



Annual Report 2010

Together: Finding Answers. Improving Outcomes.



Phase 3 - Implementing the Research Plan April 2009 - March 2012

Our Mission

To create, nurture and sustain a collaborative environment which produces relevant research leading to the prevention of FASD and to a significant improvement in the lives of affected individuals, their families and their communities.

Our Goals

- ▶ To develop and foster relationships, research programs, and initiatives across the spectrum of FASD activity
- ▶ To be sensitive to community and cultural needs
- ▶ To facilitate and enhance productive linkages across jurisdictions, communities, and disciplines
- ▶ To answer high priority questions about the prevention, diagnosis, and treatment of FASD
- ▶ To disseminate empirically validated knowledge about the prevention, diagnosis, and treatment of FASD
- ▶ To inform policy, practice and decision making

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Message from the Chair

The Board of Directors for the Canada Northwest FASD Research Network is pleased to celebrate another successful year of activity. Over the past five years, we have seen CanFASD Northwest grow remarkably into its current role as an emerging leader in supporting collaborative, multi-disciplinary, and inter-sectoral research in a wide range of topics centred on FASD prevention, diagnosis, and intervention. CanFASD Northwest has evolved a strong organizational structure, which now offers a solid foundation for creating and sharing new knowledge needed by governments, service providers, families, and communities to improve the outcomes across the lifespan. With this work, we have increased capacity for FASD research in Northern and Western Canada.

In the last year alone, members of our Network Action Teams successfully secured over \$7,780,000 in competitive research grants. Results of their research has been reported in peer-reviewed, scientific journals, at professional meetings, and in reports for service providers, families, and policy makers.

As we look to the future of the Canada Northwest FASD Research Network, we remain focused on both expanding and sustaining our organization, ensuring that we can remain responsive to the changing economic and social conditions in which people with FASD and their families live, and that new findings from this research are made accessible to those who can best use it to make change.

We thank the Canadian Northwest FASD Partnership for their continued leadership and commitment to seeing this important work continue.

Audrey McFarlane

CanFASD Northwest Board of Directors, Co-Chair

Bob Ransford

CanFASD Northwest Board of Directors, Co-Chair

Message from the CEO and Scientific Director

Phase 3 of the CanFASD Northwest developmental plan (fiscal years 2010, 2011 and 2012) is now underway. Thanks to solid planning and hard work in 2009 by our Board of Directors, our Central Office staff, and the leaders and members of the Network Action Teams, all aspects of the Network will be implemented and active in 2010. In the last year alone, the Network has produced 38 published articles, reports and book chapters, a music video and 56 presentations in Canada as well as South Korea, Scotland and the United States. Grants have been awarded and funding proposals for additional research are actively being written. Our leadership in advancing knowledge for improving the situation for individuals with FASD and for preventing this condition is clear.

We are now poised to create data that will more fully describe the specific needs of persons with FASD across the lifespan and the interventions that are being attempted. This work should lead to options for improved policy work. The careful work in all aspects of prevention should lead to the world's first comprehensive approach to effective reductions in alcohol exposed pregnancies.

FASD remains an epidemic problem of extraordinary complexity. The Network is committed to working collaboratively with researchers, clinicians, advocates, families, communities and government agencies to develop clear, fact-driven approaches to prevention and intervention. We are proud of the work that has been accomplished in the last year and thank you for your ongoing support in this important effort.

Sterling K. Clarren, MD, FAAP
CEO and Scientific Director

Our Research Partners and Our Teams

Board of Directors

Executive

Audrey McFarlane, BCR, MBA, Co-Chair, Alberta

Bob Ransford, Co-Chair, Member at Large

Josephine Nanson, PhD, Vice Chair, Saskatchewan

Peter Webster, Treasurer, Member at Large

Board Members

Gail Andrew, MDCM, FRCP(c), Alberta

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Max Cynader, CM, OBC, PhD, FRSC, FCAHS, British Columbia

