2021-2022 ANNUAL REPORT



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WHO WE ARE

The Canada Fetal Alcohol Spectrum Disorder Research Network (CanFASD) is a network of stakeholders from across Canada focused on addressing Fetal Alcohol Spectrum Disorder (FASD). We are a national and charitable organization that supports research and knowledge exchange initiatives to inform evidence-based policies and practices.

CanFASD's unique partnership brings together researchers, students, practitioners, policymakers, families, and communities across Canada and internationally to address the complexities of FASD. Our research teams currently lead over 50 major projects in the areas of prevention, diagnosis, intervention, justice, and child welfare.

> Together. Finding answers. Improving outcomes.

VISION

All Canadians are engaged and united with awareness, evidence and knowledge and are effectively addressing the complexities of FASD.

MISSION

CanFASD supports Canada's leadership, across all sectors and at all levels, in addressing the extraordinary complexities of FASD.

The Network does this through producing and sustaining national collaborative research, shared with all Canadians, focusing primarily on the critical areas of prevention, intervention and diagnosis.

The work of the Network leads to increasingly effective prevention strategies and practice and improved support for people affected by FASD.

Table of CONTENTS

WHO WE ARE STRENGTHS OF PEOPLE WITH FASD MESSAGE FROM THE BOARD OF DIRECTORS **BOARD OF DIRECTORS** MESSAGE FROM THE SENIOR RESEARCH LEAD MANAGEMENT AND RESEARCH TEAM UPDATE FROM THE FAMILY ADVISORY COMMITTEE **UPDATE FROM THE AFECT** SUPPORT RESEARCH OUTREACH AND COMMUNICATIONS WORKFORCE DEVELOPMENT **INFLUENCE POLICY & PRACTICE** NATIONAL FASD STRATEGY INDIGENOUS RELATIONS **FINANCIAL SNAPSHOT MEMBERSHIP** SUPPORT OUR WORK



STRENGTHS of people with FASD

Balancing the Story of FASD with Research on Strengths

Research on the challenges and needs of individuals with FASD and their families has been important for understanding the complex impacts of prenatal alcohol exposure and fueling advocacy for services and supports. However, without balancing this research with studies of strengths and successes, a deficit-based narrative has become the dominant one in the literature.

This is problematic. Focusing only on the challenges associated with FASD can increase stress and stigma while reducing self-efficacy and quality of life for individuals and their families. Instead, identifying and leveraging strengths can improve confidence; promote optimism, wellbeing, and resilience; and ultimately support individuals, families, and communities to thrive.

To balance the deficit-oriented story of FASD, a group of CanFASD researchers and Family Advisory Committee members reviewed and synthesized the FASD literature on strengths. We focused on studies published about strengths that are inherent to individuals with FASD, defined as:

"Individual characteristics, talents, and abilities that may contribute to, and be cultivated to promote fulfilment and wellbeing for individuals with FASD"

From the literature published up until February 2021, we identified 19 studies of strengths in FASD. Most involved adults (n = 9) or adolescents (n = 8) and only two involved children. The goal of most studies was to explore the lived experiences of people with FASD and their caregivers. Evidence of strengths was often reported as a tangential finding, or as part of a larger picture that was equally (or more heavily) focused on challenges.

Within these studies, researchers identified a range of talents and abilities, such as art, music, sports, language, visual-spatial skills, kinesthetic learning, and computers/video games. Researchers also listed positive character attributes included kindness, perseverance, curiosity, and hopefulness.

We synthesized this evidence through the lens of positive psychology and identified five broad categories of strengths among people with FASD:

- 1. Strong self-awareness: Recognizing personal challenges and limitations, as well as strengths and capabilities.
- 2. Receptiveness to support: Acknowledging the need for help and being willing to seek and receive support, particularly during the transition to adulthood.
- **3. Capacity for human connection:** Connecting with and caring for other people.
- 4. Perseverance through challenges: Having the courage and persistence to overcome adversity.
- 5. Hope for the future: Seeing beyond the present moment and believing in a better future.

This study reveals a preliminary but critical body of evidence that underscores the inherent strengths of individuals with FASD. These findings reflect the remarkable diversity of this population and lay important groundwork for future strengths-based FASD research and practice.



Identifying and leveraging strengths can improve confidence; promote optimism, wellbeing, and resilience; and ultimately support individuals, families, and communities to thrive.



