



*best start
meilleur départ*

by/par health **nexus** santé

Planning for Change

**Facilitator Guide: Workshop for First Nations Women
about FASD Prevention and Skills for Change**

Acknowledgements

Best Start Resource Centre would like to thank Dianne Rogers for researching and drafting the content for this resource, as well as the advisory members and expert reviewers who provided guidance for this project.

Advisory Committee:

- Cherity Calder, FASD/Child Nutrition Program Coordinator, Nishnawbe Aski Nation
- Carol Ann Cheechoo, Director Community Programs, Shkagamik-Kwe Health Centre
- Tannis Favot, Rehabilitation Clinic Coordinator/FASD Clinic Coordinator, FIREFLY
- Jessica Montana, FASD Nutrition Program Coordinator, Hamilton Regional Indian Centre
- James Gideon, FASD Certificate Program - Train the Trainer, Native Parenting Program For Families Affected by FASD
- Holly Johnston, Team Supervisor, Central, Nogdawindamin Family and Community Services
- Priscilla Southwind, NEAP FASD Project Coordinator, Northeastern Aboriginal FASD Education Partnership Project

Expert Reviewers

- Melody Morton Ninomiya, Well Living House, Li Ka Shing Knowledge Institute
- Nancy Poole, BC Centre of Excellence for Women's Health

Use of this Resource

The Best Start Resource Centre permits others to copy, distribute or reference this work for non-commercial purposes on the condition that full credit is given. We would appreciate knowing how this resource has supported, or been integrated into, your work (beststart@healthnexus.ca), because our resources are designed to help support local health promotion initiatives.

Citation

Best Start Resource Centre. (2016). *Planning for Change. Facilitator Guide: Workshop for First Nations Women about FASD Prevention and Skills for Change*. Toronto, Ontario, Canada: Author.

For copyright, reproduction information, questions or comments, contact:

Best Start Resource Centre
Health Nexus
180 Dundas Street West, Suite 301
Toronto, Ontario, M5G 1Z8
1-800-397-9567
beststart@healthnexus.ca

This document has been prepared with funds provided by the Government of Ontario. The information herein reflects the views of the authors and is not officially endorsed by the Government of Ontario. The resources and applications cited throughout this resource are not necessarily endorsed by the Best Start Resource Centre, or the Government of Ontario.

Introduction

This resource was developed to guide facilitators in planning and presenting a workshop about Fetal Alcohol Spectrum Disorder (FASD) prevention and skills for change for First Nations women. The workshop includes information about:

- Alcohol use during pregnancy and FASD.
- Self-care.
- Ways to improve health.
- Supports for health changes.

Prenatal alcohol exposure is the leading preventable cause of brain damage and developmental disability. Alcohol use during pregnancy may result from lack of awareness of the risks, unplanned pregnancies, social norms around alcohol use, addiction, inter-generational trauma, sexual abuse, as well as other interacting factors such as mental health concerns, substance use, poverty, and lack of resources.

Awareness is growing in Canada about First Nations health issues such as high levels of poverty, stress, chronic disease, disability, sexual abuse, suicide, homelessness, family violence, etc. Loss of traditional values, language, and family/community kinship due to colonization, residential schools, and other historical events have seriously affected the physical, emotional, mental, and spiritual health of First Nations in Canada. There are ongoing impacts on reproductive health and parenting, for example FASD.

Pregnancy and motherhood can be times of renewed hope and strength to make important health changes for women and for the future generations.

Table of Contents

Preparing for the Workshop	4
Using this Facilitator Guide	4
Workshop Participants and FASD	5
Communities and FASD.....	6
Workshop Facilitation.....	7
Healthy Pregnancies.....	8
Making a Difference	10
Child Care	12
Developing the Workshop Agenda.....	13
Gathering Needed Materials.....	14
Putting Together the Participant Handouts	15
Setting up the Room	16
 Facilitating the Workshop	 17
Section 1 – The Welcome	17
Opening and Prayer	18
Introductions.....	19
Workshop Description, Goals, and Agenda.....	20
Workshop Ground Rules.....	22
 Section 2 – Healthy Foundations	 24
Health during Pregnancy.....	25
FASD	27
How much is Safe?	29
 Section 3 – Finding Our Way	 31
Identifying Strengths	32
Self-Care	33
How Does Change Happen?.....	34
Thinking about Change	36
My Community Supports	37

Section 4 – Wrapping Up.....	38
Key Messages	39
Participant Feedback	40
Closing	41
Facilitator Debrief	42
Additional Information for Facilitators	43
References.....	45
Appendix 1 – Participant Handouts.....	47
• Alcohol and Pregnancy	48
• My Four Top Strengths	51
• My One Change.....	52
• My Community Supports.....	53
• My Plan	54
• Resources and Services during Pregnancy and Parenting	55
Appendix 2 – Participant Forms	57
• Confidentiality Agreement Form.....	58
• Participant Feedback Form	59

Preparing for the Workshop

Using this Facilitator Guide

This facilitator guide includes information and tools to help you prepare for and provide workshops about Fetal Alcohol Spectrum Disorder (FASD) prevention and skills for change for First Nations women. Workshops can be adapted to suit participant needs and available time. You may want to plan a one day workshop or several shorter workshops. Choose content that is relevant to the participants. The content, with some adaptations, may also be useful for workshops with Métis or Inuit women.

This guide includes:

- A section on preparing for the workshop (this section).
- Sections on facilitating the four parts of the workshop.
- Sections with resources and services that may be helpful to facilitators and for participants.
- An appendix with handouts for workshop participants.
- An appendix with forms that may be useful to workshop facilitators.

You do not have to be an expert on this topic to facilitate this workshop. Before the workshop, review the the sections on facilitating the four parts of the workshop and the participant handouts (Appendix 1). Each section provides information, teachings, and facilitation suggestions. You may also want to review materials from the *Additional Information for Facilitators* section of this guide before facilitating a workshop on this topic. View all videos prior to the workshop so that you are familiar with the content and to ensure they are appropriate for the participants.

As you prepare for the workshop, keep in mind that there are many different types of adult learners and that each individual learns in their own way. Facilitators can present the material in this guide in different ways such as an oral presentation with printed handouts, a PowerPoint presentation, and/or by using flipchart paper and markers. Use a presentation style that you are comfortable with and that sets a good learning environment for the participants.

Workshop Participants and FASD

Remind yourself that participants are generally engaged in self-care to the best of their abilities. Nevertheless, it is important to provide information about alcohol use and pregnancy and to encourage and support healthy behaviours. Don't focus only on abstaining from alcohol – there are many ways to improve health during pregnancy. Reinforce that it is okay to ask for help.

Participants in your workshop may include women who have specific challenges or concerns, such as:

- Women who are FASD affected.
- Women who are planning a pregnancy but not sure if they can stop drinking.
- Women who drank alcohol before they knew they were pregnant.
- Women who are pregnant and still using alcohol.
- Women who have children with FASD.
- Women who are attending because of concerns about a family member or a friend.
- Women who experience abuse or inter-generational trauma.

In preparation for the workshop, think about women in each of these situations. Women drink alcohol for many reasons – to socialize, have fun, to cope with difficult life problems, due to mental health issues, addiction, etc. Stopping drinking can be easier for some women than others. For some it's an ongoing challenge.

We all want what is best for our children. Provide opportunities for participants to contribute to, talk openly about, and engage in learning about this topic. It is also important to learn about trauma-informed practices and to reinforce each participant's ability to continue to strengthen herself, and her family and community connections, through cultural values, beliefs, and practices.



Communities and FASD

Some communities may not feel ready to discuss FASD. Prevention in First Nations communities requires sensitivity due to the shame and stigma associated with FASD. FASD is everyone's issue and prevention includes women, partners, families, communities, health care, social support, and society.

If your community is reluctant to talk about FASD, you may want to introduce the issue of FASD gently, for example using a workshop name such as *Self Help Tools for a Healthy Pregnancy, Taking Care of Ourselves While Pregnant, Finding Our Way*, or a title in the language of your community. Try to find people in your community who are willing to speak openly about the issue. They may be willing to share their story during your workshop.