Judith Bartlett, MD, MSc, CCFP, FCFP, Manitoba

Michelle Dubik, BA (Hon), BSW, Manitoba

Susan Chatwood, BScN, MSc, Northwest Territories

Helen Kimnik Klengenberg, BA, MBA, Nunavut

Lisa Brownstone, BSc, MSc, Saskatchewan

Leona Corniere, BA, DipED, MC, Yukon

Sharon Wilsnack, PhD, Member at Large

Marilyn Van Bibber, Member at Large

Canadian Northwest FASD Partnership

Alberta

Honourable Yvonne Fritz

Minister of Children and Youth Services

British Columbia

Honourable Mary Polak

Minister of Children and Family Development

Minister Responsible for Child Care

Manitoba

Honourable Jim Rondeau

Minister of Healthy Living, Youth and Seniors

Chair of Healthy Child Committee of Cabinet

Northwest Territories

Honourable Sandy Lee

Minister of Health and Social Services

Minister Responsible for Status of Women

Minister Responsible for Persons with Disabilities

Minister Responsible for Seniors

Minister Responsible for the Homeless

Nunavut

Honourable Tagak Curley

Minister of Health and Social Services

Saskatchewan

Honourable June Draude

Minister Responsible for Crown Investments Corporation

Provincial Secretary

Minister Responsible for Information Technology Office

Minister Responsible for Information Services Corporation

Minister Responsible for Saskatchewan Government Insurance

Minister Responsible for the Public Service Commission

Yukon

Honourable Glenn Hart

Minister of Health and Social Services

Minister Responsible for Workers' Compensation Health and Safety Board

Minister Responsible for French Language Services Directorate

Our Representatives

Alberta

Ken Dropko

Director, Community Partnerships and Youth Strategies

Alberta Children and Youth Services

Denise Milne

Senior Manager, FASD Initiatives/Children's Mental Health

Alberta Children and Youth Service

British Columbia

Anne Fuller

Provincial FASD Consultant

Children and Youth with Special Needs Policy

Ministry of Children and Family Development

Joan Geber

Executive Director, Women's Healthy Living Secretariat

Population and Public Health

Ministry of Healthy Living and Sport

Adrienne Treloar

Policy Analyst, Women's Healthy Living Secretariat

Ministry of Healthy Living and Sport

Manitoba

Holly Gammon

Manager, FASD Programs

Healthy Child Manitoba Office

Susan Tessler

Director of Policy

Program Development and Implementation

Healthy Child Manitoba Office

Northwest Territories

Sandra Malcolm

FASD Project Specialist, Prevention Services Unit

Children and Family Services Division

Department of Health and Social Service

Dean Soenen

Director, Children and Family Services

Health and Social Services

Bethan R. Williams-Simpson

Manager, Prevention Services

Children and Family Services Division

Department of Health and Social Service

Nunavut

Janet Brewster

Manager of Research and Special Projects

Saskatchewan

Betty Deis

Senior Consultant, Post Care Services

Child and Family Services Division

Ministry of Social Services

Ginny Lane

Program Consultant, Community Care Branch

Ministry of Health

Linda Restau

Director, Saskatchewan Health

Community Care Branch

Yukon

Brad Bell

Manager, Implementation Child and Family Services Act

Health and Social Services

Jan Langford

Policy Analyst, Health and Social Services

Patricia Livingston

Director, Social Marketing and Communication

Health and Social Services

Host Agency

Provincial Health Services Authority

Stuart MacLeod, MD, PhD, FRCPC

Executive Director, Child & Family Research Institute

Vice President, Academic Liaison & Research Coordination

Provincial Health Services Authority

Vancouver, BC

Canada Northwest Research Network

Staff

Sterling Clarren, MD, FAAP, CEO and Scientific Director

Amy Salmon, PhD, Managing Director

Jan Lutke, Clinical Research Manager

Michelle Sherbuck, Research Communications Manager

Krystina Tran, Administrative Assistant

Network Action Teams and Lead Agencies

Research in Diagnostics

Team Leader: Sterling K. Clarren, MD, FAAP

Lead Agency: Developmental Neurosciences and Child

Health, Child & Family Research Institute, Vancouver, BC

Intervention on FASD

Team Leader: Jacqueline Pei, BA, MEd, PhD, CPsych

Lead Agency: University of Alberta, Edmonton, AB

Evaluation of FASD Mentoring Programs

Team Leaders: Rob Santos, PhD and Linda Burnside, BSW, MEd, PhD

Lead Agency: University of Manitoba, Winnipeg, MB

Evaluation of FASD-Specific Health and Educational Materials

Team Leaders: Sameer Deshpande, BCom, MA, PhD and

Magdalena Cismaru, BA(Hon), PhD

Lead Agency: University of Regina, Regina, SK

Prevention from a Women's Health Determinants Perspective

Team Leaders: Nancy Poole, MA and Amy Salmon, PhD

Lead Agency: BC Centre of Excellence for Women's Health,

Vancouver, BC

Thank You

Research conducted by the Canada Northwest FASD Research Network would not be possible without the generous support of numerous government partners, organizations and individuals. We would like to take this opportunity to thank the Canadian Northwest FASD Partnership, and each of the seven jurisdictions – Alberta, British Columbia, Manitoba, the Northwest Territories, Nunavut, Saskatchewan and the Yukon. We would also like to thank the Provincial Health Services Authority of British Columbia for the support provided as the host agency for CanFASD Northwest.

Key Actions 2009 - 2010

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Key Action 1

We will stimulate foundational human research in priority areas of diagnosis, intervention, and prevention

Highlights

- ▶ Four Network Action Teams operational, with a fifth poised to begin work in 2010
- ▶ Successfully obtained competitive research grants to begin new studies in FASD
- ▶ Palpebral fissures study complete (see pages 18-19, Publications and Presentations)

Key Accomplishments

CanFASD Northwest now has four operational Network Action Teams (NATs) with developing programs of research. Each of these teams has prepared applications to relevant external funding bodies to support their research programs, and have plans to prepare additional grant applications in the fiscal year 2010-2011. Our current teams have secured grants from funders such as CIHR, SSHRC, NCE, and ACCFCR to support portions of their research programs, as articulated in their 2009-2010 work plans. Some of this funded research is now complete, and others are in progress, with results expected in the fiscal year 2010-2011. Details of funds requested and received in the fiscal year 2009-2010 are provided within the Network Action Team Activities section of this report.

Plans to develop a fifth NAT (focused on Mother Mentoring programs) are underway, and a new lead agency has been identified. This NAT will begin operating at the University of Manitoba's Department of Community Medicine early in the fiscal year 2010-2011. The Central Office and NAT leaders have continued to directly recruit colleagues in research, service provision, and policy roles to move high priority research and knowledge exchange areas forward.

Key Action 2

We will identify, summarize, and communicate relevant research to inform policy

Highlights

- ▶ Communications and knowledge exchange strategy developed
- ▶ Evidence to inform policy and practice published and presented in a wide range of forums

Key Accomplishments

This year has seen a significant expansion of CanFASD Northwest's research communications activities. This work has been supported by the development of a knowledge exchange strategy, which was created and approved by the Board of Directors following consultation with stakeholders in each jurisdiction of the Partnership. Research findings and syntheses of existing evidence were transmitted through presentations at a wide variety of meetings, through the website and, through short reports and policy briefs prepared by NATs. This was facilitated by Central Office staff responsible for communications. To ensure that material from CanFASD Northwest is presented in a recognizable, consistent, and professional manner, standardized templates were created. Procedures for ensuring the consistent use of these templates by NAT leads were established, and the production of a CanFASD Northwest publication style guide was initiated.

NAT members prepared and published articles summarizing their research activities in peer-reviewed journals, and in presentations of study findings at appropriate professional conferences. These activities ensured findings of NAT research are subject to peer review. Once published, links to articles' abstracts and full texts were posted on the CanFASD Northwest website (in accordance with copyright regulations).

The Network's CEO/ Scientific Director, Managing Director, representatives from all five NATs, and members of the Network's Board of Directors participated in the Consensus Development Conference on FASD – Across the Lifespan hosted by the Institute of Health Economics. This provided an excellent opportunity to showcase the work of our researchers and to highlight policy implications that stem directly from this work. Many CanFASD Northwest members have contributed chapters to an edited book, which is linked to this conference that will be published in late 2010. Details of papers published and presentations delivered are provided within the Network Action Team Research section of this report.

Key Action 3

We will communicate FASD research findings to service providers to support identification and implementation of best practices in FASD diagnosis, intervention, and prevention

Highlights

- ▶ CanFASD Northwest website updated to provide current consistent, and reliable information on our activities and to promote networking among all partners in the research community
- ▶ Infrastructure is in place to use web-based technologies to expand communication outside of the research community in an accessible and cost-effective manner

Key Accomplishments

In response to findings of a stakeholder consultation process undertaken by the Network's Managing Director, and in keeping with CanFASD Northwest's knowledge exchange strategy, a major redesign of the website was undertaken in the fiscal year 2009-2010. These updates sought to make the website more user-friendly and to allow us to offer a more accurate representation of the Network's current activities. The new website is complemented by the creation of the CanFASD Northwest community, an online environment for CanFASD Northwest members to share information and develop their collaborative endeavours, and a CanFASD Northwest YouTube channel, which can be used to archive and share presentations delivered by Network members to a wider audience. Plans are underway to support the Network's appropriate engagement with social media (such as Facebook and Twitter) as another vehicle for information sharing. Central Office has continued to maintain and update a searchable inventory of all FASD-related research activities, programs, and demonstration projects underway in Canada Northwest (the FASD Project Inventory), which is available on our website.

The Network's website is now better able to serve as a "clearing house" for disseminating practice-relevant research findings generated by the NATs.

NATs have prepared short reports of research and evaluation findings, and syntheses of published literature on priority topics, which highlight findings that have direct implications for practice. For example, NAT 3 has prepared a short report summarizing the promise of protection motivation theory for developing more effective primary prevention campaigns (see page 21, Publications), and NAT 5 produced a Consensus Statement on FASD Prevention from a Women's Health Determinants Perspective (see page 24, Reports).

