

FASD Learning Series 2012/13

Evaluation

Final Report

April 2013

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EXECUTIVE SUMMARY

Introduction

The FASD Learning Series, administered through the Ministry of Human Services (formerly the Alberta Children and Youth Services), was introduced in 2007 to increase community and individual capacity to support individuals with FASD and their caregivers across the lifespan. The initiative specifically addresses the need for educational programs that target a wide variety of urban and rural audiences. CASA Child, Adolescent and Family Mental Health was contracted to develop the content for the 2012/13 program year, and to conduct a summative evaluation.

The learning sessions cover a broad spectrum of content that spans the needs and interests of various groups who provide services to individuals and families affected by FASD.. The 2012/13 FASD Learning Series presented 7 educational sessions between September 2012 and March 2013. Since 2008, all the videoconference sessions and webcasts have been archived on the CMD-FASD website for continued unrestricted use. Once the last webcasts from 2013 are processed, there will be a total of 67 videos/webcasts in the archive.

Evaluation Methods

The evaluation addressed two questions:

1. How did the FASD Learning Series impact participant knowledge about FASD?
2. How effective is webcasting as a method of providing education about FASD?

Quantitative and qualitative data were collected using participant on-line surveys distributed by an e-mail link, webcast sign-in sheets and website utilization data. The response rate for the participant surveys was 20%. Quantitative data were analyzed using a statistical software package and qualitative data were coded and summarized using a thematic analysis.

Evaluation Results

Participant Demographics

The majority of respondents described themselves as service providers such as those employed by community non-profits, social services, health care and education. Sixty-five percent (65%) of the survey respondents viewed the webcast in Alberta. The rest viewed the webcast in British Columbia, Saskatchewan, the Yukon, the Northwest Territories, Ontario and Newfoundland. Thirty-one percent (35%) of respondents said that they or their organization were members of an FASD Service Network.

Attendance

There were 717 participants who attended the 7 sessions presented in 2012/13. Attendance at individual sessions ranged from 48 to 156 with the average being 102. Attendance for the first four sessions was over 100 each but dropped to less than 100 for the last 3 sessions.

Participant Feedback

An overwhelming majority (i.e. 91%-94%) of respondents agreed that the learning objectives were clear, that the learning objectives were met, that the content was relevant for them, that they would be able to apply what they had learned and that it was a valuable learning experience. A large majority of respondents also agreed that their awareness of the topic increased (i.e. 91%). The average overall rating of their satisfaction with the content of the sessions was 87%.

Almost all of the respondents (i.e. 96%) agreed that the use of webcasting helped them to attend the presentations. Average satisfaction with the video quality was 93% and for audio quality was 91%. The average overall rating of their satisfaction with the webcasting was 90%.

Overall, average respondent ratings of the presenters suggest that the presenters were well prepared (i.e. 95%), effective communicators (i.e. 93%) and knowledgeable (i.e. 95%). There were many positive participant comments about the webcast sessions such as that they were “excellent”, “informative” and “very useful”. The following is a sample positive comment in the participant’s own words: ***“I find the webinars to be a very productive means to access learning and flexible in that I can view archived sessions . . .”*** Respondent suggestions to improve the sessions included having handouts available before the sessions, providing more practical examples and including the time zone when advertising the sessions. The most frequent suggestions for future topics were skills to work with FASD (i.e. 13%) and mental health issues and FASD (i.e. 12%). The majority of respondents (i.e. 59%) want future sessions to be at an intermediate training level.

In every session average differences in respondent assessments of their pre-post change in knowledge showed that they perceived their knowledge to have increased after attending a session. The average increase in knowledge from each of the 7 individual sessions ranged from +13% to +17% and the average knowledge increase for all 7 sessions was +17% which was statistically significant at a p-value of 0.001.

The Archived Videos

The Government of Alberta Cross-Ministry Committee web site houses the archived videos and webcasts from all of the previous FASD Learning Series. Between May 13, 2013 and June 13, 2013 there were 2, 504 visits to the Cross Ministry website. The majority of the visitors were from Canada but there were also some visits from the U.S.A., Europe, South Africa and India. Of all the Cross Ministry website visits, 554 visits were specifically to the FASD Learning Series page and of these 360 were unique visitors. This suggests that the archived videos continue to provide FASD information to the public even after the initial presentation.

Conclusion

Overall the data presented in this evaluation suggests that the 2012/13 FASD Learning Series has been very successful. All participant ratings for the session content, the webcast delivery method and the presenters were very high. Pre-Post-ratings strongly indicate that participants

knew more about session topics after attending a session. Participant comments were very positive, indicating that the sessions were very useful and that they enhanced access to this training. The benefits of the webcasts and previous videos have been further extended by archiving them for future use.

The knowledge disseminated by the 2012/13 FASD Learning Series broadly throughout urban and rural Alberta and beyond is a valuable resource that has enhanced community and individual capacity to support individuals with FASD and their caregivers across the lifespan.

How did the FASD Learning Series impact participant knowledge about FASD?

The goal of the FASD Learning Series is to increase capacity to support individuals with FASD and their caregivers. Since the majority of participants were service providers, their very high ratings of session relevance, usefulness, knowledge increase and value of the session suggest that they not only gained new knowledge but that they will also be able to use their new knowledge in their work. There is very strong evidence that the respondents **perceived** their knowledge had increased related to the content of the presentations. The average post-session knowledge gain of 17% is statistically significant (i.e. $p < 0.001$).

How effective is webcasting as a method of providing education about FASD?

The overall rating of webcasting as a method of delivery was 90% which suggests that it is a very acceptable delivery method. The FASD Learning Series specifically addresses the need for educational programs that target a wide variety of urban and rural audiences. This evaluation has shown that webcast sessions allowed access to FASD information throughout urban and rural Alberta. The very high (i.e. 96%) respondent agreement that the use of webcasting helped them attend the session further supports the usefulness of webcast technology to enhance access to educational sessions.

Besides increasing access, the FASD Learning Series has been remarkably efficient in distributing the expertise of the presenters, a valuable but scarce resource to many more people than the number who would be able to attend one live presentation. The access to the archived videos further extends the benefits of the webcasts. The more often the archived videos and webcasts are viewed, the more cost effective it becomes.

Recommendations

Based on the findings of this evaluation, it is recommended that the FASD Learning Sessions continue, and that the following actions be considered to improve the effectiveness and efficiency of the initiative.

1. Identify and implement strategies to support webinar attendance especially for the last sessions. Some strategies to consider include:
 - a. Scheduling dates for webinars that historically have the best attendance.
 - b. Scheduling “in demand” speakers and topics in the last quarter of the series.

- c. Match the training level (i.e. beginner, intermediate or advanced) of the webinar content to the needs of the target audience, and identify the training level in the promotional material.
 - d. Include the time zone of the live presentation in the promotional material.
- 2. Review and evaluate processes for archiving webinars to incorporate advances in technology and ensure efficient and timely access to material.

