



CASA
Child, Adolescent and Family
Mental Health

FASD Learning Series 2014/15 Evaluation

Final Report

June 2015

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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 2014/15 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 2014/15 FASD Learning Series presented nine educational sessions between September 2014 and May 2015. Since 2008, all the videoconference sessions and webcasts have been archived on the FASD Cross Ministry Committee website (<http://fasd.alberta.ca/>) for continued unrestricted use. Including this year's webcasts, there are a total of 83 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 55%. Quantitative data were analyzed using Microsoft Excel 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. Seventy-six percent (76%) of the survey respondents viewed the webcast in Alberta. The rest viewed the webcast in British Columbia, Saskatchewan, other Canadian provinces and territories, and a few viewed from the United States. Forty-four percent (44%) of respondents said that they or their organization were members of an FASD Service Network.

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. As of June 1st, 2015 there are 81 videos in the archive; when the remainder of this year's videos are added, there will be 83. Between July 2014 and May 2015 there were 18,942 views of the archived videos. A total of 3,727 hours was spent viewing the videos. The data for this year suggests that the archived videos continue to provide a significant amount of FASD information to the public even after the initial presentation has concluded.

Attendance

There were 1481 participants who attended the 9 sessions presented in 2014/15. Attendance at individual sessions ranged from 69 to 239 with the average being 165 per session.

Participant Feedback

An overwhelming majority (i.e. 90-91%) of respondents agreed that the learning objectives were clear, that the learning objectives were met, that the content was relevant for them and that it was a valuable learning experience. A large majority of respondents also agreed that their awareness of the topic increased (i.e. 89%) and that they will be able to apply what they learned (i.e. 90%). The average overall rating of their satisfaction with the content of the sessions was 85%.

Almost all of the respondents (i.e. 96%) agreed that the use of webcasting helped them to attend the presentations and that connecting to the webcast was easy (i.e. 93%). Average satisfaction with the video quality and audio quality were 91% each. The average overall rating of their satisfaction with the webcasting was 86%.

Overall, average respondent ratings of the presenters suggest that the presenters were well prepared (i.e. 97%), effective communicators (i.e. 95%) and knowledgeable (i.e. 96%). There were many positive participant comments about the webcast sessions such as that they were “excellent” and “informative.” Respondent suggestions to improve the sessions included having handouts available before the sessions, providing more practical examples and improving the audio and video quality of the webcasts. The most frequent suggestions for future topics were mental health issues and FASD (i.e. 77%) and skills to work with FASD (i.e. 70%). The majority of respondents (i.e. 57%) want future sessions to be at an intermediate training level.

In every session average differences in respondent assessments of their pre- and post-session 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 nine individual sessions ranged from +12% to +19% and the average knowledge increase for all nine sessions was +14%, which is statistically significant at a p-value of 0.001.

Conclusion

Overall the data presented in this evaluation suggests that the 2013/14 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- and post-session 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.

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 14% 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 85%, which suggests that it is an 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 provided 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 provides further support to the claim that webcast technology can enhance access to educational sessions.

Besides increasing access to training, 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 use of the archived webcasts and videos described in this report further extends the reach and benefits of the FASD Learning Series. The more often the archived videos and webcasts are viewed, the more cost-effective they become.

The knowledge disseminated by the 2014/15 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.

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. Develop and implement a communication plan which will reach and generate new audiences while providing information about future demand. The communication plan should include clarifying for participants how to access the FASD Learning Series, including:
 - a. How to register
 - b. How to access presentation materials
 - c. How to sign in
 - d. How to access the live webcast
 - e. How to ask questions during the live webcast
 - f. How to complete an evaluation of the presentation
 - g. How to receive a certificate of attendance
2. Update the evaluation questionnaires to further refine the information collected, including information about the archived sessions.
3. Continue to refine the technical process to make webcast access easier for participants, and to improve the quality of webcast streaming.

Future Directions

The value of the FASD webinars for front line service providers has been clearly demonstrated in this and previous evaluations. Going forward, it is important to consider the role of the webinars in light of the shifting political and service delivery landscape in Alberta. We recommend that:

1. The FASD webinar series be delivered as an integral component of a multi-faceted “FASD Centre of Excellence” that integrates practice, research and training.
2. The FASD Education and Training Council review the publicly funded opportunities for education and training, including the webinars and the provincial conference, with a view to ensuring the provincial plan for education and training makes the best use of resources while meeting the training needs of caregivers and others working in the field.

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 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 2014/15 program year, and to conduct a summative evaluation.

In 2010 the delivery of the FASD Learning Series moved from videoconferencing to webcasting. Webcasting is more convenient than videoconferencing since participants can view the sessions from their own computers without having to travel to specific viewing locations. Participants have experienced considerably fewer technical problems with webcasting than with videoconferencing. Delivery by videoconference is still available to participants at select Government sites where the facilities do not support webcasting.

The 2014/15 FASD Learning Series presented nine educational webinars between September 2014 and May 2015. Since 2008, all the videoconference sessions and webcasts have been archived on the CMC-FASD website for continued unrestricted use. Including this year's webcasts, there are a total of 83 videos/webcasts posted in the archive and available for viewing.

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 2014/15 FASD Learning Series webinars. Posters used to advertise these sessions can be seen in Appendix A.

Date	Title	Presenter(s)
September 17, 2014	Strengthening the Parent-Child Attachment Relationship in Children and Parents Affected by FASD: What We Now Know	Dr. Sonya Vellet
October 15, 2014	Strengthening the Parent-Child Attachment Relationship in Children and Parents Affected by FASD: Red Flags & Practical Strategies	Dr. Sonya Vellet & Mary Berube
November 19, 2014	Strengthening the Parent-Child Attachment Relationship in Children and Parents Affected by FASD: Additional Practical Strategies	Mary Berube
December 17, 2014	Results from the Alberta Pilot of the Treatment Improvement Protocol (TIP) for FASD	Dr. Carmen Rasmussen & Katrina Kully-Martens

Date	Title	Presenter(s)
January 21, 2015	Help Us to Prevent FASD! Join the Prevention Conversation: A Shared Responsibility	Hazel Mitchell, Rod DeVries, and Debbie Collins
February 18, 2015	The Office of the Child and Youth Advocate – Enhancing Advocacy Skills and Client Participation	Arlene Eaton-Erickson, Brownyn Armstrong, and Erin Jamieson
March 18, 2015	Healing Disordered Attachments	Dr. Wanda Polzin
April 15, 2015	A First Nations Community Response to FASD	Teresa O’Riordan and Rupert Arcand
May 20, 2015	What’s New in FASD Research	Jacquie Pei, Marnie Hutchison and Katy Wyper

The evaluation of the FASD Learning Series 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 Microsoft Excel and qualitative data were coded and summarized using thematic analysis.

Participant Surveys

Links to an online survey were sent to e-mail addresses of those who signed in to the webcasts on the day of the live presentation. The overall response rate for the 9 sessions was 55%. The response rate for each individual webcast can be seen in Appendix B. A copy of the participant post-session survey is shown in Appendix C.

From September through February, a single survey was in use: participants were asked to choose which session they were evaluating from a list. This was problematic in that some participants were rating the presentation many weeks after it occurred (the survey is meant to be completed within two weeks of the presentation). This made timely and accurate data analysis difficult. From March through May, surveys were created for each individual presentation, and the surveys were closed two weeks after the

presentation occurred. This latter method of survey collection does not seem to have impacted survey response rates. It has been much more efficient, and will be continued in the future.

Sign in sheets

Electronic sign in sheets for each webcast were used to determine 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. A few participants attended some sessions in person and these names were added to the unique names from the sign in sheets to determine total attendance.

Archived Video Statistics

Statistics about the use of the archived videos from July 2013 to May 2014 were provided by Alberta Human Services.