Key Action 4

We will continue to foster collaborative, multi-site research that increases knowledge and enhances practice

Highlights

- ▶ Network Integration Teams on Data Management and Communications are now fully operational
- ▶ Activities are underway to raise the profile of CanFASD Northwest, to effectively communicate research findings, and identify directions for needed research

Key Accomplishments

As of fiscal year 2009-2010, both the Data Management and Communications Network Integration Teams (NIT) are fully operational. The first use of the Data Management NIT has been to apply this expertise in the structuring, collecting, and organizing of clinical profiles of patients for work in NAT 1's Common Data Form project (see page 18, Research Grants Pending). Other NATs will be encouraged to work with this NIT as there is need and the approach proves suitable.

The Communications NIT provides support to Central Office and the NATs to publicize high priority research, evaluation, and knowledge exchange needs articulated by governments and communities, and to ensure that findings from research supported by the Network and its NATs are communicated in a timely, effective, and efficient manner to decision-makers, service providers, families, and other stakeholders.

The Managing Director and Research Communications Manager work with NAT leaders to encourage the dissemination of Network-supported research in peer-reviewed journals and at scholarly meetings, to ensure that results meet the highest standards of scientific and scholarly excellence. The Communications NIT has also produced a series of promotional documents to raise the profile of CanFASD Northwest at professional meetings.

Key Action 5

We will increase awareness among researchers, governments and other concerned stakeholders of the challenges and the opportunities for advancing FASD research priorities in each of the jurisdictions of the Partnership

Highlights

- ▶ CanFASD Northwest has supported capacity building in the FASD research community
- ▶ New researchers have been linked to Network Action Teams to stimulate emerging areas of study
- ▶ New research has been developed to address priorities of governments, service providers, families, and communities

Key Accomplishments

CanFASD Northwest has sought to link and catalyze researchers and research partners to respond to emerging research and evaluation needs in FASD diagnosis, intervention, and prevention. Central Office staff have supported capacity building among researchers with an interest in FASD by connecting them to NATs with which they can develop research and knowledge exchange collaborations. These collaborations are also supported via the website. To the extent that we are aware of them, research needs and priorities of governments, communities, families, and service providers will continue to be communicated (via the Central Office and the Communications NIT) to researchers through our website, at professional meetings, and in circulated electronic announcements.

In an effort to support communication between Board members and their respective Ministers, a briefing package was created for each jurisdiction highlighting activities currently underway in that region. These briefing packages have been used as background material for meetings with Ministers, and will be updated regularly to ensure they remain current.

Key Action 6

We will take leadership in leveraging research and private funding to move the work of the CanFASD Northwest forward

Key Accomplishments

CanFASD Northwest's Board of Directors, with support from Central Office staff, embarked on a plan to pursue philanthropic fundraising. This included establishment of a fundraising committee to develop a fundraising plan and evolution of Board policies on approved sources of funding. The Board engaged Weber Shandwick International to develop a case statement to support fundraising efforts in fiscal years 2011 through 2012. CanFASD Northwest staff participated actively in this process by providing information and guidance to Weber Shandwick to assist them in creating this case statement.

As noted previously, all active NATs have prepared proposals for external funding this fiscal year. Details of funds requested and received are available within the Network Action Team Research section of this report.

The Canadian Health Institutes of Research (CHIR) developed a call for proposal for a Canadian Centre of Excellence in Developmental Medicine. Dr. Daniel Goldowitz, from the University of British Columbia, led an initiative in response to this call to establish a Neurodevelopmental Centre with research keyed to the three most prominent diagnostic groups: cerebral palsy, autism spectrum disorder and fetal alcohol spectrum disorder. FASD was only included in the proposal because our Scientific Director and the Network Action Team on Diagnostics had laid the ground work for collaboration between clinics that would permit the identification of research participants in adequate numbers from multiple sites. The proposal was successful and Neurodevelopmental Network Canada (NeuroDevNet) is now a reality.

The Centre received an approximate award of \$20 million for 5 years with about \$6 million for FASD research. This is a far-reaching proposal bringing the best innovative research in brain imaging, brain testing, epigenetics and hormone studies to bear on FASD. CanFASD Northwest is proud to be a partner in this ground-breaking work and delighted that its vision for research opportunities has paid off so well.

Key Action 7

We will foster collaboration with First Nations, Inuit, and Métis organizations, governments, and communities to address FASD diagnosis, intervention, and prevention priorities as they emerge within indigenous contexts

Highlights

- ▶ Work is underway to develop research programs focused on FASD-specific research priorities of Aboriginal communities
- ▶ Symposium held on FASD Research in First Nations, Inuit, and Métis communities

Key Accomplishments

NAT members are currently involved in developing and implementing research programs in collaboration with indigenous communities, subject to shared interests, emerging opportunities, and available funds. At the end of the fiscal year 2009-2010, the Network's Managing Director responded to a request from the First Nations and Inuit Health Branch to submit three funding proposals to support activities previously identified as priorities in Central Office and NAT work plans.

These included:

- ▶ a proposal to identify culturally-safe program evaluation practices for services supporting Aboriginal mothers at risk of having a child with FASD;
- ▶ a proposal to support the development of a Northern First Nations and Inuit Advisory Committee, to provide guidance to FASD research activities in the Northern Territories; and
- ▶ a proposal to develop a culturally-responsive, trauma-informed FASD prevention initiative in three Northern communities. FNIHB indicated support for this proposal (3), and a decision regarding funding is currently pending.

In January 2010, Board members Marilyn Van Bibber, Judy Bartlett, and Helen Klengenberg organized a day-long symposium in Victoria, BC on FASD research in First Nations, Inuit, and Métis communities. This symposium was attended by Board members, NAT leads, and some NAT members, and stimulated discussion on the need to develop respectful, culturally-responsive research agendas in this area. Activity to operationalize the First Nations, Inuit, and Métis NIT will continue into the next fiscal year.

Network Action Team Research

CanFASD Northwest's research is conducted through Network Action Teams. These teams are led by established and emerging investigators engaged in research throughout the jurisdictions of the Canadian Northwest FASD Partnership. Membership in each of the Network Action Teams is encouraged and facilitated from all jurisdictions with relevant programmatic activities, interest, and expertise. Priority areas for research and action have been generated through extensive consultation with key stakeholders in each jurisdiction of the Canadian Northwest FASD Partnership.

Our Teams

Research in Diagnostics—This team is engaged in research activities to help promote increased consistency, clarity and accuracy to the diagnosis of Fetal Alcohol Spectrum Disorder. They are also collaborating with NeuroDevNet, the first trans-Canada initiative dedicated to studying children's brain development.

Intervention on FASD—This team's focus is on the intervention needs of individuals with FASD across the lifespan. They have established a cross-jurisdictional advisory panel of FASD experts in the areas of research, policy and practice who are using a virtual community of practice as a central place where ideas, interventions, and research can evolve collaboratively.