1.0 INTRODUCTION

The Fetal Alcohol Spectrum Disorder (FASD) Cross-Ministry Committee (CMC) established the FASD Learning Series Program to support the development and delivery of learning opportunities for all stakeholders involved with FASD. The FASD Videoconference Learning Series, administered through the Ministry of Human Services (formerly Alberta Children and Youth Services), was introduced in 2007 to increase community and individual capacity to support individuals with FASD and their caregivers across the lifespan. The initiative specifically addressed the need for educational programs that target a wide variety of urban and rural audiences. CASA Child, Adolescent and Family Mental Health was contracted to develop the content for the 2012/13 program year, and to conduct a formative and summative evaluation.

This was the second year that webcasting was used to deliver the FASD Learning Series. Previously, videoconferencing was used as the delivery method. In videoconferencing, participants have to travel to locations where the presentation can be viewed while webcasting allows participants to view the sessions from their own computers without having to travel to specific viewing locations. The 2012/13 FASD Learning Series presented 7 educational webinars between September 2012 and March 2013. Since 2008, all the videoconference sessions and webcasts have been archived on the CMD-FASD website for continued unrestricted use. Once all the webcasts from 2013 are processed, there will be a total of 67 videos/webcasts in the archive.

The learning sessions cover a broad spectrum of content that spans the needs and interests of various groups: individuals, family members/caregivers affected by FASD, support service providers, health care providers, educators, legal and justice systems and researchers. The following table lists the 2012/13 FASD Learning Webinars. A poster used to advertise these sessions can be seen in Appendix A.

Date	Name of Session
September 26	Evidence-based School-based Intervention with Students Affected by FASD
October 24	Working with Women who have Addictions Issues
November 28	Treating Co-occurring FASD and Conduct Disorders in Youth
December 12	Developments in FASD Research
January 18	Restorative Justice and its Implications for Community
February 20	Aboriginal Communities and FASD
March 20	The Edmonton MILE:Pilot Project

The evaluation of the FASD Learning Webinars assessed the content and presentation of the sessions as a whole as well as the use of technology as a means to support learning. The evaluation addressed these two questions:

1. How did the FASD Learning Series impact participant knowledge about FASD?
2. How effective is webcasting as a method of providing education about FASD?

2.0 EVALUATION METHODS

Quantitative and qualitative data was gathered from participant self-report surveys and webcast sign in sheets. All survey participants were informed about issues of confidentiality and anonymity, and were advised that their participation was voluntary. Quantitative data for change in knowledge were analyzed using a statistical software package (SPSS) and qualitative data were coded and summarized using thematic analysis.

Participant Surveys

Links to an online survey were automatically sent to e-mail addresses of those connecting to the webcasts on the day of the live presentation. The overall response rate for the 7 sessions was 20%. The response rate for each individual webcast can be seen in Appendix B. A copy of the participant post-session survey can be seen in Appendix C.

Sign in sheets

Sign in sheets for each webcast were used to determine total attendance at each session. Names on the sign-in sheets for each session were sorted and duplicates were removed to provide a list of unique individuals attending each session. The total number of unique individuals for each session was used as the attendance number for each session.

Archived Video Statistics

Statistics about the use of the archived videos for a one month period from May 13 to June 13, 2013 were provided by Alberta Human Services.

3.0 EVALUATION RESULTS

3.1 Participant Demographics

Participants

To determine participant demographics, respondents were asked to check all to the listed descriptions that apply to them. The table below shows their responses. The largest group of respondents was front-line service providers followed by those working in the community non-profit sector.

Survey Respondents by Target Group

	2012/13 (n=267)
Front Line Service Provider	31%
Community non- profit	16%
Education	10%
Parent/caregiver	10%
Health Care	8%
Justice	5%
Social Services	5%
Researcher	3%
Provincial Government	1%
Employment and Immigration	1%
Other	10% ^a

^a Other includes: advocate, art therapist, contracted service provider, Correctional Service of Canada, Daycare program supervisor, FASD diagnostic coordinator, FASD liaison, federal government, foster parent, human rights trainer, school counselor, speech-language pathologist, success coach and WRaP project.

In previous years, respondents were asked this information in two separate questions, the first question if they were a service provider, a parent/caregiver or an individual affected by FASD and the second questions asked service providers to indicate in more detail the sector where they work. Responses from 2010/11 and 2011/12 are shown in the two following tables.

Because of the differences in the way the questions were asked, it is difficult to make direct comparisons between the years, however in the past 3 years front line service providers are clearly the largest group responding to the post-session survey.

Survey Respondent by Target Group

	2010/11 (n=610)	2011/12 (n=501)
Service Provider	84%	61%
Parent/caregiver	15%	16%
Individual affected by FASD	1%	0%
Other	-	23%

Work Sector of Service Provider Survey Respondents

Sector	2010/11 (N=522)	2011/12 (n=396)
Community non- profit	19%	26%
Social Services	22%	20%
Employment and Immigration	1%	18%
Health Care	22%	15%
Education	22%	13%
Other	10%	5%
Justice	3%	3%
Government of Alberta	-	-

Viewing Location

The table below shows the locations where survey respondents viewed the FASD webcasts. Although the locations span across Canada from British Columbia, to Newfoundland, as expected and similar to previous years, the majority of the respondents were from Alberta. The provincial viewing location for each webcast is shown in Appendix D.

Viewing Location of Survey Respondents

Location	2010/11 (n=586)	2011/12 (n=427)	2012/13 (n=142)
Alberta	67%	64%	65%
British Columbia	2%	14%	13%
Saskatchewan	12%	7%	11%
Yukon	2%	1%	6%
Northwest Territories	16%	4%	4%
Ontario	1%	4%	4%
Newfoundland	-	-	2%
Other ^a	1%	1%	1%

^a Other includes: Nunavut, Prince Edward Island Newfoundland, Manitoba and USA.

Within Alberta 25 different viewing locations were reported. The following table shows the Alberta locations where more than one person viewed the webcasts. These 6 locations had only 1 viewer: Fort McMurray, Grimshaw, High Prairie, Lacombe, Peace River, Sherwood Park,

Alberta Webcast Viewing Locations

Location	Number ^a	Location	Number ^a
Edmonton	12	Rimbey	3
Lethbridge	12	Edson	3
Slave Lake	6	Fort Saskatchewan	2
Grande Prairie	5	Red Deer	2
Calgary	5	Hinton	2
Vulcan	3	Medicine Hat	2
Drumheller	3	High Level	2
Cold Lake	3	Red Deer	2
Barrhead	3	Smoky Lake	2
Lac La Biche	3		

^a Number of unique viewings per session.