Message from the

Tim Moorhouse, Board Chair

This will be my last Annual Message as Chair of the CanFASD Board of Directors. As such I would like to use this opportunity to acknowledge the tremendous evolution that the Research Network has undergone since it's inception in 2013. The initial identified need and Network concept was to create an initiative that had the mandate to find ways to increase the amount of FASD research within the provinces and territories of the Canada Northwest FASD Partnership. The resulting Network of partnerships and collaborations significantly exceeded the original mandate and went on to find innovative and practical ways to support persons with FASD and their families and caregivers, researchers, program and service agencies practitioners, governments, and educational institutions in creating and disseminating evidencebased research and knowledge. CanFASD now operates across Canada and is highly respected internationally by counties working on the complex circumstances involved with FASD. The evolution has occurred over a relatively short period of time and, of course, the work and the pace of evolution continues.

The Board of Directors is acutely aware that the success of CanFASD in continually exceeding our strategic goals and strategies is due to the many partners, agencies, organizations, institutions and individuals that enable the work of the Network to carry on and to continue to grow and develop. In particular, we deeply appreciate the continued commitment and support of the Network by the Provincial and Territorial Governments of the Canada Northwest FASD Partnership, the Government of New Brunswick,

and the Government of Canada through the Public Health Agency and First Nations Inuit Health Branch and excellent stakeholders and partners in Ontario, Quebec, Nova Scotia, Newfoundland and Labrador, and Prince Edward Island. The Board fully appreciates that as an organization we are much more effective in preventing FASD and in providing research and evidence-based knowledge to support those persons with FASD, their families, caregivers and communities across Canada when we work collectively and collaboratively. In fact, our success and continuity of service depends on it.

On behalf of the Board of Directors, I would like to thank all of the people who have chosen to walk this journey with us, including our incredible staff, the amazing team of researchers, the dedicated Family Advisory Committee members, the advocates on our Adult FASD Expert Collaboration Team, our very supportive and engaged government partners, and the agencies and practitioners we work with. I also want to give very sincere thanks to my fellow Board members whose commitment to supporting this critical work has never ceased to inspire me.

To close I would like to express my admiration for those persons with FASD and their families and caregivers who have invited us to be part of their experience and who have allowed us to participate with them in identifying meaningful ways to support their needs and their aspirations.

Sincerely,

Tim Moorhouse

Board of DRECTORS





Tim Moorhouse Alan Bocking







Wenda Bradley

Darren Joslin





Olecia Walker



David Brown



Lisa Brownstone



Christian Whalen



Carol Anne Cheechoo



Message from the ESEARCH Dr. Jacqueline Pei

With spring upon us, we again reflect on the year that has passed. Despite the continued challenges presented by the pandemic, our team of researchers continue to pursue admirable goals and make important strides forward in addressing FASD. And they do all of this with optimism, energy, and persistence.

Most recently, this year has afforded us the opportunity to reconnect in person with many members of our research team. We were able to provide research updates and develop evolving research ideas. In doing so we were reminded of the dynamic nature of our network and left this meeting feeling revitalized and re-energized. Thus while we will continue to embrace the efficiency and accessibility of virtual modes of communication and work, we happily embrace the ability to truly blend our approaches to include face to face meetings that truly foster development of relational approaches to research and community engagement.

As is the case every year, my desire to provide an overview of the work and accomplishments of our Research Leads (RLs) over the past year is a lofty (if not unattainable) goal. That said, I have selected a few areas of work to highlight.

Community-based, applied research is often at the centre of the work conducted by our RLs. These researchers are keen to respond to community interest and engage in work that can have shortterm and long-term impacts. In this regard the RLs are engaged in multiple collaborative projects spanning many topics including screening (Dr. McLachlan), substance use and treatment (Drs. Mela and Pei), and FASD courts (Dr. Hanlon-Dearman). Dr. Poole continues to engage large groups of

people, including researchers, policy analysts, and service providers from across Canada in monthly discussions about current research, practice, and policy issues regarding FASD prevention and learn about their local achievements.

