

### **WHAT'S INSIDE:**

COVER-2 Best Practices
PAGES 3-9 Happenings
PAGES 10-11 New Initiatives
PAGE 12 Wired

### **MCAP STAFF**

#### editor/submissions

Catherine Pate capnews@mts.net

#### subscriptions/change of address

Kerri Hiebert kerrihiebert@mts.net

#### newsletter committee

Lia Braun, lia\_mmp@yahoo.ca
Julia Wellwood, julia.wellwood@gov.mb.ca
Joanne Wyman, jwyman@normanrha.mb.ca
Carol Robson, caroline.robson@gov.mb.ca
Kim Akins, kim.akins@gov.mb.ca

# Page 15 and 16 a

Sharing ideas, information, resources, struggles & successes

**BEST PRACTICES** 

# FASD Diagnostic Co-ordinators in Manitoba by Sandra Marr, Brandon Regional Health Authority

In Sept. 2009, the province of Manitoba announced the establishment of the Manitoba FASD Network and expanded diagnostic services at the Manitoba FASD Centre.

As part of this initiative, we are pleased to introduce seven FASD diagnostic co-ordinators from various regional health authorities (RHA) who work in partnership with the Manitoba FASD Centre. The co-ordinators are: Sandra Marr, Brandon RHA; Devon Ungurain, Pinawa-North Eastman RHA; Melissa Froese, Steinbach-South East RHA; Sherisse Picklyk Dear, Selkirk-Interlake RHA; Sherry Osborne-Thompson, Burntwood RHA; Joanne Wyman, The Pas-Norman RHA; and Sheryle Marshall, Winnipeg RHA/Central RHA, Parkland, Churchill.

Effective Sept. 7, 2010, all referrals for FASD assessments are sent directly to the FASD co-ordinators. Referrals are accepted from a variety of sources, including families, physicians, health care professionals, Child and Family Services, schools and other community professionals.

In my role, I complete the initial screening for eligibility, support families during the pre-assessment process, attend diagnostic assessments as needed, and assist with the follow-up planning after a diagnosis. I also work with the team at the 7th Street Health Access Centre, which is a seamless service delivery model that has become a vital part of the community. As such, I can refer a client to other professionals on the team as needed, ensuring that each person receives the support and services they require.

For more information about the FASD Network or to contact a diagnostic co-ordinator in your area, visit the Manitoba FASD Centre's website at www.fasdmanitoba.com or phone 204.235.8866.



### VOLUME 5 NUMBER 2

MCAP News is a semi-annual publication of Manitoba Coalition on Alcohol and Pregnancy (MCAP). Its mandate is to disseminate current information about Fetal Alcohol Spectrum Disorder, a disability affecting those who have been exposed to alcohol in utero

MCAP provides a forum for service providers, families and agency representatives throughout Manitoba with an interest in FASD to share ideas, information, resources, struggles and successes. MCAP facilitates this through regular meetings, special events, the MCAP website and this published newsletter. MCAP receives funding support from Healthy Child Manitoba. MCAP meets every third Monday of the month from 10:00 a.m. to 12:00 noon at the Healthy Child Manitoba Office. Teleconference available.

Stock image supplied by istockphoto.com.

# 7th Street Health Access Centre is a One-Stop Shop for FASD Programs and Services by Sandra Koch

The Brandon Regional Health Authority's (RHA) 7th Street Health Access Centre is a one-stop shop for community services, which are offered to the public at no charge.

Services that are available include the following:

#### Laundry/showers:

Laundry and shower facilities are available on a first-come, first-served basis

### Voicemail system:

The voicemail system is used to receive private phone messages. Individuals can access the system from any touchtone phone or they can check messages when they are at the centre.

#### Computer and internet:

There are two computers with internet access available for use at the centre.

### Fax/printing/photocopying:

Fax, printing and photocopying services are available at the centre. There is a limit of 10 pages per day, per person.

### Bus pass exchange:

In partnership with Manitoba Family Services and Consumer Affairs' Employment and Income Assistance programs, the centre may be able to exchange expired, off-peak bus passes.

There are also several individuals at the centre who are able to provide assistance and guidance on the programs offered, including:

#### Receptionists:

Receptionists are available to answer questions about the centre's services. They can assist individuals with signing up for laundry, phone, computer, fax or photocopying services and make appointments with service providers.

#### Service navigator/intake:

Upon arrival, individuals discuss their needs with a service navigator. The service navigator will assist with immediate needs, problem solving and, if required, refer the individual to the appropriate services for any long-term goals.

### Community health nurse:

For physical health needs, there are two community health nurses available.
There is also a needle distribution program for those who require clean needles and who wish to discuss safer practices and harm reduction approaches.

In partnership with the Manitoba FASD Centre, the coordinator completes the initial screening for eligibility.

#### Nurse practitioner:

treats health concerns and illnesses through assessments, tests and lab results and by prescribing lifestyle changes and medications.

FASD diagnostic coordinator:
In partnership with the Manitoba FASD Centre, the coordinator completes the initial screening for

The nurse practitioner identifies and

eligibility, supports families during the pre-assessment process, attends assessments as needed and assists with the follow-up planning after a diagnosis.

#### Community social worker:

The community social worker works with families and individuals who have complex needs to ensure the best progress is being achieved.