Evaluating FASD-Specific Public Health and Educational Materials—This team's focus is on identifying and evaluating the potential impacts of FASD messaging strategies in social marketing and how these campaigns may change women's alcohol use patterns during pregnancy.

Evaluation of FASD Mentoring Programs—This team is presently in the planning stage, poised to begin its work in fiscal year 2010-2011. The intent of this team is to initiate and foster collaborative research with Parent Child Assistance Program (PCAP) replication sites across Canada Northwest.

FASD Prevention from a Women's Health Determinants Perspective—This team's research is focused on building the knowledge base for FASD prevention through work with women and their support systems on a range of health and social issues.

Research in Diagnostics

Research Grants Received

Investigation of specific patterns of cognitive dysfunction in FASD patients with correlations to neuroanatomy, neurophysiology, and neurochemistry, funded by Networks of Centres of Excellence of Canada, \$19,572,000.00, 2009 – 2014 (approximately \$6,000,000.00 is dedicated specifically for FASD research). PI: Dr. D. Goldowitz, University of British Columbia. Co-PIs of FASD projects: Dr. J. Reynolds, Queens University, Dr. J. Weinberg, University of British Columbia, and Dr. S. Clarren, University of British Columbia (NeuroDevNet).

Development of a screening tool kit, funded by the Public Health Agency of Canada, \$290,221.00, June 2009 – March 2010. Team Leader: E. Orbine, CAPHC President and CEO. Team members: Dr. A. Chudley, University of Manitoba, Dr. C. Looock, University of British Columbia, Dr. S. Clarren, University of British Columbia, Dr. G. Koren, University of Toronto, and Dr. T. Rosales, retired Geneticist.

Research Grants Pending

Development of a common data set for use in evaluating patients for FASD in all clinics in Canada Northwest and beyond. Application submitted to Alberta Provincial Government. Co-applicants: Dr. S. Clarren; University of British Columbia, and Dr. R. Sebaldt, McMaster University. Funding request: \$300,000.00 for 6 to 12 months (Common Data Form project).

Publications

Bertram, C. P., Konarski, R., Keiver, K., Pritchard Orr, A., & Clarren, S. K. (2009). Changes in motor abilities following a strength-based intervention program for children with fetal alcohol spectrum disorder (FASD). *Journal of Sport and Exercise Psychology*, 31, S27.

Clarren, S. K. (2009). Time for the development of effective approach to the prevention of fetal alcohol spectrum disorder. *Expert Rev. Obstet.Gynecol.*, 4(5), 483-485.

Clarren, S. K., Chudley, A. E., Wong, L., Friesen, J., & Brant, R. (2010). Normal distribution of palpebral fissure lengths in Canadian school age children. *The Canadian Journal of Clinical Pharmacology*, 17(1), e67-e78.

Presentations

Clarren, S. K. (2009, April 7). FASD screening and diagnosis implications for two. Presentation at the Alberta FASD teaching and training series for the Alberta FASD Cross-Ministry Committee, Edmonton, AB (Broadcast across Canada).

Clarren, S. K. (2009, May 30). Approaches to the prevention of Fetal Alcohol Spectrum Disorder. Presentation at the Tom Shepard Festschrift, Seattle, WA.

Clarren, S. K., Chudley, A., Wong, L., Friesen, J., & Brant, R. (2009, September 09). Normal distribution of palpebral fissure lengths in Canadian school age children. Presentation at the 10th Annual Fetal Alcohol Canadian Expertise (FACE) Research Roundtable, Toronto, ON.

Clarren, S. K. (2009, September 23). How are we to fairly develop FASD screening materials? Presentation at the National FASD Screening Tool Development Workshop, Toronto, ON.

Clarren, S. K. (2009, October 7). From policy to research and from research to policy. Presentation at the Institute for Health Economics Consensus Development Conference on FASD – Across the Lifespan, Edmonton, AB.

Clarren, S. K. (2009, December 3 – 4). FASD and the Canadian approach. Presentation at the Substance Abuse and Mental Health Service Administration, Bethesda, MD.

Clarren, S. K. (2009, December 3 – 4). A report on the Institute of Health Economics Consensus Development Conference. Presentation at the Substance Abuse and Mental Health Service Administration, Bethesda, MD.

Clarren, S. K. (2010, February 18). What are we doing with diagnostics, intervention and prevention? Keynote address at 2010 Southeast Alaska Regional FASD Conference, Juneau, Alaska.

Clarren, S. K. (2010, February 18). Diagnosis – cutting edge. Workshop facilitation at 2010 Southeast Alaska Regional FASD Conference, Juneau, Alaska.

Clarren, S. K. (2010, February 18). Why screen for Fetal Alcohol Spectrum Disorder? Presentation to the Medical Society of Juneau, Alaska, Juneau, Alaska.

Clarren, S. K. (2010, March 13). Who cares for fetal alcohol syndrome? Keynote address at the North Pacific Pediatric Society 180th Scientific Conference, Seattle, WA.

Intervention on FASD

Research Funds Received

Patterns of recommendations made following FASD diagnosis: A pilot project in three Alberta FASD diagnostic clinics, funded internally, and linked to an ACCFCR-funded study entitled, Life course trajectories and service utilization patterns of children with Fetal Alcohol Spectrum Disorder. (PI: Dr. J. McLennan; award amount \$99,940.00), April 1 – September 30, 2009. PIs: Dr. B. Gibbard, University of Calgary and Dr T. Prince, University of Calgary.

Pilot survey of community intervention programs in Alberta, funded by Alberta Centre for Child, Family, and Community Research (ACCFCR), \$5,000.00, August 1, 2009 – September 30, 2009. PIs: Dr. B. Gibbard, University of Calgary and Dr. T. Prince, University of Calgary.

FASD intervention expert opinion survey, funded internally, \$4,925.00, and by Pure Studentship, \$9,098.23, from the University of Calgary, May 1, 2009 – December 31, 2009. PIs: Dr. B. Gibbard, University of Calgary and Dr. T. Prince, University of Calgary.

Research Funds Requested

The experience of families and caregivers as it relates to FASD interventions across the lifespan. Letter of intent submitted to Alberta Mental Health. Applicant: Dr. J. Pie, University of Alberta.

Perceptions of Fetal Alcohol Spectrum Disorder: Identifying and developing systems for healthy living. Application submitted to Killam Research Fund. Applicant: Dr. J. Pie, University of Alberta.

Perceptions of Fetal Alcohol Spectrum Disorder: Identifying and developing systems for healthy living. Application submitted to Canadian Foundation on Fetal Alcohol Research Grant. PI: Dr. J. Pei, University of Alberta.

Research Funds Pending

An evaluation of an intervention program for youth with Fetal Alcohol Spectrum Disorders (FASD). Application submitted to Alberta Centre for Child, Family and Community Research. Co-applicants: Dr. J. Pei, University of Alberta and Dr. C. Rasmusen, University of Alberta. Request: \$61,000.00 for two years.

