

# NEWSLETTER

*Fall Newsletter / October 2020*

## PROJECT UPDATE

- 3,019 records as of October 5, 2020
- 29 clinics are currently participating
- Data from the National Database were presented as part of an online webinar in recognition of International FASD DAY.
- The Project team is busy with additional data analysis on mental and physical comorbidities.
- We are also exploring the effects of exposure to both alcohol and cannabis, especially with respect to autism, since a recent paper suggests that prenatal exposure to cannabis increases risk of autism.
- A project was recently funded to investigate the relationship between suicidal ideation/attempts and prenatal alcohol exposure. Stay tuned!

## RESEARCH TEAM



**Dr. Jocelynn Cook**  
*PhD, MBA*  
**Principal Investigator**



**Ms. Kathy Unsworth**  
*MHSc, MBA*  
**Program Manager**



**Andrew Wrath, BA**  
*(Hons.)*  
**Research Assistant**

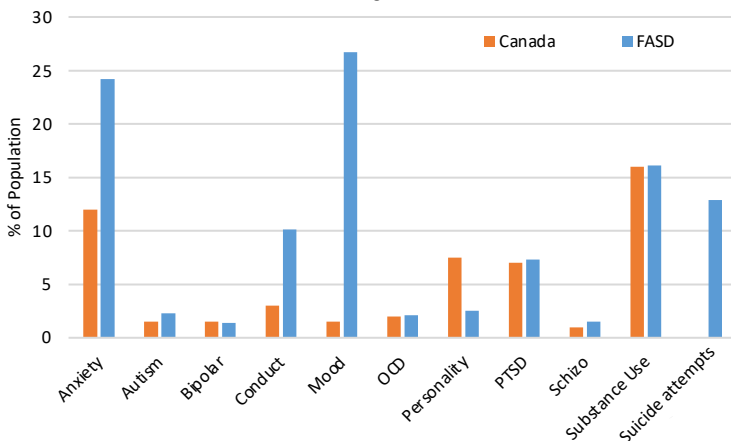
## DATA HIGHLIGHTS

- Of 2,327 useable records, 9% have FASD + SFF, 53% have FASD - SFF, 11% are At Risk, and 27% do not have FASD.
- 40% of those diagnosed with FASD are 6-12 years, the largest age group represented in the FASD group.
- The 5 most common brain domain impairments in individuals with FASD are: Executive Functioning (72%), Academic (71%), Adaptive Behaviour, social skills or social communication (71%), Cognition (69%), and Attention (68%). It is important to note that prevalence of brain domain impairments shift over the lifespan.
- Individuals with FASD tend to also have been exposed to other substances prenatally; 57% were only exposed to alcohol, 13% were exposed to Alcohol + Nicotine, 7% were exposed to Alcohol + Nicotine + Marijuana, 5% were exposed to Alcohol + Marijuana (5%), and 2% were exposed to Alcohol + Nicotine + Cocaine + Marijuana.
- Individuals with FASD are 7 times and 6 times more likely to have an IQ <70 compared to the At Risk and No FASD groups, respectively.

Individuals with FASD tend to have a higher propensity for mental health co-morbidities than the general population.

**Mental Health Comorbidities in Individuals with FASD vs Canada**

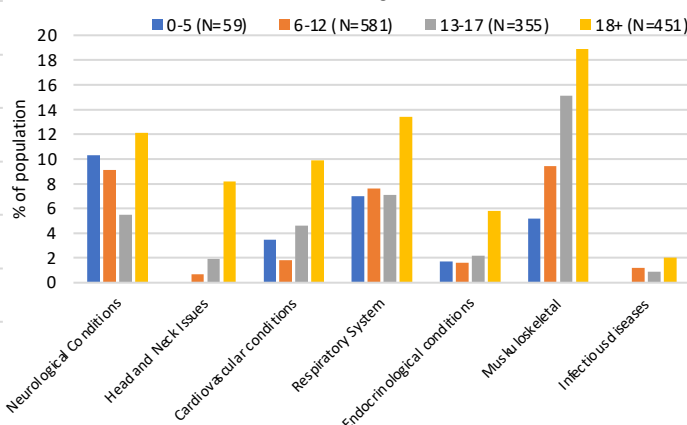
Note: this includes data from 2016 to Aug 2020.



Individuals with FASD tend to experience physical issues more as they age. It is anticipated that these incidences are higher than the Canadian population.

**Physical Health Comorbidities in Individuals with FASD by age**

Note: this includes data from 2016 to Aug 2020.



FALL LEARNING!