Workshop Facilitation

We recommend two facilitators for this parent workshop in case issues such as inter-generational trauma emerge. One facilitator can take the role of caregiver. If a participant is triggered by a topic or a discussion, the caregiver can provide needed support.

If your workshop plans include a co-facilitator (e.g. a co-worker, Elder, grandparent, or knowledge holder, etc.), make sure they have the full details about the workshop (location, time, type and number of participants, workshop content, their role, etc.).

If you are new to facilitating workshops, or for a review of protocols for inviting and involving an Elder, please refer to the *First Nations Workshop Facilitator Guide* (available at www.beststart.org).

Your role as a facilitator is to promote health. This intent should be carried out in the best interest of their health and the health of their unborn children. Help participants build their skills to make healthy choices and provide support and information.

When facilitating a workshop on this topic:

- Use a non-judgmental, trauma-informed, and strength-based approach.
- Learn why some women find it hard to stop drinking alcohol.
- Be aware of how historical factors and current life situations influence health.
- Nurture a trusting relationship with participants.
- Link women to needed information and services.
- Support and promote healthy choices.

Confidentiality

It is important to define and discuss confidentiality at the beginning of the workshop. There may be a history of mistrust in the community and confidentiality must not be taken lightly. You may want to ask participants to sign a confidentiality agreement (see *Confidentiality Agreement Form*, Appendix 2). Explain that it is to protect participants and ask them not to share personal information or stories outside of the group.

The exceptions to confidentiality are issues that concern:

- Child protection (e.g., a participant discloses child abuse or neglect).
- Self-harm (e.g., if a participant confides that she is thinking of taking her life).
- Harm to others (e.g., if a participant intends to injure another person).

Healthy Pregnancies

There are things you need to know about healthy pregnancies and Fetal Alcohol Spectrum Disorder (FASD) in order to discuss the issues sensitively and to respond participants' questions and concerns. Before the workshop, review the content in this section as well as the *Alcohol and Pregnancy* handout in Appendix 1. If you need more information about certain topics, visit the links in this section or refer to the materials in the *Additional Information for Facilitators* section. If participants ask questions you can't answer, let them know you will try to find the answers following the workshop.

Men - Alcohol and Pregnancy

Men influence prenatal health. While FASD results from alcohol use by pregnant women, alcohol use by men may affect genes in sperm responsible for normal fetal development (Lee et al., 2013). In addition, the behaviours of partners (e.g. supportive behaviours versus abusive behaviours) have an impact on the ability of women to make healthy choices during pregnancy.

Women - Alcohol, Drugs and Pregnancy

Alcohol use during pregnancy increases the risk of health problems for pregnant women as well as the risk of FASD. Some women are at higher risk due lack of information, lack of services or support, loss of culture, untreated mental health issues, higher levels of alcohol use, difficulties in stopping drinking, risk of an unplanned pregnancy, and/or difficult life circumstances such as poverty, abuse, etc. (BCCEWH, 2014). These factors also increase the risk of substance use, prescription drug misuse, commercial tobacco use, etc., adding to the health concerns (Anderson & Wemigwans, 2002).

Some pregnant women are aware of the risks of alcohol use but struggle to abstain. It is important to consider *"What happened to her?"* instead of *"What is wrong with her?"*

"The recovery of our cultures has in fact been shown to have great positive effects for individuals, families and communities coping with FASD."
(Wemigwans, 2008, page 10).

Most pregnant women who use alcohol or substances (such as street drugs, solvents, or prescription medicines that are not meant for them) want to stop or use less. Alcohol and many other substances are clearly harmful to women and their unborn babies. It's best to make changes before pregnancy but it's never too late to make healthy choices. It is important to provide information about prenatal health and making positive changes rather than only promoting abstinence, while being clear that no alcohol during pregnancy is the safest choice. Feeling shamed or judged may make it more difficult for women to access needed services. They may avoid health care services for fear that their children will be removed from their care (Poole & Isaac, 2001). Pregnant women in your community who misuse alcohol need trauma-informed support.

To learn more see the *Additional Information for Facilitators*.

Abuse during Pregnancy

Pregnancy is a time when abuse by a partner may start or get worse (BSRC, 2016). If a participant discloses abuse during the workshop, if possible, find a space to talk to her in privacy. Discuss her choices and services she can reach out to. Respect that she knows her own situation best, including whether or not it is safe to leave the relationship. Offer supportive messages (BSRC, 2016) including:

- It's not your fault.
- You are not responsible for your partner's behaviour.
- Help is available.

If you have concerns about the safety of her children, let her know. You can support her in calling child protection services, or let her know you need to call child protection services (BCCEWH, 2007).

Services in your community may be able to help her prepare a safety plan for herself and her children. If there are no appropriate referral services, information about safety plans is available online at www.phac-aspc.gc.ca/sfv-avf/info/ha-plan-eng.php

To learn more about abuse during pregnancy, refer to *Abuse in Pregnancy: Information and Strategies for the Prenatal Educator* at www.beststart.org/resources/anti-violence

Beyond the Scope of this Workshop

This workshop does not replace the role of a trained addictions counsellor or health care provider. If a woman indicates she needs support to make positive health changes, help her become familiar with relevant services, supports, and resources. For some women pregnancy is an opportunity to address addiction and other issues. Other women may benefit from a referral to a health care provider to discuss harm reduction and other things they can do (e.g., healthy eating, prenatal supplements, prenatal health care, etc.) until they are ready to address their alcohol use. Some women may benefit from services to address specific issues such as mental health concerns, abuse, or risk of an unplanned pregnancy. If a woman is drinking heavily during pregnancy, withdrawal should be medically managed. Questions regarding risk to the unborn baby and potential termination of the pregnancy should be handled by a health care provider.

Making a Difference

Build a Relationship with Participants

Drinking alcohol during pregnancy has become highly stigmatized. Women may not wish to disclose their alcohol use due to judgemental attitudes as well as fear of child apprehension (SOGC, 2012). Be warm and welcoming and encourage participation by supporting each individual in a positive way and avoid criticising. Let everyone know that you are there to listen and to support them. Everyone is an expert on themselves and you are a guide in the conversation. Always pay attention to strengths. Help participants know they are capable of solving their own problems and capable of making positive changes in their lives. Link participants to needed information or services as required.

Culture as a Foundation

Some First Nations women do not understand what self-care is and how important it is prior to and during pregnancy. They may not have experienced being cared for in a kind and loving way due to the legacy of historical trauma. Teaching a woman about self-care is about teaching her to care about herself.

It is essential for women to learn about prenatal health if they are pregnant or planning a pregnancy. A workshop that includes cultural values, beliefs, and practices sets the stage for an open dialogue and support for women. If possible, involve an Elder in the workshop to bring First Nations and community-specific teachings as a foundation to FASD prevention. Each component of the workshop can be enhanced with examples of how cultural values or teachings in your community can be used in daily life or when facing challenges.



Cultural Safety

Cultural safety is an ongoing, evolving process that includes specific actions to adjust services to the needs and preferences of clients from a specific cultural group. To learn more about cultural safety, refer to *Cultural Safety in First Nations, Inuit and Métis Public Health*, www.nccah-ccnsa.ca/Publications/Lists/Publications/Attachments/88/CIPHER_report_EN_web_updated2.pdf

Trauma-informed Practice

Trauma-informed practice allows facilitators to help participants move from stigma, guilt, and shame, to empowerment. It emphasizes strengths-based, respectful, and non-judgemental comments. Trauma-informed practice means being knowledgeable about historical issues, cultural practices (e.g., involving an Elder and teachings), and creating a physically and culturally safe environment where trauma is acknowledged and the impact is understood. If possible, arrange for a safe space for a traumatized person to speak with an Elder or caregiver if they are triggered during the workshop. To learn more about trauma-informed practice, refer to *Trauma Informed Practice Guide*, http://bccewh.bc.ca/wp-content/uploads/2012/05/2013_TIP-Guide.pdf or *Trauma Matters* at www.jeantweed.com

Motivational Interviewing

Motivational interviewing is a supportive way of speaking that encourages participants to think about what they are doing, what is happening, and what they want to do to change the situation. Some of the things they may want to change include physical activity, nutritional choices, reducing or stopping smoking, or reducing or stopping alcohol intake during pregnancy. The facilitator's motivational approach can encourage participants to notice they may need to do things differently for their own health and for a healthy pregnancy. To learn more about motivational interviewing, refer to *The SMART Guide*, www.aware.on.ca/sites/default/files/sites/default/files/Smart-Guide.pdf



Child Care

Since some participants may have young children, think about options for child care during the workshop. Will participants arrange for someone to take care of their children while they are in the workshop? Or do you have the funding to offer child minding services during the workshop? Or perhaps a co-worker could provide this service? The child minding services could be in the same room or in a separate space. If you are arranging for child minding services, think through the logistics, such as:

- Is the space safe for young children?
- Are there snacks and activities for the children?