In addition, researchers (Cook, McLachlan, Pei) and CanFASD staff (Unsworth) recently received additional funding through the Kids Brain Health Network for continuation of the 'COMPASS' project: Client-Oriented Mapping for Point of Care Access to Supports and Services. This is an exciting initiative in which researchers are working with clinics from across Canada to generate a resource designed to advance clinical practice for FASD assessment. By linking individualized data from the National FASD Database to the Towards Healthy Outcomes model (an evidence-based model for interventions across the lifespan), this team is creating a tool that will support clinics to improve intervention opportunities. This tool is designed to produce systematic feedback reports when individual diagnostic data is inputted. The reports produced will facilitate a shared understanding of intervention goals, increase consistency and intentionality in practice, establish shared language across the country, reflect shared philosophy, and develop opportunities for open conversations with clients and families.

Recently, a justice-specific project on FASD launched in partnership with CanFASD RLs (Drs. McLachlan, Mela, and Pei) and the Asante Centre. The overall aim of the project is to improve not only identification, but also to enhance the services and supports for individuals with FASD and other neurodevelopmental disorders in the legal system and (ultimately) improve their trajectories and

and (ultimately) improve their trajectories and outcomes. The project places specific focus on building and enhancing the legal and clinical community of practice for professionals, agencies, and service providers who support and engage with youth and adults in British Columbia in partnership with local project partners.

CanFASD RLs have also reported many professional successes and have reflected on how their involvement with CanFASD has been a big part of their achievements. For instance, our first Dr. Sterling Clarren FASD Research Award recipient, Dr. McLachlan, recently received a University of Guelph research excellence award honoring early career researchers. This award she attributes to her support from CanFASD - both in terms of funding as well as collaborative networks. Dr. Mela became an endowed Iver and Joyce Graham Small Indiana professor of Biological Psychiatry, which he also attributes to opportunities provided to him through support and collaboration with CanFASD. Dr. Badry was appointed to an adjunct faculty position in the School of Medicine at Curtin University, Perth, Australia, in recognition of her international collaboration with other researchers in the field. Dr. Badry and her co-authors also received the Canadian Association of Social Workers and ACSW Distinguished Service Award for the Youth in Care Chronicles.

I remain excited by the achievements and potential of the CanFASD research community. As we grow together, I look forward to continued collaborative efforts that shape the field of FASD, and ultimately contribute to healthy outcomes for all individuals, families, and communities.

Sincerely, Dr. Jacqueline Pei













MANAGEMENT & RESEARCH Team



Dr. Jacqueline Pei

Senior Research Lead &

Intervention Research

Lead



Dr. Jocelynn Cook National Database Research Lead







Dr. Mansfield Mela

Diagnostics

Research Co-Lead

Dr. Ana Hanlon-Dearman Diagnostics Research Co-Lead

Audrey McFarlane **Executive Director**





Dr. Katherine Flannigan Research Associate





Rochelle Blaak-Herron Administrative Assistant

Despite the continued challenges presented by the pandemic, our team of researchers continue to pursue admirable goals and make important strides forward in addressing FASD. And they do all of this with optimism, energy, and persistence.







Victoria Bailey Communications Coordinator



Dr. Kaitlyn McLachlan Justice Research Lead



Dr. Nancy Poole Prevention Research Lead



Dr. Dorothy Badry Child Welfare Research Lead





Kathy Unsworth Managing Director



Dr. Kelly Coons-Harding Director of Research Administration



Lindsay Wolfson **Research Assistant**



Andrew Wrath **Research Assistant**



Kirsten Morrison Research Assistant

Update from the ADV/SORYCOMMINITIEE

Another year of COVID. Who would have thought at the beginning of the pandemic that we would be awaiting the arrival of the 6th wave two years after the pandemic started? We are all tired of this, but as parents of children and adults with disabilities, this has been exhausting, demoralizing and confusing. If we are struggling this much, can we even imagine what it has been like for our loved ones with FASD?

Initial fears have been replaced with boredom. Social anxieties have ramped up. Substance use has increased. Academic abilities have been lost and there is depression and anxiety abound. The past year has seen decreased services, lack of support, and social isolation for a group of caregivers and individuals who have always lacked services and felt isolated. It is time for a change. It is time that all levels of government work collaboratively with experts in the field - both academic experts and experiential experts - to develop concrete and sustainable strategies to better the lives of those with FASD.

Anyone who takes the time to read this report has a responsibility to make their voices heard in advocating for a National FASD Strategy that provides a framework for FASD support and services. It is not OK that your access to diagnostic services depends on where you live. It is not OK that FASD is considered by many service agencies as an "exclusion criterion". It is not OK that individuals with a medical condition cannot receive appropriate health care to address their needs.

