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NORTHEAST ALBERTA
FASD NETWORK

NEAFAN Newsletter

Connecting Pathways to Support

FASD support depends on clear pathways. In this issue, we explore how healthcare providers can have respectful prevention conversations, examine why careful assessment helps distinguish FASD from other neurodevelopmental conditions, consider justice-informed supports for individuals with FASD, and review an evaluated model for building diagnostic capacity. Together, these articles highlight how informed professionals, coordinated systems, and practical supports help individuals, families, and communities move forward with greater confidence and care.

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Without clear diagnosis, accessing appropriate support can become overwhelming.

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Understanding FASD means looking beyond behaviour to the brain.

FASD Diagnosis and Support Still Matters

FASD can resemble other neurodevelopmental conditions, making careful assessment essential. Understanding cognitive, emotional, and social patterns helps professionals provide more accurate diagnosis and better support planning.

FASD can be difficult to identify because many of its signs overlap with other neurodevelopmental conditions. Challenges with attention, learning, memory, emotional regulation, behaviour, and social skills may also appear in ADHD, learning disabilities, autism, or other developmental concerns. This can make assessment complicated for families, schools, and professionals trying to understand what kind of support is needed.

This study looked at how FASD may differ from other neurodevelopmental disorders by examining neurocognitive and socio-emotional patterns. The researchers found that while there can be overlap between conditions, FASD has features that require careful attention during assessment. The findings reinforce the importance of looking at the whole person, including developmental history, cognitive functioning, emotional and social needs, and possible prenatal alcohol exposure.

For families, accurate diagnosis can bring clarity after years of confusion. Without the right diagnosis, children and youth may be misunderstood as defiant, careless, or unmotivated when they are actually struggling with brain-based differences. A clearer understanding of FASD can lead to better planning, more realistic expectations, and supports that match how the person learns and functions.

For service providers, the article is a reminder that diagnosis is not about applying a label. It is about understanding needs. FASD-informed assessment helps professionals see beyond behaviour and recognize the supports that may improve daily life, school participation, family stability, and long-term outcomes.

Empowering Advocacy Skills for Families, Caregivers, and Individuals with FASD is a free online training course for people with FASD, families, caregivers, and those who support them. The course provides clear and practical information that can be used to help understand your rights and advocate for yourself or your friend/family member with FASD.

Understanding the Patterns Behind FASD

Respectful conversations about alcohol use before and during pregnancy can strengthen prevention and reduce stigma.

Healthcare professionals play an important role in preventing FASD by having respectful, non-judgmental conversations about alcohol use before and during pregnancy. Many general practitioners recognize this responsibility, but barriers such as limited time, uncertainty about how to raise the topic, and concerns about causing discomfort can make these conversations difficult.

The researchers found that many general practitioners understand the importance of discussing alcohol use during pregnancy but often feel they need more support. Time pressures, uncertainty about how to begin the conversation, and concerns about making patients uncomfortable were among the most common barriers identified.

The study suggests that practical training and clear clinical resources can make these conversations easier. Simple screening approaches, up-to-date information, and referral pathways help practitioners provide accurate advice while building trust with patients.

Another important finding was the need to reduce stigma. People are more likely to discuss alcohol use honestly when healthcare professionals use respectful language, listen without judgment, and recognize the broader social and personal factors that influence health decisions.

Prevention conversations are most effective when they are routine, supportive, and person-centred. By increasing confidence and providing practical tools, healthcare systems can better support professionals in preventing alcohol-exposed pregnancies and connecting families with services when needed.

General practitioners need practical tools, confidence, and supportive resources to have respectful conversations that reduce stigma and strengthen FASD prevention.

RESPECTFUL CONVERSATIONS STRENGTHEN PREVENTION.

Strengthening FASD Systems Through Collaboration

A multi-site Australian project improved FASD diagnostic capacity, professional confidence, and community education, showing how coordinated service models can strengthen access to assessment and support.

Access to FASD assessment and diagnosis often depends on whether communities have trained professionals, coordinated services, and clear pathways for families. In many regions, diagnosis is delayed because there are not enough trained clinicians or multidisciplinary teams available. This Australian evaluation looked at a multi-site FASD models of care project designed to strengthen diagnostic capacity, professional training, and community education.

The project brought together several sites across Australia to provide diagnostic clinics, training clinics, and community education sessions. The evaluation found that FASD diagnoses increased during the project, and professionals who took part in training reported improved knowledge and confidence. Community education also helped build local awareness and understanding of FASD.

For service providers, the findings show that research and evaluation are not only academic exercises. They help communities understand what is working, where capacity is growing, and what supports are still needed. A coordinated model can make it easier for families to move from concern, to referral, to assessment, to meaningful follow-up support.

" Evaluation helps systems improve."