Membership in an FASD Network

Similar to previous years, the table below shows that about one third of the respondents or their organization belonged to an FASD service network, one third do not and one third do not know.

Are you or your organization a member of an FASD service network?

	2010/11 (n=592)	2011/12 (n=419)	2012/13 (n= 140)
Yes	33%	31%	35%
No	38%	29%	36%
Don't know	29%	39%	29%

3.2 Attendance

The table below shows the attendance for each session. Attendance was over 100 for each of the first 4 session but under that for the last 3 sessions. Possible reasons for this drop in attendance are that in January, the presentation day was scheduled for a Friday instead of a Wednesday and the topic of the February session was changed 2 months before the presentation because the original presenter cancelled.

2011/12 FASD Learning Series Attendance by Session

Session Date	Session Title	Attended
September 26	Evidence-based School-based Intervention with Students Affected by FASD	156
October 24	Working with Women who have Addictions Issues	115
November 28	Treating Co-occurring FASD and Conduct Disorders in Youth	238 ^a
December 12	Developments in FASD Research	
January 18	Restorative Justice and its Implications for Community	85
February 20	Aboriginal Communities and FASD	48
March 20	The Edmonton MILE:Pilot Project	75

^a Due to a technical problem, attendance numbers for these sessions cannot be reported separately.

The following table shows FASD Learning Series attendance by year. Although the attendance for 2012/13 was almost half the attendance for 2011/12, the average attendance per session was comparable to 2010/11.

FASD Learning Series Attendance by Year

	2010/11	2011/12	2012/13
Total Attendance	1,239	1,531	717
Number of sessions	11	7	7
Average attendance per session	113	219	102

3.3 Participant Ratings

Participants were asked questions about session content, delivery using webcasting and the presenter. In this section of the evaluation report, the ratings for all the 7 sessions have been summarized and are presented by comparing the responses with those from 2010/11 and 2011/12. For ease of comparison average agreement ratings were determined by assigning numerical values to the rating scale and calculating the numerical averages which were then converted to percentages. The comparisons of the ratings for each year should be interpreted with caution as there is a wide variation in the number of respondents for each year. See Appendix E for summaries of ratings for individual 2012/13 sessions.

Learning Objectives

The tables below show that similar to the 2011/12 ratings, an overwhelming majority of respondents “strongly agreed” or “agreed” that the learning objectives were clear and that the learning objectives were met.

	Year	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Average Agreement ^a
Learning objectives were clear.	2010/11 (n=572)	2%	4%	53%	40%	1%	83%
	2011/12 (n=427)	-	4%	39%	57%	-	88%
	2012/13 (n=142)	-	2%	39%	54%	6%	89%

^a To determine average agreement, ratings were assigned a numerical value (i.e. strongly agree=4; agree=3; disagree=2; strongly disagree=1) and the average of all the numerical ratings was converted to a percentage.

	Year	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Average Agreement ^a
Learning objectives were met.	2010/11 (n=571)	2%	6%	51%	37%	3%	82%
	2011/12 (n=426)	-	4%	35%	60%	1%	89%
	2012/13 (n=142)	-	2%	39%	54%	6%	89%

^a To determine average agreement, ratings were assigned a numerical value (i.e. strongly agree=4; agree=3; disagree=2; strongly disagree=1) and the average of all the numerical ratings was converted to a percentage.

Content of Sessions

The tables below show respondent ratings for content of the sessions. Overall, an overwhelming majority of respondents “strongly agreed” or “agreed”, that the content was relevant for them, that they would be able to apply what they had learned, that it was a valuable learning experience and that their awareness of the topic increased. These high agreement ratings suggest that the content of the sessions met the needs of those attending. The average agreement ratings are very similar to the ratings in 2011/12.

	Year	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Average Agreement ^a
The content was relevant to me.	2010/11 (n=570)	2%	4%	46%	46%	1%	85%
	2011/12 (n=427)	1%	5%	39%	54%	-	87%
	2012/13 (n=142)	-	5%	45%	49%	1%	86%

^a To determine average agreement, ratings were assigned a numerical value (i.e. strongly agree=4; agree=3; disagree=2; strongly disagree=1) and the average of all the numerical ratings was converted to a percentage.

	Year	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Average Agreement ^a
I will be able to apply what I have learned at this session.	2010/11 (n=572)	2%	6%	52%	38%	2%	82%
	2011/12 (n=427)	1%	5%	39%	52%	2%	86%
	2012/13 (n=142)	1%	5%	45%	46%	4%	85%

^a To determine average agreement, ratings were assigned a numerical value (i.e. strongly agree=4; agree=3; disagree=2; strongly disagree=1) and the average of all the numerical ratings was converted to a percentage.

	Year	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Average Agreement ^a
This was a valuable experience.	2010/11 (n=565)	3%	4%	42%	48%	2%	85%
	2011/12 (n=427)	2%	5%	28%	63%	1%	89%
	2012/13 (n=142)	1%	2%	42%	50%	6%	87%

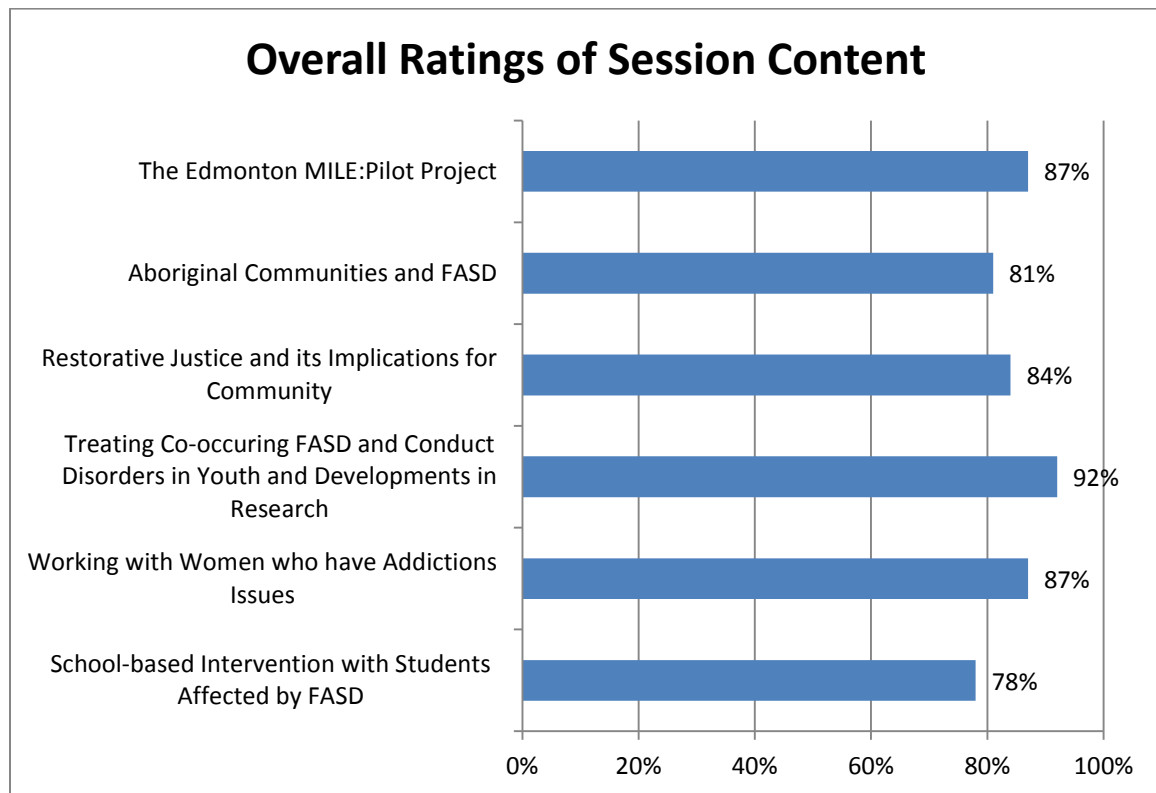
^a To determine average agreement, ratings were assigned a numerical value (i.e. strongly agree=4; agree=3; disagree=2; strongly disagree=1) and the average of all the numerical ratings was converted to a percentage.