This is a human rights issue. Canada signed on to the United Nations Convention on the Rights of the Child (UNCRC) which means we agree to article 23 which states that we "recognize that a mentally or physically disabled child should enjoy a full and decent life, in conditions that ensure dignity, promote self-reliance

and facilitate the child's active participation in the community". Also, article 7 of the UN Convention on the Rights of Persons with Disabilities (UNCRPD) requires parties who have signed on to take "all necessary measures to ensure the full enjoyment by children with disabilities of all human rights and fundamental freedoms on an equal basis with other children". It is time to hold policy makers up to the commitment made through ratifying this convention.

As the CanFASD Family Advisory Committee our role is to advise FASD researchers of the priorities of individuals with FASD and caregivers for FASD research and to help ensure that the information from research reaches those who need it in a way that they can understand. We feel that we have been successful in communicating the need for collaborative, participatory action research. CanFASD researchers actively involve those with lived experience in the work they do. We have worked with CanFASD to develop strategies to be more inclusive. Great gains have been made in terms of disseminating research knowledge. The focus of communication has become more balanced, including strengths instead of focusing merely on deficits. More practical, applied FASD research is occurring every year. Evidence based training modules are readily available. CanFASD is the place to go for accurate information on FASD in Canada and we are pleased to have been a part of those gains.



and Noah Noah (Nunavut).

Anyone who takes the time to read this report has a responsibility to make their voices heard in advocating for a National FASD Strategy...



As caregivers of individuals with FASD, however, we know that this is not enough. We need to continue to collect the voices of people with lived experience. This year we launched a comprehensive caregiver survey to help us more fully understand the experience of those providing care to individuals with FASD. If you are a caregiver, we encourage you to complete the survey.

Research must guide policy, which in turn, must guide practice. Without this, change is unlikely to occur. We are not fulfilling our commitment to protect the rights of children and adults with mental and / or physical disabilities. Through a collaboratively developed national strategy on FASD, based on both empirical and experiential data, policy and practice can be guides to maximize success. All our voices are necessary to ensure we are walking the talk, not just supporting the UNCRPD statements as rhetoric but are moving from talk into action to ensure we are compliant with the intent of the convention. A national strategy on FASD would be a good first step.

The members of the FAC continue to appreciate the support we receive from CanFASD Research Network staff and research leads. We enjoy the openness and collaborative spirit as we work together to improve the lives of individuals with FASD.

Sincerely,

The Family Advisory Committee

FAC members left to right: Alicia Munn (New Brunswick), Tammy Roberts, Co-chair (Northwest Territories), Shana Mohr (Saskatchewan), Ray Marnoch (Yukon), Wanda Beland (Alberta), Dorothy Reid, Co-chair (British Columbia) and Marsha Wilson (British Columbia). Absent are Simon Laplante (Manitoba)

Update from the ADULT FASD EXPERT COLLABORATION TEAM

This past year has been one of great beginnings for the Adults with FASD Expert Collaboration Team. (AFECT). Each month, the committee met online to lend their voices to research initiatives, share their perspectives and lived experiences. They are supported by their "go to" person who attends all meetings and helps the members participate interdependently on the committee.

In December, the AFECT members celebrated one year of working together. Over the past year, the team has welcomed a number of guests at their monthly meetings. CanFASD Research Leads, including Dr. Mansfield Mela, Dr. Jacqueline Pei, Dr. Katy Flannigan and Dr. Kelly Harding met with the AFECT group to seek their feedback, conduct focus groups and review research projects relating to cannabis, housing needs, and the strengths and attributes of individuals with FASD.

With support from the committee chair, and CanFASD Executive Director, Audrey McFarlane, the team developed their own specific work plan for the next year and learned about the role of goal setting, subcommittee work, and reporting on achievements. Together, as a team, they are learning how to align their work and interests within the broader goals outlined in the CanFASD Strategic Plan. The process is incremental. New pieces are introduced each meeting, allowing the AFECT members to strengthen their knowledge and skills and successfully engage in discussions, focus groups, and applied research.

"Hats off" to the AFECT committee members! They have represented individuals with FASD well over the past year. Their voices bring a new perspective to the Network and their interests spark new ways of thinking. They have continued to learn and grow and have become incredible advocates for themselves and their communities. Their hard work and contributions are leading to novel projects that will benefit the community at large, particularly those whose voices have historically been left out of the conversation. It is both a pleasure and an honour to work with the AFECT Committee.

Respectfully Submitted,

Marsha Wilson, M.A.