Publications & Presentations

Gibbard, B., & Prince, T. (2009). FASD Intervention Network Action Team Stakeholders Symposium Summary Report. Prepared for Canada Northwest FASD Research Network.

Pei, J., & Walls, L. (2010, March 25). Interventions for individuals with Fetal Alcohol Spectrum Disorder. Presentation to Alberta Health Services via video conference, Edmonton, AB.

Evaluating FASD-Specific Public Health and Education Materials

Research Funds Received

Conversations with women about alcohol use during pregnancy, funded by Social Sciences and Humanities Research Council, \$14,800.00. PIs: Dr. S. Deshpande, University of Lethbridge, and Dr. M. Cismaru, University of Regina.

Publications

Peer-Reviewed Articles

Cismaru, M., Deshpande, S., Thurmeier, R., Lavack, A. M., & Agrey, N. (2010). Preventing Fetal Alcohol Spectrum Disorders: The role of protection motivation theory. *Health Marketing Quarterly*, 27, 66-85.

Reports

Cismaru, M., Deshpande, S., Thurmeier, R., Lavack, A. M., & Agrey, N. (2009). Enhancing the effectiveness of north-western Canada initiative in preventing FASD. Prepared for Canada Northwest FASD Research Network (www.canfasd.ca).

Saskatchewan Prevention Institute (2009). Creating effective primary prevention FASD resources: Evaluation processes in health promotion. Prepared for Canada Northwest FASD Research Network (www.canfasd.ca), Saskatoon, SK.

Book Chapters

Thurmeier, R., Deshpande, S., Lavack, A. M., Agrey, N., & Cismaru, M. (2010) Next steps in FASD primary prevention. In Institute of Health Economics FASD Policy Development Book. Submitted.

Presentations

Cismaru, M., Deshpande, P., Thurmeier, R., Lavack, A., & Agrey, N. (2009, June 6 – 9). Preventing Fetal Alcohol Spectrum Disorders: The role of protection motivation theory. Presentation at the Administrative Sciences Association of Canada, Niagara Falls, ON.

Thurmeier, R. (2009, October 7 – 9). Inventory of primary prevention campaigns. Presentation at the Institute of Health Economics Consensus Development Conference on FASD - Across the Lifespan, Edmonton, AB.

Thurmeier, R. (2009, November 17). FASD prevention efforts in Saskatchewan. Presentation at the Canada Prenatal Nutrition Program, Saskatoon, SK.

FASD Prevention from a Women's Health Determinants Perspective

Research Funds Received

Pregnancy, alcohol, tobacco and health strategies (PATHS) for youth follow up, funded by Child and Youth Health Network, \$10,000.00. Co-PIs: J. Bottorff, UBC Okanagan and N. Poole, British Columbia Centre of Excellence for Women's Health. Collaborators: Dr. L. Marcellus, University of Victoria, and L. Greaves, British Columbia Centre of Excellence for Women's Health.

Healing ourselves: Mothers recovering from grief and loss in Vancouver's downtown eastside, funded by Victoria Foundation, \$156,000.00. PI: Dr. A. Salmon, University of British Columbia. Co-PIs: Dr. D. Badry, University of Calgary, Dr. D. Rutman, University of Victoria, S. Payne, Women's Health Research Institute. D. Clifford, Sheway, S. Lockhart, Stanton Territorial Health Authority, and M. Van Bibber, Inter Tribal Health Authority.

Identifying the long-term impact of MHSD supports on client outcomes at Sheway, funded by BC Ministry of Housing and Social Development, \$35,000.00. PI: Dr. A. Salmon, University of British Columbia. Collaborators: S. Payne, Women's Health Research Institute, and D. Clifford, Sheway.

Moving forward on improving substance treatment and support for First Nations and Inuit women in Canada, funded by First Nations and Inuit Health Branch, Health Canada, \$144,786.00. PI: N. Poole, British Columbia Centre of Excellence for Women's Health.

Women with FASD and FASD prevention, funded by Victoria Foundation, \$57,680.00. PI: Dr. D. Rutman, University of Victoria. Project partners: British Columbia Centre of Excellence for Women's Health, the Aurora Centre, Inter Tribal Health Association, Vancouver Island Health Authority, Victoria FASD Community Circle, Canadian National Coalition of Experiential Women, and PEERS Victoria.

Pregnancy-related issues in the management of addictions (PRIMA) train-the-trainer and evaluation project, funded by Public Health Agency of Canada, \$662,412.00. PIs/Collaborators: D. Midmer, M. Kahan, P. Mousmanis, L. Graves, R. Abrahams, S. Payne, G. Hunt, K. Cardinal, R. Wilson, and S. Harper. Project partners: British Columbia Centre of Excellence for Women's Health.

Training trainers, developing champions, funded by Health Canada, \$198,222.00. PIs/Collaborators: D. Midmer, M. Kahan, P. Mousmanis, L. Graves, S. Payne, G. Hunt, K. Cardinal, P. F. Hall, O. Horn, and T. Kim.

Pregnancy-related issues in the management of addictions (PRIMA) train-the-trainer and evaluation project, funded by First Nations and Inuit Health Branch, Health Canada, \$74,666.00. PI: D. Midmer. Co-Applicants: P. Mousmanis, L. Graves, and M. Kahan. Participants: R. Abrahams, S. Payne, G. Hunt, K. Cardinal, S. Harper, S. Wong, T. Kim, and M. Smith.

FASD interventions and communities of practice, funded by Alberta Centre for Child, Family, and Community Research, \$100,000.00. PI: Dr. D. Badry and W. Pelech, Faculty of Social Work, University of Calgary.

Does affordable Aboriginal housing have a beneficial impact? funded by Social Sciences and Humanities Research Council, \$25,000.00, April 2010 – April 2011. PI. Dr. A. Salmon, University of British Columbia. Co-PIs: N. Jategaonkar, BC Non-profit Housing Association and K. Albers, M'akola Housing Society.

Research Funds Requested

CIHR team in trauma-informed, integrated addictions treatment for women. Application submitted to Canadian Institutes of Health Research (CIHR). Applicants: L. Greaves, C. Dell, V. Brown and L. Drabble. Co-applicants from NAT 5: N. Poole, British Columbia Centre of Excellence for Women's Health, M. Harber, Thompson Rivers University, Dr. C. Tait, University of Saskatchewan and Dr. L. Marcellus, University of Victoria. Fund requested: \$1,497,832.00.

A Common evaluation framework for comprehensive, women-centred FASD prevention programs in Canada Northwest. Application submitted to Canadian Institutes of Health Research. Applicants: Dr. A. Salmon, University of British Columbia, Dr. L. Marcellus, University of Victoria. Co-applicants: Dr. L. Burnside, Manitoba Family Services and Consumer Affairs, S. Chatwood, Institute for Circumpolar Health Research, C. Dell, University of Saskatchewan, N. Poole, British Columbia Centre of Excellence for Women's Health, Dr. D. Rutman, University of Victoria. Fund requested: \$100,000.00.