#### Addictions counsellors:

The Addictions Foundation of Manitoba, in partnership with the Brandon RHA, provides help and support for adults and youth who are dealing with addictions.

For additional information, please check www.brandonrha.mb.ca and click on the Access Centre link.

### Violence and Trauma-Informed FASD Prevention Training in Brandon

by Kim Akins, Brandon Interagency FAS/E Committee

Lynda Dechief and Betty Poag, facilitators from British Columbia, held a violence- and trauma-informed FASD prevention workshop in Brandon on Oct. 18 and 19, 2010.

This two-day workshop brought together service providers and caregivers from southwestern and northern Manitoba to discuss how they could support women at risk in making better decisions. Participants also looked at how their organizations could come together to provide more efficient, women-centred services and create change within their communities.

The first day of training focused on understanding the experiences of the women participants served—reviewing the cycle of violence and how it impacts a woman's ability to access and receive services as well as the impacts of socialization on self definition and self esteem. The day ended with an introduction to the violence- and trauma-informed practice model, which emphasizes a woman's experiences and

needs as the foundation of care, from which things such as services and policy should grow.

On the second day, participants focused more closely on the violenceand trauma-informed care model, discussing through example how violence- and trauma-informed care can look in a practical perspective. Participants also brainstormed ways they could come together within their communities and put the model into practice.

The facilitators used a variety of means to engage the participants.
Groups took part in a service simulation game and discussed how to help women express their needs and work around barriers to service.
Participants were also able to share their experiences as caregivers and service providers.

This workshop provided a wonderful opportunity for the members of the FASD community to share their knowledge and to learn from each other.

## events

The 4th International Conference on Fetal Alcohol Spectrum Disorder
The Power of Knowledge:
Integrating Research, Policy and Promising Practice Around the World

#### **Date**

March 2-5, 2011

#### Description

The conference will provide a forum for discussing emerging and cutting-edge research as well as policies and practices that will help governments, service systems, service providers, parents and caregivers as they strive to address the complex issues of FASD.

#### Hotel

The Westin Bayshore
1601 Bayshore Drive, Vancouver, B.C.

For bookings at a reduced room rate of \$129 (based on single or double occupancy), please go to www.starwoodmeeting.com/
StarGroupsWeb/booking/reservation?id=1
004099235&key=2D3BE.

#### Spread the word

Please forward this information to your colleagues who would benefit from participating. It would also be greatly appreciated if you would post information about the conference on your organization's website.

### Contact

Katia Selezeneva Phone: 604.822.7524 Fax: 604.822.4835

Email: ipad@interchange.ubc.ca

Website: www.interprofessional.ubc.ca

**HAPPENINGS HAPPENINGS** 

### **Brandon Celebrates International FASD** Awareness Day

by Kim Akins, Brandon Interagency FAS/E Committee

On Sept. 9, 2010, the Brandon Interagency FAS/E Committee Inc., in partnership with the Brandon and Area United Way, held its second annual Lunch and Learn event to mark International FASD Awareness Day. The event, which drew over 50 participants, highlighted three new programs that are available in Brandon for families and adults affected by FASD.

The Lunch and Learn panel had three presenters: Sandi Marr, FASD coordinator for the Brandon and Assiniboine Regional Health Authorities; Laura Moar, co-ordinator of the Stepping Out on Saturdays (SOS) program; and Tracy Williams, project co-ordinator

of the Westman Coalition for Employment Opportunities (WCEO).

Sandi Marr shared how she is able to help families and caregivers in the Westman area prepare for and go through the diagnostic process when they suspect that a child has FASD.

Laura Moar talked about the SOS program and its goals to help participants develop social and communication skills while providing their families and caregivers with much-needed time for themselves. Some of the caregivers from the SOS program were on hand to answer questions from the audience about the success of the program so far.

Tracy Williams talked about the WCEO's new initiative, which started in late September. WCEO assists adults with disabilities prepare for, secure and maintain employment. Its new initiative will focus on adults with FASD or suspected FASD and aid them with their employment goals.

This Lunch and Learn event was of particular significance because the FAS/E Committee was able to highlight three new programs that did not exist in Brandon at this time last year!

For more information on any of these or other programs and services related to FASD in the Westman area, contact the FAS/E Committee at brandonfasd@ hotmail.com.

### International FASD Awareness Walk a Huge Success by Dee Harvey, The Pas and Area FASD Committee

On Sept. 9, 2010, The Pas and Area FASD Committee held its annual International FASD Awareness Walk. This event is an incredible opportunity to recognize people who are directly or indirectly affected by FASD and to educate individuals on FASD's wide-ranging effects.

There was an amazing turnout this year! Approximately 85 enthusiastic individuals from The Pas and Opaskwayak Cree Nation (OCN) walked down Main Street to commemorate this special day.

Led by local drummers, it was an inspiring event. Local dignitaries acknowledged the significance of the occasion and the impact FASD has on not just one person, but on a whole community.

Following the walk, there was



85 participants march down Main Street in The Pas, MB.

a moving presentation by Visions and Voices, a group of six presenters who share their personal stories about living with FASD. Two of the women came to The Pas to share their experiences and their candor was

appreciated by all who attended.

Afterward, lunch was provided and people gathered to look at various display boards set up by community service providers.

