

Community Impact Report 2019-2020



SOUTH
ALBERTA
FASD
NETWORK

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*A culture of collaboration.
A vision of change.*

1. Message from the Chair

I am indeed honored to have the responsibility and privilege to be the Chair of the South Alberta FASD Network.

The South Alberta FASD Network continues to be recognized provincially and nationally as a leader in new approaches and programs supporting FASD, as we deliver against the four identified pillars and pursue our Vision and Mission.

In serving the individuals living with FASD and their families in our community, I continue to be impressed with our contracted agencies, the Leadership Team members, and the South Alberta FASD General network membership and all the identified partners for their positive attitude of cooperation, collaboration and accomplishment.

Your dedication, focus and commitment to helping, serving, and educating our community is truly exemplary. We cannot do this work alone. It takes extensive partnerships, collaboration and ingenuity to do the work. You make this happen and we are extremely proud of the work you do, in reaching agency program and Network stated outcomes.

In spite of no increased funding for many years, and increased demands of more complex clients, we have continued to be a strong Network. We have learned how to work smarter, and with more creativity – in spite of limitations.

If more resources were available the South Alberta FASD network could increase existing programs and thus reach more individuals and families. However, we must stay the course at present, and continue to do the amazing job that we do, with the resources that we are allocated. I thank the South Alberta FASD Network Leadership Team for their dedicated commitment and guidance in helping us reach our goals: and Debbie Deak and Brenda Burton our Network Co- Coordinators for keeping the Network updated and on track with the business side of our operation.

With all of your knowledge, commitment, and dedication the South Alberta FASD Network is ready for 2020-2021 and beyond. Given the uncertain times ahead of us with the presence of COVID 19, there will be challenges, but the South Alberta FASD Network will rise above these issues and support the individuals living with FASD, who need our help and support.

Respectively Submitted
Hazel Mitchell PHEc
Chair, South Alberta FASD Network
June 16, 2020

2. Highlights

In 2019-2020 the South Alberta FASD Network, its contracted agencies, service partners, stakeholders and community members continued to work co-operatively and collaboratively to support and engage individuals and caregivers impacted by FASD.

As reported in the 2018-2019 Impact Statement, contracted agencies have worked diligently toward meeting their identified program outcomes. This does not happen without dedicated and committed staff who go above and beyond to support the individuals with whom they work. Of importance and deserving of mention, is that the agencies contracted through the Network provide support beyond their contractual obligations. This commitment is not only appreciated by the Network but has positively impacted clients, their families and respective communities.

The past year has been one of experiencing both successes and challenges. Hazel Mitchell, Network Chair, had the experience and knowledge that was required throughout 2019-2020 in providing direction to both the Leadership Team and Co-Coordinators. During the year, Network services, supports, awareness and prevention campaigns, as well as community engagement endeavors continued according to plan; no one could have predicted that March 2020 would see the world responding to a pandemic. Through the expert guidance of both Hazel Mitchell and the Leadership Team, services continued to be provided; protocols and procedures consistent with both Alberta Health Services and respective Agency mandates were followed. New and modified ways of meeting the needs of clients were developed and delivered.

The Leadership Team is strengthened by the diversity in its membership; new community partners, such as ARCHES and the YWCA, have joined its membership. Indigenous participation is valued, appreciated and needed. Collectively, the agencies, Ministries and community partners who form the Leadership Team provide expertise in guiding the Network; their wisdom in understanding the needs of children, adults and caregivers affected by FASD within our region is invaluable. The City of Lethbridge recognized the importance of work being done through the South Alberta FASD Network, and requested representation from the Leadership Team on their governance committees structured to meet the needs of vulnerable populations.

In recognition of International FASD Day on September 9th, the Network sponsored a regional promotion to bring awareness to the prevention of FASD:

- More than 80 businesses who sell alcohol (restaurants, bars, pubs and liquor stores) used the Network coasters in place of their own during the week of September 9th; additionally, they displayed post cards and posters with FASD prevention messaging on them
- The Network attended several community events, distributed Network promotional materials, and had conversations with attendees about the prevention of FASD. These included the Lethbridge College New Student Orientation Week, the Word on the Street Festival (hosted by Lethbridge Public Library), “Shelter Me Party in the Park” (hosted by McMan in Lethbridge), the Crossings Library which connects two large high schools (Lethbridge) and “Ready Set Go” (in both Fort Macleod and Lethbridge).
- Various social media platforms and local publications were accessed to highlight the importance of abstaining from alcohol during pregnancy.

