suspected dysfunction.”
- Dr. Gail Andrew, Glenrose Rehabilitation Hospital

Assessment and diagnosis services may or may not lead to a confirmed diagnosis of full Fetal Alcohol Syndrome (FAS), partial Fetal Alcohol Syndrome (pFAS), alcohol-related neurodevelopmental disorder (ARND) and alcohol-related birth defects (ARBD).

**Initiatives Underway in Support of this Strategic Pillar**

**Adult Assessment and Diagnosis Demonstration Project**
*Alberta Health and Wellness*

Assessment and diagnosis of adults with FASD can be a challenge, as it requires confirmation of prenatal alcohol exposure beyond evidence of organic brain damage. In addition to reviewing birth and family records, reports from reliable family historians may need to be considered in the diagnosis of FASD. Current Canadian guidelines for FASD diagnosis were generated from a child/youth perspective and there are no current, widely-accepted guidelines for adult assessment and diagnosis.

The Adult Assessment and Diagnosis Demonstration Project includes developing and evaluating a diagnostic model that is appropriate for adults with suspected FASD, linking individuals to appropriate community services through the FASD Service Networks and developing a training module for implementing the diagnostic model in both rural and urban settings. In addition, the project aims to provide recommendations for the development of guidelines for adult diagnosis.
Development of FASD Clinical Capacity
*Alberta Health and Wellness*

The number of active FASD assessment and diagnostic clinics in Alberta increased from 11 in November 2008 to 20 in late 2009, with at least eight additional clinics under development. Models for the diagnostic clinics are diverse and have been very creative in providing this service to individuals across the province. The models range from hospital-based clinics, private and traveling clinics and clinics specializing in forensic clients.

**SUPPORTS FOR INDIVIDUALS AND CAREGIVERS**

This service category addresses the needs of individuals with FASD and their informal and unpaid support networks. This support category does not include formal, paid caregivers. Programs and services in the community aimed at enabling individuals affected by FASD to reach their potential and supports and assistance to families and caregivers of individuals affected by FASD are included. Consideration is required to ensure supports for individuals and caregivers are inclusive of the needs of Aboriginal, cultural and rural groups and available to clients and families across the lifespan.

**Initiatives Underway in Support of this Strategic Pillar**

**Service Co-ordination and Mentorship for Adults with FASD**
*Alberta Seniors and Community Supports*

Seniors and Community Supports (SCS) has contracted 12 community agencies to provide service co-ordination and mentorship to adults with FASD, including adults and their families. Through co-ordinated supports and mentorship, participants have been helped to make positive life choices in addressing legal, financial, medical, housing and employment concerns. Support staff provide practical teaching and develop structure to help adults with planning and problem-solving; managing their time and money; and anticipating outcomes or behaviour consequences. Demands on costly services like the court systems, correctional facilities, hospitals and mental health services are reduced when the social problems and secondary disabilities commonly experienced by adults with FASD are managed.

Services are available to adults with FASD across the province in nine of the 12 FASD Service Networks. Contracts have been finalized for the delivery of services to adults with FASD in the remaining three networks to commence early in 2010/2011. In addition, SCS has initiated a project focused on defining common and best practices for supporting adults with FASD. Over the next two years, four agencies will consult with the network program to share experiences, increase understanding and identify best practices and strategies to support adults with FASD.
Supports through Corrections
Alberta Solicitor General and Public Security

Correctional Services Division staff members participate at FASD Service Network meetings in many Alberta communities and a FASD Justice Support Project for Youth provides assessment and case-conferencing in Edmonton. In correctional centres, two pilot programs - one for Aboriginal female offenders impacted by FASD and the other for male offenders impacted by FASD, address needs through psychological support, intensive workshops and transition worker follow up. A life skills program for adult male offenders builds on existing programming by taking into account the special learning needs often associated with individuals affected by FASD.