The Pas and Area FASD

Committee would like to thank the Manitoba Metis Federation (MMF) for allowing the use of the MMF building for this event. It would also like to thank all the individuals and organizations that helped plan the event and complete the tasks that made it

Lastly, a big thank you goes out to The Pas and Area FASD Committee. Without the hard work and dedication of its members, this event would not continue to grow

The Pas and Area FASD Committee appreciates the willingness of all those who participated—here's to continuing with the great work!

### Fetal Alcohol Spectrum Disorder 2010-11 Information Series

### MCAP is proud to present the following topics for 2010-11:

Nov. 26, 2010 "Holiday Fun and FASD"

March 25, 2011 "Environmental Adaptations"

Jan. 28, 2011: "FASD and Medication"

April 29, 2011 'Provincial Diagnostic Network"

May 27, 2011 "Stepping Out on Saturday - Strategies

Feb. 25, 2011

"FASD and

Sexuality"

### All sessions run from 11:45 a.m. to 1 p.m.

More information will be provided leading up to each session. Winnipeg sessions are located at the Rehabilitation Centre for Children (633 Wellington Crescent). Please email Kerri at kerrihiebert@mts.net to hold a seat. All sessions are available via video/teleconference.

Please see below for contact information in your area.

The Pas: Joanne Wyman (jwyman@normanrha.mb.ca) Thompson: Chantal McClelland (cmcclelland@brha.mb.ca) Norway House: Lucy Muswagon (lucym\_mmp@yahoo.ca) Brandon: Joey Pattle (pattlej@brandonrha.mb.ca) Flin Flon: Colleen Tower (ctower@normanrha.mb.ca) Morden/Winkler: Bronwen Bugden (bugden@mts.net) Ashern: Pearl Parent (pparent@irha.mb.ca) Selkirk: Sherisse Picklyk Dear (spicklykdear@irha.mb.ca) Steinbach: Melisa Froese (mfroese@sehealth.mb.ca) Ste. Rose du Lac: Melanie Sheldon (msheldon@prha.mb.ca) Swan River: Colleen Clark (cclark@prha.mb.ca) Churchill: Jennifer Legault (ilegault@ChurchillRHA.MB.CA)

This is a free event sponsored by the Manitoba Coalition on Alcohol and Pregnancy (MCAP).

### U.K. Study Draws Flawed Conclusions

by Drs. Sally Longstaffe and Ana Hanlon-Dearman, Manitoba FASD Centre

In early October 2010, media reports informed Manitobans of a British study that claimed the babies of mothers who drank lightly during pregnancy had no ill effect from the alcohol. MCAP News asked Dr. Sally Longstaffe, developmental pediatrician and medical director of the Manitoba FASD Centre, and Dr. Ana Hanlon-Dearman, also a developmental pediatrician and an award-winning FASD research scientist to respond to this study. The following is their response refuting the findings of the study.

The study looks at the relationship between alcohol use in pregnancy, which includes light drinking, and socioemotional problems and

cognitive deficits in children at five years of age. It is an extension of a 2009 study with a similar title, with this study redefining the parameters of non-drinkers in pregnancy.

The results have been interpreted, by both the authors and the media at large, to conclude that children of mothers who drank as much as one to two drinks per week while pregnant did not have an increased risk of significant behavioural difficulties or cognitive deficits when compared to children of mothers who did not drink while pregnant. This flawed interpretation places women and their children at risk of adverse outcomes related to alcohol use in pregnancy.

The data used in this study came

from the Millennium Cohort Study, in which 11,553 families agreed to participate in interviews when their infants were nine months of age.

Further follow-up interviews were done at ages three and five. In the initial interviews, mothers were asked to self-report their drinking habits in pregnancy. Mothers were grouped into categories of never drinking, not drinking in pregnancy, light drinking (not more than one to two units of alcohol per week), moderate drinking (not more than six units per week) and heavy/binge drinking (seven or more units per week).

Infants' behavioural and emotional problems were determined by a questionnaire that was provided to parents. Cognitive ability was measured using the British Ability Scale, using subscales of vocabulary, picture similarity and pattern construction.

In looking at the conclusions of the study and the authors' and media's interpretation of those conclusions, there are several important points to consider. In addition to these points, several inherent study design factors require careful interpretation of the authors' conclusions.

First, this study was done in retrospective—it relied on the recall of information from several months to over a year prior. For example, data from prenatal exposure was collected from maternal self-reports

continued on page 6

**HAPPENINGS** 

continued from page 5

almost 18 months after the time in question. This may well have resulted in an underestimation of alcohol consumed.

It is also unclear whether the group reporting alcohol use "not in pregnancy" includes individuals who did not realize they were pregnant until they were well into their pregnancies. It is known that many mothers use alcohol during the early weeks or months of pregnancy, often in a binge pattern, potentially causing damage to the fetus until the pregnancy is known.

Second, it is important to emphasize the group differences among the mothers who drank. Light drinkers were more likely to be better educated, from higher income households, and less likely to have smoked; moderate drinkers were older with larger families, smoked in pregnancy, and were the heaviest current drinkers; and heavy/binge drinkers were more likely to be younger, have a low income, and be more likely to have smoked during pregnancy. Teetotalers compared favourably with the light drinkers.