	Year	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Average Agreement ^a
My awareness of this topic increased as a result of this session.	2010/11 (n=569)	3%	8%	44%	44%	1%	82%
	2011/12 (n=427)	2%	7%	37%	52%	1%	85%
	2012/13 (n=142)	1%	4%	45%	46%	4%	85%

^a To determine average agreement, ratings were assigned a numerical value (i.e. strongly agree=4; agree=3; disagree=2; strongly disagree=1) and the average of all the numerical ratings was converted to a percentage.

Overall Rating of Session Content

Respondents used a 4-point scale (1=Poor; 2=Fair; 3=Good; 4=Excellent) to give overall ratings for session content. Ratings for individual sessions are presented in the chart below. The highest rating was 92% and the lowest rating was 78%. Only 1 of the 6 ratings were below 80% .



The overall ratings of session content presented in the table below show that the average agreement rating remains very high at 87%.

Overall ratings for session content by year

	Year	Excellent	Good	Fair	Poor	Don't Know	Average Agreement ^a
Overall rating for content of the sessions.	2010/11 (n=571)	52%	38%	8%	2%	-	81%
	2011/12 (n=426)	61%	29%	7%	2%	-	87%
	2012/13 (n=142)	53%	39%	6%	1%	1%	87%

^a Each rating was assigned a numerical value (i.e. excellent=4; good=3; fair=2; poor=1) and the average of all the ratings was converted to a percentage.

Delivery Method

The following tables show ratings for questions relating to the method of session delivery. Note that the ratings for 2010/11 are for videoconferencing and those for 2011/12 and 2012/13 are for webcasting.

Similar to previous years, respondents strongly agreed that the use of videoconferencing helped them attend the sessions (i.e. average agreement 96%). Ratings for video and audio quality were also very high at 93% and 91% respectively. Both these ratings are slightly higher than the ratings for 2011/12.

	Year	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know/Does Not Apply	Average Agreement ^a
Use of videoconferencing/webcasting helped me attend this session.	2010/11 (n=513)	1%	2%	26%	72%	-	92%
	2011/12 (n=427)	1%	-	11%	87%	1%	96%
	2012/13 (n=142)	-	1%	13%	83%	2%	96%

^a To determine average agreement, ratings were assigned a numerical value (i.e. strongly agree=4; agree=3; disagree=2; strongly disagree=1) and the average of all the numerical ratings was converted to a percentage.

	Year	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Average Agreement ^a
I was satisfied with the video quality of the presentation.	2010/11 (n=513)	7%	14%	49%	30%	-	76%
	2011/12 (n=427)	1%	9%	29%	59%	1%	87%
	2012/13 (n=142)	-	8%	13%	76%	3%	93%

^a To determine average agreement, ratings were assigned a numerical value (i.e. strongly agree=4; agree=3; disagree=2; strongly disagree=1) and the average of all the numerical ratings was converted to a percentage.

	Year	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Average Agreement ^a
I was satisfied with the audio quality of the presentation.	2010/11 (n=506)	3%	15%	53%	29%	-	77%
	2011/12 (n=427)	1%	10%	31%	57%	1%	86%
	1012/13 (n=142)	1%	2%	27%	67%	2%	91%

^a To determine average agreement, ratings were assigned a numerical value (i.e. strongly agree=4; agree=3; disagree=2; strongly disagree=1) and the average of all the numerical ratings was converted to a percentage.

Information in the following four tables was only gathered for the past two years as previous to these years, the FASD learning series was delivered by videoconference, not webcasting. Ratings indicate that respondents think it is easy to connect to the webcast. Although less than half the respondents said they took the opportunity to participate in webcast discussions, they are satisfied with their ability to submit questions. A majority of respondents viewed the webcast by themselves but 35% viewed the webcast with others.

	Year	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Average Agreement ^a
Connecting to the webcast was easy	2011/12 (n=413)	1%	3%	26%	69%	4%	95%
	1012/13 (n=142)	1%	1%	16%	77%	6%	95%

^a To determine average agreement, ratings were assigned a numerical value (i.e. strongly agree=4; agree=3; disagree=2; strongly disagree=1) and the average of all the numerical ratings was converted to a percentage.

	Year	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Average Agreement ^a
I participated in the group discussion on the webcast screen.	2011/12 (n=397)	10%	51%	14%	25%	85	69%
	1012/13 (n=142)	5%	54%	8%	26%	7%	65%

^a To determine average agreement, ratings were assigned a numerical value (i.e. strongly agree=4; agree=3; disagree=2; strongly disagree=1) and the average of all the numerical ratings was converted to a percentage.