Publications

Peer-Reviewed Articles

Moumita, S., Burnett, M., Carrière, S., Cox, L., Dell, C., Gammon, H., et al. (2009). Screening and recording of alcohol use among women of child-bearing age and pregnant women. *Canadian Journal of Clinical Pharmacology*, 16(1), e242-263.

Strega, S., Casey, L. & Rutman, D. (2009). Sex workers addressing treatment. *Women's Health and Urban Life*, 8 (1), 42-53.

Rutman, D., & Van Bibber, M. (2010). Parenting with Fetal Alcohol Spectrum Disorder. *International Journal of Mental Health and Addiction*. doi: 10.1007/s11469-009-9264-7.

Hubberstey, C., Rutman, D., & Hume, S. (2010). Evaluation of BC's key worker and parent support program for families with a child or youth with Fetal Alcohol Spectrum Disorder. *Canada's Children*, 16, 33-45.

Marcellus, L. (2010). Supporting resilience in foster families: A model for program design that supports recruitment, retention and satisfaction of foster families who care for infants with prenatal substance exposure. *Child Welfare*, 89(1), 7-29.

Acoose, S., Desjarlais, V., Dell, C., Blunderfield, D. (2010). Beginning with our voices: How the experiential stories of First Nations women are contributing to a national research project. *Journal of Aboriginal Health*, 4(2), 35-43. http://www.naho.ca/jah/english/jah04_02/04_V4_I2_Beginning.pdf

Salmon, A., Browne, A., & Pederson, A. (in press). "Now we call it research": Participatory health research involving marginalized women who use drugs. *Nursing Inquiry* (accepted January 2010).

Hubberstey, C., Rutman, D., & Hume, S. (in press). Evaluation of BC's key worker and parent support program for families with a child or youth with Fetal Alcohol Spectrum Disorder. *Canada's Children*.

Reports

Dell, C., & Poole, N. (2009). Applying a sex/gender/diversity-based analysis within the national framework for action to reduce harms associated with alcohol and other drugs and substances in Canada. Ottawa, ON: Canadian Centre on Substance Abuse. <http://www.nationalframework-cadrenational.ca/images/uploads/file/sex-diversity-paper-bil.pdf>

Hume, S., Rutman, D., Hubberstey, C., Lentz, T., & Van Bibber, M. (2009). Key worker and parent support program –final formative and summative report. Victoria, BC: Ministry for Children and Family Development. http://www.mcf.gov.bc.ca/fasd/kw_evaluation.htm

Salmon, A. and Fielding, L. (2009). Your rights in research: A guide for women. Vancouver, BC: BC Centre of Excellence for Women's Health. <http://www.bccewh.bc.ca/publications-resources/documents/YourRightsinResearchAGuideforWomen.pdf>

When researchers come calling: A guide for organisations that work with women. (2009). Vancouver, BC: BC Centre of Excellence for Women's Health. <http://www.bccewh.bc.ca/publications-resources/documents/WhenResearchersComeCalling.pdf>

Salmon, A., & Poole, N. (2010). 10 fundamental components of FASD prevention from a women's health determinants perspectives. Vancouver, BC: Canada Northwest FASD Research Network. <http://www.canfasd.ca/networkActionTeams/womens-health-determinants.aspx>

Salmon, A., & Poole, N. (2010). Taking a relational approach: The importance of timely and supportive connections for women. Vancouver, BC: Canada Northwest FASD Research Network. <http://www.canfasd.ca/networkActionTeams/womens-health-determinants.aspx>

Marcellus, L. (2010). Safe babies foster parent training project: 10 year curriculum revision. Victoria, BC:

BC Ministry of Children and Family Development.

Dechief, L. (2010). Evaluation report: Women's outreach worker (WOW) project. Paper prepared for Chrysalis Society for Women. Vancouver, BC .

Rutman, D., Hubberstey, C., & Hume, S. (2010). Interim formative evaluation report on the youth outreach program (for youth with FASD). Paper prepared for the College of New Caledonia, Burns Lake. BC.

Taylor, J., & Rutman, D. (2010). Experiences of adults living with Fetal Alcohol Spectrum Disorder and their personal supporters in making and using a representation agreement. Paper prepared and produced by the Nidus Personal Planning Resource Centre and Registry, Vancouver, BC.

Taylor, J., & Rutman, D. (2010). Representation agreements and fetal alcohol syndrome: Answers to frequently asked questions. Paper prepared and produced by the Nidus Personal Planning Resource Centre and Registry, Vancouver, BC.

Salmon, A., & Poole, N. (Submitted). Importance of timing and relational aspects of care in risk/protective factors for having a child with FASD.

Information Sheets

Poole, N., Urquhart, C., & Dell, C. (2010). Trauma-informed approaches in addictions treatment: Gendering the national framework discussion guide 1. Vancouver, BC: BC Centre of Excellence for Women's Health. <http://www.coalescing-vc.org/virtualLearning/community6/info-sheets.htm>

Poole, N., Urquhart, C., & Gonneau, G. (2010). Girl-centred approaches to prevention, harm reduction, and treatment: Gendering the national framework discussion guide 2. Vancouver, BC: BC Centre of Excellence for Women's Health. <http://www.coalescing-vc.org/virtualLearning/community6/info-sheets.htm>

Poole, N., & Urquhart, C. (2010). Mothering and substance use: Approaches to prevention, harm reduction, and treatment: Gendering the national framework discussion guide 3. Vancouver, BC: BC Centre of Excellence for Women's Health. <http://www.coalescing-vc.org/virtualLearning/community6/info-sheets.htm>

Poole, N., Urquhart, C., & Talbot, C. (2010). Women-centred harm reduction: Gendering the national framework discussion guide 4. Vancouver, BC: BC Centre of Excellence for Women's Health. <http://www.coalescing-vc.org/virtualLearning/community6/info-sheets.htm>

Book Chapters

Rutman, D. (2009). Ensemble des troubles causés par l'alcoolisation fœtale (ETCAF): Effets sur la parentalité. Invited chapter in: P. Morissette et Marielle Venne (Eds.), *Parentalité, alcool et drogues: Un défi multidisciplinaire*. Montreal: The Éditions du CHU Sainte-Justine.

Badry, D., Pelech, A., & Milne, D. (in press). Fetal Alcohol Spectrum Disorder communities of practice in

Alberta: Innovations in child welfare practice. In: D. Fuchs, S. McKay, & I. Brown (Eds.), *Awakening the spirit: Voices from the Prairies*. University of Regina: CPRC Press.

Poole, N. (in press). A women's health perspective on prevention of FASD. In E. Jonsson, E. Riley, S. Clarren, & J. Weinberg (Eds.), *Fetal Alcohol Spectrum Disorder – A policy perspective*. Toronto, ON: Wiley Blackwell.