These group differences suggest the markers of child psychosocial functioning, as measured by mental health questionnaires and childparent questionnaires, are likely affected by the socioeconomic differences in their mothers. In other words, are the authors measuring alcohol effects or is light alcohol usage a marker of an advantaged social environment—one in which women interpret their child's behaviour through a different lens and whose child may be relatively cognitively protected?

With economic advantage come a number of other protective factors, such as better nutrition, better pregnancy care, and the likelihood that children would have had more environmental stimulation. These factors could have an effect on the outcomes measured.

This flawed interpretation places women and their children at risk of adverse outcomes related to alcohol use in pregnancy.

The authors themselves, in fact, admit these confounders. Just prior to their conclusions, the authors write, "It might be that these social circumstances, rather than the direct physio-chemical impact of ethanol, may be responsible for the relatively

low rates of subsequent behavioural difficulties and cognitive advantage in children whose mothers were light drinkers."

A third point drawn from the conclusions is that the tools used as outcome measures can be considered screening tools; they would not be considered diagnostic measures representing the thorough assessment needed to delineate the multiple possible domains of brain function impairment that may be present with FASD.

Another point to note is that the study attempted to complete multiple data analyses, taking into account some of the other causes that may have contributed to the outcome measured.

Of course, not all such factors can be easily analyzed, and when all identifiable factors were included the results were not statistically different. For example, there may well have been no difference between children of light drinkers and children of non-drinkers in terms of these outcomes.

Finally, there was considerable attrition of participants during the course of the study, which may have significantly biased and affected results.

Given these considerations, not only does this study not prove that drinking in pregnancy is safe, but the authors themselves admit, "It is likely that social circumstances to a large part are responsible for the relatively low rates of subsequent behavioural difficulties and the cognitive advantage in children whose mothers were light drinkers."

In fact, when a prospective blinded study is undertaken looking at the relationship between maternal drinking and alcohol use, prenatal alcohol use is predictive of adverse child behaviour outcomes, even at exposure levels as low as one drink per week.

The Manitoba FASD Centre advises mothers that no safe amount of alcohol in pregnancy has been established. Alcohol use in pregnancy, even in small amounts, is not advised. Abstaining from alcohol in pregnancy remains the best medical advice.

<sup>1</sup> Kelly, Y.J. et al. "Light drinking during pregnancy: still no increased risk for socioemotional difficulties or cognitive deficits at 5 years of age?" Journal of Epidemiology and Community Health. Web. Published 5 Oct. 2010.

<sup>2</sup> Joshi, Heather and Smith, Kate. "The Millenium Cohort Study." Centre for Longitudinal Studies, Institute of Education. PDF. Published April 12 2005. Last amended on May 28 2010. <sup>3</sup> Sood, B. et al. "Prenatal Alcohol Exposure and Childhood Behavior at Age 6 to 7 Years: I. Dose-Response Effect." Pediatrics. Web. Published Aug. 2001.

### **Correction Notice**

"Council of Provincial FASD Coalition Chairs Share Best Practices," Summer 2010, MCAP News (p. 2): Betty Head works for Cree Nation Tribal Health (not Assembly of Manitoba Chiefs) and is the chair of the AMC working group. Lynn Turcotte is the former FASD program manager at Health Canada, First Nations, Inuit and Aboriginal Health.

### **HAPPENINGS**

### Manitoba Coalition on Alcohol and Pregnancy (MCAP) - Membership Form

Thank you for your interest in the Manitoba Coalition on Alcohol and Pregnancy (MCAP). MCAP membership is open to all Manitobans with an interest in fetal alcohol spectrum disorder (FASD). MCAP will facilitate representation from across the province through the use of teleconferencing technology. Anyone may attend a MCAP meeting, however only voting members may participate in making decisions for MCAP. There are no membership fees or dues. Members must complete and submit annually a membership form confirming their intention. The type of membership chosen reflects the level of commitment to MCAP. Voting members are encouraged to attend meetings regularly to ensure quorum can be established at each meeting. Voting members are asked to let the MCAP administrative co-ordinator know when they are unable to attend a meeting.

,	3	
Name:	<b>:</b>	Date:
Organ	ization (if applicable):	
Mailin	g address:	
Tel: _	Fax:	Email:
Pleas	se indicate the type of member	you wish to be:
no	<b>Individual Voting Member:</b> An individual voting member is a person with an interest in FASD, who is not representing an organization. Voting members are committed to attending meetings on a regular basis and are engaged in MCAP activities.	
or vo or or	<b>Organizational Voting Member:</b> An organizational voting member is a person representing an organization. The membership will be held by the organization who will appoint a representative to vote at MCAP meetings, participate in MCAP events and receive minutes and correspondence. Each organization will have one vote. An alternate may attend meetings to represent the organization. The organization is committed to providing a representative to attend meetings on a regular basis and	
In ar w	Individual Non-Voting Member: An individual non-voting member is a person not representing an organization, interested in receiving the FASD News and invitations to MCAP events but does not wish to participate in the operation of MCAP. Individual non-voting members are encouraged to attend MCAP meetings, however if they wish to participate in the administration of MCAP they must change their membership to a voting member.	
ar in or	<b>Organizational Non-Voting Member:</b> An organizational non-voting member is an organization with an interest in receiving the FASD News and invitations to MCAP events but does not wish to participate in the operation of the MCAP. The organization will identify a contact person to receive information. The organization is encouraged to send a representative to attend MCAP meetings, however if they wish to participate in the administration of the MCAP they must change their membership to a voting member.	
E:	x officio non-voting member: MCAP funde	Please mail the completed form to:  Kerri Hiebert, MCAP Administrative Coordinate 299 Truro Street, Winnipeg, MB R3J 2A2

### Burntwood **FASD Day**

by Chantal McClelland, InSight Mentoring Program

To commemorate Intentional Fetal Alcohol Spectrum Disorder Day, various community members of Thompson co-ordinated activities to raise awareness of the effects of alcohol use during pregnancy. Display boards and takeaway information were provided in the front lobby of the Burntwood Regional Health Authority, the lobby of which was the staging area for mocktails (nonalcoholic beverages) and an awareness walk.