	Year	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Average Agreement ^a
I was satisfied with my ability to submit questions to the presenter.	2011/12 (n=427)2%	2%	5%	25%	51%	18%	88%
	1012/13 (n=142)	-	4%	20%	50%	27%	91%

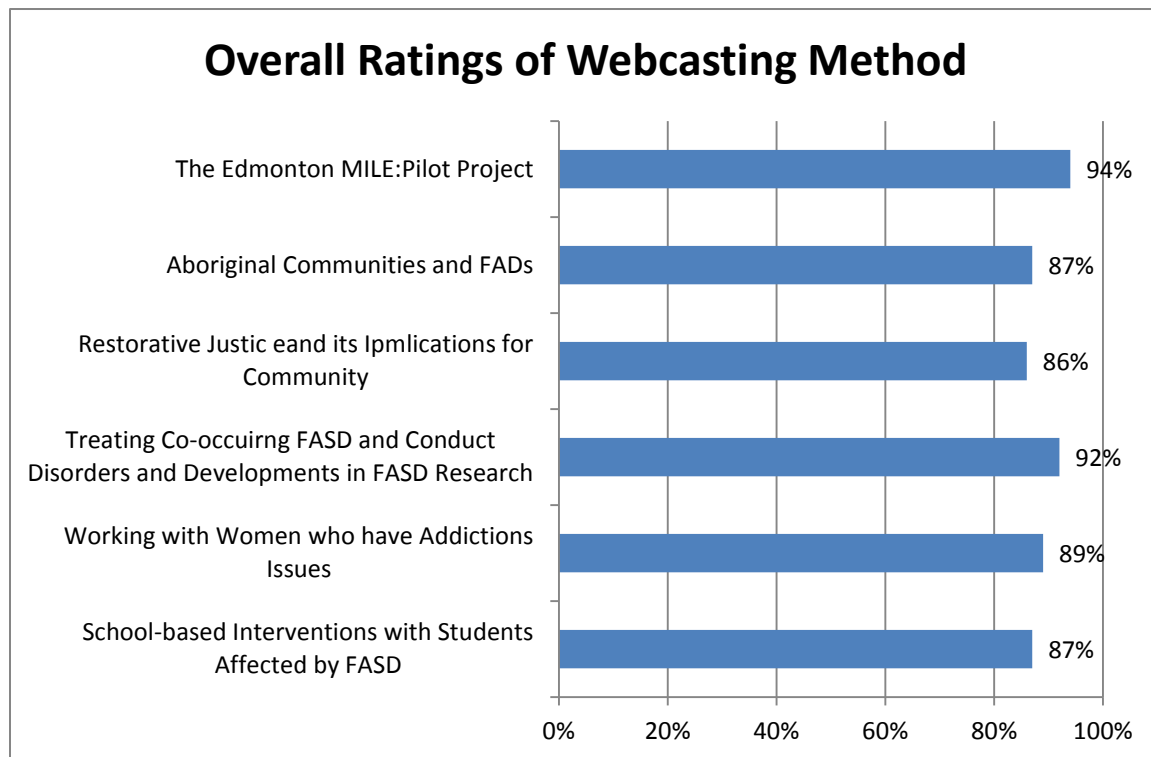
^a To determine average agreement, ratings were assigned a numerical value (i.e. strongly agree=4; agree=3; disagree=2; strongly disagree=1) and the average of all the numerical ratings was converted to a percentage.

Number of People Viewing Webcast at One Location

Number of people	2011/12 (n=427)	2012/13 (n=142)
1	50%	63%
2 to 5	41%	35%
6 to 10	7%	2%
11 to 20	1%	-

Overall Rating of Webcasting as a Method of Delivery

Respondents used a 4-point scale (1=Poor; 2=Fair; 3=Good; 4=Excellent) to give overall ratings for webcasting as a method of educational delivery. Overall ratings for each session are shown in the chart below. The very high ratings ranging from 86% to 94% suggests that webcasting is a very acceptable educational method.



The table below shows the ratings for the learning series delivery method. During 2010/11, the technology used to deliver the FASD learning sessions was videoconferencing rather than webcasting. The higher ratings for 2011/12 and 2012/13 suggest that webcasting is a better delivery method than videoconferencing. In 2012/13, 94% of the ratings for the use of webcasting as a tool for the sessions were “excellent” or “good”. The average agreement rating for webcasting (i.e. 90%) is slightly higher than 2011/12.

	Year	Excellent	Good	Fair	Poor	Don't Know	Average Agreement ^a
Overall the use of videoconferencing/ webcasting for this session was:	2010/11 (n=510)	30%	50%	14%	3%	5%	78%
	2011/12 (n=425)	54%	37%	6%	2%	-	86%
	2-12/13 (n=139)	62%	32%	4%	1%	2%	90%

^a Each rating was assigned a numerical value (i.e. excellent=4; good=3; fair=2; poor=1) and the average of all the ratings was converted to a percentage.

Participant Ratings of the Presenters

The following tables present ratings specifically pertaining to the session presenters. Overall, the very high presenter ratings suggest that the presenters were well prepared, effective communicators, and knowledgeable in their subject area.

	Year	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Average Agreement ^a
The presenter was well prepared.	2010/11 (n=730)	1%	2%	33%	64%	1%	90%
	2011/12 (n=425)	-	1%	16%	83%	-	96%
	2012/13 (n=142)	-	1%	18%	77%	4%	95%

^a To determine average agreement, ratings were assigned a numerical value (i.e. strongly agree=4; agree=3; disagree=2; strongly disagree=1) and the average of all the numerical ratings was converted to a percentage.

	Year	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Average Agreement ^a
The presenter was an effective communicator.	2010/11 (n=735)	1%	1%	34%	63%	-	90%
	2011/12 (n=425)	-	2%	18%	80%	-	95%
	2012/13 (n=142)	-	2%	24%	72%	2%	93%

^a To determine average agreement, ratings were assigned a numerical value (i.e. strongly agree=4; agree=3; disagree=2; strongly disagree=1) and the average of all the numerical ratings was converted to a percentage.

	Year	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Average Agreement ^a
The presenter was knowledgeable.	2010/11 (n=738)	-	-	33%	67%	-	91%
	2011/12 (n=426)	-	1%	15%	84%	-	96%
	2012/13 (n=142)	1%	-	17%	81%	1%	95%

^a To determine average agreement, ratings were assigned a numerical value (i.e. strongly agree=4; agree=3; disagree=2; strongly disagree=1) and the average of all the numerical ratings was converted to a percentage.

Participant Comments

In addition to quantitative data, survey respondents were asked an open-ended question about how the presentation could be more useful to them. Participant responses to this question were summarized and coded by theme. Responses are presented in the table below. Comments for individual sessions can be seen in with the summaries of individual sessions in Appendix E.

Comment Summary (n=53 respondents made 63 comments) ^a

	Percent of all comments
Positive – Very useful (6), excellent (2), good (2), great the way it is (4), perfect, interesting, very pleased with presentation, very helpful, productive way to access learning, likes attending remotely, enjoys easy access, very convenient, 2 hours per month is convenient and doable.	35%
Session content - more FASD specific information (2), useful information/topic but not likely to work (2), more practical ideas, more strategies, resources and networking possibilities, more focus on community approach, more in depth information about MNA, more basic information about how to get FASD diagnosis and skill training, explain strategies used with FASD students, interested in best practices, resources for Metis people, demonstrate techniques, how to work with students who are not in forensic units	23%
Technical – audio problem (5), size of video very small (2), others were on line mic's, cut out before presentation was over, presentation froze and presenters were in shadows, did not see video at all only downloaded notes, have a link to watch video then return to webcast.	18%
Process – give session notes before presentation (2), more interactive, presenter do more than just read from slides, share time fairly among presenters, notify about changes before presentation, make it shorter, put in archives as soon as possible, have available to replay, no response to a written question, loved how fast question was answered.	17%
Advertisement – Content was different than what was advertized (3), please indicate time zone (2)	7%

^a The number in brackets is the number of times that comment was made. Comments without numbers were made only once.