Check out the CanFASD e-learning platform for new evidence-based education and training online courses. Some are FREE! <https://canfasd.ca/online-learners/>

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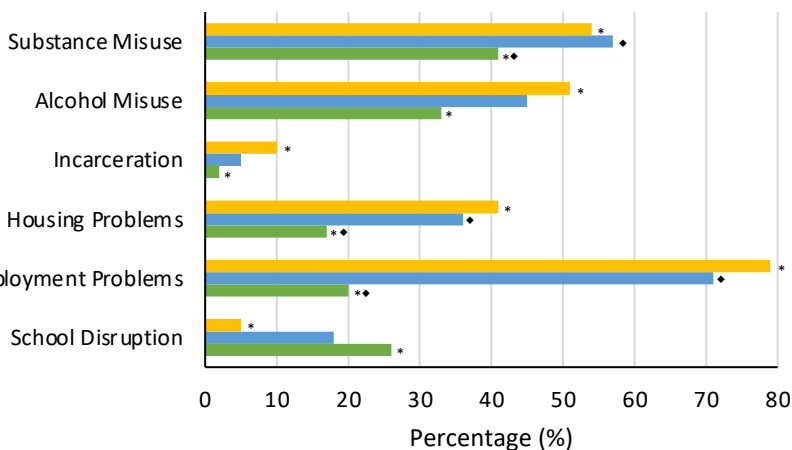
## Database Publication Summary

McLachlan, K., Flanigan, K., Temple, V., Unsworth, K., & Cook, J. (2020) Difficulties in Daily Living Experienced by Adolescents, Transition-Aged Youth, and Adults with Fetal Alcohol Spectrum Disorder. *Alcoholism: Clinical & Experimental Research*;44(8), 1609-1924.

**These are just some of the important findings published by McLachlan et al. (2020).**

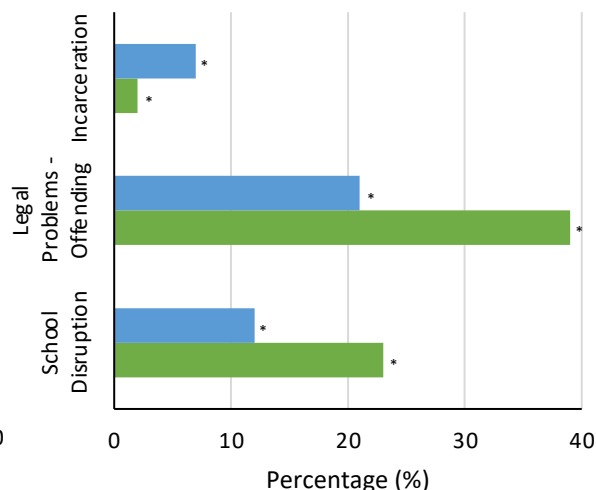
*Note: Shared symbols within a variable indicate statistically significant differences between groups.*

Individuals with FASD experience different difficulties across the lifespan



■ Adults ■ Transition Aged youth ■ Adolescents

Sex is associated with different difficulties

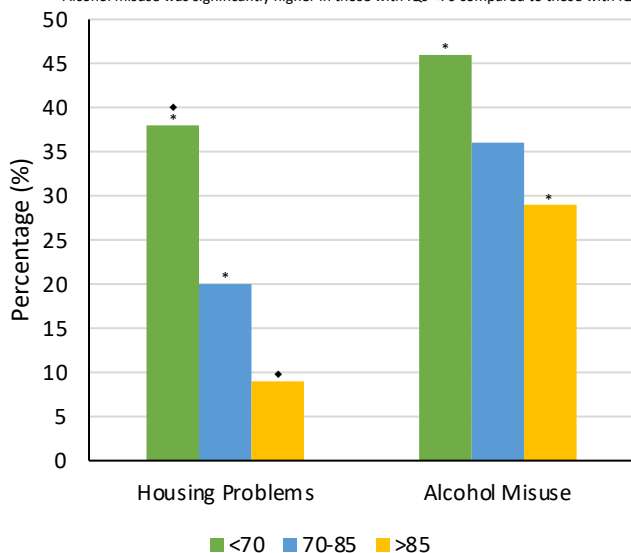


■ Female ■ Male

Housing problems and alcohol misuse differ by IQ

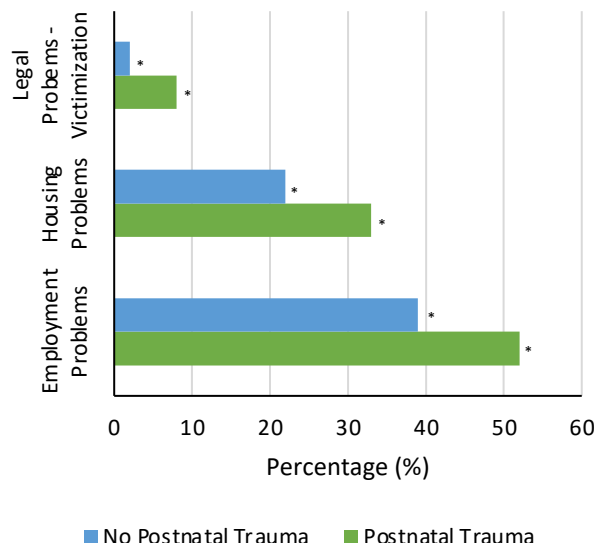
Note:

Alcohol misuse was significantly higher in those with IQs <70 compared to those with IQs >85



■ <70 ■ 70-85 ■ >85

Post-natal trauma appears to have future influences on legal, housing, and employment problems