The Network continues to provide in-service sessions at the General Network Meetings which occur every third month. We were also fortunate enough to be able to host a full day conference in September, 2019 with well over 150 participants. Dr. Peter Choate spoke on FASD and Stigma and Dr. Michelle Stewart spoke on FASD and the Justice system and how it is related to TRC Action #34. Attendees at the conference indicated that the training was very informative and increased their understanding of the issues faced by individuals and care-givers impacted by FASD.

The FASD Network as well as contracted agencies and community partners continue to engage in a Collective Wisdom process that is a “Best Practice” Model for individual case planning and management. The process allows for front line staff to collectively meet and consult about clients presenting with the most complex needs. This process has met with huge success, as

contracted agencies and invited partners work together to collaboratively determine “next steps” for both immediate action and long-term supports. Staff leave the consultation with concrete recommendations, as well as a record of “Who” is responsible for “What” and “By What Date.” Inherent in the process, is the support staff feel in the case planning they have in place for their clients. A decision was made this year to continue to meet on a monthly basis even if there are no complex cases to discuss so the group can meet on a regular basis to discuss any concerning systemic issues that may impact all of the individuals and their care-givers they work with. Over the past year we have also seen an increase in community partners who are interested in being involved in the Collective Wisdom process.

The Christmas Carnival held in December, 2019 was certainly a highlight for the South Alberta FASD Network. This event, organized by the Network, would not have been possible without the financial support from private and corporate donors and the participation of partnering agencies. The Network received in excess of \$15,000 from members of the community; new donors included businesses such as Winners’ BINGO. The Carnival has become an annual event for families and caregivers of children either suspected of having or diagnosed with FASD. This past year in excess of 400 children and caregivers attended the Carnival. The volunteer support the Network received from agencies and Ministries not funded by the Network deserves mention – 2019 saw more than 85 participants from the community volunteer their time and resources to offer activities, food and beverages to the families. Jack Hazelwood, Leadership Team, and Brenda Burton, Co-Coordinator, volunteered to be Mr. and Mrs. Claus and distributed gifts to the children. The Honourable Minister of Community and Social Services, Rajan Sawhney, sent a congratulatory letter to the Network in recognition of the Carnival and what it offered families.

Although significant strides have been made this past year, there are still many obstacles faced by those affected by FASD. Some of these challenges include securing permanent housing, access to appropriate mental health and addiction services, and insufficient community resources.

Programs and agencies funded through the Network are at and beyond capacity; without increased provincial funding it is very possible next year may see a decrease in service. This is of grave concern, common to all Networks across the province. The Provincial Cross Ministry Committee is aware of the issue. Network Co-Coordinators will continue, with their provincial colleagues, to advocate for additional funding.

The commitment and dedication of Network contracted agencies’ staff in meeting the needs of the clients and families they serve has been deeply appreciated and not unnoticed. The South Alberta FASD Network has demonstrated through data collection and reporting, that this model of collaborative and cooperative service delivery reaches the greatest number of vulnerable individuals. It has been, and is, a partnership grounded in respect, empathy and understanding.

3. Vision, Mission and Values

Vision:

To the community served by the South Alberta FASD Network, we deliver a comprehensive and coordinated regional response to FASD across the lifespan and a continuum of services that is respectful of individual, family, culture, and community diversity.

Mission:

The South Alberta FASD Network is committed to increasing regional capacity by enhancing FASD services and developing new services in in four primary areas: awareness, prevention, assessment and diagnosis, and supports for individuals and caregivers.

Our Service Area:

Encompassing nearly 26,000 square kilometers in Alberta's south-western corner, our Network's catchment area extends from Crowsnest Pass on the west, to Bow Island on the east, Vauxhall and Claresholm on the north, to the U.S. Border on the south.

Our service area is home to more than 157,000 people. Nearly half live in Lethbridge; others are spread among more than 40 smaller towns and villages and their surrounding rural landscapes.

The region also includes two Reserves which are the Blackfoot People of North Peigan (Piikani) and Blood (Kainai) Tribes. Their combined population exceeds 10,000.



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A vision of change.*

Goals

- To provide leadership, co-ordinate service delivery and build community capacity to support individuals affected by FASD across the lifespan.
- To demonstrate and foster collaboration and coordination among all services relating to the FASD community.
- To develop opportunities for interaction and networking within the FASD community.
- To identify community needs and service gaps.
- To develop mechanisms to broadly share relevant information, thereby increasing awareness of services and activities within the FASD community.
- To provide opportunities to share and celebrate success.
- To direct and appropriately manage funds provided by the Government of Alberta, family and social supports, supports for people with disabilities, and other funders.

