

FNIHB FASD Projects

The First Nations and Inuit Health Branch (FNIHB) is funding [insert number] community-based FASD projects this year. This is up from last year's [#] projects. To apply for funding, communities were required to prepare a community asset map.

"The intent is to focus on what the community has available to them, whether it's educators or buildings – all the different kinds of assets that they could use, rather than looking at what the community is lacking," explains Paula Rempel with FNIHB.

"This also encourages the communities to look at and encompass other resources such as CPNP [Canada Prenatal Nutrition Program] and ADI [Aboriginal Diabetes Initiative] that can tie into each other."

FASD Co-ordinators/Mentors

Included in this year's FASD projects are nine communities that will be developing full-time FASD coordinators using the mentoring model in Healthy Child Manitoba's Stop FASD program.

"Some communities are in the capacity building stage in terms of a knowledge base and resources for FASD," notes Rempel. "These nine were identified as communities that could staff someone and go one step further to do hands-on work in homes and more one-on-one mentoring."

Healthy Child Manitoba and the Addictions Foundation of Manitoba are partnering to provide the training to the nine communities, which will take place at the end of September. The four-day session will cover training in addictions and the Stages of Change Theory; training in the philosophy and delivery of the Stop FASD model; the intake, clinical and evaluation tools necessary to deliver the program model; and an opportunity to build relationships with experienced mentors and co-ordinators to discuss the challenges of the work and strategies for working with the hardest to reach women with addictions.

Rempel notes that they hope to keep adding more communities. Also, they will continue to work with each community involved to ensure the mentoring model fits their needs.

From a larger perspective, FNIHB is planning to undertake cross training to encourage staff working on different programs in the communities to work together towards the same goals and using the same resources. This would include the FASD co-ordinator along with CPNP and other workers.

"Since they will be seeing a lot of the same people, we want to ensure these workers and programs are connecting," says Rempel. "For example, if the FASD person is mentoring a woman, that worker could also try to get her involved in other programming options."

For more information, contact Paula Rempel at 983-3992 or email: paula_rempel@hc-sc.gc.ca.

"Promising Practices" - AMC FASD Working Group

In March 2005, the Assembly of Manitoba Chiefs (AMC) FASD Working Group held a conference in Winnipeg called "Promising Practices."

The FASD Working Group receives funding from Health Canada's First Nations and Inuit Health Branch (FNIHB). While the majority of the funding is directed towards community-based FASD projects, a portion is used to hold an annual conference.

Approximately 110 representatives – including addiction workers, mental health workers, early childhood educators, and FASD project workers among others – from the 64 First Nations communities across Manitoba participated in the conference.

The three day gathering included personal stories from parents and break out sessions highlighting FASD projects, small group circle sharing, successes and barriers, and developing promising practices and solutions to challenges and barriers.

Additional presentations included holistic support to First Nations schools by the Manitoba First Nations Education Resource Centre, the Applied Studies in FAS/E program offered at Red River College, an overview of FASD initiatives in Manitoba, and an Elder's perspective.

The final morning featured some of the tools developed by community projects and highlighted three of the FASD projects underway in First Nations communities in Manitoba.

"Pioneer Awards" were held to honour individuals who have been innovative in their approach to addressing FASD. The winner of the Pioneer

Award was Doug Starr of the Black River First Nation. Honourable Mention was given to Jackson Roberts of the Roseau River First Nation. Three Working Group members were also honoured, including Eli Beardy, Linda Grieve and James Ross.

"I believe our goal of sharing promising practices was met," says Linda Grieve, committee member and original

chair of the AMC FASD Working Group. "The participants broke into small groups and the different communities highlighted what they were doing and what was going well, along with the challenges they face and ways in which they have been able to overcome some of those challenges."

As summarized by Darrin Stevenson on behalf of the FASD Working Group, some of the common barriers identified included lack of funding support to address the need; leadership participation and political support to address the need; access to proper family supports; stigmas associated with the condition; increased education and awareness of the problem; and lack of diagnosis capacity in the community and access to specialized care, such as occupational and physical therapists, and speech and language therapists.

Some of the common "best practices" and solutions that were identified included community members and teachers wanting to learn more about FASD; workshops that are productive and successful; improved early assessment and intervention initiatives; in-school awareness classes; and Elders working with teens on issues of alcohol and drug use.

The three projects featured as successful examples included the numerous

FASD activities being undertaken by Cross Lake First Nation; the Families and Schools Together (F.A.S.T.) program with the Bloodvein First Nation that has a focus on families living with FASD; and an FASD project led by Norway House Cree Nation.

As a direct result of the conference, Grieve notes that they received more FASD project funding applications this year than the previous fiscal year.

"Applicants also had a better understanding of what was required in those applications, especially the community asset mapping requirement."

Last year, each First Nation community was given the opportunity to receive training on how to complete a community asset map. Those who did not do so will have an opportunity to take it this year, as completion of a community asset map is required to receive project funding.

Linda Grieve explains how the process works. "It takes someone in the community to call together all possible resources and people who could potentially be an asset to prevention, intervention or support to those families living with FASD. They are brought together and each is asked 'What is it that you bring to the table that you are willing to commit to in making life better for those living with FASD or for prevention or intervention?' It could be anyone from the janitor at the school or the supervisor at the beach."

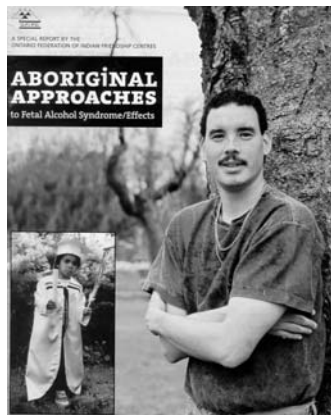
Those who are applying for renewed or continued funding are required to review their original community asset map to identify if new people or resources need to be included, or if others have had to leave.

For more information, contact Linda Grieve, Southeast Resource Development Council, at (204) 766-2716 or email: lindag@health.serdc.mb.ca.

Aboriginal Approaches to FASD

A special report commissioned by the Ontario Federation of Indian Friendship Centres called "Aboriginal Approaches to Fetal Alcohol Syndrome/Effects" is available in hard copy or online to others across the country. Published in the fall of 2002, this magazine style report features personal stories, community responses, focus on the Aboriginal Family as medicine, and an

Elder's experience with fostering over 350 children, including many with FASD.



Additional articles include an explanation of FASD and stories on parenting children affected by FASD, cultural awareness camps, videos with Aboriginal content, becoming an FASD friendly school, responsibility of the father, traditional Aboriginal justice, and prevention strategies.

To obtain a copy of this special report, contact Kim Meawasige at the Ontario Federation of Indian Friendship Centres at (416) 956-7575 or download the magazine at: www.ofifc.org.

FASD TOOL KIT for Aboriginal Communities

This Tool Kit was prepared as a "user-friendly" resource to help frontline workers working with children, youth, adults, and families affected by FASD. It was prepared with the support of the Public Health Agency of Canada.

The Tool Kit is now available for download at:

www.ofifc.org



A free print version is available from the Ontario Federation of Indian Friendship Centres. Call (416) 956-7575 Fax (416) 956-7577