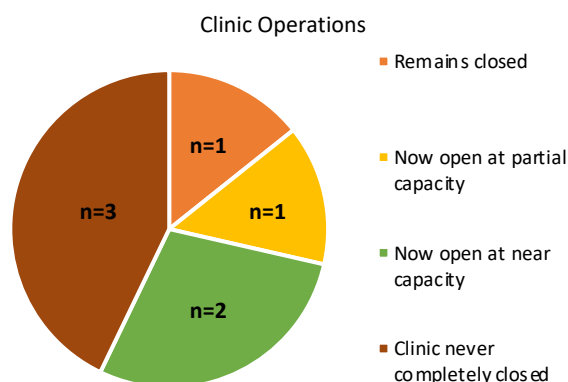
■ No Postnatal Trauma ■ Postnatal Trauma

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## COVID-19 Survey Results

In September, a survey of how clinics are coping with the pandemic was posted on our TEAMS Community of Practice. We are grateful to the 7 clinics that participated, and we have summarized the results below.

*"FASD services have always had to be flexible and adaptable because of the population we work with - I think COVID-19 has really put a stamp on that process."*



**6 of 7** clinics were forced to cancel or reschedule clients. At one clinic, this affected over 20 clients.

### What modifications did you make to your clinic to adapt?

- 5 clinics use videoconferences
- 4 clinics use PPE for in-person assessments
- 1 clinic limits the number of participants on clinic day
- 1 clinic remains closed

### What was/is the greatest difficulty for your clinic? Some reported difficulties were:

- No or limited means of transportation and supports for clients.
- Extra time required to manage appointments whether via zoom or in person.
- Unable to assess infants and young children.
- Training team members on technology required time.

### What did you do to address these difficulties? Some responses to difficulties were:

- Use medical transportation as available
- Reduced the case loads of workers
- Provided extensive zoom training for team members

*"One of our Support Persons is an Indigenous Elder with little or no experience on computers. For the Clinic Evaluation, she was very proud of her new-found skills and is continuing to use them."*

### What have you learned about your clinic and staff resiliency and adaptability?

*"Staff have maintained engagement and support of 100% of families during this pandemic period. They are creative and resilient."*

*"People in this field are more than willing to move outside their comfort zone to ensure that people are still able to participate in the FASD Dx process."*

*"Clinic members and staff have been accommodating and adaptable, just keep saying that this will not be our new normal."*

### Is there anything that your clinic has done to improve resiliency and adaptability?

*"Restructuring of face-to-face assessments."*

*"Lots of communication between the team. Also we received lots of support from management."*

*"Improved our technology to make zoom meetings smoother/clearer."*

*"For our support persons in outside communities, we also purchased them gift cards and thank you cards to show our appreciation for the extra work that is required."*

### Are there any modifications to service provisions that your clinic will continue to us moving forward?

- 6 clinics report that Zoom will remain an option for intake and/or assessment and/or team debriefs.
- 1 clinic is hopeful that the normal we knew before COVID-19 returns.

### What concerns and feelings do you have for the future of your Clinic? Some responses were:

*"...it is increasingly challenging for (clients) to access assessment without supports."*

*"...cancellations due to any type of symptoms/sickness and ability/viability of adding additional appointments in the future."*

*"...how often assessments are needing to be rescheduled at the last minute due to family or staff having medical symptoms, or other issues related to COVID."*

## THE NATIONAL FASD DATABASE

# NEWSLETTER

## Updates



### Issue Papers

In 2020, CanFASD released the following Issue Papers.

- [Fetal Alcohol Spectrum Disorder and Adversity](#)
- [Provincial and Territorial Strategies for Fetal Alcohol Spectrum Disorder in Canada](#)
- [Canada FASD Research Network's Commitment to Indigenous Partnership, Reconciliatory Research, and Action](#)
- [Engagement de Réseau canadien de recherche sur le TSAD \(CanFASD\) en matière de partenariat avec les Autochtones, de recherche de réconciliation et d'action](#)
- [Alcohol and Breastfeeding](#)
- [The Canada Fetal Alcohol Spectrum Disorder Research Network: Understanding and Benefiting from Collaboration, Experience and Expertise](#)

## CONGRATULATIONS

Congratulations are in order for Lethbridge Family Services as they entered the 3,000<sup>th</sup> record into the National Database!

Congratulations to all of you, your clinics, diagnostic teams and staff! Surpassing 3,000 entries is more than data. This means that over 3,000 individuals have received an assessment/reassessment, which we know can be the first step towards wellness and healing for the individuals with FASD, those given differential diagnoses, those who will need to be followed over time, and their caregivers.

### “Heads Up”

- We will be posting a survey on TEAMS seeking feedback on our semi-annual clinic reports. We want to know what is helpful, what is not helpful, what data is missing that would assist your clinic with respect to advocacy, securing funding, etc. Help us help you by participating in the survey. Andrew will send out a TEAMS message when it is posted.

## WHAT'S NEXT?

We would like to hear from you! Let us know what you would like to see in the next clinic newsletter. Message Andrew on TEAMS or e-mail [andrew.wrath@canfasd.ca](mailto:andrew.wrath@canfasd.ca)