Beliefs

- FASD has wide-ranging impacts on society as a whole.
- FASD is a preventable disability.
- Supports to mothers and families during pregnancy can lead to better birth outcomes.
- Timely and proper diagnosis, planning and support are critical to improving the lives of those affected by FASD.
- Assessment and diagnosis are the cornerstone of effective individualized support planning and will facilitate the prevention of other adverse outcomes.
- Support plans must take into consideration the changing needs of those affected by FASD across the lifespan.
- A strength-based approach to individuals affected by FASD and their supports will lead to improved outcomes.
- Community response must focus on prevention, intervention and support across the lifespan.

Business Priorities

- Increase the availability of assessments and diagnosis.
- Enhance and expand supports for individuals and caregivers.
- Increase awareness and prevention of FASD.
- Increase the quality of effectiveness of programs and services to those affected with FASD, their families and caregivers.
- Enhance stakeholder engagement.
- Support Network Governance, Operation and Coordination.

Key Principles of Service Delivery

- Promote collaboration among stakeholders of the government, agency and community level.
- Provide flexibility and operate in a manner that optimizes responsiveness to unique local needs.
- Programs will be strength-based, meet needs across the lifespan without age barriers and be respectful of cultural diversity.
- Programs funded through the Network will be fiscally responsible and transparent.

4. Service Partners

In 2019-2020, the following organizations partnered with The South Alberta FASD Network to deliver high-quality FASD-informed services to 525 children, youth and adults, to provide training to 1,031 individuals, and to reach to 3,671 persons through community development and FASD awareness campaigns.



Ministry of Community and Social Services
Supports for People with Disabilities
Fetal Alcohol Spectrum Disorder



Alberta Health Services
First Steps PCAP Program



Lethbridge Family Services
DaCapo Disability Services
FASD Assessment and Diagnostic Services



McMan Youth, Family and Community Support Services Association, South Region
FASD Lifespan Program
Pincher Creek Parent-Child Assistance Program



Peak Support Services
Justice Initiative Program



Lethbridge Police Services
FASD Youth Justice Project

We acknowledge the numerous programs and services supporting individuals with FASD and their caregivers, in partnership with the FASD Service Network, such as: PDD, AISH, Alberta Works, Income Support, FSCD, Alberta Mental Health, City of Lethbridge, Lethbridge School Divisions, University of Lethbridge, Lethbridge College, Blood Tribe, Piikani Nation, 5th on 5th Youth Services, ARCHES, Probation, Youth and Adult Shelters, YWCA, Lethbridge Food Banks, Alberta Mental Health, Lethbridge Correctional Centre, Legal Aid, Wood's Homes, Native Counselling Services, Family Centre and Children's Services.

We thank the many volunteers and donors who, through their time and energy and financial resources, support our community outreach programs.

5. FASD Awareness and Prevention

Priority:

- ❖ To increase awareness and prevention of FASD.

Description

- ❖ **The FASD Prevention Conversation – A Shared Responsibility** is a partnership between the Government of Alberta and 12 FASD regional networks. This project equips professionals, post-secondary students and the public with tools and resources designed to engage in non-judgmental, empathetic conversations with youth, women of childbearing age and their support networks about alcohol use during pregnancy or when planning a pregnancy, and available information and services related to prenatal alcohol use. The South Alberta facilitator is responsible for the implementation of the project in the South Alberta FASD Network target area.
- ❖ **Network-Sponsored Community Fairs and FASD Awareness Campaigns:** The Network and funded agencies participated in a number of community fairs, such as the Piikani Women's Gala, the Brocket Community Health fair, Shelter Me Party in the Park, National Addictions Awareness Week Walk, Project Connect, a Christmas carnival for families affected by FASD, National Child Day, Back to School Connect in Fort Macleod, and Ready Set Go.

Outputs:

- ❖ The Prevention Conversation – A shared Responsibility:
 - 19 training sessions, reaching 372 individuals trained: of which 337 professionals and post-secondary students.
 - 10 community development initiatives, reaching at least 1,505 individuals, of which 470 were professionals and post-secondary students.
 - 907 FASD prevention conversations.
- ❖ Network-sponsored community fairs and awareness campaigns, reaching at least 3,158 people of which 728 were professionals and post-secondary students.



Outcomes:

(Based on 193 surveys completed by professionals/post-secondary students and on 35 surveys completed by mixed audiences, through the Prevention Conversation project)

Professional and Post Secondary Student Survey Results	Results
Number of surveys	193
As a result of the event: (% who agree or strongly agree)	
My knowledge about FASD has increased.	99%
I know more about FASD resources and services available in my community.	95%
My knowledge about FASD prevention strategies has increased.	99%
I know more about resources and services available in my community to help women/youth prevent alcohol-exposed pregnancies.	98%
I feel confident in my ability to discuss alcohol use in pregnancy with women/youth of childbearing age and their partners.	85%
I feel confident in my ability to intervene or to provide support to women/youth who confirm drinking alcohol while pregnant and to their partners.	84%
The FASD Prevention Conversation is relevant to my work.	99%
I intend to incorporate what I have learned today in my practice/work.	100%
The event was a good use of my time.	99%
The facilitator was knowledgeable about the subjects covered.	100%
The facilitator was responsive to questions.	100%
The information covered was thorough and thoughtful.	99%