Two regional dieticians, Carmen Ho and Huguette Samson-Bouchard, provided a display on nutrition in pregnancy as well as tasty samples and recipes for mocktails. The co-ordinators of the FASD Diagnostic Program and the InSight Mentoring Program, Sherry Osborne and Chantal McClelland, were available to answer questions about their respective programs as well as to provide general information on alcohol use during pregnancy and FASD. The media was present and covered the event.



As with last year, the co-ordinators produced a local newsletter describing their programs as well as others, such as the Stepping Out on Saturdays (SOS) program, and yes, more mocktail recipes. This take-away newsletter was very handy and many people mentioned that it was nice to see "what is happening" and to have all the contact information available.

The event was sponsored by the Hello Parents Network of Thompson, which provided a healthy snack, water and a reusable bag featuring the slogan "Alcohol-free pregnancy." Approximately 70 people participated in the event.

Last year was the first year that the event was taken on by the Hello Parents Network of Thompson, which has provided much-needed stability and support to the event. By working with other community members, it is hoped that we can continue to develop more understanding and interest in issues related to FASD within the community.

### Stepping Out on Saturdays (SOS) Program by Laura Moar, Stepping Out on Saturdays

The Stepping Out on Saturdays (SOS) program is a respite camp that focuses on children from three to 12 years of age that have been diagnosed with FASD, or have suspected FASD with confirmation of prenatal alcohol exposure and are in the care of or involved with the Child Welfare System.

The program is held one Saturday a month, offering children a fun and safe day to learn and practice social skills, self regulation, and fine and large motor skills. The day consists of fun activities such as board games, crafts, gym time, puzzles, Wii games, Lego, sand table, water table and most importantly, a chance for children to socialize with

other children that may have the same challenges they have. The children learn important skills that they can take away and implement in their home or school environment. Trained staff and a low child-to-staff ratio are key to a successful day.

Through the intake process, a plan to support the unique need of each child is developed.

For more information, contact Laura Moar, Brandon SOS facilitator, by phone at 204.727.1407 or by email at bfc fasd@mts.net.

walking for 40 km past Ponton.

There was no way to set up camp as there was too much water on both sides of the highway, and there was lightning ahead, so we drove to Grand Rapids and checked into a motel.

On day three, we drove back to where we left off the day before and Billy Muminawatum walked 10 km for the group. We still could not quite make it into Grand Rapids, so we drove in again and this time a local couple, Edwin and Annie Ballantyne, allowed us to stay in their home and have dinner.

On the fourth day, we drove back to where we left off again.

We were down to eight people and we were short a driver, so we drove back to Grand Rapids as we were wet and tired from the heavy rainfall. On that same evening, three more people joined us on our journey.

On day five, we were joined by nine more people and we covered 153 km. We nearly made it to Gypsumville, then drove up to Fairford, where we set up camp in Gordon and Joanne McLean's yard.

We started with 18 people walking on the sixth day, but we were down to 15 as the day went on and people made their way home. That day, there was a rodeo taking place in Ericksdale so we stopped to take a break and have something to eat. We were welcomed with an announcement and saw many cowboys at the rodeo. Afterward, we made it to

Ashern and spent the night in a

The next day, we walked to St. Laurent, but we had to drive back to Oakpoint and check into a

On day eight, we walked to the Red Sun gas station off Highway 6. We arrived at the perimeter highway in Winnipeg one day ahead of schedule.

We took care of one another along the way and made sure everyone was doing okay. With prayer and the willingness by each and everyone that took part in the walk, we were able to finish what we started.

On September 9, we walked to the Legislative Building and took in presentations by Jim Rondeau, minister of healthy living, youth

and seniors, the Assembly of Maniotoba Chiefs' Grand Chief Ron Evans, myself and other speakers.

Also present was the Manitoba Keewatinowi Okimakanak Territory's Grand Chief David Harper as well as chiefs from Cross Lake and Grand Rapids. It was a great turnout with people showing their support. Now, we are awaiting the response of the federal government.

I would like to thank everyone who showed their support financially, and give a big thank-you to Staff Sgt. Bob Batchelor, the Cross Lake RCMP detachment and the community members for being there and keeping us in your thoughts and prayers. Thank you!

### The Long Walk to Winnipeg

by Lucy Muswagon, Norway House

On Aug. 31, 2010 at approximately 10:30 a.m., the FASD Awareness Walk began in Norway House. Twenty-seven people signed up to join us on our walk, but when we departed Norway House, there were only 10 participants present.

