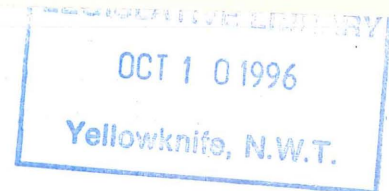


Yellowknife Association for Community Living • Sombak'è d'one nàde xè eghàlagide

Sóbah Kó mení degoyá t'a gonezó godíle, kóta dene kúle gogha déhw'ie ke • Beghúldesche ts'í Háyořila ęelta náde xa ęeta deřth'í
 • Yellowknife Inuuniarvianni Ikayurnariyit Inuuniarnikkun • Yellowknife gwizhit dinjii nihkhah gwank'yuu zhangidilih

October 7, 1996

Members of the Legislative Assembly
 Government of the NWT
 Yellowknife, NWT



Dear Members;

On behalf of the FAS Community Team I am pleased to present you with a FAS Strategy that we hope you will adopt in the Legislative Assembly as a document to guide the development and implementation of policy and programs. We believe that the principles and objectives of this document will be of great use to you and your government officials as you begin to address the many issues of fetal alcohol syndrome and fetal alcohol effects (FAS/E).

Since it first began meeting two and a half years ago the FAS Community Team has enjoyed a number of successes in raising public awareness about FAS and supporting families and children affected.

Some of our successes include:

- two television ads that have been broadcast across the NWT with prevention of FAS/FAE messages;
- development of two FAS/FAE prevention posters and a plain language information pamphlet which will be presented during the October '96 sitting of the Legislative Assembly;
- guiding the development of respectful and compassionate programs that address the needs of families and children affected by FAS/FAE;
- development and distribution of an information sheet on FAS/E specifically for nurses;
- raising awareness and profile of FAS/E issues with political leaders and the community at large;
- communication and coordination among the various groups in Yellowknife that deal with this issue.

...../2

page 2

This strategy document was developed by the FAS Community Team which came together to advise the "Living and Learning with FAS" project which is funded by Health Canada and is managed by the Yellowknife Association for Community Living. The document is the result of many people with experience in the community coming to consensus about the most appropriate ways to approach the complicated issues surrounding FAS/FAE.

Members of the FAS Community Team include representatives from the following groups:

Department of Health and Social Services, parents, Public Health, Status of Women Council of the NWT, Tree of Peace, Yellowknife Women's Centre, Yellowknives Dene Community Wellness program, Stanton Regional Hospital Pediatric Rehab Team, Yellowknife Education Region #2, MacKenzie Regional Health, and NWT Council for the Disabled Persons.

The FAS Community Team has identified two objectives in this strategy as priorities:

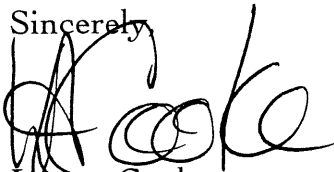
- to pilot a comprehensive treatment program for pregnant women with substance dependency issues:
- to develop and deliver a standardized, modular training program on FAS/FAE with materials in plain language.

Members of our team would be pleased to work together with government to begin action on these two objectives as soon as possible.

Please contact me, Lanny Cooke, at the Yellowknife Association for Community Living if you have any further questions regarding this FAS Strategy or the ensuing Action Plan.

Thank you for your attention to FAS/FAE issues in the NWT.

Sincerely,



Lanny Cooke

Executive Director

attachment

October 1996

Fetal Alcohol Syndrome Community Team

FAS Strategy Document

Mission:

To promote understanding, education and community action about:

1. prevention of fetal alcohol syndrome and fetal alcohol effects (FAS/FAE);
2. supports for families and individuals affected by prenatal exposure to alcohol (FAS/FAE) and other drugs.

Principles:

1. **FAS/FAE is a community concern, it is not only a woman's responsibility.**
Each community must be actively involved and support families "at risk" of having children affected by prenatal exposure to alcohol and other drugs.
2. **Healing is the first step in strengthening communities.**
As they grow in their healing, communities can better understand and take initiative on FAS/FAE concerns.
3. **FAS/FAE crosses all cultures and social/economic groups.**
Any strategies, policies and supports must be multi-cultural in approach.
4. **FAS/FAE affects individuals throughout their entire life.**
Supports and services are needed for children, youth, and adults.