The comments below describe some of the impacts of the webcasts in the participant's own words.

- *"I find the webinars to be a very productive means to access learning and flexible in that I can view archived session after their original air date."*
- *"... I love the web presentation, as it allows me to attend remotely and gain a better understanding of what is happening in the province."*
- *"Continue with these sessions, very helpful and keeps me up to date as my work schedule does not permit using a whole day for training this often, but 2 hours a month is convenient and doable."*

Future Topics

Respondents were asked to indicate their preferences for future learning series topics by choosing as many topics as they were interested in from a list of topics. The following table shows that the topics respondents are most interested in are skills to work with FASD, mental health, addictions and employment.

Other FASD Presentation Topics of Interest (n=913 suggestions)

Topic	Percent
Skills to Work with FASD	13%
Mental Health Issues and FASD	12%
Addictions and FASD	11%
Employment and FASD	10%
Adults and FASD	9%
Assessment and Diagnosis of FASD	9%
Teens and FASD	8%
Law and FASD	8%
Children and FASD	7%
Caregivers and FASD	7%
Research about FASD	7%

Other topics suggested by the respondents were:

- Supporting families with multiple affected members, particularly aboriginal families
- Supported independent living for affected parents who have normal children
- Institutions like Group Home, Juvenile homes, ect...and working with FASD
- FASD and psychosexual development
- FASD and pregnancy
- Decision making
- Social tendencies for Teens & Young Adults with FASD

Level of Future Training

Respondents were asked what level of training they would be most interested in for future presentations. The table below shows that the most requests were for the intermediate level training, followed by advanced training. The least number of requests were for introductory level training.

Level	Number	Percent
Intermediate	83	59%
Advanced	36	25%
Introductory	23	16%
Total	142	100%

3.4 Change in Perceived Knowledge

To assess the impact of the session on participant knowledge, participants were asked to rank their level of knowledge about the session topic both before and after the session. As illustrated in the table below, in every session average differences in participant pre-and post-ratings show that participants perceived their knowledge of the session topic to increase after participating in the session. The amount of the knowledge increase ranged from +13% to +17% with the average being +17%.

Percent Change in Knowledge by Session ^a

Session	Sample Size (n)	Average Rating Pre Session (%)	Average Rating Post Session (%)	Pre-Post-Difference (%)
Evidence-based School-based Intervention with Students Affected by FASD	20	69%	86%	+17%
Working with Women who have Addictions Issues	24	71%	88%	+17%
Treating Co-occurring FASD and Conduct Disorders in Youth and Developments in FASD Research	41	74%	91%	+17%
Restorative Justice and its Implications for Community	14	68%	84%	+16%
Aboriginal Communities and FASD	22	67%	80%	+13%
The Edmonton MILE:Pilot Project	21	71%	86%	+15%
Total	142	69%	86%	+17%

^a Note the average pre-post difference of all the sessions was calculated to reflect the different sample sizes of each session and hence may not match the mathematical difference between the average pre-and post-scores.

A paired samples T-test was performed to determine whether or not the change in level of knowledge was statistically significant. Only complete sets of pre-post-data were included in the determination of significance. Similar to the 2 previous years, the post-session increase in knowledge was found to be significant at a p-value of 0.001.

Year	Sample Size (n)	Average Rating Pre Session (%)	Average Rating Post Session (%)	Pre-Post-Difference (%)
2012/13	142	69%	86%	+17%**
2011/12	426	77%	91%	+14%**
2010/11	568	78%	89%	+11%**

** Significant p<0.001.

3.5 The Archived Videos

The Government of Alberta Cross-Ministry Committee web site houses the archived videos and webcasts from all of the previous FASD Learning Series. After the last webcasts from 2013 are processed, there will be a total of 67 videos/webcasts in the archive. Between May 13, 2013 and June 13, 2013 there were 2, 504 visits to the Cross Ministry website. The majority of the visitors were from Canada but there were also some visits from the U.S.A., Europe, South Africa and India. Of all the Cross Ministry website visits, 554 visits were specifically to the FASD Learning Series page and of these 360 were unique visitors. This suggests that the archived videos continue to provide FASD information to the public even after the initial presentation.

4.0 Conclusion

Overall the data presented in this evaluation suggests that the 2012/13 FASD Learning Series has been very successful. All participant ratings for the session content, the webcast delivery method and the presenters were very high. Pre-Post-ratings strongly indicate that participants knew more about session topics after attending a session. Participant comments were very positive, indicating that the sessions were very useful and that they enhanced access to this training. The benefits of the webcasts and previous videos have been further extended by archiving them for future use.

The knowledge disseminated by the 2012/13 FASD Learning Series broadly throughout urban and rural Alberta and beyond is a valuable resource that has enhanced community and individual capacity to support individuals with FASD and their caregivers across the lifespan.

How did the FASD Learning Series impact participant knowledge about FASD?

The goal of the FASD Learning Series is to increase capacity to support individuals with FASD and their caregivers. Since the majority of participants were service providers, their very high ratings of session relevance, usefulness, knowledge increase and value of the session suggest that they not only gained new knowledge but that they will also be able to use their new knowledge in their work. There is very strong evidence that the respondents **perceived** their knowledge had increased related to the content of the presentations. The average post-session knowledge gain of 17% is statistically significant (i.e. $p < 0.001$).

How effective is webcasting as a method of providing education about FASD?

The overall rating of webcasting as a method of delivery was 90% which suggests that it is a very acceptable delivery method. The FASD Learning Series specifically addresses the need for educational programs that target a wide variety of urban and rural audiences. This evaluation has shown that webcast sessions allowed access to FASD information throughout urban and rural Alberta. The very high (i.e. 96%) respondent agreement that the use of webcasting helped them attend the session further supports the usefulness of webcast technology to enhance access to educational sessions.

Besides increasing access, the FASD Learning Series has been remarkably efficient in distributing the expertise of the presenters, a valuable but scarce resource to many more people than the number who would be able to attend one live presentation. The access to the archived videos further extends the benefits of the webcasts. The more often the archived videos and webcasts are viewed, the more cost effective it becomes.

Recommendations

Based on the findings of this evaluation, it is recommended that the FASD Learning Sessions continue, and that the following actions be considered to improve the effectiveness and efficiency of the initiative.