3.0 Evaluation Results

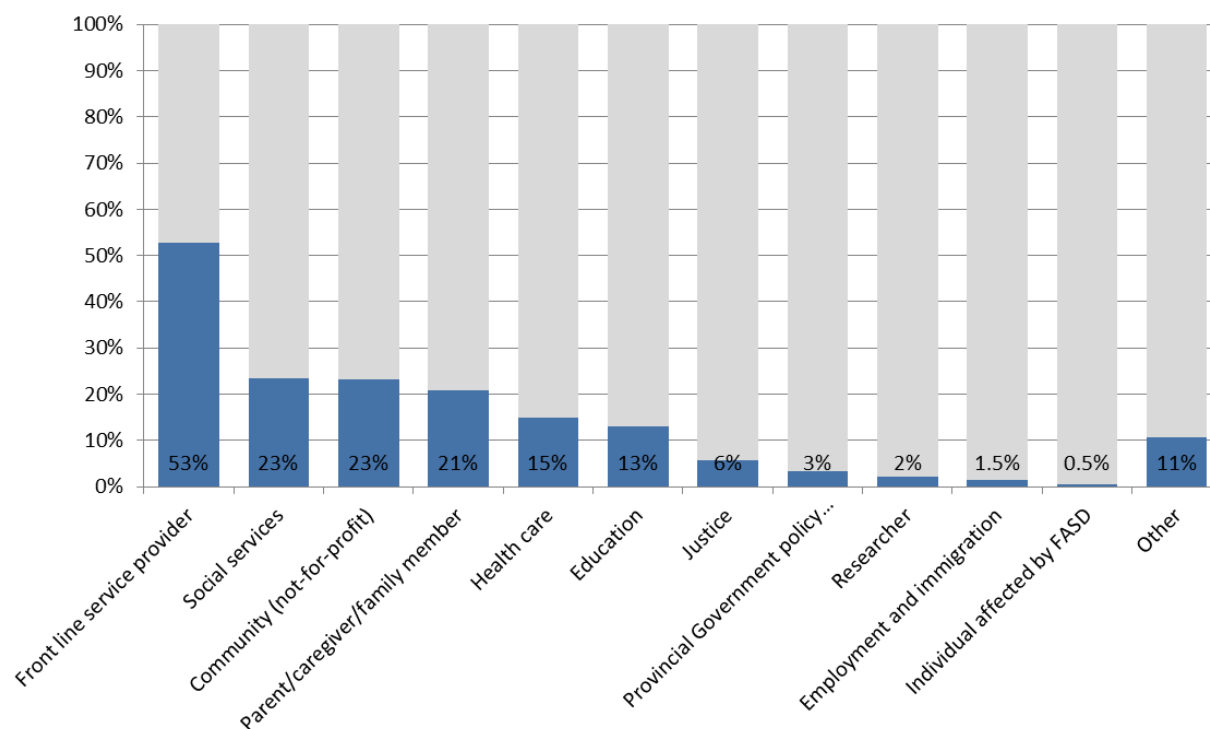
3.1 Participant Demographics

Participants

To determine participant demographics, respondents were asked to check all of the listed descriptions that apply to them. The table and graph below show their responses. Similar to the previous year, the largest group of respondents was front-line service providers (53%) followed by those working in social services and the community non-profit sector.

Survey Respondents by Target Group

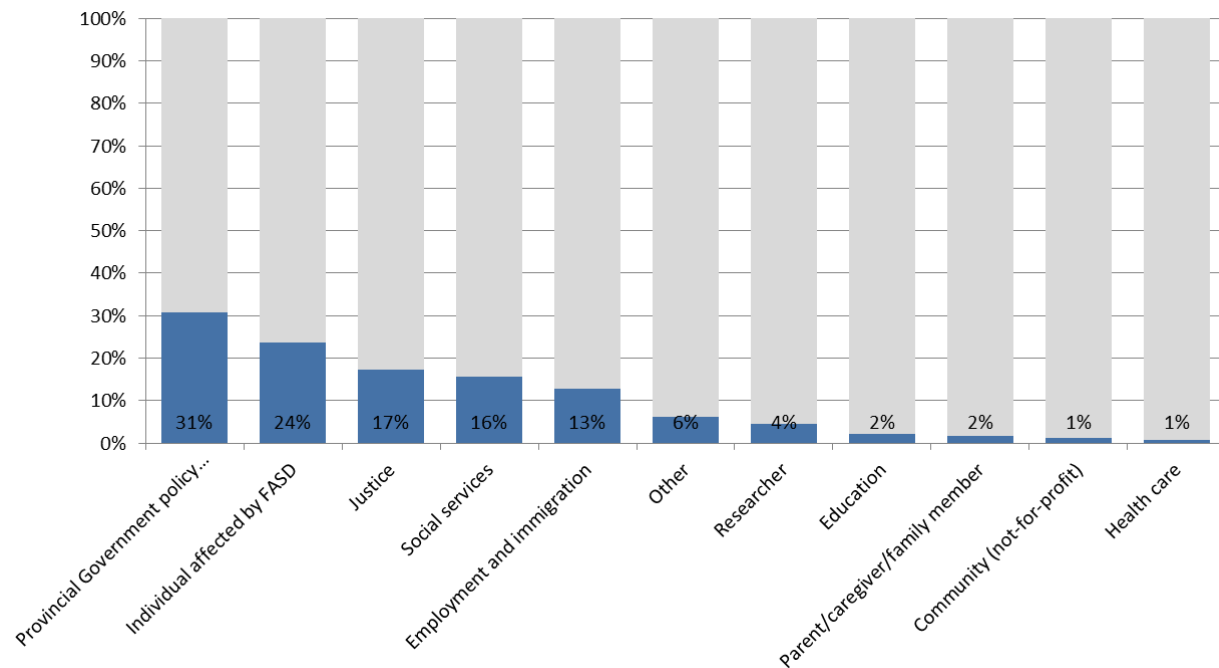
(n=803 respondents)



Of the 424 participants who identified as Front Line Service Providers, 309 participants also identified at least one other description. The graph below shows the other responses of Front Line Service Providers.

Front Line Service Providers' Other Responses

(n=424 respondents)



Most Common Participant Descriptions by Year

	2012/13 (n=267 responses)	2013/14 (n=666 responses)	2014/15 (n=1384 responses)
Front line service provider	31%	32%	31%
Provincial Government policy maker/administrator	1%	2%	2%
Parent and/or caregiver and/or family member of individual affected by FASD	10%	9%	12%
Individual affected by FASD	0%	0%	0%
Researcher	3%	3%	1%
Employment and immigration	1%	1%	1%
Health care (addictions, mental health, etc.)	8%	12%	9%
Education	10%	7%	8%
Justice	5%	3%	3%
Community (not-for-profit)	16%	13%	14%
Social services (child and youth disabilities, seniors, etc.)	5%	11%	13.6%
Other	10%	6%	6%

Viewing Location

The table below shows the locations where survey respondents viewed the FASD webcasts. Although the locations span across Canada and into the United States, 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	2012/13 (n=142)	2013/14 (n=388)	2014/15 (n=808)
Alberta	65%	70%	76%
BC	9%	10%	10%
Manitoba	1%	3%	1%
New Brunswick	0%	0%	1%
Newfoundland	2%	0%	0%
Nova Scotia	1%	1%	1%
Northwest Territories	4%	2%	3%
Nunavut	0%	0%	0%
Ontario	4%	1%	3%
PEI	0%	0%	0%
Quebec	0%	0%	0%
Saskatchewan	8%	11%	4%
Yukon	6%	3%	1%
Other	1%	0%	1% ¹

Survey respondents viewed the webcasts from 79 different locations in Alberta; this has increased considerably from 43 locations in 2013/14. The following table shows the total number of connections for all nine sessions from Alberta locations with the largest number of connections to the webcasts (i.e. 7 or more). As expected, the largest cities had the most connections although there were some connections throughout the province. For a complete list of cities/towns, see Appendix D. The large number of Alberta communities connecting to the webcasts provides evidence that the training provided by the 2013/14 FASD Learning Series has been broadly disseminated throughout urban and rural Alberta.

¹ This year all “Other” responses came from the USA.

Alberta Webcast Viewing Locations

Location	Number of Connections	Location	Number of Connections
Edmonton	108	Edson	13
Calgary	68	High Level	10
Lethbridge	45	Lac La Biche	10
Red Deer	34	Peace River	9
Medicine Hat	32	Westlock	9
Fort McMurray	27	High Prairie	8
Grande Prairie	23	Lamont	8
Wetaskiwin	20	Okotoks	7
Sherwood Park	16	Pincher Creek	7
Camrose	13	St. Albert	7

Membership in an FASD Network

The table below shows the percentage of respondents who belong to an FASD service network either individually or through their organization. This year nearly half of respondents (44%) indicated that they were a member of an FASD service network. This represents a significant increase over the 2013/14 year.

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

	2012/13 (n=140)	2013/14 (n=381)	2014/15 (n=808)
Yes	35%	29%	44%
No	36%	46%	24%
I Don't know	29%	24%	32%

3.2 Attendance

The table below shows the attendance for each session. Attendance ranged from a high of 239 for the March 18 session to a low of 69 for the December 17 session. It should be noted that the total number of attendees is the sum of each month's attendance: it is not the total number of *unique* attendees (e.g. if the same participant attended September and October, she was counted twice).

2014/15 FASD Learning Series Attendance by Session

Date	Title	Attendance
September 17, 2014	Strengthening the Parent-Child Attachment Relationship in Children and Parents Affected by FASD: What We Now Know	79 ²
October 15, 2014	Strengthening the Parent-Child Attachment Relationship in Children and Parents Affected by FASD: Red Flags & Practical Strategies	209
November 19, 2014	Strengthening the Parent-Child Attachment Relationship in Children and Parents Affected by FASD: Additional Practical Strategies	148
December 17, 2014	Results from the Alberta Pilot of the Treatment Improvement Protocol (TIP) for FASD	69 ³
January 21, 2015	Help Us to Prevent FASD! Join the Prevention Conversation: A Shared Responsibility	133
February 18, 2015	The Office of the Child and Youth Advocate - Enhancing Advocacy Skills and Client Participation	150
March 18, 2015	Healing Disordered Attachments	239
April 15, 2015	A First Nations Community Response to FASD	237
May 20, 2015	What's New in FASD Research	217
TOTAL	9 sessions	1481 attendees

The following table shows FASD Learning Series attendance by year. The total attendance for 2014/15 was **94% higher** than the total attendance for 2013/14. The average attendance increased by 80 participants.