Developing the Workshop Agenda

In this guide there are many activities to choose from. You may want to focus on only some areas of the workshop content, depending on participant needs, interests, and time available, or all content could be used, perhaps over several workshops. You may wish to add information that is relevant to your community and participants.

The following table is a summary of the time and materials required for potential content that could be included in your workshop. Sections may be longer or shorter depending on the selected activities, the knowledge and interests of the participants, time available, your facilitation style, etc.

As you develop an agenda, remember to include breaks as required (for example, a mid-morning break, lunch break, and mid-afternoon break). Short energizer activities can be included in the agenda or used as needed. They don't take long and then you have good energy to get back on task. They can also be used to indicate the importance of movement, laughter, and play.

Time	Topic	Content	Forms and Handouts
THE WELCOME			
10 minutes	Opening and Prayer	Page 18	
10 minutes	Introductions	Page 19	
15 minutes	Workshop Description, Goals, and Agenda	Page 20	Journals, Page 15
10 minutes	Workshop Ground Rules	Page 22	Confidentiality Agreement Form, Page 58
HEALTHY FOUNDATIONS			
30 minutes	Health During Pregnancy	Page 25	Beginning Journey booklet
45 minutes	FASD	Page 27	Alcohol and Pregnancy, Page 48
30 minutes	How Much is Safe?	Page 29	Mocktails for Mom pamphlets
FINDING OUR WAY			
30 minutes	Identifying Strengths	Page 32	My Four Top Strengths, Page 51
30 minutes	Self-Care	Page 33	My Four Top Strengths, Page 51
30 minutes	How Does Change Happen?	Page 34	
45 minutes	Thinking about Change	Page 36	My One Change, Page 52
15 minutes	My Community Supports	Page 37	My Community Supports, Page 53 Resources and Services, Page 55 List of local services
WRAPPING UP			
10 minutes	Key Messages	Page 39	My Plan, Page 54
10 minutes	Participant Feedback	Page 40	Participant Feedback Form, Page 59
10 minutes	Closing	Page 41	

Gathering Needed Materials

Before the workshop, bring together the things you will need for your planned activities, for example you may need some or all of the following:

- Flip chart.
- Masking tape, markers, pens.
- Nametags.
- Equipment for showing a video, internet connection.
- Ininasin Journal for each participant (see *Putting Together Participant Handouts*).
- Items for decorating the Journals such as scissors, glue, stickers, ribbon, coloured pencils, etc.
- Feedback forms for each participant (Appendix 2).
- Smudge bowl, Sweet Grass, Cedar or Sage.
- Tea, teapot or thermos, mugs.
- Talking feather, shaker, or stick.
- Water for drinking and Water teachings.
- Snacks, bus tokens.
- Supplies for specific activities.



Putting Together the Participant Handouts

Workshop participants can use the handouts in Appendix 1 to follow along during the workshop and for review after the workshop. You could also develop your own handouts, activities, and forms.

In Anishnawbe *Ininasin* (pronounced ih-nih-nuh-sihn) means jewel. You can make an Ininasin Journal for each participant using a basic binder containing:

- Workshop Description and Objectives.
- 3-hole punched lined paper (for taking notes, drawing etc.).
- Participant Handouts (Appendix 1).
- List of local services and supports.

Participants can use their binder to collect any additional workshop handouts and to take notes such as teachings or other pieces of information that might be important to them. During the workshop, while listening to lecture format sections or discussions, participants can decorate their journals.



Setting up the Room

If possible arrange the tables in a U shape, or sit at a round table. This will allow participants to work in a circle formation. The facilitator should be at the open end of the circle with the flipchart, etc. If there will be an Elder/Traditional Person, you will need a table for their medicines. If you are incorporating a caretaking space, then have a small table and chairs available as a sitting area with teapot or thermos of tea and mugs, slightly apart from the group (semi-private space).

Set out an Ininasin Journal for each participant, as well as a pen and a nametag. Set up the flipchart. On the flipchart paper write out the workshop description, goals, agenda, and ground rules (see *Workshop Description, Goals & Agenda* and *Workshop Ground Rules*). Post these pages on the wall so participants will be able to see them. If you are planning to show a video or use PowerPoint, set up and test the equipment. Make the room as comfortable as possible, paying attention to temperature, lighting, and noise.





Section 1

The Welcome

Opening and Prayer

Cultural Context:

You may want to open the session with a cultural/spiritual activity that is recognized in your community, such as smudging or a prayer. Traditionally before council or important gatherings First Nations would have an opening prayer to bring all the minds together for a purpose and to provide thanks to the Creator and all Creation.

Purpose:

To begin the workshop in a traditional manner in order to focus attention of participants on work ahead.



Workshop Activities:

- **Welcome:** Introduce yourself. Briefly state the purpose of the workshop. Welcome participants. Welcome the Elder.
- **Prayer and Smudge:** Invite the Elder to offer a prayer and smudge to start the workshop in a good way. Thank the Elder once they are done. For a review of protocols for welcoming, involving, and thanking an Elder, refer to the *First Nations Workshop Facilitator Guide*, www.beststart.org

If an Elder is not involved in the workshop, you could offer a prayer and ask a participant to take the smudge around. Or you may know a knowledgeable participant or staff member who could do a prayer and smudge for you. Another option is to share a teaching that is important in your community, such as:

"A woman is closest to the Creator when she is pregnant. It is when her medicine is the most powerful. She sustains and nurtures life completely within her own body."

Traditional Mohawk Teaching (BSRC, 2012a, page 2)

Materials:

- Smudge bowl and matches or lighter.
- Sweetgrass, Cedar, or Sage.

Time: 10 minutes (at the discretion of Elder).

Introductions

Purpose:

To help participants get to know one another. To help the facilitator learn about the participants. To ensure participants have needed information about the building.

Workshop Activities:

- **Introductions:** Introduce yourself again. Ask participants to:
 - Choose a stone from a basket of stones.
 - Say their name.
 - Say why they chose to take the workshop.
 - Say why they chose that particular stone and which personal strength it represents.



You may want to pass a feather, shaker, or stick so each one knows it is their turn and the others know to shift their focus to that person.

- **Nametags:** Ask participants to fill out their nametag and put it on.
- **Building:** Provide any relevant information about the building such as:
 - Location of fire exits.
 - Location of washrooms.
 - Smoking areas.
- **Caretaking Space:** Let participants know if you have a caregiver and caretaking space available during the workshop. Let them know if they can smudge during the workshop, if needed.

Materials:

- Nametags, pens.
- Basket of stones.
- A feather, shaker, or talking stick.
- Comfortable caretaking space with chairs, table, tea, mugs.

Time: 10 minutes.

Workshop Description, Goals, and Agenda

Purpose:

To ensure that participants have a clear understanding of the topic and plan for the day.

Workshop Activities:

Introduce participants to the workshop by covering the following:

- **Workshop Description and Goals:** Review the workshop description and goals (posted on wall prior to the workshop) with participants (see content in this section).

Workshop Description (to review with participants based on the agenda you developed):

This workshop is about taking care of your body, your emotional health and the sacred children who may grow within. Some of you may be thinking of becoming pregnant, some may be pregnant now, and others may be here to take back information to their sister, daughter, niece, or friend if they are pregnant. You may be worried about the safety of alcohol, drugs, or prescription medications during pregnancy. You may also want to know how to make changes towards positive behaviours that will improve health for women and for the sacred children within. This workshop will provide answers to many of your questions.

