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# northern child and youth

AN ELECTRONIC PUBLICATION OF THE UNBC TASK FORCE ON SUBSTANCE ABUSE,  
THE CENTRE OF EXCELLENCE FOR CHILDREN AND ADOLESCENTS WITH SPECIAL NEEDS.  
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## Centre of Excellence for Children and Adolescents with Special Needs

Health Canada established the Centre of Excellence for Children and Adolescents with Special Needs to ensure that young people with special needs living in rural and northern communities receive the best services Canada has to offer.

The Centre is based at Lakehead University in Thunder Bay, Ontario, but works in partnership with five sites across the country to address specific areas of children's well-being: Memorial University in Newfoundland is focussing on nutrition, Lakehead University on learning and communication, Mount St. Vincent University in Nova Scotia on early intervention, the University of Northern British Columbia on substance abuse, and the Government of Nunavut on mental health.

The Centre is also involved with more than 300 community, government and corporate partners across Canada.

### The UNBC Task Force on Substance Abuse

The UNBC Task Force examines how substance abuse is related to a variety of special needs, including fetal alcohol syndrome and brain injury; how to design, develop and deliver substance abuse programs that meet the specific needs of young people in rural and northern communities.

### For More Information

For more about the Centre of Excellence for Children and Adolescents with Special Needs, visit [www.coespecialneeds.ca](http://www.coespecialneeds.ca).

For more about the UNBC Task Force on Substance Abuse, contact us at:

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# A Fresh Perspective on FASD

Sometimes, change is good.

When B.C.'s Northern Health Authority decided to improve the way it helps children and youth with Fetal Alcohol Spectrum Disorders and their families two years ago, it found a new perspective on a long-term problem.

It talked to everyone it could think of on the subject - from researchers, to government managers, professors, social workers, nurses and other front-line service providers in the region.

Northern Health found a wide variety of experience in the area, but not much discussion among different professionals about the challenges of working with FASD affected families and individuals.

That should change within three years, when the health authority implements its FASD Prevention Plan.

Northern Health is still developing the plan, but already it's created a reference group of top managers, researchers and service providers to enlighten health officials on what needs to be done next.

The innovative group, together with the health authority, has already put together a list of six priorities for the plan.

The priorities may be useful in other areas of the country where geography and the size of small communities limit the number of professionals and resources available to patients.

This month's newsletter features a report on the priorities and the key details of the prevention plan.

We hope you find the report informative, enjoy!



# A Plan to Change

## A New Approach for FASD Prevention in Northern BC

Fetal Alcohol Spectrum Disorder - if governments could prevent it, they would.

Too often ministries, government agencies and support groups in rural and remote communities tackle the disorder in isolation, each doing their best to help and prevent the disorder from continuing.

In the north region of British Columbia, Northern Health is working on a plan to build and coordinate existing services, as it has never done before.

It aims to cut the number of FASD cases and support individuals with FASD and their families.

The plan is still in its developmental stages and Northern Health is working on identifying targets and actions for the next three years.

"It's really a plan to plan at this stage," said Leslie Webb, a consultant hired to coordinate the process. "I think it is significant because it is a regional initiative with several senior decision makers on the reference group, a committee struck to help inform the plan's development."

The plan came together after key coordinators looked at the provincial government's commitment to healthy communities in their ActNowBC campaign ([actnowbc.gov.bc.ca](http://actnowbc.gov.bc.ca)).

Created in 2005, ActNowBC, envisions the province as one of the healthiest jurisdictions to host the Olympic Games in 2010.

One of its goals is to support "healthy choices in pregnancy."

While the province has a specific deadline for health improvement,

# Build on Successes; says Northern Health



## FASD:

A DISORDER THAT CAUSES A VARIETY OF PERMANENT PHYSICAL AND BEHAVIORAL ABNORMALITIES IN CHILDREN WHOSE MOTHERS USED ALCOHOL DURING PREGNANCY. MOST EXPERTS BELIEVE IT IS ENTIRELY PREVENTABLE.

FASD INCLUDES THE MORE COMMONLY KNOWN FETAL ALCOHOL SYNDROME (FAS) AND FETAL ALCOHOL EFFECTS (FAE).

## Northern Health:

ONE OF SIX PROVINCIAL HEALTH AUTHORITIES IN BRITISH COLUMBIA. ITS SERVICE AREA INCLUDES EVERY COMMUNITY FROM QUESNEL NORTH. IN 2004/2005, NORTHERN HEALTH PROVIDED HEALTH CARE FOR 300,000 RESIDENTS. THAT SAME YEAR ABOUT 3,000 BABIES WERE BORN IN THE REGION.

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other national and provincial government initiatives set a context for FASD prevention at the regional health level.

They include the National Framework for FASD, the province's membership in the Canada Northwest FASD Partnership, the 2003 provincial strategic plan on FASD, and the provincial health ministry's redesign of legislation to include more focus on the social determinants of health and its development of a new provincial plan for the FASD assessment and diagnosis.