General Public and Mixed Audiences Surveys	Results
Number of surveys	35
As a result of the event: (% who agree or strongly agree)	
I have a better understanding of the FASD disability.	97%
I know more about supports available in my community for someone living FASD and for their caregivers.	91%
My knowledge about the risks associated with alcohol use during pregnancy has increased.	97%
I know how to access resources and supports to prevent alcohol-exposed pregnancies in my community.	91%
I understand the importance of abstaining from alcohol in current and future pregnancies.	94%
I intend to talk to my friends who are pregnant or intend to be pregnant about abstaining from alcohol.	94%
I intend to support my friends who are pregnant or intend to be pregnant in abstaining from alcohol.	97%
I intend to engage in conversations with youth about sex and alcohol.	89%
The event was a good use of my time.	94%
The facilitator was knowledgeable about the subjects covered.	97%
The facilitator was responsive to questions.	97%
The information covered was thorough and thoughtful.	97%



6. FASD Prevention – Parent and Child Assistance Program

Priority:

- ❖ To increase awareness and prevention of FASD.

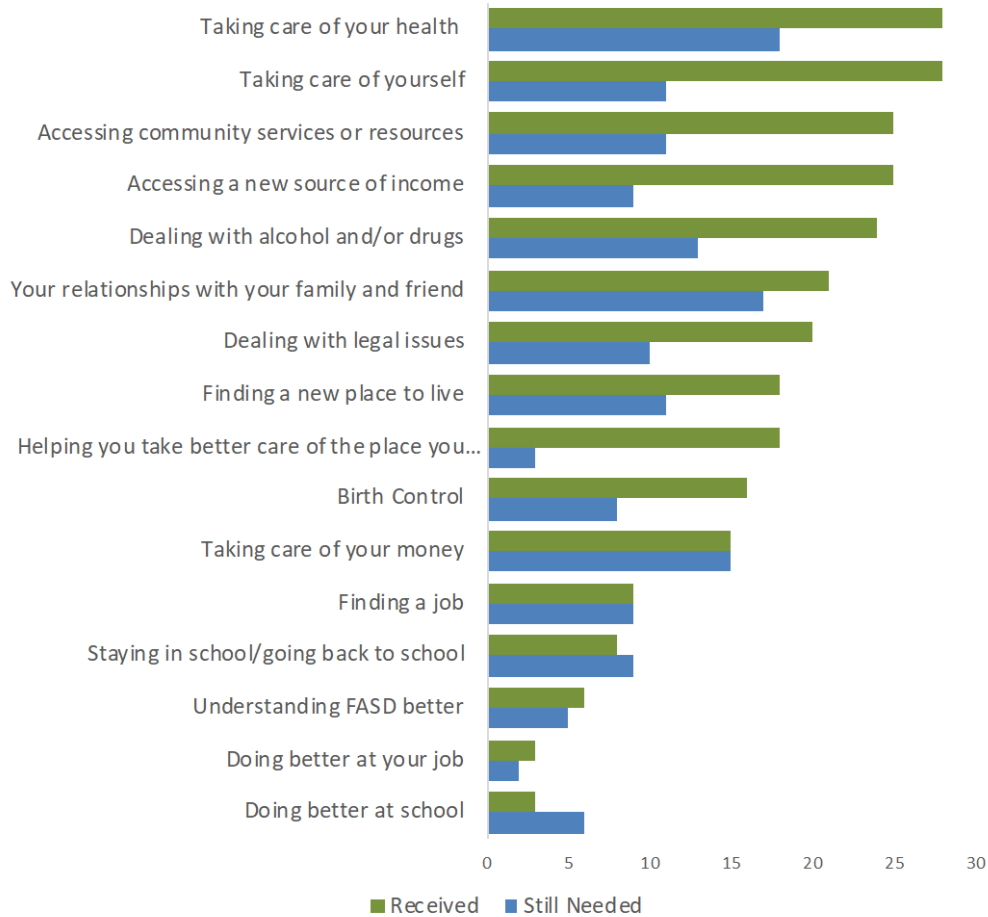
Description:

- ❖ **The Parent Child Assistance Program (PCAP) Initiative:** a three-year relationship-based, intensive specialized and holistic mentorship program for pregnant and post-partum women who struggle with alcohol use and/or have other health/social problems, women who may have a diagnosis of FASD, or women who have given birth to a child diagnosed with FASD. The goals of the program can include: prevention of future alcohol or drug exposed children; effective family planning; drug & alcohol treatment; stable housing; children living within their own families; effective child care and connecting to community services.
- ❖ **Alberta Health Services First Steps PCAP Program works with PCAP clients in Lethbridge and surrounding areas.** The project is jointly funded by Southwest Alberta Child and Family Services Authority, Alberta Health Services and South Alberta FASD Network.
- ❖ **McMan Youth, Family and Community Support Services Association, South Region PCAP Program works with Indigenous PCAP Clients on the Kainai Reserve,** is based in Pincher Creek.