Employment Supports for People Affected by FASD (Pilot Project – Medicine Hat)
Alberta Employment and Immigration

This project assists individuals with FASD in obtaining and maintaining employment by developing employability, life management and coping skills and employment maintenance skills through job coaching and other supports. The purpose is to re-examine the traditional model of vocational support to meet the employability needs of individuals affected by FASD and develop an approach that will lead to future employment. The follow up component of the project will be used to evaluate the need for ongoing employment-specific support to individuals living with FASD. This pilot will provide a range of employment-related supports to individuals who are 18 years of age or older, demonstrate characteristics of FASD and already have life supports in place.

Employment Supports and Services (Pilot Project – Cold Lake)
Alberta Employment and Immigration

This pilot seeks to develop employment supports and services for individuals affected by FASD or suspected of living with FASD. The pilot focuses on the following three areas:

- Helping youth transition to adult supports through case management by supporting families to develop a transition plan, identifying possibilities for individuals and providing access to services available to meet the needs of that youth;
- Providing awareness and training support to the area by working with community, government, social development departments and agencies, four Métis Settlements and seven First Nations communities; and
- Developing and producing free resources and tools to assist employment counselors and support agencies in their work with individuals with FASD.

FASD: Supporting Adults to Gain and Maintain Employment
Employment and Immigration

This training program has been developed to enable Employment and Immigration professional staff and their delivery partners to work more effectively with clients
affected by FASD. Six workshops were offered during 2009/2010, with 56 people trained, including 24 Employment and Immigration staff and 32 Aboriginal delivery partners. Areas covered in this two-day workshop include:

- Characteristics associated with FASD;
- How the characteristics impact the functioning and behaviour of adults;
- How to develop helpful and supportive relationships with adults affected by FASD; and
- Accommodations and supports needed by people affected by FASD to find success in employment.

In addition, two videoconference sessions were held: FASD – Enhancing Employability in February 2010 (100 participants) and FASD – Employability Strategies in March 2010 (80 participants).

**First Nations and Inuit Supports**

*First Nations and Inuit Health, Alberta Region (Health Canada)*

First Nations and Inuit Health, Alberta Region focuses its FASD-related activities on four primary objectives which include: early identification, assessment and diagnosis; FASD-related education and training; supports for parents and families of children affected by FASD; and targeted programming for populations at risk.

Activities related to these objectives are implemented in communities and include an on-reserve mentorship model based on best practice evidence offered in seven Alberta sites: Enoch Cree Nation, Ermineskin Cree Nation, O’Chiese First Nation, Saddle Lake First Nation, Samson Cree Nation, Blood Tribe and Tsuu T’ina Nation.

**Wellness, Resiliency and Partnerships (WRaP) Coaching Demonstration Project**

*Alberta Education*

The goal of this project is to identify innovative and effective supports for increasing school success for junior and senior high students with FASD in 10 selected school sites through services provided by five on-site WRaP coaches. Coaching activities at each school include:

- goal-setting and information coaching with individuals and small groups of students in the areas of wellness, personal resiliency and fostering community partnerships;
- providing support, training and innovative strategies to support the students during less-structured parts of the school day (such as getting to school on time, managing breaks and lunch hours);
- supporting students participating in school activities such as field trips, homework clubs, noon-hour and afterschool clubs and activities and special events;
- sharing information, research and strategies with school staff;
• supporting families and caregivers in their efforts to get their children to school and support their children’s academic and social success; and
• collaborating with school staff, FASD Service Networks and other community partners to build a circle of support for participating students and school staff.

Participating school jurisdictions for 2009/2010 included: Northern Lights, Pembina Hills, St. Albert Catholic, Elk Island Public and Edmonton Public. Most projects began August 1, 2009. This project is in collaboration with Edmonton Regional Educational Consulting Services, who provided support to participating school principals and used tele-collaborative technologies to provide ongoing professional development and support to WRaP coaches.