1. Identify and implement strategies to support webinar attendance especially for the last sessions. Some strategies to consider include:
 - a. Scheduling dates for webinars that historically have the best attendance.
 - b. Scheduling “in demand” speakers and topics in the last quarter of the series.
 - c. Match the training level (i.e. beginner, intermediate or advanced) of the webinar content to the needs of the target audience, and identify the training level in the promotional material.
 - d. Include the time zone of the live presentation in the promotional material.
2. Review and evaluate processes for archiving webinars to incorporate advances in technology and ensure efficient and timely access to material.

Appendix A

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FASD Learning Series ~ 2012 - 2013



Sessions are available
via live webcast,
in-person in Edmonton
or by way of
videoconference for
Nunavut, NWT and
Yukon stakeholders.

Evidence-based school-based intervention with students affected by FASD

Colleen McClure, Justin Tardiff, and Sandra Swaffield
September 26, 2012, 9-11 am

Working with women who have addictions issues

Alberta Parent-Child Assistance Program (PCAP)
October 24, 2012, 9-11 am

Treating co-occurring FASD and conduct disorders in youth

Dr. Vinesh Gupta
November 28, 2012, 9-11 am

Developments in FASD research

Canadian Northwest Partnership – Dr. Jacqueline Pei
December 12, 2012, 9-11 am

Restorative justice and its implications for community

Restorative Justice Panel – Judge Peter Ayotte
January 18, 2013, 9-11 am
Room 328, 9940-106 Street, Edmonton

Aboriginal communities and FASD

Speaker to be confirmed
February 20, 2013

The Edmonton MILE: Results of a one-year pilot project to improve school functioning for children with FASD

Dr. Jacqueline Pei and Dr. Carmen Rasmussen
March 20, 2013, 9-11 am

Webcasting and Registration Process

There is no fee to attend. Registration and sign-in is necessary for receipt of a certificate of attendance.

Please visit www.research4children.com and go to "Events" to register and for more info.

Unless otherwise stated, all sessions are broadcast live from the Human Services' Deputy Minister Boardroom located on the 12th Floor of 9940-106 Street.

Sessions will be recorded and posted within two weeks of the broadcast.



Appendix B

Participant Survey Response Rates

Sessions	Total Participants Attending	# of Surveys Returned	Response Rate ^a
Sept 26	156	20	13%
Oct 24	115	24	21%
Nov 28 and Dec 12 ^b	238	41	17%
Jan 18	85	14	16%
Feb 20	48	22	46%
March 20	75	21	28%
Total	717	142	20%

^a Response rates were calculated by using the number of surveys received divided by the number of participants attending each session.

^b Data for the Nov and Dec sessions was not available separately.

Appendix C

Participant Post-Session Survey

About You

What is the name of the city/town from where you attended this webcast?

From which province did you access the webcast?

Please indicate ALL of the following descriptions that apply to you.

- ☐ Front Line Service Provider
- ☐ Provincial Government Policy Maker/Administration
- ☐ Parent and/or caregiver/family member of individual affected by FASD
- ☐ Individual affected by FASD
- ☐ Researcher
- ☐ Employment and Immigration
- ☐ Health Care (Addictions, Mental Health etc.)
- ☐ Education
- ☐ Justice
- ☐ Community (Not-for-Profit)
- ☐ Social Services (Child and Youth Disabilities, Seniors etc.)
- ☐ Other _____
(please describe)

Are you or your organization a member of the FASD Network?

- ☐ Yes ☐ No ☐ I don't know

The Presentation

6. Please choose a response for each statement

	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know
The learning objectives were clear to me.					
The learning objectives were met.					
I will be able to apply what I have learned from this session with others.					
My awareness of this topic increased as a result of this session.					
This was a valuable learning experience.					
The content was relevant to me.					

Overall the content for this session was:

- ☐ Poor ☐ Fair ☐ Good ☐ Excellent ☐ Don't know

Webcast

Indicate your agreement with each statement.

	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know
The use of webcasting to deliver this presentation helped me attend this session.					
I was satisfied with the video quality of the presentation.					
I was satisfied with the audio quality of the presentation.					
Connecting to the webcast was easy.					
I participated in the group discussion that took place in the space provided below the webcast screen.					
I was satisfied with my ability to submit questions to the presenter.					

Overall the use of webcasting for this session was:

☐ Poor ☐ Fair ☐ Good ☐ Excellent ☐ Don't know

Approximately how many other people joined you for the webcast?

- ☐ 0
☐ 1-5
☐ 6-10
☐ 11-20
☐ More than 20

Change in Knowledge

	Not at all	Minimally	Moderately	Very Well	Don't Know
BEFORE this session, how well did you understand the topic area?					
AFTER this session, how well did you understand the topic area?					

The Presenter

	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know
The presenter was knowledgeable.					
The presenter was an effective communicator.					
The presenter was well prepared.					

The Future

Over the next three years, what other subject areas relating to FASD would be of interest to you? Please check all that interest you.

- ☐ Mental Health Issues and FASD
- ☐ Addictions and FASD
- ☐ Assessment/Diagnosis of FASD
- ☐ Law and FASD
- ☐ Caregivers and FASD
- ☐ Children and FASD
- ☐ Teens and FASD
- ☐ Adults and FASD
- ☐ Employment and FASD
- ☐ Research on FASD
- ☐ Skills to work with FASD
- ☐ Other _____(please specify)

For the future, what level of FASD training are you most interested in?

- ☐ Introductory ☐ Intermediate ☐ Advanced

How could we make this presentation more useful to you?

Appendix D

Viewing Location of Survey Respondents by Session

Location	26-Sep	24-Oct	28-Nov 12-Dec	18-Jan	20-Feb	20-Mar
Alberta	16	13	27	9	13	14
BC	1	3	4	2	3	0
Saskatchewan	2	2	3	1	2	1
Manitoba	0	1	1	0	0	0
Ontario	0	0	0	0	1	4
Quebec	0	0	0	0	0	0
New Brunswick	0	0	0	0	0	0
Nova Scotia	0	0	0	0	0	1
PEI	0	0	0	0	0	0
Newfoundland	1	1	1	0	0	0
Nunavut	0	0	0	0	0	0
Yukon	0	3	1	2	3	0
Northwest Territories	0	1	4	0	0	0
Other	0	0	0	0	0	1 ^a
Total	20	24	41	14	22	21

^a Ohio, USA

Appendix E

Individual Session Ratings

Individual session ratings are summarized in the tables below and presented in chronological order. The change in knowledge is the average percent difference in respondent ratings between how much knowledge they had of the topic presented before the presentation and how much knowledge they had of the topic after the presentation. The overall session rating is the respondents' average rating for the content of the session. The comments are those made specifically about that session.