PCAP Outputs:

- ❖ **Alberta Health Services Lethbridge First Steps PCAP program:** The Network funded a 0.50 FTE advocate supporting 9 clients, and AHS funded 6 advocates who supported 96 clients.
- ❖ **McMan PCAP Pincher Creek program:** 15 individuals served.
- ❖ **Demographic information (based on 66 outcome surveys):**
 - 30 clients were in their first year of the 3-year program, 21 in their second year, and 15 in their third year.
- ❖ **Services received and still needed (based on 34 client surveys)**
 - Services most often received in the past 6 months were:**
 - Taking care of one's health (82%)
 - Self-care (82%)
 - Accessing community services or resources (74%)
 - Accessing a new source of income (74%)
 - Dealing with alcohol and/or drugs (71%)
 - Relationships with families and friends (62%)
 - Services still needed were:**
 - Taking care of one's health (53%)
 - Relationships with families and friends (50%)
 - Taking care of one's money (44%)
 - Dealing with alcohol and drugs (38%)

PCAP Services Received and Still Needed



Outcomes:

- ❖ **Client feedback:** (based on 34 client surveys)
 - 100% were happy with the services they received.
 - 100% agreed that the people at the agency treated them with respect.
 - 97% made decisions about the services and supports they received.
 - 100% knew more about their strengths and weaknesses.
 - 100% knew where to look for help.
- ❖ **A decrease in the percentage of women currently pregnant or who had been pregnant in the past 6 months:**
 - 11 of the 30 women in their 1st year of PCAP (37%)
 - 4 out of 21 women in their 2nd year of PCAP (19%)
 - 3 out of 15 women in their 3rd year of PCAP (20%)
- ❖ **An increase in the percentage of non-pregnant women using an effective birth control method at the end of the 6-months reporting period:**
 - 9 of the 26 women in their 1st year of PCAP (35%)
 - 13 out of 20 women in their 2nd year of PCAP (65%)
 - 7 out of 10 women in their 3rd year of PCAP (70%)
- ❖ **A decrease in use of alcohol, especially for pregnant women**

- The percentage of women (regardless of pregnancy status) not using alcohol for at least one month at the end of the reporting period was 33% in years 1 and 3 and 38% in year 2. This is a positive outcome, considering that struggles with alcohol or drugs is the primary criteria for admission.
- The percentage of women (regardless of pregnancy status) not using illicit drugs for at least one month at the end of the reporting period was 30% in year 1, 33% in year, and 3 and 20% in year 3.
- Of the 7 women pregnant at the end of the reporting period, 6 were currently not using alcohol. Alcohol use was unknown for one woman.
- ❖ **Effective prevention of alcohol-exposed pregnancies**
 - Of the 7 women pregnant at the end of the reporting period, 6 were currently not using alcohol for at least one month.
 - Of the 59 women currently not pregnant, or with unknown pregnancy status, 32 were using birth control regularly
 - Of the 27 women currently not pregnant, but not using birth control regularly, 12 were abstaining from alcohol for at least one month.

50 out of all 66 PCAP clients (76%) were preventing alcohol-exposed pregnancies at the end of the reporting period.

The percentage of women effectively preventing alcohol-exposed pregnancies at the end of the reporting period increased from 57% for women in their 1st year to 62% in their 2nd year and 93% in their 3rd year of PCAP



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7. FASD Assessment, Diagnosis

Priority:

- ❖ To increase the availability of FASD assessments and diagnosis in Southern Alberta.

Description:

- ❖ **FASD Assessment and Diagnostic Services:** medical, cognitive, and behavioral assessments following the Canadian guidelines for FASD diagnosis, utilizing a multidisciplinary team approach, for referred individuals who have confirmed prenatal exposure. If the assessment leads to a confirmed diagnosis under the spectrum of FASD, community referrals and intervention plans are developed and implemented.
- ❖ **Lethbridge Family Services Da Capo Disability Services** manages Assessment and Diagnostic clinics for pediatric and adult assessments in Lethbridge and provides follow-up services to individuals that receive an FASD diagnosis. Follow-up consists of up to one year, one-on-one support to the caregivers of youth and children and to adult individuals, helping them implement the recommendations made at clinic.