Workshop Goals (to review with participants based on the agenda you developed):

- o To better understand alcohol use during pregnancy and FASD.
 - o To learn more about self-care.
 - o To learn ways to improve health.
 - o To identify supports for health changes.
- **Agenda:** Review the agenda you developed with participants (posted on the wall prior to the workshop). Explain when the breaks will occur and when the workshop will wrap up.



- **Ininasin Journals:** Introduce participants to their Ininasin Journals and the meaning behind the name Ininasin. Provide materials so participants can decorate their Journal during the workshop.

Ininasin Journal (to review with participants)

In Anishnawbe *Ininasin* (pronounced ih-nih-nuh-sihn) means jewel. The Ininasin Journals include the workshop handouts. You can use your Journal to draw pictures or take notes, for example teachings, thoughts, or information that might be important to you. At the end of the workshop you can take your Journal with you and refer to it at home. If you are a mother, grandmother or auntie, you might want to add photos of the child or the child's drawings to your Journal.

Materials:

- Flipchart page with workshop description, goals, and agenda.
- Ininasin Journals and items to decorate Journals.

Time: 15 minutes.



Workshop Ground Rules

Purpose:

To guide participants in understanding respectful conduct while attending the workshop.

Workshop Activities:

- **Ground Rules:** Discuss and review the workshop ground rules (see examples in this section) with participants to ensure everyone understands the conduct to be observed during the workshop. Refer participants to the ground rules that you posted on the wall prior to the workshop. Ask participants for their input. You may choose to include a discussion about the things that need to be in place so that people feel comfortable sharing during the workshop (i.e. confidentiality, being supportive, etc.). Adapt ground rules as required.



Examples of Ground Rules (to help you develop your workshop ground rules)

1. We will turn off our cell phones as a sign of respect to other participants. No pictures, no texting, and no answering calls during the workshop. If you expect an emergency call, your cell phone can be on vibrate mode.
2. We will show respect and common courtesy to other participants (i.e. do not interrupt when a participant is speaking, save private conversations for breaks).
3. We will participate during the workshop in ways that we feel comfortable.
4. We will do our best to create a safe and supportive space so everyone is comfortable participating. It is not our place to judge—we all make mistakes, we are all learning!
5. When in a talking circle, we will not interrupt the participant holding the feather, stick, or shaker.
6. We will ensure time is given to others in the circle—there will be other times for lengthy, in-depth discussions.
7. What we say and do in the circle, stays within our circle. Other peoples' information and stories are not shared outside this group without their consent.

You may want to ask participants to sign a *Confidentiality Agreement* form (see Appendix 2).

During the workshop, if needed, you can refer participants to the agreed upon list of ground rules posted on the wall.

Materials:

- Flipchart paper with list of ground rules, markers.
- *Confidentiality Agreement* form (Appendix 2), if using.

Time: 10 minutes.





Section 2

Healthy Foundations

Health during Pregnancy

Cultural Context:

"In our culture we believe everything that the woman thinks, feels, and eats... the baby is going to experience as well. It's very important then, that the woman needs to take care of herself."

Mohawk Elder, Sakoieta' Widrick (BSRC, 2012b, p.30)

Purpose:

To share information about healthy pregnancies.

Workshop Activities:

- **Cultural Practices and Values Related to Pregnancy and Infants:** To set the stage for a conversation about alcohol use and FASD, ask participants to share cultural practices about pregnancy. Encourage reflection/discussions about values regarding pregnancy and parenting such as the concept of children as sacred, a gift from the creator. If discussion is slow to start, you could read the quote at the top of this page. You could also invite an Elder to share cultural practices, stories and/or ceremonies about pregnancy and parenting.
- **Water Teaching:** You may choose to include a Water teaching, discussing the importance of cleansing body/mind/spirit during and after the group. Water teachings are important, especially during discussions about sensitive issues like FASD when emotions are high. Water is the basis of life. Most teachings recognize that women are responsible for the water. To learn more, talk to a local *Elder* or refer to *Taking Care of Our Children*, www.beststart.org
- **Healthy Pregnancy:** Ask participants to discuss the following questions:
 - o How can women prepare for a healthy pregnancy before they are pregnant?
 - o What are some things women can do while pregnant for their health and for a healthy pregnancy?



Support the discussion by prompting for the many things that women can do for their health and to have a healthy pregnancy such as prenatal care, stopping or cutting back on smoking, avoiding second hand commercial tobacco smoke, not using drugs or medications unless prescribed for them by a health care provider, exercising, eating healthy food, sleeping well, etc. As needed, refer to a prenatal resource (see Materials) to plan and share needed content. Provide copies of a prenatal resource to participants if feasible (see Materials). Reinforce that there are many ways to improve health before and during pregnancy, and they all make a difference.

Materials:

- If you include a Water teaching, ensure that water is available to drink and cleanse.
- A resource about healthy pregnancies such as *Beginning Journey* booklet, www.beststart.org

Time: 30 minutes, depending on the planned content.



FASD

Cultural Context:

"In indigenous cultures the child traditionally was seen as the future and extension of one self; all family members and extended family members placed high value on the child, each member being responsible for molding and shaping the child's life."

(Linda Eagle Speak, Elder in Residence at the Minnesota Indian Women's Resource Centre from the Blackfoot Confederacy of Southern Alberta, Blood Tribe)



Purpose:

To share basic information about alcohol use during pregnancy and FASD.

Workshop Activities:

- **Share Information about Alcohol Use during Pregnancy and FASD:** Use a positive approach when discussing alcohol use during pregnancy and FASD, including respect, understanding, compassion, strengths, skills, and hope for the future. Also, be clear about the risks of alcohol use during pregnancy and the supports available for those who want to stop drinking and those with FASD. To focus in on alcohol use during pregnancy and FASD, ask participants:
 - o What have you heard about alcohol use during pregnancy and FASD?

During the discussion, draw an image of a baby and an image of a pregnant woman on the flipchart. Make notes on the flipchart during the discussion (e.g. impacts on the baby beside the image of the baby and impacts on the pregnant woman beside the image of the woman). Fill in any knowledge gaps by sharing the key information in the *Alcohol and Pregnancy handout* (Appendix 1). Make sure you leave enough time for questions and discussion. Let participants know help is available and will be discussed later in the workshop.

- **Video:** You could consider the brief video *FASD & Stigma: Why Do Women Drink When Pregnant*, or a portion of the longer video *Recovering Hope*, or a video of your choice. Introduce the video by explaining it is about why women might drink during pregnancy and the impacts on the unborn baby. Be clear that the video includes some difficult topics such as abuse and addiction. Respect that some participants may choose to step out of the room during the video. To access videos:
 - o *FASD & Stigma* (4 minutes), www.neurodevnet.ca/resources/fasd-resources#whydrink
 - o *Recovering Hope* (57 minutes), www.youtube.com/watch?v=m7zfJCW9Yco

Discussion: After the video, you could ask participants to discuss some or all of the following questions. Encourage and model respectful discussion about alcohol use and FASD.

- o What are some of the ways alcohol has touched or changed our community?
- o Why might a woman use alcohol while she is pregnant?
- o What could help women who drink alcohol during pregnancy?

Materials:

- *Alcohol and Pregnancy* handout (Appendix 1).
- Equipment to show the video, internet connection.
- Flipchart and markers.

Time: 45 minutes, depending on activities planned.



How Much is Safe?

Purpose:

To learn more about safe amounts of alcohol before and during pregnancy.

Workshop Activities:

- **How much is Safe?** Ask participants how much alcohol is safe for a woman who is:
 - o Not planning to be pregnant
 - o At risk of an unplanned pregnancy
 - o Planning a pregnancy
 - o Pregnant

Then share the following information about safe limits on the flipchart.

Safe Limits

- o Women who are not planning a pregnancy:
 - Maximum of 10 standard drinks a week.
 - No more than 2 drinks a day most days.
- o Before and during pregnancy - no alcohol:
 - There is no safe amount of alcohol.
 - There is no safe time to drink alcohol.
 - There is no safe kind of alcohol.
- **What is a Standard Drink?** Ask participants to find a partner. Provide each team with water and 3 large plastic cups. Ask the teams to pour what they think is a: standard drink of liquor; a standard drink of wine; and a standard drink of beer. Once they have completed this task, provide a measuring cup so the groups can measure the amounts in their cups. Then put the following information on the flipchart (CCSA, 2011). Ask participants if there were any surprises.