The walk to Winnipeg was 810 km in total, with participants taking turns to complete the distance. It was led by Const. Termbathe, who walked for 10 km. Hubert Hart walked the next 10 km, along with Brittany Crate and her sister, Melissa Crate, who each walked 4 km and took turns running. The rest of the participants walked the distance relay-style, and later we were joined by two ladies at the Cross Lake Junction.

Upon our arrival in Jenpeg at 7:30 p.m., the Manitoba Hydro staff fed us dinner and gave us a place to sleep.

On day two, we started off on Highway 6. We were down to nine people, as the runners made their way back home to Norway House. We were joined by Mayor Cristo Spiess between Junction 6 and Ponton, where he did 10

We arrived in Ponton around 3:30 p.m., where we were fed and able to wash up. Afterward, we kept on

### Flin Flon/Creighton FASD Committee Walks for Awareness by Colleen Tower, Flin Flon/Creighton FASD Committee

On Sept. 9, 2010, the Flin Flon/ Creighton FASD Committee held its annual walk to promote awareness of FASD. This year was a little different than previous years, however, because instead of going down Main Street in Flin Flon, the group walked through the streets of Creighton with hundreds of kids from Creighton Community School. Grades 1 through 6 were

invited to join in the walk as well as the community at large, and the response was great.

The walk started at the school with committee member Jan Modler giving a short talk on what FASD is and how it can be prevented. A young man from Flin Flon who has FAS was introduced to the crowd and some of his strengths and struggles were

highlighted. After a 20-minute walk, everyone was treated to hot dogs, fruit and water.

Later that afternoon, care packages were delivered to community agencies that work with moms-to-be and new moms. Each package contained a couple of diapers and a package of wipes, facts about FASD and information about how to contact the committee.

The committee members who delivered the packages talked about Sept.9 being a day to bring about awareness to the subject of FASD and encouraged that the packages are handed out to moms. The response from the agencies was positive and the information appears to have been well received.

### **NEW INITIATIVES**

### Seven Oaks/Inkster Listen and Learn

by Lia Braun, Seven Oaks/Inkster FASD Interagency Committee

The first of several free seminars sponsored by the Seven Oaks/ Inkster FASD Interagency Committee was held at the Maples Collegiate theatre on Oct. 27, 2010. The topic for this first session was diagnosis and intervention in FASD in Manitoba. It was delivered by Dr. Ana Hanlon-Dearman, a developmental pediatrician at the Manitoba FASD Centre in Winnipeg and associate professor of pediatrics and child health at the University of Manitoba, and Dorothy Schwab, an occupational therapist working as the FASD

educator/follow-up worker at the Manitoba FASD Centre. The audience consisted of a wide cross-section of people, including professionals, caregivers, community and family members. Dr. Hanlon-Dearman described FASD from infancy to adolescence. Her insightful, research-based presentation helped caregivers, families, and professionals to understand behaviour as neurobiologically based. She described the process of FASD diagnosis at the Manitoba FASD Centre, linked diagnosis to

intervention, and answered many questions from the audience. Dorothy Schwab's presentation emphasized reframing our perceptions of how individuals with FASD view the world. Her careful descriptions, based on many years of clinical experience, gave caregivers, educators and other professionals a better understanding of behaviors, learning styles, effective strategies, and ways to adapt environments. She stressed the importance of nurturing and developing individual strengths to ensure success and develop healthy self- esteem.

The knowledge and experience of the presenters made the afternoon fly by quickly.

The Seven Oaks/Inkster FASD Interagency Committee would like to thank Maples Collegiate for providing the space, technical expertise, and the coffee and juice, as well as Maples Multiplex for allowing us to use its parking lot. Also, we would like to extend a thank-you to the ladies in the Nor'West Co-op training program for the delicious cookies.

continued from page 10

Lia Braun, FASD consultant;

**Gina Kirchman**, co-ordinator of Stepping Out on Saturdays;

**Dee Bissonnette** of the Manitoba Youth Justice Project;

Lyndsay Hersikorn, counsellor for Klinic Community Health Centre's Project CHOICES program;

Jodie Penner, counsellor for Nor'West Co-op Community Health Centre's Project CHOICES program;

Sheri Lysy, who works in prevention education

for the Addictions Foundation of Manitoba; Kim Watts, policy analyst for the Public Health Agency of Canada;

Deborah Kacki, co-ordinator of the Interagency Fetal Alcohol Spectrum Disorder Program at New Directions for Children, Youth, Adults and Families;

Cathe Umlah, FASD specialist for the General Child and Family Services Authority; Mary Werba, FASD specialist for the First Nations of Northern Manitoba Child and Family Services Authority; Tammy Stuart, counseling and addictions prevention co-ordinator for the Nor'West Co-op Community Health Centre; and Deb Thordarson, FASD support teacher at the Winnipeg School Division.

A detailed account of the information provided by each speaker will be available on MCAP's website (www.capmanitoba.ca) after Nov. 15, 2010.

### FASD Infinity Education/Support Program

by Leilani Buschau, Metis Child, Family and Community Services Inc.

Metis Child, Family and Community Services Inc.'s FASD Infinity Education/Support Program is designed to help caregivers put theory into action while receiving weekly support from professionals and peers.