Rutman, D., Hubberstey, C. & Hume, S. (in press). British Columbia's key worker and parent support program: Evaluation highlights and implications for practice. In E. Jonsson, E. Riley, S. Clarren, & J. Weinberg (Eds.), *Fetal Alcohol Spectrum Disorder – A policy perspective*. Toronto, ON: Wiley Blackwell.

Badry, D., & Wight Felske, A. (in press). Policy development in Fetal Alcohol Spectrum Disorder for individuals and families across the lifespan. In E. Jonsson, E. Riley, S. Clarren, & J. Weinberg (Eds.), *Fetal Alcohol Spectrum Disorder – A policy perspective*. Toronto, ON: Wiley Blackwell.

Edited Books

Bell, K., Salmon, A., & McNaughton, D. (forthcoming). *Alcohol, tobacco, and obesity: Morality, mortality, and the new public health*. Under contract with Routledge Press, expected publication in late 2010.

Music Videos

University of Saskatchewan (Producer), National Native Addictions Partnership Foundation (Producer), the Canadian Centre on Substance Abuse (Producer), & Dell, C. (Director). (2009). *From Stilettos to Moccasins* [music video]. Available from <http://www.youtube.com/watch?v=1QRb8wA2iHs>

Presentations

Payne S. (2009, March 27 – 28). FASD, trauma-informed care, pregnancy and substance use. Training facilitation at Train-The-Trainer PRIMA (Pregnancy-Related Issues in the Management of Addictions) Workshop, Prince Rupert, BC.

Poag, E., & Lindsay, M. (2009, May 29). Substance use in pregnancy. Presentation at Interdisciplinary Rounds, Victoria General Hospital, Victoria, BC.

Drabble, L., Magri, R., Tumwesigye, N. M., Poole, N., & Li, Q. (2009, June 3). Conceiving risk, divergent responses - perspectives on the evolution of the construction of FASD in six countries. Presentation at the 35th Annual Alcohol Epidemiology Symposium of the Kettil Bruun Society for Social and Epidemiological Research on Alcohol, Copenhagen, Denmark.

Poole, N. (2009, June 9). Preventing Fetal Alcohol Spectrum Disorder, promoting women's health. Presentation at the Canadian Public Health Association 2009 Annual Conference Public Health in Canada: Strengthening Connections, Winnipeg, MB.

Tait, C. (2009, July 11 – 16). The role of ethical guidelines in the delivery of frontline mental health and

addictions programming in Canadian indigenous communities. Presentation at the 14th International Congress on Circumpolar Health, Yellowknife, NT.

Badry, D. (2009, July 11 – 16). Personal ecology and environmental struggles for birth mothers of children with Fetal Alcohol Spectrum Disorder. Presentation at the 14th International Congress on Circumpolar Health, Yellowknife, NT.

Van Bibber, M. (2009, July 11 – 16). Community readiness to engage in FASD research. Presentation at the 14th International Congress on Circumpolar Health, Yellowknife, NT.

Hache, A. (2009, July 11 – 16). Making the path by walking it: A comprehensive evaluation of the Women and Children's Healing and Recovery Program. Presentation at the 14th International Congress on Circumpolar Health, Yellowknife, NT.

Van Bibber, M. (2009, July 11 – 16). Creating models for mother's wellness through partnership research: A community partner experience. Presentation at the 14th International Congress on Circumpolar Health, Yellowknife, NT.

Salmon, A. (2009, July 123 – 24). Aboriginal mothering, fetal alcohol exposure, and the contestations of neoliberal citizenship. Presentation at the Alcohol, Tobacco, and Obesity: Medicine, Morality, and the New Public Health Workshop, UBC, Vancouver, BC.

Payne S. (2009, September 11 – 12). FASD, trauma-informed care, pregnancy and substance use. Training facilitation at Train-The-Trainer PRIMA (Pregnancy-Related Issues in the Management of Addictions) Workshop, Halifax, NS.

Marcellus, L. (2009, October 4 – 6). Administering love: Foster families caring for infants with prenatal substance exposure. Poster presentation at the 15th International Qualitative Health Research Conference, Vancouver BC.

Poole, N. (2009, October 7 - 9). Prevention of FASD: A broader strategy in women's health. Presentation at the Institute for Health Economics Consensus Development Conference on FASD – Across the Lifespan, Edmonton, AB. <http://www.buksa.com/fasd/docs/018-Poole.pdf>

Badry, D. (2009, October 7 – 9). Policy development and FASD. Presentation at the Institute for Health Economics Consensus Development Conference on FASD – Across the Lifespan, Edmonton, AB. <http://www.buksa.com/fasd/docs/027-Badry.pdf>

Salmon, A. (2009, October 7 – 9). Addressing FASD as a women's health issue. Presentation at the Institute for Health Economics Consensus Development Conference on FASD – Across the Lifespan, Edmonton, AB. <http://www.buksa.com/fasd/docs/017-Salmon.pdf>

Payne S. (2009, November 6 – 7). FASD, trauma-informed care, pregnancy and substance use. Training

facilitation at Train-The-Trainer PRIMA (Pregnancy-Related Issues in the Management of Addictions) Workshop, St. John's, NF.

Salmon, A. (2009, November 11). Understanding the health service needs of women with addictions: Evidence from four studies. Presentation at the invited lecture to the University of Stirling's Department of Nursing and Midwifery, Stirling, Scotland.

Poole, N., & De Pape, D. (2009, November 15 – 18). Linking FASD prevention and alcohol policy. Presentation at the Canadian Centre on Substance Abuse's Issues of Substance Conference, Halifax, NS. http://www.issuesofsubstance.ca/SiteCollectionDocuments/2009%20IOS%20Documents/EIBI3_PooleN.pdf

Dell, C. (2009, November 15 – 18). Hear me heal: A research project on Aboriginal women, drug abuse and the healing journey. Presentation at the Canadian Centre on Substance Abuse's Issues of Substance Conference, Halifax, NS. http://www.issuesofsubstance.ca/SiteCollectionDocuments/2009%20IOS%20Documents/SAT4_DellC.pdf

Dell, C., & Poole, N. (2009, November 15 – 18). Better treatment, harm reduction and prevention using a population-informed approach: Sex, gender, and diversity. Presentation at the Canadian Centre on Substance Abuse's Issues of Substance conference, Halifax, NS. http://www.issuesofsubstance.ca/SiteCollectionDocuments/2009%20IOS%20Documents/CC5_Chaim_Dell_PooleN.pdf

Poole, N. (2009, November 15 – 18). Improving substance use treatment and support for First Nations and Inuit women who are at risk of having a child with FASD. Poster presentation at the Canadian Centre on Substance Abuse's Issues of Substance Conference, Halifax, NS.

Poole, N. (2009, November 15 – 18). Fetal Alcohol Spectrum Disorder (FASD) prevention: Canadian perspectives. Poster presentation at the Canadian Centre on Substance Abuse's Issues of Substance Conference, Halifax, NS.