Standard drinks are:

- o Beer (5%): 341 ml (12 oz.)
- o Wine (12%): 142 ml (5 oz.)
- o Spirits (40%): 43 ml (1.5 oz.)
- **Discussion:** Ask participants:
 - o How could you help a pregnant woman to stop drinking or to remain alcohol-free?



- **Mocktails:** Consider serving non-alcoholic drinks (mocktails) or having participants make the drinks. For simple and delicious recipes, see *Mocktails for Mom* pamphlet, www.beststart.org

Materials:

- Pitchers of water, plastic cups, measuring cup.
- Flipchart and markers.
- Recipes for non-alcoholic beverages, e.g. *Mocktails for Mom* pamphlets, www.beststart.org
- Ingredients for non-alcoholic beverages.

Time: 30 minutes, depending on the selected activities.





Section 3

Finding Our Way

Identifying Strengths

Cultural Context:

"For thousands of years, native families and communities have identified and used cultural strengths and resiliency to sustain and promote life in all its facets: spiritual, mental, physical and emotional. Embracing these concepts gives native people a blueprint or framework within which to understand their strengths."

(White Shield, 2012, p. ix)

Purpose:

To support participants in identifying their own strengths and in discussing ways to honour and respect their bodies.



Workshop Activities:

- **My Strengths:** Using the *My Four Top Strengths* handout in their Ininasin Journals, ask participants to identify their four top strengths using words and/or pictures. Ask participants to share one of their strengths with the group, if they choose. This can be hard for participants because people are often shy to say good things about themselves, but it is a good practice.

You could model this activity by discussing one of your strengths and how it helped you to make a change in your life.

- **Honoring and Respecting Your Body:** Start a conversation about healthier choices by asking participants some or all of the following questions. Write their responses on the flipchart:
 - o How do people cope with stress and problems in life?
 - o How can you help a family member or friend honour, love, and respect herself?
 - o Do you do those things for yourself? If not, why?
 - o What are some things you can do every day to honour, love, and respect your body, mind, and spirit?
 - o Hold onto the stone you selected at the start of the workshop and think about the strength this represents. How does this strength help you honour, love, and respect yourself? How do your other strengths help you?
 - o How can your community, family, friends or Elders help you honour, love, and respect yourself?

Materials:

- *My Four Top Strengths* handout (Appendix 1).
- Pens.
- The stone they selected at the start of the workshop.
- Flipchart and markers.

Time: 30 minutes.

Self-Care

Cultural Context:

"Many women do not truly understand what self-care is and how important it is during pregnancy. Many First Nation women have not experienced being cared for in a kind and loving way due to the legacy of the residential schools and historical trauma... Teaching a woman about self-care is about teaching her to care about herself."
(BSRC, 2012b, page 30)



Purpose:

To support participants in thinking about self-care.

Workshop Activities:

- **Self-care:** Remind participants that:
 - o Self-care is especially important when women are thinking of getting pregnant, during pregnancy, and while parenting. And for all women at all times!
 - o Every change that a woman makes prior to or during pregnancy makes a difference to her health and the health of her unborn baby.
 - o If a woman feels unable to make certain changes, she can choose to be supported to make other changes.

Remind participants of the information covered in the earlier section about things women can do to have a healthy pregnancy.

- **Things that Get in the Way:** Ask participants to move into small groups and give each group a page of flipchart paper and a marker. Ask participants to identify and list on the flipchart 3 to 5 things that could interfere with a woman's health or a healthy pregnancy. Then ask participants to write 5 to 10 healthy things that women could do instead of an unhealthy behaviour, or to avoid an unhealthy situation. Once the groups have made their lists, ask each group to provide highlights from their discussion. Remind participants that there are many things that get in the way of health, and many coping strategies that support good health.

Ask participants to write in their *Ininasin Journal*, at the bottom of the *My Four Strengths* handout (Appendix 1), at least 1 self-care activity they would like to start using or would like to use more often.

Materials:

- Flipchart paper and markers.
- *My Four Top Strengths* handout (Appendix 1)

Time: 30 minutes.

How Does Change Happen?

Cultural Context:

"Native teachings tell us to always place our children first above all else, treasure them as gifts from the Creator."

(Linda Eagle Speak, Elder in Residence at the Minnesota Indian Women's Resource Centre from the Blackfoot Confederacy of Southern Alberta, Blood Tribe)

Purpose:

To help participants better understand the steps involved in making changes, such as improving health.

Workshop Activities:

- **Stages of Change:** Introduce the stages of change (Prochaska & Velicer, 1997) using a flipchart, saying a few words about each stage based on an example from your own life or experience. You may also use the example of a person wanting to quit smoking.



Stage	Definition	Example
Precontemplation	Not thinking about changing the behaviour.	"I like smoking and I do not want to stop."
Contemplation	Thinking about the change.	"Maybe I should smoke less."
Preparation	Getting ready and being committed to change	"I called the 800 number and my friend said she will support me."
Action	Actively working on making the change.	"I use the patch and I found ways to keep busy instead of smoking."
Maintenance	Maintaining the change.	"I have been smoke-free for six months and my plan is working well!"

Share each of the following examples one at a time and ask participants to tell you what stage of change it represents. The answers are on the right.

Example (share with participants)	Correct Response
Wendy makes mocktails for herself and even shares them with friends.	Maintenance
Joan has no interest in quitting smoking.	Precontemplation
Laurie asked the nurse practitioner if her current blood sugar levels would be safe if she were to become pregnant.	Contemplation
It has not always been easy, but with support from family and services, Sylvia has been alcohol-free for six months.	Maintenance
Teresa read information about quitting smoking and set a quit date.	Preparation

- **Step by Step:** Remind participants that behaviours such as quitting alcohol, reducing stress, and eating better are not simple as they can include many steps. For example, a person may need to search for or ask for information, set a quit date, ask for support from friends, family, find community services, and seek assistance from a health care provider, etc. As the person plans and makes changes, they will find that some steps work well, some don't, and some need to be adjusted. Sometimes they can make the changes fairly quickly and sometimes it takes many tries. These things are a normal part of making changes.

Ask participants to form small groups and give each group a piece of flipchart paper and a marker. Ask each group to think about the small steps for a woman planning to make a change. Give each group a different change, such as stopping smoking, stopping drinking, managing diabetes, getting active, eating healthier, etc. Ask them to include a list of things that might help (family, friends, local services, etc.). Once the discussions are slowing down, ask each group to report back. Re-inforce the good work that they have done and that the small steps are similar for all of the changes.

Materials:

- Flipchart paper and markers.

Time: 30 minutes.

Thinking about Change

Cultural Context:

"The first step to my own healing was the realization that I needed to be healthy. And that meant I had to change! So, I worked on myself – physically at first. I also attended... traditional ceremonies to begin my emotional and spiritual healing... I dealt with issues of intergenerational trauma and faced them head on for the first time in my life. Most of my trauma, I saw, centered on the concept of shame. Much of which wasn't even my own. This was shame that had been down through generations from the time of first contact, I was certain. I saw this shame pour off my body like water draining from a basin. When it was gone I felt so much lighter."

(Xube Wau, 2008, www.sacredhorsewoman.blogspot.ca/2008_04_30_archive.html)

Purpose:

To provide an opportunity to think through a potential personal change.

Workshop Activities:

- **Example of Change:** Encourage participants to choose one change they might want to make at some time in the future. Let participants know it is okay to choose a simple behaviour change or to make up a change if they are uncomfortable writing about their own. The goal is to practice thinking through the steps for change.