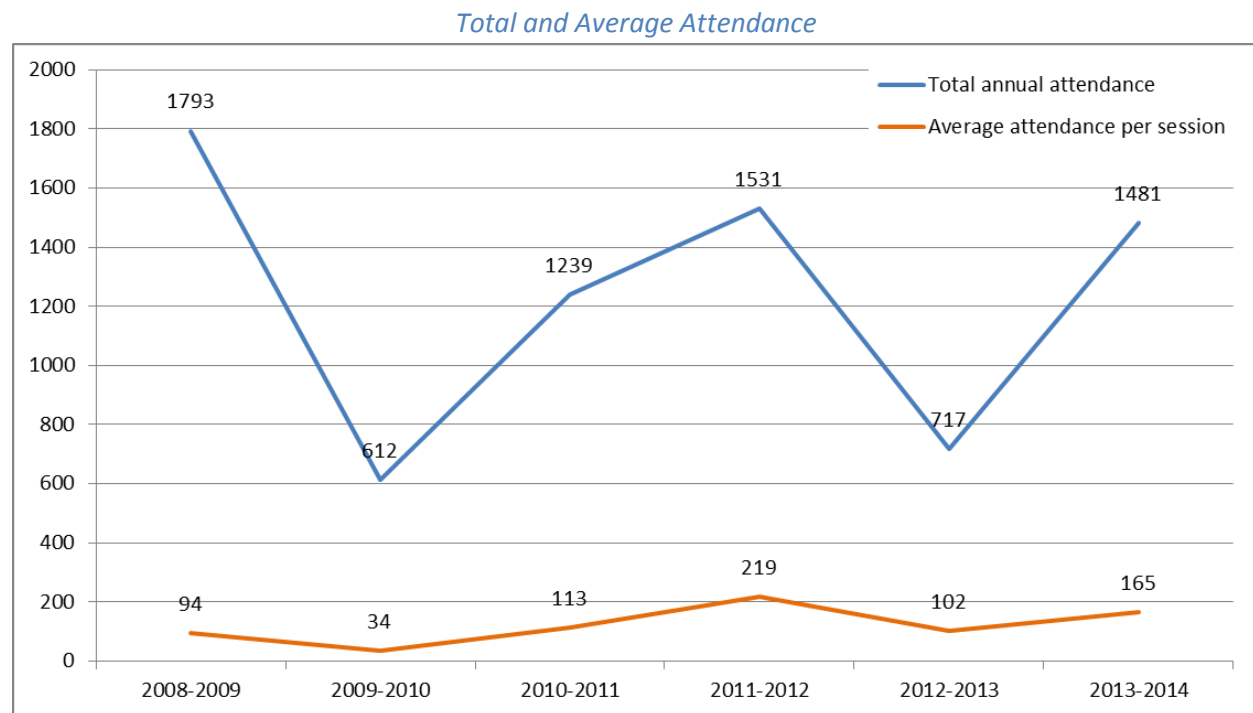
FASD Learning Series Attendance by Year

	2012/13	2013/14	2014/15
Total Attendance	717	762	1481
Number of sessions	7	9	9
Average attendance per session	102	85	165

² Attendance at the September session was low due to a significant delay in establishing the registration process. Registration was not available until one week prior to the webcast.

³ The internet connection was lost during the December presentation, and as a result the broadcast was unable to continue for about 30 minutes, but by the time the connection returned, many users had closed the presentation.

The graph below shows the total attendance for each year, as well as the average attendance per session, since the FASD Learning Series began in 2008/09.



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 9 sessions have been summarized and are presented by comparing the responses with those from 2012/13 and 2013/14. For ease of comparison average agreement ratings were determined by assigning numerical values to the rating scale (e.g. strongly agree=4; agree=3; disagree=2; strongly disagree=1) and the average of all the numerical ratings was converted to a percentage. Ratings of “I don’t know” were not included in the average rating.

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 2014/15 sessions.

Learning Objectives

The tables below show that similar to the 2013/14 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 Agree	Agree	Disagree	Strongly Disagree	Don't Know	Average Agreement
Learning objectives were clear.	2012/13 (n=142)	54%	39%	2%	--	6%	89%
	2013/14 (n=387)	64%	34%	1%	--	1%	91%
	2014/15 (n=808)	63%	34%	1%	--	2%	90% (n=794)

	Year	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know	Average Agreement
Learning objectives were met	2012/13 (n=142)	54%	39%	2%	--	6%	89%
	2013/14 (n=387)	62%	34%	1%	--	3%	91%
	2014/15 (n=808)	61%	34%	1%	--	3%	90% (n=785)

Content of Sessions

The following tables 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.

	Year	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know	Average Agreement
The content was relevant to me	2012/13 (n=142)	49%	45%	5%	--	1%	86%
	2013/14 (n=387)	63%	35%	1%	1%	1%	90%
	2014/15 (n=808)	61%	35%	2%	--	2%	90% (n=795)

	Year	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know	Average Agreement
I will be able to apply what I have learned	2012/13 (n=142)	46%	45%	5%	1%	4%	85%
	2013/14 (n=387)	55%	40%	1%	--	4%	89%
	2014/15 (n=808)	60%	34%	2%	0%	4%	90% (n=779)

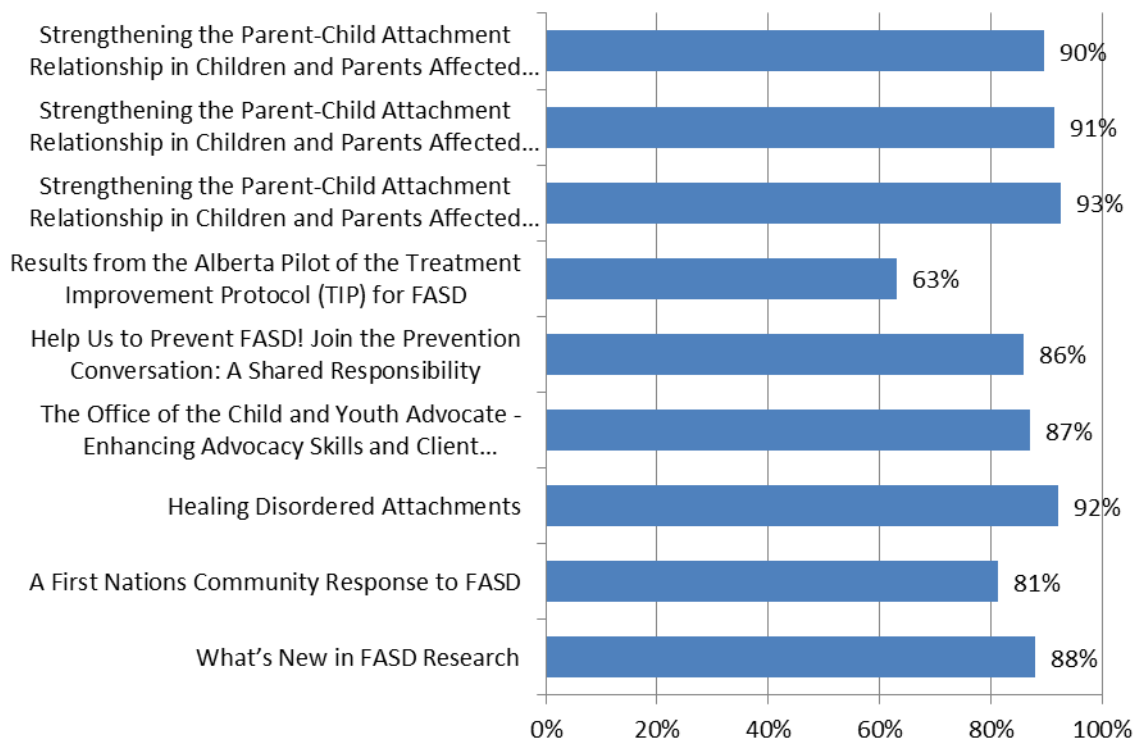
	Year	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know	Average Agreement
My awareness of this topic increased	2012/13 (n=142)	46%	45%	4%	1%	4%	85%
	2013/14 (n=387)	62%	32%	3%	--	2%	90%
	2014/15 (n=808)	59%	34%	4%	1%	2%	89% (n=792)

	Year	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know	Average Agreement
This was a valuable learning experience	2012/13 (n=142)	50%	42%	2%	1%	6%	87%
	2013/14 (n=377)	68%	29%	2%	--	2%	92%
	2014/15 (n=808)	67%	27%	3%	0%	3%	91% (n=787)

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 of “I don’t know” were not included in the average rating. Ratings for individual sessions presented in the chart below show that most of the ratings were very high, with all but one rating above 80%. The rating for December’s session, “Results from the Alberta Pilot of the Treatment Improvement Protocol (TIP) for FASD,” was much lower than the other sessions. This poor rating reflects the extreme technical difficulties with this broadcast: the internet connection was lost early in the session, and the online broadcast could not continue.

Overall Ratings of Session Content



The overall ratings of session content presented in the table below show that the average agreement rating was very high at 89%.

Overall ratings for session content by year

	Year	Excellent	Good	Fair	Poor	Don't Know	Average Agreement
Overall rating for content of the sessions.	2012/13 (n=142)	53%	39%	6%	1%	1%	87%
	2013/14 (n= 389)	61%	33%	4%	-	2%	90%
	2014/15 (n=808)	62%	31%	5%	1%	2%	89% (n=794)

Delivery Method

The following tables show ratings for questions relating to the webcast method of session delivery. Similar to previous years, respondents strongly agreed that the use of webcasting helped them attend the sessions (i.e. average agreement 96%). The ratings for video and audio quality were higher than 2013/14 at 91% each.