5. **Communities must direct action on FAS/FAE issues.**
Communities must be given the authority to initiate and manage their own FAS/FAE programs with coordinated governmental and agency support.
6. **All FAS/E strategies must be family centred.**
Professionals, programs and services must respect the values, traditions and individuality of each family affected by prenatal exposure to alcohol and other drugs.
7. **FAS/FAE strategies and programs must be coordinated.**
The needs of an individual affected by FAS/FAE and other drugs are multi-dimensional so no one agency or community organization can successfully respond in isolation.
8. **People with FAS/FAE are valuable contributing members of our communities.**
With early and consistent support there is hope for people with FAS/FAE to make a positive contribution to society.

Objectives

FAS/E Awareness:

1. to establish an annual Healthy Baby Week to raise public awareness on healthy pregnancies and FAS/FAE issues;
2. to provide education on FAS/FAE in school curricula from grade one up;
3. to develop specific awareness programs for youth, families and individuals with a history of alcohol use, survivors of abuse/family violence, and individuals with addictions;

Education and Training:

1. to develop and deliver a standardized, modular training program on FAS/FAE with materials, in plain language, to parents, community resource people, and volunteers;
2. to include modules of the above training program within a variety of college level courses including programs for Social Workers, school community counsellors, alcohol and drug counsellors, nurses, community health representatives, teachers, and homecare workers;
3. to provide FAS/FAE professional development based on the above training program to all government and other workers in the areas of health and social services, education, and justice.

Prevention:

1. to pilot a comprehensive treatment program for pregnant women with substance dependency issues;
2. to develop community programs that address the needs of pregnant women with substance dependency issues such as:
 - safe homes;
 - after care support for women who have gone through treatment;
 - community supports to maintain sobriety for pregnant women;
3. to pilot a comprehensive community coordinated drug and alcohol detoxification project for pregnant women with substance dependency issues.

Identification:

1. to develop a screening program for alcohol and drug use (such as the TACE questionnaire) for all pregnant women;
2. to develop a comprehensive and sensitive referral system for at risk pregnant women with substance dependency issues which includes good communication, adequate documentation and appropriate responses;
3. to ensure that an effective, accessible, and appropriate system for diagnosis is in place in the NWT and that children, youth, and adults possibly affected by prenatal exposure to alcohol are referred to the appropriate system for FAS/FAE diagnosis and assessment and to ensure proper follow-up.

FAS/FAE Programs and Supports :

1. to include community based groups such as the Yellowknife Association for Community Living FAS Community Team, the Status of Women Council of the NWT, the Fort Rae Disability Committee on the GNWT Joint Working Group on Early Childhood Intervention especially during the formation stage;
2. to address the needs of children with FAS/FAE in early childhood intervention programs including daycares;
3. to develop and deliver school based programs to meet the needs of children in school affected by FAS/FAE;
4. to build and coordinate partnerships between community based programs and the schools that address the needs of school age children affected by FAS/FAE;
5. to have knowledgeable counsellors available within the school system to address the needs of children affected by FAS/FAE;

6. to strike a Youth Task Force to identify and address the needs of youth now affected by FAS/FAE:

The youths needs may include :

- * supported living programs
 - * employment programs
 - * alcohol and drug treatment services
 - * government services such as justice, education, health and social services
 - * mental health;
7. to share information about Family Support Programs, such as the one presently offered by the Yellowknife Association for Community Living, "Living and Learning with FAS" project , with communities in the NWT;

Healing:

1. to develop and provide healing activities for FAS/FAE issues including grieving workshops, and peer counselling.

Research:

1. to conduct community based FAS/FAE research which communities identify as needed.

Coordination:

1. to create a NWT FAS resource network including representation from government, non profit agencies, communities, families, educators and professionals;

2. to name one GNWT position as a FAS resource contact who would provide information and liaison on all initiatives in the area of FAS/FAE. This FAS resource person works with the NWT FAS resource network to develop inter departmental protocols and liaise with community groups and NGOs on FAS issues;

Evaluation:

1. to evaluate all FAS/FAE programs and services with evaluation criteria developed by the NWT FAS resource network;
2. to evaluate the effectiveness of the current NWT FAS health protection activities such as warning labels, prevention posters and public service announcements.