Creating a new plan in the north has its challenges.

Affected children and parents often don't have government programs and staff in their communities. Where programs do exist, staff tends to be under-resourced.

It's more difficult to reach outside communities where programs and staff exist.

It can also be harder to

coordinate programs with populations that have their own health programs, funding sources and staff. These populations include on and off reserve aboriginals and non-aboriginal communities. However, some agencies and programs have been phenomenally successful. The prevention plan hopes to build on local successes.

The College of New Caledonia in Burns Lake, for example, has earned national recognition for FASD programs and the Public Health Agency of Canada coordinates a number of service agencies on FASD issues through its Community Action Programs for Children initiative.

"The plan is built on the recognition that there is lots of support and knowledge at the local and regional levels," said Webb.

Governments and service organizations already

# Reference Group Key to Project

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recognize FASD in northern BC.

Northern Health estimates there are 50 or more national, provincial or regional programs, services and initiatives that actively address FASD in the area.

Northern Health wants to find strengths and gaps in service and find new possible roles for itself in FASD prevention.

To do it, the health authority worked with other ministries and organizations to sponsor two community-planning forums in 2005 and 2006 to find out how early childhood programs and services for children with special needs are planned in the region. Each forum created its own set of recommendations.

The health authority also looked at its own programs and how they could change to better meet the needs of FASD clients, their families and frontline staff.

It is now updating contracts with pregnancy outreach services in five northern communities to make sure each contract meets new directions in health.

Northern Health is also continuing as a major partner in a cross-ministerial program called Structured for Success, which teaches daily skills to FASD clients and their families. This year, the program hopes to add training workshops for service providers as well as public education and awareness sessions for landlords, employers and others who may have contact with people affected by FASD.

In 2006, Northern Health, together with the provincial ministry of Children and Family Development, created regional diagnostic assessment teams in eight B.C. communities from Prince Rupert to Dawson Creek. The teams will work with children with FASD and other complex developmental and behavioral conditions in treatment, support and prevention.

The very fact that managers and service providers have been and are willing to look for new opportunities to work together should result in better-coordinated programs for FASD affected children, says Webb.

A vital step in creating the Northern Health FASD prevention plan is the creation of a-reference group made up of eight ministries and non-governmental organizations with similar interests.

The group will connect service providers and policy makers, provide a place to share information across ministries with a view to developing joint strategies where possible, and keep the Northern Health Prevention Plan informed of ongoing issues and

## Plan Priorities

1. Collaborate and coordinate current programs.
2. Enhance awareness and education of staff involved in FASD programs.
3. Increase awareness and education of FASD among youth.
4. Promote stop smoking campaigns in pregnant and postpartum women.
5. Create and put in place a regional assessment and diagnosis model.
6. Increase support and intervention for those affected with FASD and their families.

# Tobacco and Alcohol Use Linked

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developments.

While the prevention plan is not yet tied to any additional provincial money, it has already established six key goals:

The reference group is key to Northern Health achieving its first goal. Once the group defines its membership and project management role, it will explore future partnerships between Northern Health and member groups. The group will also develop implementation strategies and provide input on Northern Health strategies.

To achieve its second goal, Northern Health intends to develop a professional education plan for staff, managers and contracted employees. It intends to take advantage of provincial training resources

available through ActNowBC.

To increase youth education and awareness, the health authority intends to create a consistent message for youth that could be delivered through existing programs aimed at youth, or through poster or other public education campaigns.

It also wants to look how FASD prevention can be integrated into existing stop smoking campaigns aimed at pregnant and postpartum women. It wants to reduce tobacco use in perinatal and postpartum women and sees a need to tie tobacco and alcohol awareness campaigns together.

Northern Health intends to continue to support its new diagnostic units and is exploring how new partnerships

can be developed with other organizations, such as First Nations and Inuit Health Branches.

To enhance support for FASD affected individuals and their families; Northern Health wants to work with the Ministry of Children and Family Development to find existing gaps in service.

For example, it may support groups of service providers in communities where no diagnostic team exists based on the Structured for Success program.

An action plan for each goal is to be created this spring.

For more information on the plan after it is developed, contact Northern Health at [www.northernhealth.ca](http://www.northernhealth.ca)

## Upcoming April Events

### Train-the-Trainer Workshop on Problematic Substance Use in Pregnancy

April 27-28, 2007

The purpose of this workshop is to increase the knowledge of perinatal providers about problematic substance use in pregnancy (PSUP), including alcohol, tobacco, prescription opiates and other drugs. This workshop is designed for family physicians, obstetricians, midwives, addiction physicians, PHNs and nurse practitioners.

Location: BMO Institute for Learning 3550 Pharmacy Avenue, Toronto, Ontario, Canada, M1W 3Z3

Contact: Melanie Smith OR Mary Clelland

Website: <http://www.addictionpregnancy.ca/lnr/downloads/PRIMAflyer.pdf>

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