	Year	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know	Average Agreement
The use of webcasting helped me to attend	2012/13 (n=142)	83%	13%	1%	-	2%	96%
	2013/14 (n=378)	91%	8%	1%	-	-	98%
	2014/15 (n=808)	88%	8%	1%	1%	2%	96% (n=795)

	Year	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know	Average Agreement
Connecting to the webcast was easy	2012/13 (n=142)	77%	16%	1%	1%	6%	95%
	2013/14 (n=378)	74%	17%	5%	3%	1%	91%
	2014/15 (n=808)	81%	11%	4%	3%	2%	93% (n=793)

	Year	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know	Average Agreement
I was satisfied with the video quality	2012/13 (n=142)	76%	13%	8%	-	3%	93%
	2013/14 (n=377)	67%	23%	6%	3%	1%	89%
	2014/15 (n=808)	71%	21%	4%	2%	2%	91% (n=789)

	Year	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know	Average Agreement
I was satisfied with the audio quality	2012/13 (n=142)	67%	27%	2%	1%	2%	91%
	2013/14 (n=377)	69%	21%	5%	4%	1%	89%
	2014/15 (n=808)	72%	20%	4%	2%	2%	91% (n=788)

The tables below show that ratings for participating in group discussion and satisfaction with ability to submit questions are similar to the 2 previous years. The relatively low average agreement for “I participated in the group discussion” (67%) suggests that this is an area that could be improved upon in future years.

	Year	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know	Average Agreement
I participated in the group discussion	2012/13 (n=142)	26%	8%	54%	5%	7%	65%
	2013/14 (n=375)	28%	12%	46%	7%	7%	66%
	2014/15 (n=808)	29%	12%	44%	8%	7%	67% (n=750)

	Year	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know	Average Agreement
I was satisfied with my ability to submit questions	2012/13 (n=142)	50%	20%	4%	-	27%	91%
	2013/14 (n=376)	54%	25%	5%	1%	15%	89%
	2014/15 (n=808)	59%	20%	4%	1%	16%	90% (n=482)

Similar to previous years, most respondents viewed sessions alone (61%). Thirty-four percent reported having 1 to 5 individuals viewing a webcast at the same location. Unlike the previous two years, some respondents viewed with 11 to 20 other people and more than 20 other people (1% each).

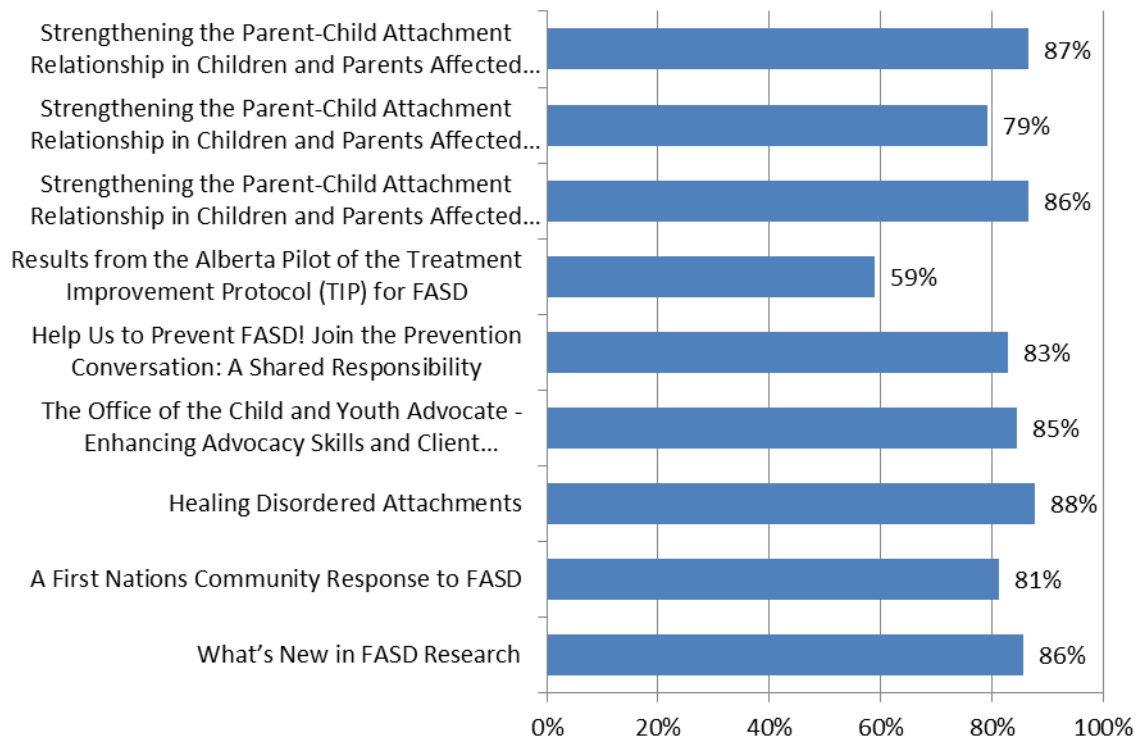
Approximately how many other people joined you for the webcast?

Number of people	2012/13 (n=142)	2013/14 (n=384)	2014/15 (n=808)
0	63%	66%	61%
1 to 5	35%	33%	34%
6 to 10	2%	2%	3%
11 to 20	--	--	1%
More than 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. Ratings of "I don't know" were not included in the average rating. Overall ratings for each session are shown in the chart below. The ratings ranged from a high of 88% to a low of 59%. The lowest rating corresponds to the session where the internet connection was lost.

Overall Rating of Webcasting as a Method of Delivery



The table below shows the ratings for the learning series delivery method. The average agreement rating for 2014/15 is slightly lower than for 2013/14. It is likely that ratings for the session that experienced technical difficulties contributed to the overall lower rating for this year.

	Year	Excellent	Good	Fair	Poor	Don't Know	Average Agreement
Overall rating for use of webcasting.	2012/13 (n=142)	62%	32%	4%	1%	2%	90%
	2013/14 (n=365)	59%	30%	7%	4%	1%	86%
	2014/15 (n=808)	58%	27%	5%	7%	2%	85% (n=788)

Participant Ratings of the Presenters

The following tables present ratings specifically pertaining to the presenters of the sessions. The presenter ratings continue to be very high (over 95%), which suggests that the presenters were well prepared, effective communicators, and knowledgeable in their subject area.

	Year	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know	Average Agreement
The presenter was knowledgeable	2012/13 (n=142)	77%	18%	1%	-	4%	95%
	2013/14 (n=388)	84%	15%	-	-	1%	96%
	2014/15 (n=808)	86%	13%	0%	0%	1%	97% (n=797)

	Year	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know	Average Agreement
The presenter was an effective communicator	2012/13 (n=142)	72%	24%	2%	-	2%	93%
	2013/14 (n=387)	80%	19%	1%	-	2%	95%
	2014/15 (n=808)	80%	17%	1%	0%	2%	95% (n=793)

	Year	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know	Average Agreement
The presenter was well prepared	2012/13 (n=142)	81%	17%	-	1%	1%	95%
	2013/14 (n=387)	82%	18%	-	-	1%	96%
	2014/15 (n=808)	83%	14%	1%	0%	2%	96% (n=793)

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 coded by theme and summarized, and are shown in the table below. The number of comments is the total number of comments included in that theme. Direct quotations are indicated by quotation marks; these quotations have been edited for spelling and grammar. Note that the number of summary comments may not equal the total number of comments counted in each theme: the summary comments are only meant to convey the strength and the diversity of comments.

Comments for individual sessions can be seen alongside the summaries of individual sessions in Appendix E.

How could we make this presentation more useful for you? (n=230 responses)		
Theme	# Comments	Sample comment(s)
Positive Comments	67	<ul style="list-style-type: none"> • The session was excellent • The session was informative • “I found the presentation very informative and inspiring. I am looking forward to the next session and thank you for having these sessions for us to learn and to be a better help and positive role model for those we work with.”
Technical	59	<ul style="list-style-type: none"> • Poor audio and/or video quality • Problems with freezing/lagging • Participants were unsure if their questions went through • Could not access the webcast • Make the webcast available on different devices
Presentation Content	49	<ul style="list-style-type: none"> • The content was excellent • Suggestions for very specific topics that the respondent would like to learn about (e.g. working with individuals with FASD in post-secondary schooling; Child Welfare and parents with FASD) • Respondents would like more practical strategies for working with individuals affected by FASD • More in-depth discussion of a topic, rather than a high-level overview • “The content was wonderful. The essence of humanity and dignity was very well represented.”
PowerPoint/handouts/outline	42	<ul style="list-style-type: none"> • Make the slides/handouts available ahead of time • Make the slides larger in the webcast screen • Archive the slides along with the video
Presenter	15	<ul style="list-style-type: none"> • The presenters did a great job • The presenter said “um” a lot, which respondents found distracting • The presenter didn’t always understand the questions being asked • The presenter used technical jargon, rather than language understood by non-professionals
Timing and length of presentation	10	<ul style="list-style-type: none"> • Make it clear that the presentation start time is in MST • Presentation was too long/too short • Would like to see presentations more often

How could we make this presentation more useful for you? (n=230 responses)		
Theme	# Comments	Sample comment(s)
Other	30	<ul style="list-style-type: none"> No suggestions Make the video available after the presentation has ended "I am passionate about FASD because my daughter lives with FASD. I am passionate about society becoming more educated about this topic and about bio moms." "This should be given to our support workers so they would be more understanding to the needs of involved."

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 mental health issues and FASD; skills to work with FASD; and addictions and FASD.