Chair of AFECT Committee and FAC Member

Their hard work and contributions are leading to novel projects that will benefit the community at large, particularly those whose voices have historically been left out of the conversation.

Support

In 2021/2022, CanFASD Research Network completed:

> 27 published articles

54 research projects

13 technical reports

5 book chapters

5E presentations & interviews

CanFASD Trainee Program

A new and exciting addition to our Network is the CanFASD Trainee Program. Designed to support and encourage the next generation of FASD researchers in Canada, this program provides students and early career professionals opportunities for training, learning, and connection.

Led by Dr. Kelly Harding, the pilot program launched in January with nine trainees on board. Nominated by the CanFASD Research Leads, the trainees represent a pan-Canadian group (spanning five provinces) of interested students and research support staff from a wide range of disciplines and levels of training. The trainees have taken part in an amazing series of learning sessions thanks to the commitment by CanFASD Research Leads and Staff. Dr. Harding's training model effectively provides something for everyone, but most importantly centers on the power of relationships and connection to inspire and motivate the next generation of researchers.

Dr. Sterling Clarren FASD Research Award

The Dr. Sterling Clarren Research Award is named in honour of Dr. Sterling Clarren to recognize his pioneering contribution and leadership in the field of FASD. The award is presented annually to an individual in recognition of a completed study that has made a substantial contribution to understanding the complexities of FASD. The 2022 recipients of the Dr. Sterling Clarren FASD Research Award are Drs. Melody Morton Ninomiya and Preeti Kar.

Across the globe, many Indigenous communities are addressing alcohol use during pregnancy through collaborative and culturally relevant approaches. Dr. Morton-Ninomiya and her team used a strengths-based approach to identify past and existing FASD prevention-related programs, services, and approaches. They then used this information to inform Innu FASD prevention strategies for two communities in northern Labrador. Dr. Morton Ninomiya is supporting community partners to ensure these FASD prevention strategies are embedded in an upcoming strategic health planning and funding envelope for these two Innu First Nations.

Dr. Kar's research assessed brain development in children aged 2 to 7 with and without prenatal alcohol exposure. Their team found that young children prenatally exposed to alcohol exhibit slower development in frontal brain connection than children without. These brain differences were associated with motor, language, and behavioural challenges in the kids with prenatal alcohol exposure. This project is the first to explore brain development in young children prenatally exposed to alcohol. It highlights the need for early diagnosis and interventions to address neurodevelopmental challenges.

OUTREACH and Communications

Campaigns

Our popular initiatives include our FASD Awareness Month campaign during September, our CanFASD Holiday Art Competition in November and our 12 Days of Mocktails campaign in December. These initiatives will continue over the coming year, with additional campaigns being added as opportunity arises.

Our increased focus on outreach and communications has translated to a greater awareness of FASD in the community, with more Canadians taking our online courses, increased traffic to our website, increased following on our social media sites, and broader dissemination of our research and resources.



Webinar Series

The goal of our webinar series is to connect professionals and people with lived experience to our network and share evidence and information about FASD. This year we hosted several webinars featuring presentations from individuals with FASD, caregivers, researchers, and service providers from across Canada.

Our webinars included the following:

- Student Spotlights: Emerging FASD Research in Canada
- Thinking About FASD Month: Ideas and **Recommendations**
- *#WineMom: Humour and Empowerment or Binge* Drinking and Mental Health Challenges?
- Early Life Adversity and FASD: Risks and Opportunities
- The Sensory World of People with FASD Part 1
- The Sensory World of People with FASD Part 2
- Optimizing Employment Opportunities and Outcomes for People with FASD
- Understanding the FASD Diagnosis
- 2022 Sterling Clarren FASD Research Award Presentations



Social Media

As of March 31, 2022 CanFASD had:

4,292 followers on Facebook

Website As of March 31, 2022 CanFASD had

52,290

visitors

18



664 followers on LinkedIn





WORKFORGE Development

Online Learning

CanFASD has a number of **online learning courses** available to improve professional and community understanding of FASD. Our courses are categorized by level of experience, where Level 1 courses provide a basic overview, Level 2 courses provide sector-specific training, and Level 3 courses provide expert training to FASD professionals.

As of March 31, 2022 CanFASD had:

7 online courses







learners

2(0)7/

learners

learners

428

learners

learners

learners

Foundations in FASD

Our introductory Foundations in FASD course is a basic training course designed to improve public understanding of FASD. It is our most popular training course, with over 19,000 learners.