Supports through the Public Health Agency of Canada

The Public Health Agency of Canada (PHAC) Alberta/NWT regional office is an active adhoc member of the FASD-CMC and works in collaboration with other members to advance prevention of FASD and support for people and communities dealing with FASD via services, assessment and care. The intergovernmental approach to the FASD portfolio enables a collaborative approach on regional and national initiatives and activities. PHAC works collaboratively with the province to build direct connections among the FASD Service Networks and PHAC-funded programs, including the Community Action Program for Children (CAPC), the Canada Prenatal Nutrition Program (CPNP) and Aboriginal Head Start in Urban and Northern Communities. These projects have provided opportunities to more effectively reach vulnerable members of communities who are at risk or affected by FASD. Many PHAC-funded programs actively support the provincial FASD strategy and PHAC will continue to support enhanced partnership opportunities for programs through these networks.

Building on the long-standing partnerships between federal and provincial counterparts, PHAC is an active member of various working groups in Alberta on FASD, including the planning committee for Alberta FASD conferences, the Alberta Videoconferencing Advisory Committee and the working groups for training on the three pillars outlined in the 10-Year FASD Strategic Plan (including the supports and interventions council). Through these roles, PHAC has provided a key representative and funding through the PHAC-FASD National Strategic Projects Fund, a Memorandum of Agreement with Alberta Children and Youth Services to support the Alberta FASD conference and contract support towards bringing together members of the FASD Service Networks and the CAPC/CPNP Coalition in the Alberta Region.
**TRAINING AND EDUCATION**

Training and education initiatives consist of formal education offered through post-secondary institutions and pre-service and in-service training programs, typically targeted at program and service providers (including health, medical and human services professionals) and/or community groups. It is particularly important that training and education services be culturally appropriate for Aboriginal and other populations.

**Initiatives Underway in Support of this Strategic Pillar**

**FASD Videoconference Learning Series**  
*Alberta Children and Youth Services*

The FASD Videoconference Learning Series is delivered digitally to communities across the province to increase both community and individual capacity to support people living with FASD and their caregivers across the lifespan. The series is designed for specific target audiences, including: parents and caregivers, Government of Alberta staff, community agencies, justice, educators, researchers and allied health professionals including physicians. In 2009/2010, 17 sessions were held on a variety of topics such as Internet safety, employment issues, information for probation officers, and parent-teacher relationships, with well over 150 participants in some sessions. Sessions are professionally filmed and posted online at the FASD-CMC website (www.fasd-cmc.alberta.ca) to enhance accessibility for people unable to attend the scheduled sessions. The website where the sessions are posted had nearly 5,500 visits between March and September 2009.

**Development of Leading Practices in FASD: Targeted and Indicated Prevention**  
*Alberta Children and Youth Services*

The Alberta Parent-Child Assistance Program (PCAP) Council is linked to the FASD-CMC and was organized in 2009 to provide support to all PCAP programs in the province, to provide policy recommendations to government regarding the FASD targeted and indicated prevention programming stream. Support from the Council for programs and services can include training, program standards, data resources and collection, program development and development of data to base future program funding. The development of a formalized data collection tool for use by all programs as well as guidelines on training or program development are tasks being addressed by the Council for the benefit of the programs and government.

**Development of Leading Practices in FASD: Targeted Assessment and Diagnosis**  
*Alberta Health and Wellness*

This initiative is piloting a data collection tool in all Alberta clinics. This project supports consistency of practice, regardless of the clinic model used and ensures the assessment
process fully informs subsequent service delivery tailored to that individual’s needs. This pilot will also form the basis for further quality improvement in clinics and provide key facts to FASD-CMC and the network program in planning better service delivery. Alberta is a leader in the field of diagnosis and assessment for those prenatally exposed to alcohol and thus, will be the first to address the data collection needed in Canada.

Development of Leading Practices in FASD: Targeted Supports for Individuals and Caregivers
Alberta Seniors and Community Supports

Case management training that built a leading practices workshop held in 2008/2009 was held for staff from the network program in September. The focus for this training was on how to bring all the key players to the case management table when developing and implementing a service and support plan for an individual living with FASD. Future focus will be on developing skill sets for supervisors and knowledge to better support front-line service providers. Service providers working with individuals with FASD and their families have limited information about FASD best practices as a collective group—a council on supports and services will be working to bring providers together to address common strengths and challenges.