Other FASD Presentation Topics of Interest (n=800 respondents)

Topic	Percent of respondents who selected topic
Mental health issues and FASD	77%
Skills to work with FASD	70%
Addictions and FASD	64%
Teens and FASD	57%
Children and FASD	53%
Caregivers and FASD	52%
Adults and FASD	52%
Assessment/Diagnosis of FASD	51%
Employment and FASD	46%
Law and FASD	46%
Research on FASD	39%
Other ⁴	5%

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 majority of requests were for the intermediate level

⁴ Other topics for future presentations suggested by the respondents included FASD and parenting, schooling, parents with FASD, trauma and FASD, financial issues related to FASD, and prevention.

training. In 2013/14, the requests for introductory and advanced presentations were roughly equal; this year there are many more requests for advanced level training. This suggests that perhaps participants have attended multiple presentations, and now feel they are ready for more advanced material.

Level	Number	Percent
Introductory	99	12%
Intermediate	463	57%
Advanced	244	30%
Total	806	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 +12% to +19% with the average being +14%.

Percent Change in Perceived Knowledge by Session

Session	Sample Size	Avg Rating Pre Session (%)	Avg Rating Post Session (%)	Avg Change in Knowledge (%)	Number Improved (%)
Strengthening the Parent-Child Attachment Relationship in Children and Parents Affected by FASD: What We Now Know	49	74%	89%	+14%**	57%
Strengthening the Parent-Child Attachment Relationship in Children and Parents Affected by FASD: Red Flags & Practical Strategies	110	75%	90%	+15%**	55%
Strengthening the Parent-Child Attachment Relationship in Children and Parents Affected by FASD: Additional Practical Strategies	87	78%	91%	+13%**	44%
Results from the Alberta Pilot of the Treatment Improvement Protocol (TIP) for FASD	36	58%	78%	+19%**	64%
Help Us to Prevent FASD! Join the Prevention Conversation: A Shared Responsibility	66	74%	89%	+14%**	55%
The Office of the Child and Youth Advocate - Enhancing Advocacy Skills and Client Participation	71	74%	89%	+15%**	54%

Session	Sample Size	Avg Rating Pre Session (%)	Avg Rating Post Session (%)	Avg Change in Knowledge (%)	Number Improved (%)
Healing Disordered Attachments	150	74%	89%	+15%**	56%
A First Nations Community Response to FASD	113	75%	88%	+13%**	46%
What's New in FASD Research	117	77%	89%	+12%**	45%
Total	797	74%	89%	+14%**	52%

** Change was statistically significant at p<0.001.

A paired samples T-test was performed to determine whether or not the change in level of knowledge was statistically significant. Similar to the 2 previous years, the post-session increase in knowledge was found to be significant at a p-value of 0.001 (i.e. the result was not due to chance). Only complete sets of pre-post data were included in the determination of significance (i.e. if the respondent rated their knowledge before or after as "I don't know", or one rating was blank, the rating was not included in the average).

The average change in knowledge for 2014/15 was lower than the previous two years. This is unsurprising given that the average pre-session rating was 5% and 6% higher than the previous years. The average post-session rating remained high this year at 89%.

Percent Change in Perceived Knowledge by Year

Year	Sample Size (n)	Average Rating Pre Session (%)	Average Rating Post Session (%)	Average Change in Knowledge (%)	Number Improved (%)
2012/13	142	69%	86%	+17%** ⁵	-- ⁶
2013/14	372	68%	89%	+21%**	--
2014/15	797	74%	89%	+14%**	52%

** Change was statistically significant at p<0.001.

⁵ Data includes all sessions except for the April session as that data was not available

⁶ This was first calculated in 2014/15.

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. As of June 1st, 2015 there are 81 videos in the archive; when the remainder of this year's videos are added, there will be 83. Between July 2014 and May 2015 there were 18,942 views of the archived videos, which is a 382% increase over last year (3,931 views between July 2013 and May 2014). There was a total of 3,727 hours spent viewing the videos, which is a 51% increase over last year (2,476 hours). The overall average hours per viewing decreased by 68% from 0.63 hours (2013/14) to 0.20 hours (2014/15). This suggests that while many more people are accessing the videos, many viewers only watch for a short time before leaving the video. This could perhaps be the result of locating the videos by chance through a search engine or a YouTube search: these viewers watch for a short time before deciding it was not what they were looking for. In the future it would be useful to analyze a more detailed breakdown of time spent viewing the videos. In any case, the data for this year suggests that the archived videos continue to provide a significant amount of FASD information to the public even after the initial presentation has concluded.

Year	2013/14	2014/15	% Change
# Viewings	3,931	18,942	+382%
# hours spent viewing videos	2,476	3,727	+51%
Average hours per viewing	0.63	0.20	-68%

4.0 Conclusion

Overall the data presented in this evaluation suggests that the 2013/14 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.

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 14% 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 85%, which suggests that it is an 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

provided 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 provides further support to the claim that webcast technology can enhance access to educational sessions.

Besides increasing access to training, 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 use of the archived webcasts and videos described in this report further extends the reach and benefits of the FASD Learning Series. The more often the archived videos and webcasts are viewed, the more cost-effective they become.

The knowledge disseminated by the 2014/15 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.

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. Develop and implement a communication plan which will reach and generate new audiences while providing information about future demand. The communication plan should include clarifying for participants how to access the FASD Learning Series, including:
 - a. How to register
 - b. How to access presentation materials
 - c. How to sign in
 - d. How to access the live webcast
 - e. How to ask questions during the live webcast
 - f. How to complete an evaluation of the presentation
 - g. How to receive a certificate of attendance
2. Update the evaluation questionnaires to further refine the information collected, including information about the archived sessions.
3. Continue to refine the technical process to make webcast access easier for participants, and to improve the quality of webcast streaming.

Future Directions

The value of the FASD webinars for front line service providers has been clearly demonstrated in this and previous evaluations. Going forward, it is important to consider the role of the webinars in light of the shifting political and service delivery landscape in Alberta. We recommend that:

1. The FASD webinar series be delivered as an integral component of a multi-faceted “FASD Centre of Excellence” that integrates practice, research and training.
2. The FASD Education and Training Council review the publicly funded opportunities for education and training, including the webinars and the provincial conference, with a view to ensuring the provincial plan for education and training makes the best use of resources while meeting the training needs of caregivers and others working in the field.

Appendix A: Posters

Fall 2014 Poster



2014-15 FASD Learning Series

FALL SESSION INFORMATION



Part 1 of 3: Strengthening the Parent-Child Attachment Relationship in Children and Parents Affected by FASD: What We Now Know

Dr. Sonya Vellet
September 17, 2014, 9:00 - 11:00 am

Learning Objective:

- To summarize 50 years of research in the areas of attachment, child mental health, brain development, and FASD.

Part 2 of 3: Strengthening the Parent-Child Attachment Relationship in Children and Parents Affected by FASD: Red Flags & Practical Strategies

Dr. Sonya Vellet
October 15, 2014, 9:00 - 11:00 am

Learning Objective:

- To outline some red flags that could suggest difficulties in the parent-child attachment relationship.
- To provide practical suggestions about what parents can do to strengthen relationships with FASD-affected children and, thereby, give them the best start in life.

Part 3 of 3: Strengthening the Parent-Child Attachment Relationship in Children and Parents Affected by FASD: Additional Practical Strategies

Dr. Sonya Vellet
November 19, 2014, 9:00 - 11:00 am

Learning Objective:

- To provide additional practical suggestions about what parents can do to strengthen their relationships with their children.

Save the Dates

Presentations will be held on the third Wednesday of each month from 9:00 to 11:00 am.

- December 17, 2014 - TBA
- January 21, 2015 - The Prevention Conversation Project
- February 18, 2015 - The Office of the Child and Youth Advocate, Enhancing Advocacy Skills and Client Participation
- March 18, 2015 - Healing Disordered Attachments
- April 15, 2015 - TBA
- May 20, 2015, What's New In FASD Research

Webcasting and Registration Process

Register today to hear leading experts discuss FASD! Attendance is available in-person, via video conference, and via webcast. Sign-in and completion of the evaluation are necessary for the receipt of a certificate of attendance.

You can register for the sessions by visiting <http://fasd.alberta.ca/register.aspx>.

All sessions are broadcast live from the 12A boardroom on the 12th floor of the Milner Building at 10040 104 Street NW, Edmonton, AB.

Contact Information

For more information, please contact Josiah Toppin with Alberta Human Services at Josiah.Toppin@gov.ab.ca or by calling 780-422-6494.

You can also contact Nicole Bloudoff with Child, Adolescent, and Family Mental Health (CASA). Services at NBloudoff@casaservices.org or by calling 780-400-4592.

The FASD Learning Series is sponsored by the Government of Alberta with support from CASA.



2014-15 FASD Learning Series

WINTER SESSION INFORMATION

Alberta Government

Prevention Conversation Project

Hazel Mitchell & Lisa Rogozinsky
January 21, 2015, 9:00 - 11:00 am

Alcohol and pregnancy don't mix. We know that, but how do we talk about it? 'The Prevention Conversation: A Shared Responsibility' is a partnership between the Government of Alberta and the 12 networks it funds province-wide to offer supports for Fetal Alcohol Spectrum Disorder (FASD).

The training for offers tools to address personal topics—addiction issues, the need for a support group to have a healthy pregnancy, family planning, and partner dynamics.

On January 21, 2015, join Hazel Mitchell and Lisa Rogozinsky to learn all of it.

**The Office of the Child and Youth Advocate,
Enhancing Advocacy Skills and Client Participation**

Melanie McIntosh, Public Education Specialist
February 18, 2015, 9:00 - 11:00 am

Want to help vulnerable children and youth find their voice?

Join Melanie McIntosh, public education specialist working in systemic advocacy and outreach for the Office of the Child and Youth Advocate. The office is mandated to work with vulnerable young people across Alberta through one-on-one and systemic advocacy.