FASD for School Staff: Practical Strategies for the School Environment

This online training program is intended for all professionals working within the school environment, including administrators, teachers, educational assistants, bus drivers, and school board personnel. It provides professionals with the skills needed to support students with FASD in an educational setting.

The Prevention Conversation

This online training program for frontline health and social service professionals provides them with the knowledge and skills to engage their clients in supportive and nonjudgmental conversations about alcohol use during pregnancy.

Best Practices for FASD Prevention, Diagnosis, and Support

Released in March 2021, this online training program is designed for professionals working in the substance use, mental health, housing, employment, justice, and other service-delivery fields. It will provide professionals with the knowledge to improve FASD prevention, diagnosis, and support initiatives. This course replaced Towards Improved Practice.

FASD for Judicial and Legal Professionals

This online training program is an advanced course intended for all professionals working in the justice system. It provides evidence-based and practice-informed information that can be easily and effectively applied to your practice working with people with FASD.

FASD for Solicitor General Professionals

This online training program is an advanced course intended for all professionals working in the Solicitor General systems. It provides evidence-based and practiceinformed information that can be easily and effectively applied to your practice working with people with FASD.

Multidisciplinary Training for Diagnosis of FASD

This online training program is designed to assist professionals in developing the skills needed to be an effective member of a multidisciplinary diagnostic team.



LEVEL I COURSE

LEVEL II COURSES

LEVEL III COURSES

Influence POLICY & PRACTICE

Thinking About the United Nations Convention on the Rights of Persons with Disabilities (CRPD) for Supporting Individuals with FASD

In 2021, CanFASD put forward recommendations for how a human rights-based approach could be used in the context of FASD. The complexity of FASD requires a human rights-based approach to supporting people with this disability. However, supports and services are still lacking for people with FASD, and it remains a low priority in Canada for research and policies informing resources and services.

The United Nations (UN) developed the Convention on the Rights of Persons with Disabilities (CRPD) to ensure that human rights are given to everyone regardless of ability or functioning. The CRPD ensures that countries promote and protect the civil, political, social, economic, and cultural rights of people with disabilities, including FASD.

Canada ratified the CRPD in 2010, which means that they are legally bound by this convention. Canada has agreed to develop policies and legislation at all levels of government that provide people with disabilities opportunities for protection from discrimination, provision of accommodations to address their needs, and participation in decisions that affect them. However, Canada has yet to provide a national framework that guides the provinces and territories on how to incorporate the CRPD into their policies and legislation. Key stakeholders continue to raise concerns that the needs of persons with FASD are not being met and that the rights of persons with FASD are being violated.

This year, we wrote an issue paper that identifies how the CRPD can be used to improve service provision and government policies for persons with FASD. The CRPD holds promise as a tool of advocacy for self-advocates with FASD and their support networks. We believe that the CRPD can be used to advocate for new accommodations, supports, and services for people with FASD or for modification to existing frameworks to accommodate people with FASD. It is important to think about the strengths and challenges of individuals with FASD and how the CRPD can be used to address these areas across a diversity of sectors, including health, education, housing, justice, and employment. We are looking forward to our continued work in this area and in working collaboratively to support the human rights of persons with FASD and their communities!

Claudette Bradshaw FASD Innovation Award

The Claudette Bradshaw FASD Innovation Award recognizes the work of individuals and organizations who are using innovative approaches to improve the lives of individuals with FASD. The award is named in honour of the late Mme. Claudette Bradshaw to recognize her dedication and impact to the fields of FASD, early childhood education, and homelessness. It is intended to encourage innovation in the development of FASD programs and practices.

Claudette Bradshaw was a beloved member of our Board of Directors until 2018. In light of Claudette's passing in March of 2022, this year's award is especially meaningful.

The Lakeland Centre for FASD in Cold Lake, Alberta is the recipient of the 2021 FASD Innovation Award. Their 2nd Floor Recovery Centre is a unique residential addiction treatment center that prioritizes women who are pregnant or at-risk of becoming pregnant and struggling with substance use. It provides holistic, relationship-based programming that is tailored to the individual. Their work is rooted in the concepts of harm reduction, trauma-informed, solution-focused, FASDinformed, and client-based care.