Ask the participants to use the *My One Change* handout to write briefly about:

- o The change they are thinking about.
 - o The pros and cons that go with making or not making the change.
 - o The reasons for making the change.
 - o The steps they could use to make the change.
 - o Things that might get in the way and solutions for each barrier.
- **Discussion:** After participants have filled out the handout, encourage participants to share what they wrote and how they felt, if they feel comfortable doing so. Use the following messages to wrap up:
 - o Planning is the bridge to change.
 - o You are more likely to be successful if you change one behaviour at a time.
 - o You are more likely to succeed if you have a plan and share it with someone else.
 - o If you are having difficulty, you can review your reasons for change.
 - o Keeping track of behaviour change in a journal can also help with change.
 - o It is okay to ask for help.

Materials:

- *My One Change* handout (Appendix 1).

Time: 45 minutes.

My Community Supports

Cultural Context:

"In the past, pregnancy was not an individual event, it permitted interconnectedness. Other people are responsible for the woman's health too."
(BSRC, 2013, page 14)

Purpose:

To help participants understand the benefits of support during the process of change. To increase awareness of available supports.

Workshop Activities:

- **My Supports:**
 - Ask the participants to identify where they go or could go to get support or help.
 - Ask participants to think about the change they identified on their *My One Change* handout and the community supports that could help them make that change. Ask participants to list these supports on their *My Community Supports* handout.
- **Supports Related to Alcohol Use during Pregnancy:** Remind participants that:
 - It is okay to ask for help.
 - Some women have support of partners, family and friends.
 - Services are available (see Resources and Services for Pregnant Women).

Use the flipchart and ask participants to help you create a list of services and supports that could help a woman who wants to stop drinking because she is pregnant or planning a pregnancy (e.g. family, friends, specific services, etc.).

Give the participants a list with links to additional information and supports (see *Resources and Services for Pregnancy and Parenting*) as well as contact information for local services such as:

- Programs for parents or pregnant women.
- Aboriginal Healthy Babies, Healthy Children Program.
- Shelter services.
- Healthy eating services such as food banks and registered dietitians.
- Health care providers such as Aboriginal midwives, doctors, nurse practitioners.
- Public health units.
- Recreational or sports programs.
- Mental health services.
- Addiction and treatment programs.
- Elders.
- Friendship Centres.

Materials:

- *My Community Supports* handout (Appendix 1).
- *Resources and Services during Pregnancy and Parenting* handout (Appendix 1).
- List of local services.

Time: 15 minutes.



Section 4

Wrapping Up

Key Messages

Purpose:

To provide an opportunity for participants to reflect on what they experienced and learned.

Workshop Activities:

- **Key Messages:** Using a feather, shaker, or talking stick, ask each participant to share their reflections and thoughts about the workshop. If you are running out of time ask participants to sum up what they learned or how they feel in one word.

Share key messages (see below) that may have been missed in the discussion.

Key Messages:

- o There are many things women can do to have a healthier pregnancy.
 - o There is no safe amount of alcohol during pregnancy ... zero is the best.
 - o There is no safe time to drink in pregnancy.
 - o There is no safe kind of alcohol in pregnancy.
 - o Cutting back or stopping drinking reduces the risk.
 - o FASD is preventable.
 - o Asking for help is a sign of strength.
 - o There is hope and there is help.
- **My Plan:** If you have time, you could ask participants to fill in the form *My Plan* (Appendix 1). After they fill out the form, ask participants if there is anything specific they plan to change that they feel comfortable sharing with the group.
 - **Future Hopes:** If you have time, ask participants to stand together or sit in a circle and complete the following future hopes statement about FASD in the community:
 - o Wouldn't it be great if ...

Materials:

- A feather, shaker, or talking stick.
- Flipchart, markers.
- *My Plan* handout (Appendix 1).

Time: 10 minutes, depending on planned activities.



Participant Feedback

Purpose:

To learn from participants including what went well and what could be improved.

Workshop Activities:

- **Participant Feedback:** Pass out the *Participant Feedback Forms* (Appendix 2) for participants to fill out. Reinforce that they do not have to put their name on the form and that their feedback will help to improve further workshops. Suggest that they can show you how they feel about the workshop through their thoughts (words) or pictures (drawings). Ask participants to hand in the completed forms before they leave. Let them know that you appreciate learning from them through their participation and feedback about the workshop.



Materials:

- *Participant Feedback Form* (Appendix 2).
- Pens.

Time: 10 minutes.

Closing

Cultural Context:

At many gatherings there was a smudge with medicines or a fire burning for the duration of the meeting. When the gathering adjourned a prayer was often offered at the end the day. The prayer would give thanks to all of Creation and the Ancestors for their guidance, freeing them to leave and rest. After the prayer the fire would be put out, signalling the end of the meeting.

Purpose:

To acknowledge the end the workshop and give thanks to the collective work of participants.

Workshop Activities:

- **Closing Remarks:** Invite the Elder to provide closing remarks and a prayer at the end of the workshop. Thank the Elder once they are finished. If an Elder is not available, close with a prayer (see below) or quote, as appropriate.

Ojibway Prayer

O Great Spirit who's voice I hear in the winds
and whose breath gives life to the entire world, hear me!
I am small and weak and I need your strength and wisdom.

Let me walk in beauty and make my eyes ever behold the red and purple sunset.
Make My Hands respect the things you have made and my ears sharp to hear your voice.
Make Me Wise so that I may understand the things you have taught my people.

Let me learn the lessons you have hidden in every leaf and rock.
I seek strength, not to be greater than my brother, but to fight my greatest enemy-myself.
Make me always ready to come to you with clean hands and straight eyes,
so when life fades, as the fading sunset, my spirit may come to you without shame.
Aho!

(Author unknown, www.manataka.org/page1449.html)

Materials:

- Smudge materials, if required.
- Water to drink and wash hands (if you have included Water teachings earlier in the workshop).

Time: 10 minutes (at the discretion of the Elder).

Facilitator Debrief

It can be helpful to debrief at the end of the workshop if there was more than one facilitator. If you did the workshop alone, you can take some time to reflect, review the participant feedback forms, and take notes for future workshops.

This can help you identify ideas for additional workshops, things that went well, things you would change, any needed follow up, etc.

It may be helpful to consider the following questions when reflecting on or discussing a recently completed workshop:

- What did I learn from the participants?
- What went well and why?
- What did not go so well and why?
- What would I do differently next time and why? (Think about how the workshop was promoted, where the workshop was held, how the workshop was facilitated, the agenda, group activities, handouts, etc.)

Additional Information for Facilitators

If you want to learn more about FASD prevention and skills for change we encourage you to visit the following information sources:

Best Start Resource Centre

www.beststart.org

- **Abuse in Pregnancy: Information and Strategies for Prenatal Education:** This resource offers an overview of the issue, how and when to screen for abuse, and what to do in case of a disclosure.
- **Beginning Journey - First Nations Pregnancy Resource:** This prenatal book will help First Nations women to prepare for pregnancy, have a healthy pregnancy, and welcome a new life into their family.
- **Pimotisiwin - A Good Path for Pregnant and Parenting Aboriginal Teens:** This report will help service providers support Aboriginal teens who are pregnant and parenting.
- **Prescription Drug Misuse in Pregnancy and Parenting:** This report includes strategies to prevent and address prescription drug misuse in First Nations women who are pregnant or parenting.
- **The Sacred Journey from Preconception to Parenting for First Nations Families:** This manual helps service providers understand some of the traditional teachings, barriers to practice, and challenges facing First Nations families.
- **Taking Care of Our Children:** Facilitator guide for a parent workshop on childrearing in First Nations families and communities.
- **Mocktails for Mom:** Recipes for delicious non-alcoholic drinks.
- **A Facilitator's Guide: Planning a First Nations Workshop for Parents:** Information for facilitators new to providing workshops to First Nations parents.
- **Best Start Aboriginal Sharing Circle:** Listserv for service providers who work with First Nations, Métis or Inuit families.
- **Prenatal Education – Key Messages for Ontario:** The main health messages for all future and new parents. www.ontarioprenataleducation.ca/alcohol

Other Services

Aboriginal Sexual Health: Information and materials supporting improved sexual health.
www.aboriginalsexualhealth.ca

Asante Centre for Fetal Alcohol Syndrome: Connects individuals, families and professionals to FASD resources and services.

www.asantecentre.org/FASD_Resources.html

AWARE: Information about alcohol and substance use including *The SMART Guide: Motivational Approaches Within the Stages of Change for Pregnant Women Who Use Alcohol*.

www.aware.on.ca/sites/default/files/sites/default/files/Smart-Guide.pdf

BC Centre of Excellence for Women's Health: Resources related to alcohol use during pregnancy including the *Trauma Informed Practice Guide* and *Why do Girls and Women Drink Alcohol during Pregnancy?*

www.bccewh.bc.ca/publicationsresources/publications/

Canadian Centre on Substance Abuse: Information to reduce the harm of alcohol and other drugs on society including *Canada's Low Risk Drinking Guidelines*.

www.ccsa.ca

Ministry of Children and Youth Services: Refer to section *What We Heard: First Nations, Métis, Inuit and Urban Aboriginal Perspectives of the Fetal Alcohol Spectrum Disorder Provincial Roundtable Report*.

www.children.gov.on.ca/htdocs/English/documents/specialneeds/fasd/FASD_Roundtable_Report.pdf

Motherisk: Provides guidance to service providers and pregnant women related to medication, alcohol and other substance use during pregnancy.