Promising Practices, Promising Futures: Alberta FASD Conference 2010
Alberta Children and Youth Services

The 2010 Alberta FASD Conference, held February 8-9, 2010 in Calgary, focused on specific FASD topics based on the strategic pillars of the FASD 10-Year Strategic Plan. The topics included: education and training; prevention and awareness; community capacity and collaboration; diagnosis and assessment; research and evaluation; supports for individuals and caregivers; and innovative practices. The 2010 conference also included a special focus on caregiver well-being. The conference was attended by more than 600 people, all of whom live or work with individuals affected by FASD. Conference evaluation data indicated it was a very successful learning opportunity, with 97 per cent of evaluation respondents rating their overall conference experience as “excellent” or “good”.

Institute of Health Economics (IHE) Consensus Development Conference on FASD:
Across the Lifespan
Alberta Children and Youth Services

In partnership with the Institute of Health Economics, the FASD-CMC sponsored the Consensus Development Conference on FASD: Across the Lifespan in Edmonton from October 7-9, 2009. Former Deputy Prime Minister Anne McLellan was the Jury Chair and Dr. Gail Andrew was the Scientific Chair for the conference. The outcome of the conference was the development of a consensus statement which made recommendations for future policy direction by government to address FASD.
The FASD-CMC is working in collaboration with the Canada Northwest FASD Partnership and federal departments to develop responses to the recommendations.

**Development of e-Learning Modules**

*Alberta Education*

A number of e-Learning modules to support school staff working with students with FASD are being developed, specifically in the area of supporting positive behaviour. These modules include short video clips, case examples, visual diagrams, interactive activities and reflective questions.

This project is a collaboration with Family Support for Children with Disabilities (Alberta Children and Youth Services) and is being co-ordinated by the Department of Social Work and Disabilities Studies at Mount Royal University. These modules will be part of a larger e-learning website, Positive Behaviour Supports for Children (www.pbsc.info), which is available to communities, schools and families across Alberta. The site will be expanded with additional modules, including those related specifically to FASD. The first phase of the site is targeted for community aides and school staff. A second phase will include learning modules for parents and caregivers.

**FASD Education and Training**

*Alberta Advanced Education and Technology*

Advanced Education and Technology (AET) provides funding to post-secondary institutions to offer programming in areas such as early childhood development, teacher education, special needs educational services and community health that include course work aimed at educating and training students on various aspects of FASD. This includes caregivers and professionals who may interact on a daily basis with individuals affected by FASD.

While AET supports the inclusion of FASD courses or modules within courses in such programming areas, the development of curriculum is an institutional responsibility. Alberta’s post-secondary institutions are also involved in valuable research associated with FASD. AET also supports community adult learning councils and community literacy organizations to provide adult literacy, family literacy, English language learning and other adult learning programs and services that are accessed by individuals affected by FASD.

**Building an Educated Workforce**

*Alberta Employment and Immigration with Lakeland FASD Service Network*

Employment and Immigration is working with the Lakeland FASD Service Network to encourage the local college to develop and deliver a post-diploma program on FASD in order to build a strong work force that will be better equipped to serve individuals with FASD.
**STRATEGIC PLANNING**

Strategic planning initiatives include activities performed by government that are aimed at recommending priority areas for government policy and action.

*Initiatives Underway in Support of this Strategic Pillar*

Strategic planning is the foundation for all FASD initiatives, programs, services and supports offered within the community. Although some Ministries are not directly responsible for developing and implementing FASD initiatives, all Ministries represented on the FASD-CMC contribute to the overall FASD-CMC outcomes through strategic planning. In addition, the general work of some Ministries may serve Albertans who are affected by FASD, whether the programs are targeted specifically to this audience or not.

**RESEARCH AND EVALUATION**

The research and evaluation pillar refers to basic scientific and applied research leading to increased understanding of FASD, its epidemiology (e.g., incidence and prevalence), leading practices in the prevention and treatment of FASD and development of standards to guide the delivery of FASD clinical services and/or FASD programming.