Save the Dates

Presentations will be held on the third Wednesday of each month from 9:00 to 11:00 am.

- March 18, 2015 - Healing Disordered Attachments
- April 15, 2015 - A First Nations Community Response to FASD
- May 20, 2015, What's New In FASD Research

Webcasting and Registration Process

Register today to hear leading experts discuss FASD! Attendance is available in-person, via video conference, and via webcast. Sign-in and completion of the evaluation are necessary for the receipt of a certificate of attendance.

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Contact Information

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The FASD Learning Series is sponsored by the Government of Alberta with support from CASA.

Appendix B: Participant Survey Response Rates

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

Session	Total Participants Attending	# of Surveys Returned	Response Rate
September 17, 2014	79	50	63%
October 15, 2014	209	110	53%
November 19, 2014	148	87	59%
December 17, 2014	69	42	61%
January 21, 2015	133	67	50%
February 18, 2015	150	71	47%
March 18, 2015	239	150	63%
April 15, 2015	237	114	48%
May 20, 2015	217	117	54%
Total	1481	808	55%

Appendix C: Participant Post-Session Survey

About You

City/Town:

Province/Territory:

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	I attended in person

The use of webcasting to deliver this presentation helped me attend this session.						
Connecting to the webcast was easy.						
I was satisfied with the video quality of the presentation.						
I was satisfied with the audio quality of the presentation.						
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 ☐ I 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 describe)

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

By Province

Location	Session Dates									Total	
	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	Apr-15	May-15	Number	Percent
AB	41	81	62	31	50	57	117	85	91	616	76%
BC	3	16	13	4	6	4	17	11	10	84	10%
MB	--	--	--	--	--	--	1	3	1	5	1%
NB	1	--	--	--	--	3	--	2	0	6	1%
NL	--	1	1	--	--	--	--	1	0	3	0%
NS	--	--	2	--	--	1	1	1	0	5	1%
NT	--	5	2	2	--	2	7	4	2	24	3%
NU	--	--	--	--	--	--	--	--	0	0	0%
ON	2	3	4	1	2	2	2	1	4	21	3%
PE	--	--	--	--	--	--	--	--	0	0	0%
QC	--	--	--	--	--	--	--	--	1	1	0%
SK	3	4	3	3	3	2	4	5	3	30	4%
YT	--	--	--	1	--	--	1	1	3	6	1%
USA	--	--	--	--	6	--	--	--	2	8	1%
Total	50	110	87	42	67	71	150	114	117	808	100%

Alberta cities and towns on following page

Alberta Cities and Towns

Location	# Connections
Edmonton	108
Calgary	68
Lethbridge	45
Red Deer	34
Medicine Hat	32
Fort McMurray	27
Grande Prairie	23
Wetaskiwin	20
Sherwood Park	16
Camrose	13
Edson	13
High Level	10
Lac La Biche	10
Peace River	9
Westlock	9
High Prairie	8
Lamont	8
Okotoks	7
Pincher Creek	7
St. Albert	7
Slave Lake	6
Whitecourt	6
Barrhead	5
Coaldale	5
Cold Lake	5
Fairview	5

Location	# Connections
Fort Macleod	5
Taber	5
Hinton	4
Magrath	4
Siksika	4
St. Paul	4
Vegreville	4
Wainwright	4
Alliance	3
Bentley	3
Carstairs	3
East Prairie Metis Settlement	3
Raymond	3
Brocket	2
Drumheller	2
Fairview/Grimshaw	2
Fort McKay	2
Gibbons	2
Grimshaw	2
Lloydminster	2
Lousana	2
Maskwacis	2
Redwater	2
Rimbey	2
Turner Valley	2
Airdrie	1
Alexis First Nation	1

Location	# Connections
Athabasca	1
Blackfalds	1
Blairmore	1
Cardston	1
Claresholm	1
Cochrane	1
Drayton Valley	1
Fort McKay First Nation	1
Fort Saskatchewan	1
Fort Worth	1
Goodfish Lake	1
Grande Cache	1
Hay Lakes	1
High River	1
Innisfail	1
Killam	1
Leduc	1
Nobleford	1
Paradise Valley	1
Redcliff	1
Rocky Mountain House	1
Spring Lake	1
Stettler	1
Stirling	1
Tomahawk	1
Winfield	1

Appendix E: Individual Session Ratings

Individual session ratings are summarized in the tables below and presented in chronological order. The overall session rating is the respondents' average rating for the question "Overall, the session content was ____." 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. Responses of "I don't know" were not included in the average ratings for session content or change of knowledge. The comments are those made specifically about that session and have been summarized unless there are quotation marks indicating a direct quote from a respondent (direct quotes have been edited for spelling and grammar). The comment sample size is the total number of people who made comments.

Session #1

Title	Strengthening the Parent-Child Attachment Relationship in Children and Parents Affected by FASD: What We Now Know
Date	September 17, 2014
Presenter(s)	Dr. Sonya Vellet
Attendance	79
Survey response rate	63%

Overall rating of session content 90% (n=50)
 Group change in knowledge +14% (n=49)

Content of Sessions (n=50 unless otherwise stated)	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know	Average Agreement Rating
The content was relevant to me	64%	34%	--	--	2%	91% (n=49)
I will be able to apply what I have learned	58%	42%	--	--	--	90%
My awareness of this topic increased	62%	32%	2%	--	4%	91% (n=48)
This was a valuable learning experience	72%	24%	--	--	4%	94% (n=48)

The presenter was: (n=50 unless otherwise stated)	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know	Average Agreement Rating
Knowledgeable	94%	6%	--	--	--	99%
An effective communicator	68%	28%	2%	--	2%	92% (n=49)
Well prepared	84%	14%	--	--	2%	96% (n=49)

How could we make this presentation more useful for you? (n=16 responses)		
Theme	# Comments	Sample comment(s)
Presentation Content	7	<ul style="list-style-type: none"> • Would like more practical strategies (3) • Great information (2) • Good review of attachment • Leads well into future sessions • Activities/interactive exercises could be incorporated into case studies • Content seemed more trauma-specific, with FASD as an afterthought
PowerPoint/handouts/ outline	5	<ul style="list-style-type: none"> • Provide the slides prior to the presentation to review and for participants to write notes on (5) • Alternatively, provide an outline of the topics (3) • In the webcast, the PowerPoint slides are too small to read (1)
Positive Comments	4	<ul style="list-style-type: none"> • Can't wait for the archived video • Great lead in to future sessions
Presenter(s)	2	<ul style="list-style-type: none"> • Presenter said "um" a lot, which was distracting (2)
Technical	1	<ul style="list-style-type: none"> • In the webcast, the PowerPoint slides are too small to read (1)
Other	2	<ul style="list-style-type: none"> • "Child Welfare and FASD parents" • Would like to know of professionals who specifically work with this population, where they are located

Session #2

Title Strengthening the Parent-Child Attachment Relationship in Children and Parents Affected by FASD: Red Flags & Practical Strategies
 Date October 15, 2014
 Presenter(s) Dr. Sonya Vellet & Mary Berube
 Attendance 209
 Survey response rate 53%

Overall rating of session content 94% (n=107)
 Group change in knowledge +15% (n=110)

Content of Sessions (n=110 unless otherwise stated)	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know	Average Agreement Rating
The content was relevant to me	70%	28%	1%	--	1%	92% (n=109)
I will be able to apply what I have learned	65%	29%	1%	--	5%	92% (n=104)
My awareness of this topic increased	72%	25%	3%	--	1%	92% (n=109)
This was a valuable learning experience	72%	25%	2%	--	2%	93% (n=108)

The presenter was: (n=110 unless otherwise stated)	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know	Average Agreement Rating
Knowledgeable	90%	10%	--	--	--	98%
An effective communicator	85%	15%	1%	--	--	96%
Well prepared	92%	8%	--	--	--	98%

How could we make this presentation more useful for you? (n=41 responses)		
Theme	# Comments	Sample comment(s)
PowerPoint/handouts/outline	11	<ul style="list-style-type: none"> • Provide the PowerPoint slides (9) • Keep the slide on screen for longer (2) • The slides on screen were too small
Technical	9	<ul style="list-style-type: none"> • Lost signal/presentation froze (4) • Inability to have questions addressed • Don't know if question went through • Wasn't sure how to ask questions • Technical difficulties using iPad • Poor audio quality, echo when the presenter was speaking • Update the information on the webcast page to reflect the current topic and correct date • Technical support was unable to help in a timely manner
Positive comments	9	<ul style="list-style-type: none"> • Great presentation (7) • "I found the presentation very informative and inspiring, I am looking forward to the next session and thank you for having these sessions for us to learn and to be a better help and positive role model for those we work with." • This presentation was a great refresher
Presentation content	7	<ul style="list-style-type: none"> • Include examples • Focus on employment/education settings for adults with FASD • "Loved the attachment lens" • There was a lot of repetition from the previous session • Get into techniques of working with individuals/children with FASD • Strategies for parenting a child with FASD • Include something hands-on like a quiz
Presenter(s)	5	<ul style="list-style-type: none"> • Enjoyed the dialogue between the presenters • It would have worked better if the presenters had spoken at different times, instead of together • Excellent choice of presenters • The presenter said "um" a lot, and it distracted from the presentation • The presentation lacked energy and enthusiasm

How could we make this presentation more useful for you? (n=41 responses)		
Theme	# Comments	Sample comment(s)
Other	7	<ul style="list-style-type: none"> • State in correspondence that the start time is in MST • Make the presentation 2.5 hours long • Try a different time slot, alternate mornings and afternoons • “This should be given to our support workers so they would be more understanding to the needs of involved” • “We were ecstatic that this was offered via webcast. As we live in the Northern region this has opened an opportunity for us which has been a restriction in the past. We're just happy to have this option.” • “Could you come to Maskwacis Cultural College and do a presentation?”