Outputs:

- ❖ Children and Youth: 42 new intakes, 26 complete assessments, 100 with follow-up support
- ❖ Adults: 32 new intakes, 11 completed assessments, 50 with follow-up support

Outcomes:

- ❖ **FASD Diagnosis:**
 - 16 out of 26 children and youth assessed received an FASD diagnosis
 - 10 out of 11 adults assessed received an FASD diagnosis
- ❖ **Post Clinic Client Feedback (11 surveys)**
 - 91% agreed that they understood what would happen at the clinic.
 - 82% agreed that they understood their diagnosis.
 - 100% were satisfied with the outcome.
 - 85% agreed that they understood FASD better.
 - 91% understood their strengths and weaknesses better.
 - 91% agreed that they had a better understanding of how they think and learn.
 - 100% agreed that the information they received would help them in the future.
 - 100% agreed that the people at the clinic treated them with respect.
- ❖ **Post Clinic Caregiver Feedback (26 surveys)**
 - 92% agreed that the assessment process was easy to understand.
 - 92% agreed that the diagnosis was easy to understand.
 - 84% were confident in the results of the assessment.
 - 92% agreed that they received what they hoped from the clinic.
 - 77% had a better understanding of FASD.
 - 92% had a better understanding of their dependent's strengths and weaknesses.
 - 92% had a better understanding of how their dependent thinks and learns.
 - 100% agreed that the recommendations made at the clinic will be useful.
 - 90% were confident that the recommendations made will be useful.
 - 88% planned to access clinic follow-up support.
 - 88% agreed that their dependent's overall experience with the process was good.

8. FASD Support Services for Youth, Adults and their Caregivers

Priority:

- ❖ To enhance and expand supports for individuals and caregivers .

Description:

- ❖ **McMan Youth, Family and Community Services Association, South Region, Lifespan mentoring and coaching program** offers coordinated access to support services. Family support workers provide information & education, strategies & interventions, and advocacy to caregivers of individuals of any age with or suspected of FASD. Lifespan workers provide assistance with daily living support, advocacy, and system navigation to individuals, ages 16 and up, who are diagnosed or suspected of FASD.
- ❖ **Peak Vocational & Support Services Justice Initiative** Program supports individuals of South Western Alberta affected with FASD with complicated legal issues to navigate the Community and Justice System and assists the Community and Justice System to respond appropriately to individuals affected with FASD.
- ❖ **Lethbridge Police Services FASD Youth Justice project** offers training, mentorship, education, advocacy and coordination services, to divert youth between the ages of 12 to 17 who are diagnosed with or suspected of having FASD and referred through interface with the justice system. The project is funded through Lethbridge Children's Services.

Outputs:

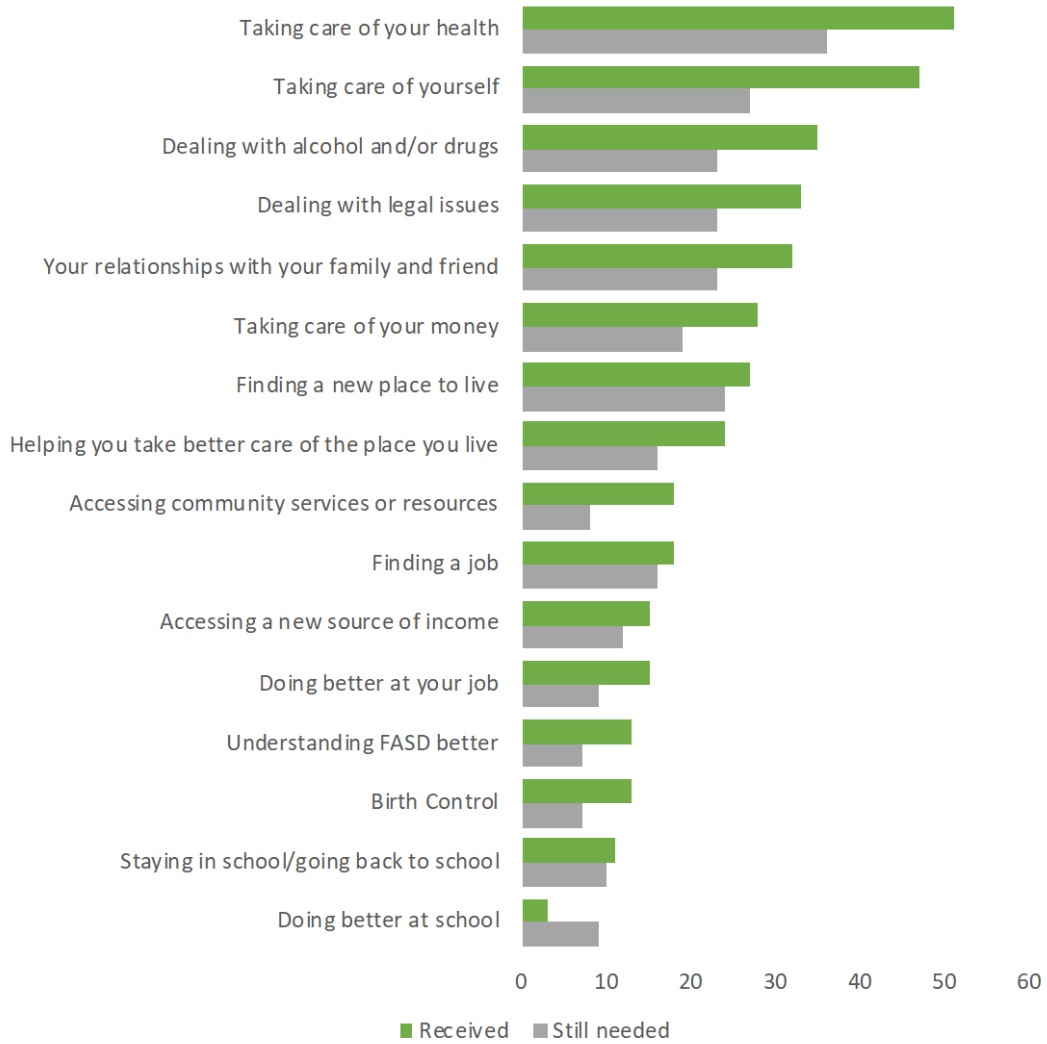
- ❖ **Demographic Information**
 - **McMan Lifespan Program:**
 - One-on-one mentoring for adults (24+): 49 individuals.
 - One-on-one mentoring for youth transitioning into adulthood (18-24 years old): 15 individuals.
 - Steps to Service brief interventions, information, or systems navigation: 39 individuals. Most of them are on a waitlist for longer-term, more intensive support services.
 - One-on-one mentoring for caregivers: 25 individuals.
 - Caregiver support groups: 40 individuals.
 - **Lethbridge Police FASD Youth Justice Project:**
 - 34 youth with or suspected of FASD, having legal issues, behavioral and mental health concerns.
 - **Peak Adult Justice Project:**
 - One-on-one support for legal and other issues: 53 adults
 - Consulting services: 22 adults
- ❖ **Services received and still needed, as reported by youth and adult clients (77 surveys)**
 - 7 most common types of services/help received:
 - Taking care of their health: 66%
 - Taking care of oneself: 61%
 - Dealing with alcohol and drugs: 45%
 - Dealing with legal issues: 43%
 - Relationships with families and friend: 42%
 - Help with taking care of their money: 36%
 - Finding a new place to live: 35%

- 7 areas where more help is required:
 - Taking care of their health: 47%
 - Taking care of oneself: 35%
 - Finding a new place to live: 31%
 - Relationships with family and friends: 30%
 - Dealing with legal issues: 30%
 - Dealing with alcohol and drugs: 30%
 - Taking care of their money: 30%
- ❖ **Services received and still needed, as reported by caregivers (16 surveys)**
 - 6 most common types of services received:
 - Access to community services or resources: 100%
 - Mental health and/or addiction issues: 75%
 - Access to basic needs: 56%
 - Access to FASD assessment and diagnosis: 50%
 - Respite care: 25%
 - Grief and loss: 25%
 - 4 areas where most help is needed:
 - Access to community services or resources: 63%
 - Mental health and/or addiction issues: 50%
 - Access to FASD assessment and diagnosis: 31%
 - Access to basic needs: 31%
 - Grief and loss: 31%