An Evaluation Plan for the FASD 10-Year Strategic Plan has been developed to:

- **Conduct provincial-level evaluation of key outcomes.** This will include a Provincial Outcomes Evaluation Plan and its execution. The Provincial Outcomes Evaluation will evaluate the success of efforts across the province to address the key outcomes identified within the Strategic Plan. This is a complex endeavour, requiring multiple inputs and evaluation activities.

- **Conduct evaluation of the FASD Service Network Program.** This will include the development and execution of the FASD Service Network Program Evaluation. This evaluation will be aligned with the Provincial Outcomes Evaluation Plan and include both summative and formative evaluation questions.

- **Develop an Alberta FASD Evaluation Framework.** In order to support the completion of evaluations that ensure consistent and meaningful data is collected at all levels across the province, the Alberta FASD Evaluation Framework will be distributed and promoted. The purpose of the Framework is to enable and align evaluations of any scale throughout Alberta that are focused on FASD.
Initiatives Underway in Support of this Strategic Pillar

Corrections and Connections to Community
Alberta Health and Wellness and Alberta Seniors and Community Supports

The goal of Corrections and Connections to Community is to determine if, through appropriate supports both while incarcerated and upon release, recidivism for adults impacted by FASD can be reduced. Men at the Fort Saskatchewan Correctional Centre suspected of having FASD are assessed and, if diagnosed as being affected, are provided with supports during their time at the correctional facility, during transition and after their release to the community.

The project works with the network program and other service providers to ensure services and supports are co-ordinated for individuals during their transition to the community. The demonstration model also captures prevalence and incidence data in Alberta for adults with FASD currently incarcerated and being transitioned back into the community and will allow the institution and FASD Service Networks to adjust service delivery based on this data. (Note: Funding for this project was issued in 2008/2009, but the timelines extend beyond fiscal 2009/2010).

FASD Community of Practice Research
Alberta Children and Youth Services, Faculty of Social Work, University of Calgary

Using a Community of Practice (CoP) approach, this project is examining the impact of enhanced case-management promising practices for children diagnosed or suspected of having FASD. While there have been studies that have identified the needs of children experiencing FASD, there have been few which have examined the impact of the best practices in foster care such as those articulated in the promising practices. This project will inform practice and policy through exploring how each of the practices influences placement outcomes. Findings from this research project will be used to provide Alberta Children and Youth Services and child welfare services providers in other jurisdictions with the evidence to support decision-making, resource allocation and policy development in the area of FASD.

A mid-term report on the FASD CoP has been completed and includes qualitative and quantitative data analysis from the first six months of the initiative. Preliminary results in the report indicate:

- Improved relationships and teamwork;
- Decreased risk behaviour by children and youth;
- Improved school attendance;
- Less school contact with caregivers regarding inappropriate behaviour;
- Caregivers noted improved positive interactions with the child at school and at home; and
- Improved caregiver satisfaction with placements of children in their homes.
Research Project on School Experiences of Children with FASD  
*Alberta Education*

Alberta Education is funding a small research project to explore the school experience of children with FASD in Alberta. This is part of a larger research project on Life Course Trajectories and Service Utilization Patterns of Children with FASD by the Alberta Network Action Team of the Western/Northern FASD Research Network. This research is being conducted by Dr. John D. McLennan, Department of Community Health Sciences, University of Alberta.

**STAKEHOLDER ENGAGEMENT**

Stakeholder engagement refers to the sharing of information among the government, practitioners and the FASD client population to facilitate informed and balanced decisions regarding government priorities and action. Engagement occurs among stakeholders at different levels of the system (such as between Ministries and regional organizations) and stakeholders at the same level of the system (for example, among regional organizations). Stakeholders will include provincial, federal and local governments, community organizations, research organizations and advocacy groups. The network program is one example of how stakeholder engagement is incorporated in all initiatives related to the FASD 10-Year Strategic Plan.