National FASD STRATEGY

As experts in FASD, we know Canada needs a coordinated, evidence-based approach to address the complexities of FASD nationally. For the last year, CanFASD has been advocating for support to develop and implement a National FASD Strategy for Canada.

Canada can do a better job supporting people with FASD and their families. A lifelong disability, FASD has significant implications for physical and well-being. Early diagnosis and supports can reduce adverse outcomes and encourage positive engagement in society. However, diagnostic capacity and formal supports across Canada are inconsistent, with some families travelling out of province because there aren't any formal diagnostic services in their region. The impacts extend beyond people with FASD to intersect with the health of women, caregivers, and communities.

FASD is a Canadian responsibility. Canada needs federal leadership to address FASD that builds on the work that has already been done at the provincial, regional, and community levels.

A National FASD Strategy would identify a way forward that ensures Canadians with FASD, those who are pregnant and parenting, and their families and support systems are not left behind.

It would recognize and build on the work that has already been done at regional and community levels, include first-person perspectives, and reflect the needs of Canada's diverse population, including our northern, rural, and remote communities.

A National Strategy would make sure FASD prevention initiatives are respectful and address the social determinants of health driving FASD prevalence, while providing a coordinated approach to early and accurate diagnosis and supports. It would identify gaps in policy and funding, highlight best practices in all the multi-sectors to effectively address those gaps, and name the stakeholders that can work collaboratively to address the complexities of this disability. It would also leverage the important scientific research and Canadian evidence being generated by the FASD research community, and specifically by CanFASD.

Most importantly, it would ensure our federal, provincial, and territorial jurisdictions are on the same page when it comes to addressing FASD and supporting those affected by this disability. Our vision is to see Canada become a global leader in the prevention of FASD and ensure Canadians with FASD and their families have full and equitable access to the resources they need across the lifespan to reach their full potential and achieve healthy outcomes.

CanFASD has been working with outside consultants to connect with parliamentarians about a National FASD Strategy. We have had several positive meetings with various Ministers, Members of Parliament, Senators, and other

parliamentary staff. Many were supportive of our cause and thankful for the work of our Network and other stakeholders.

We are also building a grassroots movement across Canada, encouraging our stakeholders to contact federal and community leaders in their own communities to share the need for national leadership on FASD.

Canada cannot afford to wait any longer to address FASD at a national level. COVID-19 has reminded Canadians about the critical role of public health and prevention in maintaining our health and well-being. The government must now continue to uphold Canada's public health standards and principles, while developing and implementing a plan for economic recovery. A National FASD Strategy can support this.

> It's time for a National FASD Strategy!

INDIGENOUS Relations

Our Commitment to Indigenous Partnership, Reconciliatory **Research, and Action**

It is important for CanFASD to be responsive to the needs of our many Network members, including our Indigenous partners and stakeholders. We are committed to aligning our research priorities and actions with those guided by the United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP) and the Truth and Reconciliation Calls to Action (TRC). Both outline the need for meaningful understanding of the impacts of colonization on Indigenous peoples, further engagement and reconciliatory relationship building, and the integration of Indigenous values, knowledge, and worldviews into research, knowledge exchange, and policy action.

In our own Network, CanFASD has made the following commitments to partnership, reconciliatory research, and action with Indigenous peoples and in Indigenous communities:



2

Understanding the impact of colonization and subsequent assimilatory policies and practices on intergenerational trauma, substance use, addictions, and FASD.

Building meaningful partnerships with Indigenous peoples and communities that are based on the values of reconciliation.

Developing research that is guided by community needs, values, and knowledge systems.

Advocating for Indigenous-led research through sustainable and long-term funding

Creating Culturally Relevant Resources

The Prevention Conversation is an evidence-based course that offers online and, in Alberta, in-person modules. The CanFASD Research Network is currently in the process of updating and expanding the modules to integrate the most up-todate information and make the modules more culturally appropriate and reflect the diversity of Inuit, First Nations, and Métis Peoples. As part of the project, CanFASD Research Network surveyed Prevention Conversation Facilitators and worked closely with an advisory committee to identify opportunities to make the modules more culturally appropriate. The updated modules are near completion and will be available online later this Spring.

In the updated course, online participants can expect to see art pieces and the stories that guide them from Indigenous artists across Turtle Island that honour Indigenous knowledge systems and capture spiritual, relational, and emotional connections to the modules.