SESSION # 1

Title –Evidence-Based School-Based Intervention with Students Affected by FASD – September 26, 2012

Overall rating of session content =78%

Change in knowledge = +17%

Presenter – Coleen McClure, Justin Tardiff and Sandra Swaffield

Attendance - 156

Survey response rate – 13%

The presenter was: (n=20)	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Average Agreement Rating ^a
Knowledgeable	1	0	5	13	1	89%
An effective communicator	0	0	5	14	1	93%
Well prepared	0	0	3	15	2	96%

^a Each rating was assigned a numerical value (i.e. strongly agree=4; agree=3; disagree=2; strongly disagree=1) and the average of all the ratings was converted to a percentage.

Comments:

- Explain strategies used with FASD students
- Always interested in best practices , need to work together
- Did not see video at all - only downloaded notes
- Indicate time differences for those watching in different provinces
- Video within presentation hard to hear but was useful thank you
- Video good but audio poor
- Have a link to watch video then return to webcast

SESSION # 2

Title – Working with Women Who Have Addiction Issues – October 24, 2012

Overall rating of session content = 87%

Change in knowledge = +17%

Presenter – Alberta Parent-Child assistance Program (PCAP)

Attendance - 115

Survey response rate – 21%

The presenter was: (n=24)	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Average Agreement Rating ^a
Knowledgeable	0	0	3	20	1	97%
An effective communicator	0	2	4	17	1	91%
Well prepared	0	1	3	19	1	95%

^a Each rating was assigned a numerical value (i.e. strongly agree=4; agree=3; disagree=2; strongly disagree=1) and the average of all the ratings was converted to a percentage.

Comments:

- Good presentation
- Excellent, thank you
- Size of video very small
- Great
- Wants to know about changes ahead of time
- Enjoyed being able to access so easily
- More specific to FASD
- Tools discussed were useful
- Make it more interactive
- Perfect
- Useful information for working with addicted incarcerated women but not if they have FAS
- Info not FAS specific
- Interesting presentation
- Topic not as advertized would like to have PCAP presentation rescheduled
- Great topic but techniques not likely to be successful
- Topic not as advertized
- Excellent
- Would like presenter to do more than just reading slides such as relating some incidents from experience
- Audio problem
- Will watch recorded presentation because audio was no audio

SESSION # 3 AND 4

Note: The data for the November and December sessions is presented together as it is not available separately.

**Title – Treating Co-occurring FASD and Conduct Disorders in Youth – November 28, 2012 and
Developments in FASD Research – December 12, 2012**

Overall rating of session content = 92%

Change in knowledge = +17%

Presenter – Dr. Vinesh Gupta – Nov 28; Dr. Jacqueline Pei – Dec 12

Attendance - 238

Survey response rate – 17%

The presenter was: (n=41)	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Average Agreement Rating ^a
Knowledgeable	0	0	5	36	0	96%
An effective communicator	0	1	5	34	1	96%
Well prepared	0	0	7	34	0	96%

^a Each rating was assigned a numerical value (i.e. strongly agree=4; agree=3; disagree=2; strongly disagree=1) and the average of all the ratings was converted to a percentage.

Comments:

- Continue session, very helpful, keeps me up to date
- Size of video very small
- 2 hours a month is convenient and doable - can't get a whole day off per month
- Have available to replay
- Others on line mic's - not problem from your end
- Enjoyed presentation, very useful thank you
- Audio problem, - was hard to hear
- Very convenient not having to travel
- Loved the way question was answered so fast
- Very pleased with presentation
- Love to see this Dr. present again with more info on how to work more effectively with students who are not in forensic units
- A bit long to stay focused
- Great the way it is (2 comments)
- Quite good as it is
- Make accessible in archives as soon as possible
- Indicate time differences of when presentations would start
- More practical ideas
- More strategies, list of resources, networking possibilities

SESSION # 5

Title - Restorative Justice and Its Implication for Community – January 18, 2013

Overall rating of session content = 84%

Change in knowledge = +16%

Presenter – Judge Peter Ayotte

Attendance - 85

Survey response rate – 16%

The presenter was: (n=14)	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Average Agreement Rating^a
Knowledgeable	0	0	2	12	0	96%
An effective communicator	0	0	5	9	0	91%
Well prepared	0	0	2	11	1	96%

^a Each rating was assigned a numerical value (i.e. strongly agree=4; agree=3; disagree=2; strongly disagree=1) and the average of all the ratings was converted to a percentage.

Comments:

- Ensure that the time is shared fairly among presenters.
- Overall the presentation was good, but I did not find it overly helpful as it did not really discuss what I originally understood it to be discussing for that session. The video conference cut us out before the presenters were done.
- It would be more beneficial to myself and the organization I worked with to understand what is FASD, how young can a person be to be diagnosed, what skills can I acquire in supporting children 0 - 12 years with FASD?
- It was a good presentation.
- I would have liked a written copy of the power point that Teresa used.

SESSION # 6

Title: Aboriginal Communities and FASD – February 20, 2013

Overall rating of session content = 81%

Change in knowledge = +13%

Presenter – Sara Parker, Kelsey Bradburn and Beatrice Demetrius

Attendance - 48

Survey response rate – 46%

The presenter was: (n=22)	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Average Agreement Rating^a
Knowledgeable	0	0	7	15	0	92%
An effective communicator	0	0	11	11	0	88%
Well prepared	0	0	7	14	1	92%

^a Each rating was assigned a numerical value (i.e. strongly agree=4; agree=3; disagree=2; strongly disagree=1) and the average of all the ratings was converted to a percentage.

Comments:

- Focus more on the community focused approach to FASD prevention and intervention.
- It was a very brief presentation. I would have preferred more in depth information about the MNA, its mission, and the community supports that they provide for those living with FASD.
- Maybe give a bit more information on the current resources available for Metis people.
- Already is very useful.

SESSION # 7

Title – The Edmonton MILE: Results of a One-Year Pilot Project to Improve School Functioning for Children with FASD – March 20, 2013

Overall rating of session content = %

Change in knowledge = %

Presenter – Dr. Jacqueline Pei and Dr. Carmen Rasmussen

Attendance -

Survey response rate – %

The presenter was:	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Average Agreement Rating ^a
Knowledgeable						
An effective communicator						
Well prepared						

^a Each rating was assigned a numerical value (i.e. strongly agree=4; agree=3; disagree=2; strongly disagree=1) and the average of all the ratings was converted to a percentage.

Comments:

- Having access to the presentation notes in advance so that I can jot down notes on them.
- I find the webinars to be a very productive means to access learning - and flexible in that I can view archived session after their original air date.
- I would have liked to have actually seen some of the techniques that were used, rather than hear about the usual pedagogy that follows with individualized learning programs.
- It was very useful in the current format.
- It was very useful. I got the information I was seeking. Thank You. Good Job.
- Move them to Northern Ontario so we can attend in person. :)
- The presentation froze up on a number of occasions. The presenters were positioned in a way that they had big shadows surrounding them and this was very distracting at times.