This new and improved eight-week program will run twice a year out of the Winnipeg office and will be facilitated by Leilani Buschau, FASD specialist, and Terri McNaughton Wright, specialized foster parent. The agency is excited to announce the program's expansion to the Brandon office in October 2010 and its upcoming availability in

the Parkland region, slated for spring 2011.

The program includes two full-day workshops and seven two-hour follow-up evening sessions.

#### Topics covered will include:

- $\bullet$  Identifying and celebrating strengths;
- Recognizing brain-based and secondary defensive behaviours;
- Creating strategies that adapt the environment to accommodate brain differences:
- Creating visual tools to support strategies;

- Developing parenting skills to apply strategies;
- Exploring the geography of the support parenting model; and
- Evaluating strategies and learning from successes and flops.

In addition, FASD assessment, advocacy and self-care will be discussed.

For more information contact Leilani Buschau at Metis Child, Family and Community Services Inc.

### MCAP Networking Event a Success

by Leilani Buschau, Manitoba Coalition on Alcohol and Pregnancy, Co-chair

The Manitoba Coalition on Alcohol and Pregnancy (MCAP) was delighted to host the Celebration of Accomplishments event on Sept. 24, 2010 at the Viscount Gort Hotel.

This event was provided free of charge and attended by 44 MCAP members and guests from across the province. It gave the FASD community an opportunity to network, share personal triumphs, and discuss new projects, services, successful programs and recent research.

Leilani Buschau, MCAP's co-chair and FASD specialist with the Metis Child and Family Services Authority and the Metis Child, Family and Community Services Agency Inc., acted as the event's master of ceremonies. Buschau kicked off the festivities by welcoming guests and thanking Kerri Hiebert, MCAP's administrative co-ordinator, for her event planning genius.

After partaking in the fantastic lunch buffet, each of the 16 speakers was invited to the podium to inform the audience of the latest news within their own professional lives or their organizations.

Speakers at the event included: Leilani Buschau;

Holly Gammon, FASD programs manager for Healthy Child Manitoba;

Mary Cox-Millar, manager of the

Manitoba FASD Centre; Joanne Wymann, diagnostic co-ordinator for the NOR-MAN Regional Health Authority; Jewel Reimer, program manager of Initiatives for Just Communities;

continued on page 11



Kim Watts and Kerri Hiebert at the registration desk

### Building Hope by Deborah Tacan, Addictions Foundation of Manitoba



The Addictions Foundation of Manitoba (AFM), located at the Parkwood Centre in Brandon, offers a variety of prevention and educational programs. These include youth, employee assistance and training programs, as

well as community development and education services.

I work as the aboriginal and gambling prevention education consultant at AFM in Brandon. I am able to provide a range of prevention and rehabilitation services, with the primary focus on serving aboriginal populations and communities. One of the educational services I can offer includes prevention and education programs related to FASD. These are provided in conjunction with other community initiatives in working toward the prevention of FASD.

I am honoured to be working for the people and look forward to meeting community members. If you have any questions or would like more information, please feel free to contact me by phone at 204.729.3850 (toll-free 1.866.767.3838) or by email at dtacan@afm.mb.ca.

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**NEW INITIATIVES** 

### **WIRED**

### **Introducing Project Choices**

by Jodi Penner, Nor'West Community Health Centre



A new program has arrived in Manitoba focusing on reducing women's risk of having an alcoholexposed pregnancy. We are the first province in Canada to roll out this FASD prevention strategy!

### How does it work?

Project CHOICES is an evidencebased program, developed from extensive research in the United States. Project CHOICES uses a womancentred, harm-reduction approach while providing information and brief support for women who are at risk of having an alcohol-exposed pregnancy. Participants are offered four counselling sessions and one contraception consultation visit with a reproductive health professional. The program uses motivational interviewing to encourage women to consider changing either or both of the target behaviours of risky drinking and ineffective birth control.

### Who is a good fit for this program?

Women who are sexually active, 16 or older, and drink more than two alcoholic drinks at a time or more than nine drinks per week could potentially benefit from Project CHOICES. You could suggest this program to someone if she is worried about becoming pregnant, expressing concern about her drinking, or if she is misunderstanding birth control methods or the effects that alcohol use can have on pregnancy.

### How can people access Project CHOICES?

This program is being offered city-wide. Project CHOICES counsellors are taking referrals as of September 27, 2010. The counsellors are based out of Klinic Community Health Centre and Nor'West Co-op Community Health Centre. To get more information contact the Project CHOICES team.

\*Canadian Low-Risk Drinking Guidelines (www.lrdg.net/guidelines.html)

Klinic Community Health Centre 870 Portage Ave., Winnipeg, MB Project CHOICES counsellors Lyndsay or Tara: Call 784.4015

Nor'West Co-op Community Health Centre 103-61 Tyndall Ave., Winnipeg, MB Project CHOICES counsellor Jodie: Call 940.8611

### Westman Coalition for Employment Opportunities Inc. Branches Out

by Tracy Williams, Project Coordinator, Westman Coalition for Employment Opportunities

The Westman Coalition for Employment Opportunities Inc. (WCEO) has branched out in an effort to increase its community

We have developed a new program that will help individuals with FASD find gainful employment. Our special services employment facilitator will work primarily with clients who have FASD and who have had difficulties with the justice system, however our focus will not be limited to those who have a criminal record. We will also work one-on-one with self-declared members of the community who are in need of the appropriate job skills to attain realistic employment.