Toll-free: 1-877-327-4636, www.motherisk.org

National Collaborating Centre on Aboriginal Health: Resources related to Aboriginal health including *Cultural Safety for Indigenous Peoples*.

www.nccah-ccnsa.ca

Ontario Drug & Alcohol Helpline: Information about services for drug and alcohol use.

Toll-free: 1-800-565-8603, www.drugandalcoholhelpline.ca

Public Health Agency of Canada: Information about healthy pregnancies, FASD and developing a safety plan for those in an abusive relationship.

www.phac-aspc.gc.ca

Videos

Fetal Alcohol Spectrum Disorder Resources: Series of videos on FASD including FASD & Stigma (4 minutes) www.neurodevnet.ca/resources/fasd-resources#whydrink

Recovering Hope: A video about the mothers and families of children who are affected by FASD (57 minutes) www.youtube.com/watch?v=m7zfJCW9Yco

References

- Anderson, D., & Wemigwans, J. (2002). Healing with a Deep Heart – A Community-based approach to living with FASD. In K. Anderson (Ed.). *Aboriginal approaches to Fetal Alcohol Spectrum Disorder* (pp. 6-12). Retrieved from www.ofifc.org/publication/aboriginal-approaches-fetal-alcohol-spectrum-disorder
- Baba, L. (2013). *Cultural safety in First Nations, Inuit and Métis public health*. Retrieved from www.nccah-ccnsa.ca/Publications/Lists/Publications/Attachments/88/CIPHER_report_EN_web_updated2.pdf
- Best Start Resource Centre. (2016). *Abuse in pregnancy: Information and strategies for the prenatal educator*. Retrieved from www.beststart.org/resources/anti-violence/pdf/bs_abuse_lr_f.pdf
- Best Start Resource Centre. (2015). *A facilitator's guide: Planning a First Nations' workshop for parents*. Retrieved from www.beststart.org/resources/aboriginal/fgw_final_low.pdf
- Best Start Resource Centre. (2013). *Beginning journey: First Nations pregnancy resource*. Retrieved from www.beststart.org/resources/rep_health/E33A_Beginning_Journey.pdf
- Best Start Resource Centre. (2012a). *Pregnancy & alcohol pamphlet*. Retrieved from www.beststart.org/resources/alc_reduction/FASD_Brochure_A20A.pdf
- Best Start Resource Centre. (2012b). *Supporting the sacred journey: From preconception to parenting for First Nations families in Ontario*. Retrieved from www.beststart.org/resources/rep_health/pdf/SupportingtheSacredJourney.pdf
- British Columbia Centre of Excellence for Women's Health. (2014). *Why do girls and women drink alcohol during pregnancy? Information for service providers*. Retrieved from http://bccewh.bc.ca/wp-content/uploads/2014/08/FASD-Sheet-1_Who-Drinks-Alcohol-during-Pregnancy.2013.pdf
- British Columbia Centre of Excellence for Women's Health. (2007). *Coalescing on women and substance use*. Retrieved from <http://coalescing-vc.org/>
- Canadian Centre of Substance Abuse. (2011). *Canada's low-risk alcohol drinking guidelines*. Retrieved from www.ccsa.ca/Resource%20Library/2012-Canada-Low-Risk-Alcohol-Drinking-Guidelines-Brochure-en.pdf
- Centre for Addiction and Mental Health. (2011). *My Change Plan*. Retrieved from www.nicotinedependenceclinic.com/english/teach/resources/assessment%20tools/my%20change%20plan%20Edition%208.pdf

- Jean Tweed Centre. (2013). *Trauma matters: Guidelines for trauma-informed services in women's substance use services*. Retrieved from <http://jeantweed.com/wp-content/themes/JTC/pdfs/Trauma%20Matters%20online%20version%20August%202013.pdf>
- Lee, H. J., Ryu, J.-S., Choi, N. Y., Park, Y. S., Kim, Y. I., Han, D. W. (2013). Transgenerational effects of paternal alcohol exposure in mouse offspring. *Animal Cells and Systems*, 17(6), 429. <http://dx.doi.org/10.1080/19768354.2013.865675>
- May, P. A., Baete, A., Russo, J., Elliott, A. J., Blankenship, J., Kalberg, W. O., . . . Hoyme, H. E. (2014). Prevalence and characteristics of Fetal Alcohol Spectrum Disorders. *Pediatrics*, 134(5), 855-866. Retrieved from <http://pediatrics.aappublications.org/content/early/2014/10/21/peds.2013-3319>
- NeuroDevNet. (2016). *FASD & stigma: Why do women drink when pregnant?* Retrieved from www.neurodevnet.ca/news/fasd-stigma-why-do-women-drink-when-pregnant
- Poole, N., & Isaac, B. (2001). *Apprehensions: Barriers to treatment for substance using mothers*. Retrieved from http://bccewh.bc.ca/wp-content/uploads/2012/05/2001_Apprehensions-Barriers-to-Treatment-for-Substance-Using-Mothers.pdf
- Prochaska, J. O., & Velicer, W. F. (1997). The transtheoretical model of health behaviour change. *American Journal of Health Promotion*, 12(1), 38-48. <http://dx.doi.org/10.4278/0890-1171-12.1.38>
- Reynolds, W., & Leslie, M. (2013). *The SMART guide motivational approaches within the stages of change for pregnant women who use alcohol*. Retrieved from www.aware.on.ca/sites/default/files/sites/default/files/Smart-Guide.pdf
- Society of Obstetricians and Gynaecologists of Canada. (2012). *Alcohol use and pregnancy consensus clinical guidelines*. Retrieved from <http://sogc.org/guidelines/alcohol-use-and-pregnancy-consensus-clinical-guidelines/>
- TIP Project Team. (2013). *Trauma informed practice guide*. Retrieved from http://bccewh.bc.ca/wp-content/uploads/2012/05/2013_TIP-Guide.pdf
- Wemigwans, J. (2008). *FASD tool kit for Aboriginal communities*. Retrieved from www.ofifc.org/sites/default/files/docs/FASD%20Toolkit%20-%202008-01.pdf
- White Shield, R. (2012). *Gifts from the Sacred Circle: A Native traditional parenting curriculum for families affected by Fetal Alcohol Spectrum Disorder (FASD)*. Hazelton.
- Wau, S. X. (2008, April 30). *Reflections on healing, renewal, and living with vows* [Blog post]. Retrieved from www.sacredhorsewoman.blogspot.ca/2008_04_30_archive.html

Appendix 1: Participant Handouts

List of Participant Handouts

Consider giving participants copies the handouts that are relevant to the content you want to share in your workshop. You can put the handouts in a binder for each participant (Ininasin Journal). The handouts in this appendix include:

- Alcohol and Pregnancy
- My Four Top Strengths
- My One Change
- My Community Supports
- My Action Plan
- Resources and Services during Pregnancy and Parenting

Alcohol and Pregnancy

Pages 49 and 50 can be printed as a stand-alone document.

Pregnancy & alcohol

It is best not to drink any alcohol at any time during your pregnancy.



A woman is closest to the Creator when she is pregnant. It is when her medicine is most powerful. She sustains and nurtures life completely within her own body.