Session #3

Title Strengthening the Parent-Child Attachment Relationship in Children and Parents Affected by FASD: Additional Practical Strategies
 Date November 19, 2014
 Presenter(s) Mary Berube
 Attendance 148
 Survey response rate 59%

Overall rating of session content 93% (n=87)
 Group change in knowledge +13% (n=87)

Content of Sessions (n=87 unless otherwise stated)	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know	Average Agreement Rating
The content was relevant to me	71%	26%	2%	--	--	92%
I will be able to apply what I have learned	75%	24%	--	--	1%	94% (n=86)
My awareness of this topic increased	69%	30%	--	--	1%	92% (n=86)
This was a valuable learning experience	83%	16%	--	--	1%	96% (n=86)

The presenter was: (n=87 unless otherwise stated)	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know	Average Agreement Rating
Knowledgeable	92%	8%	--	--	--	98%
An effective communicator	91%	7%	2%	--	--	97%
Well prepared	93%	7%	--	--	--	98%

How could we make this presentation more useful for you? (n=24 responses)		
Theme	# Comments	Sample comment(s)
Positive comments	11	<ul style="list-style-type: none"> The session was excellent/useful/informative (11) "These sessions are excellent and very informative, this morning session touched on a lot of issues that I am currently dealing with in my line of work... Thank you for the sessions, your time and compassion."
PowerPoint/handouts/outline	6	<ul style="list-style-type: none"> Provide the PowerPoint slides (6)
Presentation content	3	<ul style="list-style-type: none"> Information related to counseling Information to assist young adults with FASD in higher education, employment, and relationships Specific strategies for high school students with FASD to help them be successful in school

How could we make this presentation more useful for you? (n=24 responses)		
Theme	# Comments	Sample comment(s)
Technical	1	<ul style="list-style-type: none"> The webcast cut out and the audio was poor
Presenter(s)	1	<ul style="list-style-type: none"> Presenter said “um” a lot, which was distracting
Other	7	<ul style="list-style-type: none"> No changes (2) “I realize that FASD is a disability but I also believe that these people are all so different that one specific thing will not help... I believe and open mind, a lot of patience and time will help” “Continuing with these sessions is my biggest concern, we need the education especially when working with children we may be affected.” Make presentation available for a few days in case there’s a scheduling conflict Time of presentation was good

Session #4

The internet connection was lost during the December presentation, and as a result the broadcast was unable to continue for about 30 minutes, but by the time the connection returned, many users had closed the presentation. The presentation continued as planned, but was only available to those attending in person or via videoconference. The issue involved IT staff resetting the internet connection without notifying those involved with producing the FASD Learning Series on December 17. The issue was identified at the FASD Education and Training Council and was also brought to the attention of the FASD Service Network Manager, who ensured that the building IT staff was made aware of the issue. To mitigate the effects of the problem, the CASA Education Research Assistant emailed all who registered for the session to inform them of the problem, as well as to ensure that the registrants would be notified once the video was made available online. The video was posted to the online video archive as soon as it became available. The archived video was viewed 125 times between December 19, 2014 and May 31, 2015. It is unknown how many of those 125 viewers rated the presentation, and how many ratings were based on the live broadcast before the internet connection was lost.

The attendance, response rate, and ratings for this presentation should be interpreted with caution as they may not accurately represent the group.

Title	Results from the Alberta Pilot of the Treatment Improvement Protocol (TIP) for FASD
Date	December 17, 2014
Presenter(s)	Dr. Carmen Rasmussen & Katrina Kully-Martens
Attendance	69
Survey response rate	61%

Overall rating of session content 78% (n=34)
 Group change in knowledge +19% (n=36)

Content of Sessions (n=42 unless otherwise stated)	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know	Average Agreement Rating
The content was relevant to me	14%	48%	12%	7%	19%	71% (n=34)
I will be able to apply what I have learned	19%	36%	12%	5%	29%	74% (n=30)
My awareness of this topic increased	33%	36%	7%	2%	21%	82% (n=33)
This was a valuable learning experience	36%	33%	7%	5%	19%	81% (n=34)

The presenter was: (n=42 unless otherwise stated)	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know	Average Agreement Rating
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Knowledgeable	60%	19%	--	--	21%	94% (n=33)
An effective communicator	55%	19%	2%	--	24%	92% (n=32)
Well prepared	62%	14%	--	--	24%	95% (n=32)

How could we make this presentation more useful for you? (n=21 responses)		
Theme	# Comments	Sample comment(s)
Technical	14	<ul style="list-style-type: none"> • Could not log in, could not view part of webcast (10) • Make it easier to access the webcast, clarify how to access it (2) • The webcasts make it possible for me to attend (2)
PowerPoint/handouts/ outline	3	<ul style="list-style-type: none"> • Provide slides (2) • The presentation and slides were easy to follow
Positive comments	2	<ul style="list-style-type: none"> • “This presentation was very informative and enjoyable. It was great to be aware of the new treatments available for FASD. This presentation was very useful in my front line service.”
Other	5	<ul style="list-style-type: none"> • “It was not made clear what was being discussed at the session prior to my attendance based on the cognitive information handout provided by AHS” • “My granddaughter is afraid of animals although she can tell you information on any animal, so this presentation explained exactly how the interaction for client and animal could make a huge difference in the client’s life.” • “Support for adults who are affected by the diagnosis of FASD in Education and Employment situations.” • “I thought there would be more in the research. Was not what I wanted out of this subject. Was expecting more I think.” • “I would need information on the validity of the tool before I could bring it to my employer as a possible assessment tool. “

Session #5

Title Help Us to Prevent FASD! Join the Prevention Conversation: A Shared Responsibility
 Date January 21, 2015
 Presenter(s) Hazel Mitchell, Rod DeVries, and Debbie Collins
 Attendance 133
 Survey response rate 50%

Overall rating of session content 86% (n=67)
 Group change in knowledge +14% (n=66)

Content of Sessions (n=67 unless otherwise stated)	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know	Average Agreement Rating
The content was relevant to me	64%	36%	--	--	--	91%
I will be able to apply what I have learned	64%	36%	--	--	--	91%
My awareness of this topic increased	54%	42%	4%	--	--	87%
This was a valuable learning experience	67%	30%	3%	--	--	91%

The presenter was: (n=67 unless otherwise stated)	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know	Average Agreement Rating
Knowledgeable	91%	9%	--	--	--	98%
An effective communicator	84%	15%	1%	--	--	96%
Well prepared	87%	12%	--	1%	--	96%

How could we make this presentation more useful for you? (n=19 responses)		
Theme	# Comments	Sample comment(s)
Positive Comments	7	<ul style="list-style-type: none"> "I'm grateful that these presentations exist and now know I can go back and view sessions I missed." "This presentation was very informative and enjoyable. I look forward to future presentations and discussions on this topic."
Technical	6	<ul style="list-style-type: none"> Audio was poor, or cut in and out (3) Make it accessible on portable devices Make it possible to pause and rewind the video Unable to view YouTube videos as they were too small Fewer technical problems this time
PowerPoint/handouts/ outline	2	<ul style="list-style-type: none"> Make the presentation slides available for viewing during the presentation (2)

How could we make this presentation more useful for you? (n=19 responses)		
Theme	# Comments	Sample comment(s)
Presentation content	2	<ul style="list-style-type: none"> “It was a good presentation but seemed to skim over a very large topic. I would have preferred a more in-depth learning experience with a narrowed down subject matter. For example, specifically speak about how to approach (strategies) the prevention conversation. Strategies that are known to be effective.” “There seemed to be a strong element of fear-mongering in there that I’m not sure was necessary.”
Other	5	<ul style="list-style-type: none"> Communicate that the presentation starts at 9:00 Mountain Time. There was some confusion in other time zones. (2) Would like presentations more than once a month. (2)⁷ Not applicable

⁷ It is likely that these two comments came from the same person completing the survey twice.

Session #6

Title The Office of the Child and Youth Advocate - Enhancing Advocacy Skills and Client Participation
 Date February 18, 2015
 Presenter(s) Arlene Eaton-Erickson & Erin Jamieson
 Attendance 150
 Survey response rate 47%

Overall rating of session content 87% (n=71)
 Group change in knowledge +15% (n=67)

Content of Sessions (n=71 unless otherwise specified)	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know	Average Agreement Rating
The content was relevant to me	56%	41%	3%	--	--	88%
I will be able to apply what I have learned	58%	38%	4%	--	--	88%
My awareness of this topic increased	55%	38%	7%	--	--	87%
This was a valuable learning experience	61%	34%	1%	1%	3%	89% (n=69)

The presenter was: (n=71 unless otherwise specified)	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know	Average Agreement Rating
Knowledgeable	83%	17%	--	--	--	96%
An effective communicator	80%	15%	--	3%	1%	94% (n=70)
Well prepared	73%	23%	3%	--	1%	93% (n=70)

How could we make this presentation more useful for you? (n=20 responses)		
Theme	# Comments	Sample comment(s)
Positive Comments	11	<ul style="list-style-type: none"> The webinar format is much appreciated (3) "I thought the presentation was very useful for me in my work field." "Your song was awesome great way to introduce advocating." "The presentation was very useful and I will be attending additional sessions as they become available."