Artist: Colleen Gray Title: The Woman and the Water

FNARCIAL Snapshot

CANADA FETAL ALCOHOL SPECTRUM DISORDER RESEARCH NETWORK **Balance Sheet** March 31, 2022 with comparative figures for March 31, 2021

Assets Current assets:

Cash Investments Accounts receivable HST/GST receivable Prepaid expenses

Capital assets

Intangible assets

Liabilities and Net Assets: **Current Liabilities:** Accounts payable and accrued liabilities

Deferred capital contributions Deferred contributions

Net assets



	2022		2021
\$	251,642.63	\$	362,024.99
	260,166.69		161,453.04
	67,124.96		270,812.11
	26,482.05		15,457.09
	38,922.69		69,898.31
	644,339.02	100	879,645.54
	10,174.61		9,280.22
	56,250.00		63,750.00
	710,763.63		952,675.76
	\$ 77,761.19	\$	48 <mark>,</mark> 178.85
	59,198.63		63,750.00
	107,632.40		120,003.71
	244,592.22		231,932.56
~			
	\$ 710,763.70	\$	952,675.76

Individual Membership

Have a voice, stay informed, and stay connected. Become a member of CanFASD.

In 2021, CanFASD expanded our membership options with the addition of our individual membership program. This membership gives individuals the opportunity to become more involved with the CanFASD network. Citizens in both CanFASD member and non-member provinces and territories benefit equally from this new program.

Individual Member Benefits:

Stay Connected

- Invitations to member-only events where you can connect with CanFASD researchers, board members, staff and members from our advisory committees.
- First-in-line notices for upcoming events and important announcements.
- Being a part of the Canada FASD Research Network
- Access to the CanFASD Membership Directory

Share Your Stories

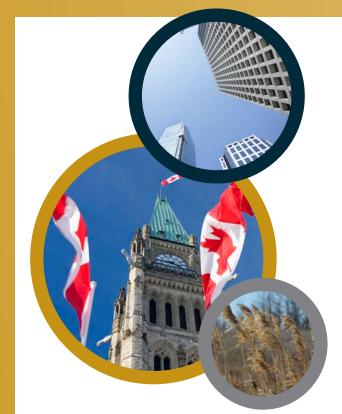
- Opportunities for researchers to seek research participants through CanFASD networks.
- Opportunities for researchers to have their work
- Opportunities for families and service providers to share their stories

Stay Informed

- Bi-weekly e-newsletter updates with exclusive
- Invitations to member-only events that put evidence about FASD in real-world contexts
- Ongoing research project updates that offer realtime information

Influence Research

- Opportunities to participate in and contribute to
- direction of policy related to FASD
- Opportunity to provide annual feedback into CanFASD's research agenda and issues of importance



Members: Alberta, British Columbia, Northwest Territories, Yukon, Nunavut, Saskatchewan, Manitoba, and New Brunswick

Non-Members: Ontario, Quebec, Newfoundland and Labrador, Prince Edward Island, and Nova Scotia



Jurisdictional Membership

CanFASD offers jurisdictional membership opportunities for provincial and territorial governments in Canada. This membership is a unique opportunity for governments in Canada to benefit from the expertise of a national network devoted to FASD. The membership connects governments with a trusted agency to turn to for answers about important policy questions.

Provinces and territories who become members of CanFASD are significantly advanced in their response to FASD. They benefit from increased research capacity, advice and assistance in evidence-based policy and program development, and collaboration with other member jurisdictions. Membership for governments also offers the potential to reduce longer-term costs associated with FASD diagnosis, prevention and intervention.

We've made great strides to move FASD forward in Canada. Imagine how much further we could go with your support.

SUPPORT Our Work

CanFASD is a registered charity, funded by leading health and policy organizations across Canada. Your financial support helps to develop and share the evidence needed to inform the policies and programs for people with FASD, their families, and pregnant and parenting women.

Decision-makers in governments, communities, and families need to know which initiatives will have the most impact and which are the most cost-effective. Sound data provides a compass to guide those decisions. CanFASD is Canada's only national network focused on FASD. We bring a multi-disciplinary approach to the study of this disability, which brings together the findings of researchers, parents and caregivers, clinicians, service providers, community advocates, program planners, government officials and individuals with FASD.

Our goal is to ensure the scope of our approach is reflected in the breadth of our funding base so that we can continue to have a national reach. You have an important role to play in making sure the knowledge developed at CanFASD reaches the stakeholders who need it to make effective policy decisions, provide the best supports, and make the healthiest choices possible.





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