The article is especially relevant for rural, regional, and northern communities where access to specialized services can be limited. It reinforces the value of building local knowledge, strengthening partnerships, and evaluating service models so that FASD work continues to improve over time. Stronger systems make diagnosis and support more accessible for individuals, families, and communities.

FASD-Informed Justice Support

Justice and forensic mental health professionals can better support individuals with FASD by adapting communication, supervision, case planning, and expectations to reflect brain-based needs.

Individuals with FASD can become involved in the justice system for reasons closely connected to disability. Challenges with memory, impulsivity, problem-solving, emotional regulation, and understanding consequences can make it difficult to follow conditions, respond to authority, or learn from standard consequences. Without FASD-informed support, people may be seen as unwilling to comply when they are actually struggling to meet expectations that do not fit how their brain works.

This article looks at FASD through the Risk-Need-Responsivity model, a framework often used in justice and forensic mental health settings. The model encourages professionals to match interventions to a person's level of risk, their specific needs, and the way they are most likely to respond to support. For individuals with FASD, this means adapting communication, supervision, planning, and expectations so services are more realistic and effective.

The article emphasizes that FASD-informed justice responses are not about removing accountability. They are about making accountability understandable and achievable. Conditions may need to be concrete, repeated, written clearly, and supported by trusted workers. Case planning may also need to include housing, mental health, substance use, income support, family connections, and disability-informed services.

For frontline workers, justice professionals, and community agencies, the message is practical: behaviour needs to be understood in context. When systems recognize FASD as a brain-based disability, they are better able to reduce repeated crises, improve compliance, and support safer outcomes for individuals and communities.

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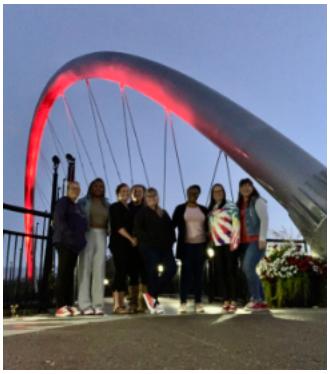
PROGRAMS & SERVICES



Awareness and Prevention

Alberta's Awareness and Prevention pillar focuses on reducing alcohol-exposed pregnancies through education, outreach, mentoring, and community engagement. Programs provide culturally informed and trauma-sensitive supports that help individuals and families access information, referrals, and healthy pregnancy resources while increasing public understanding of FASD prevention.

Assessment and Diagnosis

The Assessment and Diagnosis pillar supports individuals and families through multidisciplinary diagnostic services that follow Canadian FASD guidelines. Teams assess cognitive, behavioural, and developmental functioning to help identify strengths and support needs, improving access to services, planning, and long-term supports.

Supports for Individuals with FASD

This pillar provides ongoing supports that promote stability, independence, and quality of life for individuals living with FASD. Services may include outreach, mentoring, employment support, housing assistance, justice supports, and life skills programming designed to help individuals navigate daily challenges successfully.

Research and Evaluation

The Research and Evaluation pillar strengthens Alberta's response to FASD through evidence-informed practice, data collection, and program evaluation. Research partnerships and community collaboration help identify emerging needs, improve service delivery, and support the development of effective strategies across the province.

Let's Talk

The Prevention Conversation

It's time to talk about alcohol and pregnancy

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Amy Tobin, B. Ed, is the FASD Prevention Conversation Facilitator with NEAFAN (Northeast Alberta FASD Network) and an adoptive mother of two. Prior to motherhood, she was an elementary school teacher with the Fort McMurray Public School District for six years. Her passion for FASD, and its prevention, began nine years ago when she became a mother via adoption and was introduced, personally, to the beauty and perplexity of parenting those with prenatal alcohol exposure. Since then, she has dedicated much of her time to learning about, and educating others, on the effects of alcohol during pregnancy and Fetal Alcohol Spectrum Disorder. Her approach is one that takes into consideration the complexities that adoption, generational, and cultural trauma can play within FASD.

PREVENTION CONVERSATION

The Prevention Conversation program aims to raise awareness of FASD and FASD Prevention among target populations including Healthcare and Social Service Providers, Women of Childbearing Age, Partners, Families, Friends and Caregivers. The Project is geared towards highlighting the importance of screening all women in child bearing age for alcohol use and the risks associated with FASD, improving supports for these women and promoting involvement of community members and primary care providers.

The Prevention Conversation is aimed at encouraging a community wide awareness of FASD and prevention, developing the skills within the community to engage in non-judgmental, empathetic conversations about alcohol use during pregnancy. The Prevention Conversation is centered around increasing knowledge of FASD through training service providers on the use of screening tools to engage women in the Prevention Conversation.

To book a **Prevention Conversation** presentation, please contact:

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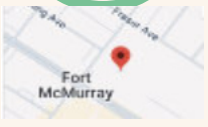

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