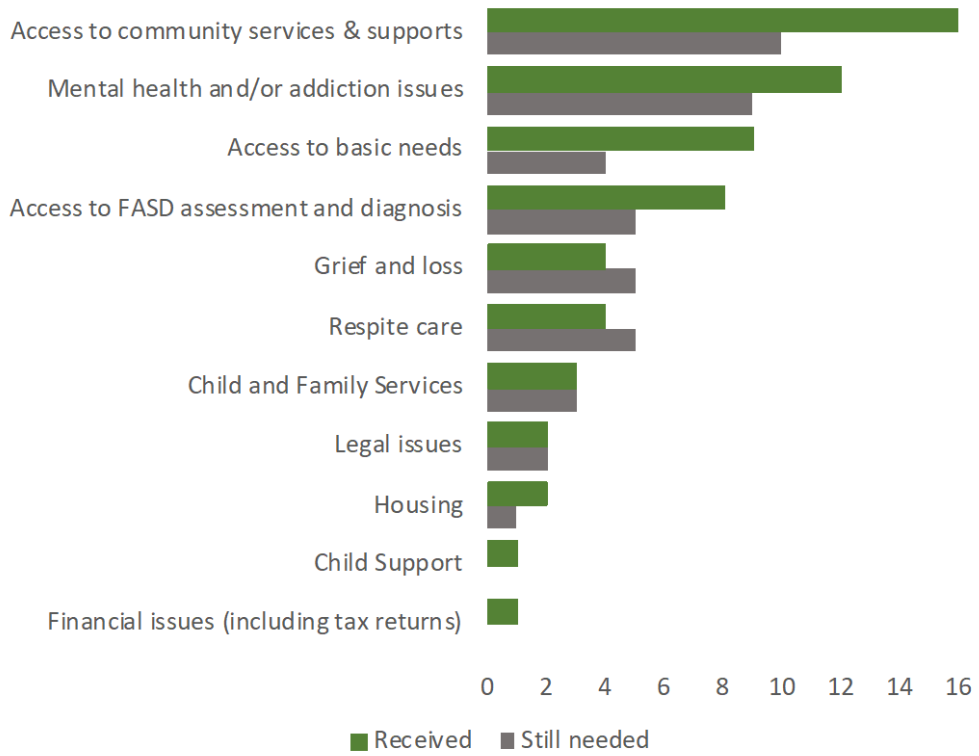
Outcomes

- ❖ **Support Services, Client Feedback (117 surveys):**
 - 97% were happy with the services they received.
 - 96% believed that the people at the agency treated them with respect.
 - 95% were involved in making decisions about the services and support they received.
 - 91% know more about their strengths and weaknesses.
 - 96% know where to look for help.
- ❖ **Support Services, Caregiver Feedback (16 surveys)**
 - 100% were satisfied with the services received.
 - 100% understand FASD better.
 - 100% felt more confident in their skills to parent/care for their dependent.
 - 100% believed their family lives had improved since receiving the services.
 - 100% believed their level of stress had decreased.
 - 100% had an increased sense of hope for their child/dependent.
 - 100% had been given information about supports available for them and their dependents.
 - 100% had an increased support network since working with the agency.
 - 100% received the kind of services they needed.

**Support Services Received and Still Needed
(All clients - n=77)**



**Support Services Received and Still Needed
(Caregivers- n=16)**



9. Community Development, Management and Governance

Priorities:

- ❖ To increase the quality and effectiveness of programs and services to those affected with FASD, their families and caregivers, through the Collective Wisdom Group.
- ❖ To enhance stakeholder engagement, through community development and training.
- ❖ To support Network governance, operations, and coordination.

Outputs:

- ❖ **Network Governance & Contract Management**
- ❖ **Annual General Meeting**, monthly **Leadership Team Meetings**, and quarterly **Membership Meetings**: planning and delivery of programs and services through a collective approach, building the knowledge and capacity of stakeholders, informing policy, practice, and continuous improvement.
- ❖ **Evaluation**: Review and updates of logic models and evaluation frameworks, data collection and analysis.
- ❖ Six **Collective Wisdom** meetings: cooperative and collaborative consultation amongst agencies providing services to served individuals with complex needs.
- ❖ **Training**: Nineteen FASD training sessions, reaching 448 trainees, of which 439 were professionals or post-secondary students. Network partners offered training to a number of regional community agencies, such as ARCHES, schools, Streets Alive, the Watch Program, SASH, and students at Lethbridge College, and presented at the Alberta Disability Conference. The Network hosted two workshops for professionals, one with Peter Choate who presented on “FASD Systemic and Policy Bias – Sustaining Stigma” and Michelle Stewart who presented on “Towards Reconciliation – FASD and Justice Requires Action”, and one with Donna Debolt who presented on “FASD and Supports to Caregivers”.
- ❖ **Christmas Carnival**: a yearly Christmas celebration for children with FASD and their families. Over 400 individuals attended the event.

Outcomes:

Based on 136 post-training surveys:

- ❖ 91% agreed that the learning objectives were clear.
- ❖ 99% agreed that it was a valuable learning experience.
- ❖ 95% agreed that the training content was relevant to them.
- ❖ 94% agreed that the training and educational material were culturally sensitive.
- ❖ 95% agreed that the presentation was based on current research and best practice.
- ❖ 93% agreed that the presentation included additional resources on the training topic.
- ❖ 84% responded that the session’s content was excellent.
- ❖ 80% had a better understanding of FASD, as a result of the training.
- ❖ 87% obtained new information that would help them care for and/or support
- ❖ Of the respondents, 53% stated that they understood the topic very well prior to the training. This increased to 86% following the training.



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