Poole, N., Gonneau, G., & Urquhart, C. (2010, January 29). Heavy alcohol use by girls and young women: Prevalence, health impacts, key influences and gender informed primary prevention approaches. Presentation at the Symposium on Heavy Alcohol Use Among Girls and Young Women: Gender-Informed Primary Prevention Approaches for BC. Vancouver, BC.

Payne S. (2010, March 15). FASD, trauma-informed care, pregnancy and substance use. Training facilitation at Train-The-Trainer PRIMA (Pregnancy-Related Issues in the Management of Addictions) Workshop, Kamloops, BC.

Bryans, M. (2010, March 16). Harm reduction and FASD prevention. Presentation at the Faculty of Nursing, the University of Manitoba, Winnipeg, MB.

Poole, N. (2010, March 18 – 19). Women's substance use and approaches to supporting/treating women with substance use problems. Keynote presentation at the 2010 Women's and Children's Health Conference, Regina, SK.

Poole, N., & Urquhart, C. (2010, March 18 – 19). Pregnancy, parenting & substance use. Presentation at the 2010 Women's and Children's Health Conference, Regina, SK.

Dechief, L. (2010, March 23 – 26). Safety and health enhancement (SHE) for women experiencing abuse. Presentation at the 19th International Conference on Safe Communities. Suwon, South Korea.

Doell, S., Dell, C., McKay, G., & de Bruin, P. (2010, March 25). Walking the line: Emergent perspectives on harm reduction. Panel presentation for a CIHR Cafe Scientifique, Saskatoon, SK.

Bryans, M. (2010, March 26). FASD NAT consensus statement. Presentation to the Coalition of Alcohol and Pregnancy, Winnipeg, MB.

Bryans, M. (2010, March 27). FASD NAT consensus statement on FASD prevention. Presentation at the 2010 Making the Connection: Partners in Caring Conference, Winnipeg, MB.

Poole, N., & Gonneau, G. (2010, March 26). Improving access for under-reached Aboriginal women: Findings from a scan of best practices regarding access to maternal and child health programming in First Nations and Inuit communities. Paper presented to the First Nations and Inuit Health Branch, Health Canada, Ottawa, ON.

Poole, N., Dell, C., & Urquhart, C. (2010, March 29). Gendering the national framework. Panel presentation for a webcast sponsored by the British Columbia Centre of Excellence for Women's Health, Vancouver, BC. <http://www.coalescing-vc.org/virtualLearning/community6/webcasts-files.htm>

Badry, D. (2010, March 30). FASD and education. Guest speaker presentation at the Faculty of Education, the University of Calgary, Calgary, AB.

Poole, N. (2010, March 30 – 31). FASD, trauma-informed care, pregnancy and substance use. Training facilitation at Train-The-Trainer PRIMA (Pregnancy-Related Issues in the Management of Addictions) Workshop, Bridgewater, NS.

Dechief, L. (2010). FASD, trauma-informed care, pregnancy and substance use. Training facilitation at Train-The-Trainer PRIMA (Pregnancy-Related Issues in the Management of Addictions) Workshop, Vancouver, BC.

Dell, C. (2010). Understanding addictions. Seminar presentation at College of Nursing, University of Saskatchewan, Saskatoon, SK.

Dell, C. (2010). Aboriginal women's healing from illicit drug abuse: Considering the role of trauma. Presentation at the 2010 Saskatchewan Clinical Conference.

Finances

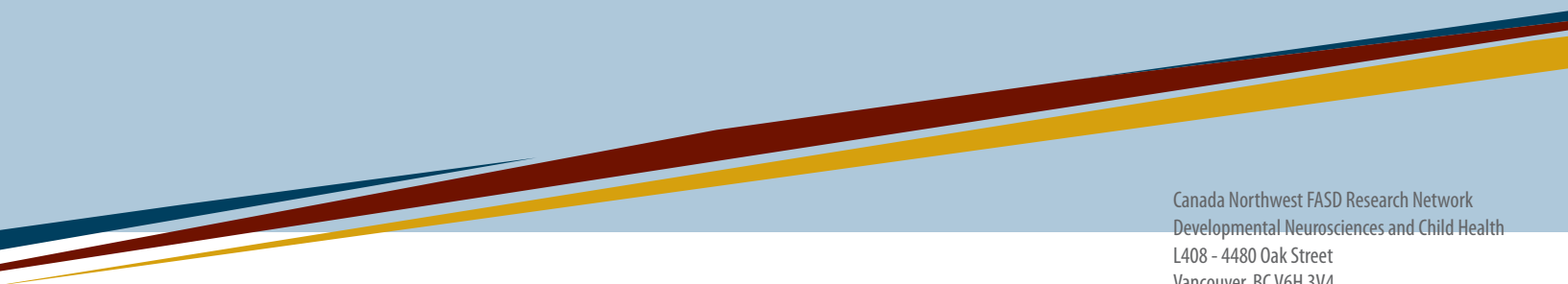
The Canadian Northwest FASD Research Partnership continued to provide our primary source of infrastructure funding for the fiscal year 2009-2010, with a commitment of \$650,000. This ongoing support provided operational funding for CanFASD Northwest's scientific direction and coordination, knowledge exchange, and data management activities, as well as a total of \$219,000 in core funding for our five Network Action Teams. With this stable source of operations funding to build a network, set research priorities, establish new collaborations, collect pilot data, and test new methodologies and tools, CanFASD Northwest's Network Action Team members successfully leveraged over \$7,780,000 in competitively awarded research grants and contracts in the fiscal year 2009-2010.

As a small organization with big aspirations, CanFASD Northwest's growth and achievements in the fiscal year 2009-2010 would not have been possible without strong working relationships with our partners in building capacity for FASD research. Additional in-kind supports were provided to the CanFASD Northwest Central Office and Network Action Teams by the Provincial Health Services Authority, the Child and Family Research Institute, and by the Network Action Team Lead Agencies: The BC Centre of Excellence for Women's Health, the Alberta Children's Hospital, University of Calgary, University of Alberta, the Saskatchewan Prevention Institute, University of Regina and Healthy Child Manitoba.

CanFASD Northwest's goal is to develop long-term, sustainable, external core funding, which will provide a solid base for researchers to build and share new knowledge to prevent FASD and significantly improve the lives of individuals, families, and communities living with this disability.

Network Action Team Research Funders Fiscal Year 2009 - 2010

- Alberta Centre for Child, Family, and Community Research
- BC Ministry of Housing and Social Development
- Canadian Institutes of Health Research
- BC Child and Youth Health Research Network
- First Nations and Inuit Health Branch
- Networks of Centres of Excellence of Canada
- Public Health Agency of Canada
- Social Sciences and Humanities Research Council
- Victoria Foundation



Canada Northwest FASD Research Network
Developmental Neurosciences and Child Health
L408 - 4480 Oak Street
Vancouver, BC V6H 3V4
phone 604-875-2996, fax 604-875-3569
www.canfasd.ca