How could we make this presentation more useful for you? (n=20 responses)		
Theme	# Comments	Sample comment(s)
Presentation Content	5	<ul style="list-style-type: none"> • Presentation didn't seem geared to professionals, but rather to the public. Seemed to focus on the justification for the Child Advocate's office (2) • Have a webinar participant who has FASD share their story • Looking for information to help families move forward
Technical	4	<ul style="list-style-type: none"> • Audio cutting in and out (2) • Sometimes difficult to connect to system • Make the presentations available on mobile devices
PowerPoint/handouts/ outline	2	<ul style="list-style-type: none"> • Leave slides on screen for longer • Provide more handouts
Other	3	<ul style="list-style-type: none"> • Needs more notice that the webinar will occur • Presenters didn't seem to understand questions

Session #7

Title Healing Disordered Attachments
 Date March 18, 2015
 Presenter(s) Dr. Wanda Polzin
 Attendance 239
 Survey response rate 63%

Overall rating of session content 87% (n=150)
 Group change in knowledge +15% (n=150)

Content of Sessions (n=150 unless otherwise stated)	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know	Average Agreement Rating
The content was relevant to me	69%	30%	1%	--	1%	92% (n=149)
I will be able to apply what I have learned	67%	31%	1%	--	1%	92% (n=148)
My awareness of this topic increased	63%	33%	4%	--	--	90%
This was a valuable learning experience	73%	23%	2%	--	1%	93% (n=148)

The presenter was: (n=150 unless otherwise stated)	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know	Average Agreement Rating
Knowledgeable	91%	9%	--	--	--	98%
An effective communicator	82%	18%	--	--	--	96%
Well prepared	89%	11%	--	--	--	97%

How could we make this presentation more useful for you? (n=40 responses)		
Theme	# Comments	Sample comment(s)
Positive Comments	13	<ul style="list-style-type: none"> • Excellent presentation (9) • "She was a GREAT presenter! Calm and easy to understand; Simple facts with tangible ways to implement in the end." • "I do not have any suggestions to make these webcasts more useful. The two I have 'attended' to date have both been most excellent, in everything from ease in signing in to the actual presentations themselves." • "You all do an AWESOME job making this important information so accessible :) Thank you !!!"

How could we make this presentation more useful for you? (n=40 responses)		
Theme	# Comments	Sample comment(s)
Presentation Content	10	<ul style="list-style-type: none"> • More information about how the content could be applied to adult populations (3), teens(1), and ethnically diverse groups (1) • “I'd be interested in talks that have less of a large overview and focus more on specific skills relevant to working with individuals with ASD and methods of treatment.” • Better explain the link between FASD and developmental trauma. • “More focus on how to heal negative impacts of stress” • Provide more stories or examples • “Found ‘Still face experiment’, sensory profile info and KIT time to be relevant and timely content for my work environment.” • “I would like to see what is really out there in actively changing brain patterns to help workers, care-givers, and FASD affected people.” • Use more videos
Technical	10	<ul style="list-style-type: none"> • Poor audio quality (3) • Poor video quality (3) • Broadcast didn't work • Unable to log in, possibly as a result of the technology available at the participant's work site • “Initially we couldn't hear the questions that were being asked, but then the participants were given a microphone.” • “This webinar was well organized and technically sound, excellent improvements from previous sessions.” • “The format to check in online was easy and accessible, cost effective, good quality.” • “After I logged in the message on the screen said to wait and that the presentation would start on its own. It did not start on its own so not until I hit the back button (an hour later) and noticed the play button was I able to join the webcast. Very disappointed that I missed the first half!”
PowerPoint/handouts/ outline	8	<ul style="list-style-type: none"> • It's good to have the slides and handouts (4) • Would have liked a copy of the slides (3) • The handouts were easy to access and print
Ability to watch the presentation later	4	<ul style="list-style-type: none"> • Would like to have the video available to review later, or to watch if they missed part of the presentation (3) • Glad the presentation will be broadcast again

How could we make this presentation more useful for you? (n=40 responses)

Theme	# Comments	Sample comment(s)
Other	4	<ul style="list-style-type: none"> • “A ten minute break at the 55 minute point of the presentation” • “I am passionate about FASD because my daughter lives with FASD. I am passionate about society becoming more educated about this topic and about bio moms.”

Session #8

Title A First Nations Community Response to FASD
 Date April 15, 2015
 Presenter(s) Teresa O’Riordan and Rupert Arcand
 Attendance 237
 Survey response rate 48%

Overall rating of session content 81% (n=114)
 Group change in knowledge +13% (n=113)

Content of Sessions (n=114 unless otherwise stated)	Strongly Agree	Agree	Disagree	Strongly Disagree	Don’t Know	Average Agreement Rating
The content was relevant to me	54%	40%	4%	--	1%	88% (n=113)
I will be able to apply what I have learned	51%	40%	4%	--	4%	87% (n=109)
My awareness of this topic increased	47%	36%	12%	3%	2%	83% (n=112)
This was a valuable learning experience	56%	34%	7%	--	3%	88% (n=111)

The presenter was: (n=114 unless otherwise stated)	Strongly Agree	Agree	Disagree	Strongly Disagree	Don’t Know	Average Agreement Rating
Knowledgeable	75%	24%	1%	--	--	94%
An effective communicator	72%	25%	3%	--	--	92%
Well prepared	68%	29%	2%	1%	--	91%

How could we make this presentation more useful for you? (n=36 responses)

Theme	# Comments	Sample comment(s)
Positive Comments	9	<ul style="list-style-type: none"> “It was a great presentation – the presenters were very knowledgeable, the webcast access was very helpful, and the presentation was available at a good time. I appreciate it – thank you!” “I really enjoyed this teaching... So much to learn!” “Well done, I hope everyone slowed down and took the time to listen.”

How could we make this presentation more useful for you? (n=36 responses)

Theme	# Comments	Sample comment(s)
Presentation Content	12	<ul style="list-style-type: none"> • More information about how to assist front line workers working with individuals with FASD (5), across multiple cultures and age groups • Presentation content was too basic (2) • Information on how to work with First Nations support groups • Emphasis on the assessment process • Discussion got the respondent wondering about FASD in other cultural groups • "The content was wonderful. The essence of humanity and dignity was very well represented." • "Identify how challenges in building relationship/trust were overcome. Address accountability from all sides of the issue. Acknowledge that being culturally sensitive involves recognition that there aren't just two peoples in Canada and that as we grow together as a nation, we need to draw from the strengths and experience that exist."
Technical	11	<ul style="list-style-type: none"> • The audio or visual connection was poor (8) • Difficult to connect (3) • The medium was good
PowerPoint/handouts/ outline	4	<ul style="list-style-type: none"> • Slides were too small/unclear to read during the webcast (3) • More information on the handout/slides (2) • Provide the slides further in advance of the presentation so they can be printed
Other	4	<ul style="list-style-type: none"> • "Ability to engage in questions or further discussion with the presenters while the topic is still fresh." • Have a one-hour presentation • Offer presentations more regularly • "N/A"

Session #9

Title What's New in FASD Research
 Date May 20, 2015
 Presenter(s) Jacquie Pei, Marnie Hutchison and Katy Wyper
 Attendance 217
 Survey response rate 54%

Overall rating of session content 90% (n=115)
 Group change in knowledge +12% (n=115)

Content of Sessions (n=117 unless otherwise stated)	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know	Average Agreement Rating
The content was relevant to me	60%	38%	1%	--	1%	90% (n=116)
I will be able to apply what I have learned	56%	38%	3%	--	3%	89% (n=114)
My awareness of this topic increased	57%	40%	1%	1%	1%	89% (n=116)
This was a valuable learning experience	65%	32%	3%	--	1%	91% (n=116)

The presenter was: (n=117 unless otherwise stated)	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know	Average Agreement Rating
Knowledgeable	85%	14%	--	--	2%	95% (n=115)
An effective communicator	83%	13%	2%	--	3%	93% (n=114)
Well prepared	87%	9%	1%	--	3%	95% (n=114)

How could we make this presentation more useful for you? (n=13 responses)		
Theme	# Comments	Sample comment(s)
Presentation Content	4	<ul style="list-style-type: none"> • Topics to assist those working with individuals with FASD • More ideas/information about interventions in a classroom setting • "More in-depth research on specific interventions and accommodations that are effective in the classroom setting." • "More specifics on clinically related research areas. For example, instead of saying research found unique profile or differences, explaining what those differences and uniqueness are."

How could we make this presentation more useful for you? (n=13 responses)		
Theme	# Comments	Sample comment(s)
Technical	3	<ul style="list-style-type: none"> • Was unable to view the presentation, or had difficulty with audio and/or video (3) • Appreciates the ability to view online
Positive Comments	2	<ul style="list-style-type: none"> • Enjoyed the presentation • The presentation was very useful
PowerPoint/handouts/ outline	2	<ul style="list-style-type: none"> • Read the PowerPoint less • Provide handouts for all presentations
Other	3	<ul style="list-style-type: none"> • “How to access assessment services.” • “Here in Yukon we need the turnover in staff to be minimal. Those of us with any fasd effects find it hard adjusting to new people all the time. Like a stick in the spokes of a tire of your bike. Sudden changes [throw] you for a loop in the brain causing reactions” • “Ongoing monthly webinars would be great!!”