Our SSE facilitator has experience working with young offenders and adults living with mental illness. She also spent six years working as an anger management facilitator. Her educational background includes counselling and human resource management.

In her current role with WCEO,

she receives referrals by agencies, departments or individuals (completion of a referral form is required) and meets with clients to gain an understanding of their goals. She discusses realistic employment options with them and assesses their training requirements.

She will work with clients to identify their hidden strengths and aptitudes, create a resume, and promote positive communication and interviewing skills—all the while seeking potential employers

Once a client has been hired. the facilitator will accompany him or her to work (as a silent shadow) to assist in the development of a positive relationship between employee and employer. As the client grows comfortable in his or her employed role, the facilitator will gradually back away, tapering support as natural supports within the work environment replace our

For referrals, contact Tracy Williams or Lisa Lacroix at 204.726.6178.

### Looking for a good book about FASD?

by Lia Braun

If you're looking for a good book about people living with FASD, you'll find a wide selection at the FASD Bookstore (www.comeover.to/FAS/store). Following are just some examples of books you'll find on the site:

Jan Crossen's 9 Lives trilogy won a gold 2009 Mom's Choice Award in the young adult series category. The trilogy opens minds and dialogues about alcohol, drugs, adoption and diversity, while raising awareness of FASD. It targets preteens, teenagers, low literacy readers, foster, adoptive and birth parents, teachers, social workers, therapists, and those working with juvenile offenders and the

homeless population.

A first-time author, Crossen's fictional work was inspired by her adopted son, Josh, who is affected by FASD.

The Long Way to Simple was written by Stephen Neafcy, an adult with FASD. The book is an easy read that boasts 50 years of ideas and offers a fresh perspective on FASD from the affected individual's experience.

Also available at The FASD Bookstore are old favourites that describe the true experiences of parents and children living with FASD. They tell of personal family struggles, offer insight into the social impact of FASD and present facts based on current

research

A few of these must-reads for every parent, professional and caregiver are The Broken Cord by Michael Dorris, Damaged Angels by Bonnie Buxton, Our FAScinating Journey: Keys to Brain Potential Along the Path of Prenatal Brain Injury by Jodee Kulp and her daughter, Liz, and the Antone books by Judith Kleinfeld.

There are also professional books by well-known people in the FASD world such as Diane Malbin and Ann Streissguth. ADHD and FASD by Dr. Kieran D. O'Malley is a new book recommended for professionals that explores the co-occurring

presence of ADHD in patients with FASD.

As ADHD and FASD's description on the FASD Bookstore's website reads, "Although prenatal alcohol exposure, and the resulting FASD, is recognized as the commonest preventable cause of intellectual disability, many clinicians and educators are now aware that 75 to 80 per cent of patients with FASD have IQs over 70. Thus, the neuropsychiatric presentation of FASD can often be unrecognized or misunderstood. FASD are the true clinical 'masqueraders' and ADHD is their most likely disguise!"

### **More Online Resources**

### www.fasdelephant.com/podcast

This blog supports the FASD Elephant™ Podcast—a podcast dedicated to changing the metaphor for FASD one person at a time. It's aimed at anyone who wants to know more about FASD.

#### www.von.ca/fasd

For good basic information on FASD from a reliable and easy-tounderstand source.

### www.motherisk.org/fas

If you could not attend the 11th FACE Research Roundtable, this is your chance to view video of the entire day's proceedings, including all presentations.

### www.healthychildmanitoba.ca

A listing of FASD services available in Manitoba is available in English and French.

### New Data On The Effects Of Alcohol **During Pregnancy**

by Zenon Lisakowski, Addictions Foundation of Manitoba (AFM)

1. Main Category: Pregnancy /

Obstetrics Also Included In: Alcohol / Addiction / Illegal Drugs; Pediatrics / Children's Health Article Date: 18 Oct 2010 - 2:00 PDT Source: R. Curtis Ellison

Boston University Medical Center 2. Even a little alcohol in pregnancy seen risky Last Updated: 2007-02-16 14:33:30 -0400 (Reuters Health) Source: Pediatrics, February 2007. www.pediatrics.aappublications. org/content/vol119/ Supplement\_1

3. Most in the substance abuse prevention field are familiar with the term "binge drinking". Defined by the Centre for Addiction and Mental Health (CAMH), binge drinking is a minimum of 4 drinks for women or 5 drinks for men per

Source: 2009 Centre for Addiction and Mental Health

4. A PAHO/WHO Collaborating Centre. Fully affiliated with the University of Toronto. www.camh.net

4. So-called low-risk drinking isn't Researchers find 2,800 premature deaths vs. more than 800 prevented Cindy Harnett, CanWest News Service

Source: Alcohol-Caused Mortality in Australia and Canada: Scenario Analyses Using Different Assumptions About Cardiac Benefit: published in the Journal of Studies on Alcohol and Drugs.

5. Low-Risk Drinking Guidelines Source: Addictions Foundation of Manitoba & 2009 Centre for Addiction and Mental Health www.afm.mb.ca

6. Study finds no such thing as 'safe' alcohol for women, even one drink a day increases risk of cancer. Source: Sharon Kirkey, Canwest News Service February 25, 2009 www.vancouversun.com/health

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