– Traditional Mohawk Teaching

Why is it important for a woman not to drink alcohol when she's pregnant?

We all want what's best for our children. Deciding not to drink when you're pregnant is best for you and your baby. Remember, no amount of alcohol is safe during pregnancy and there is no safe time to drink. Binge drinking and heavy drinking are especially harmful to the unborn baby.

Drinking alcohol when you are pregnant can cause permanent birth defects and brain injury to your unborn child. Your child will not outgrow the disability caused by drinking alcohol.

In traditional teachings, the partner is also pregnant and should not drink alcohol. The partner and family play an important role by asking how they can help and by supporting the pregnant woman to make healthy choices. If a partner drinks alcohol it may harm the baby in ways that are not fully known, but will not cause Fetal Alcohol Spectrum Disorder.

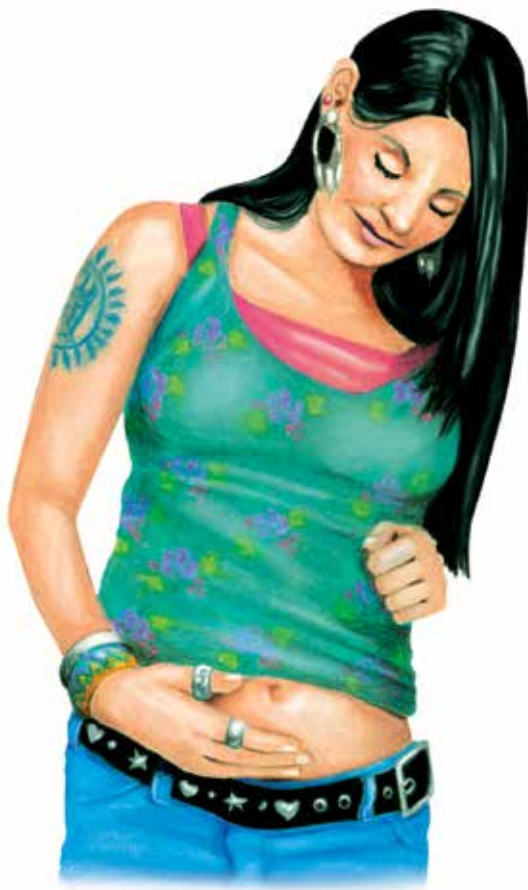
For many women, the support of partners, family and friends is all they need to not drink while pregnant. Sometimes though, it is difficult for a woman to stop. Even though she wants what's best for her unborn baby, it can be a struggle to avoid alcohol.

Remember: You aren't alone and there are places to go for help and support.

National Native Alcohol and Drug Abuse Program Treatment Centre Directory – Provides information on treatment centres that accept pregnant women.

www.hc-sc.gc.ca/fniah-spnia/substan/ads/nnadappnlaada_dir-eng.php





FASD – Fetal Alcohol Spectrum Disorder

This is the term used to describe the types of harm to the unborn baby caused by alcohol use in pregnancy. These disabilities will not disappear as the child grows.

They may include:

- difficulty learning and remembering
- difficulty thinking things through
- difficulty focussing on a task
- difficulty getting along with other people, including family members
- difficulty with hearing and with seeing
- problems with bone, arm, leg and finger growth
- slow growth overall
- damage to the heart, kidney and liver

With thanks to the LCBO for its support in developing and producing this brochure.

Contact:

- Ontario Federation of Indian Friendship Centres (toll-free 1-800-772-9291) They can refer you for local help and programs.
- The Ministry of Community and Social Services has listings for the Aboriginal Healing and Wellness Strategy programs, Aboriginal Health Access Centres and resources. www.mcscs.gov.on.ca/en/mcscs/programs/community/ahws/index.aspx
- Motherisk (toll-free 1-877-327-4636)
- Telehealth Ontario (toll-free 1-866-797-0000)
- Your doctor, local community health care provider, midwife or nurse
- Your local health unit

I want to stop but....

For more information visit:
www.alcoholfreepregnancy.ca

Are you worried about your baby, or about someone you know?

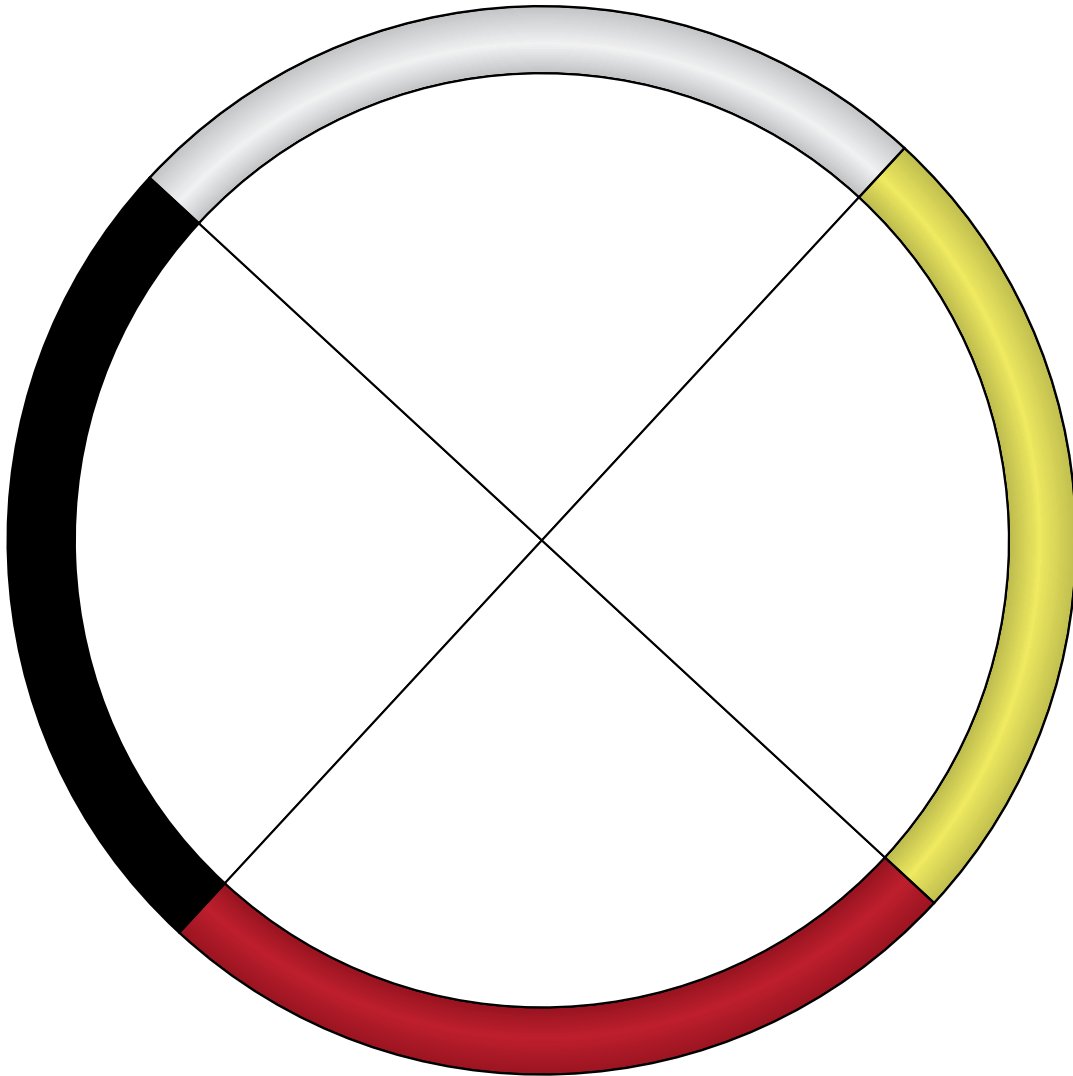


Do you want help to stop drinking?

**best start
meilleur départ**

by/par health **nexus** santé

My Four Top Strengths



Self-care activities I want to start using or want to use more often:

My One Change

The change I want to make is:

--

What are the benefits and problems of making or not making the change?

	I do not make the change	I make the change
Benefits (Pros)		
Problems (Cons)		

The reasons I want to make this change are:

--

The steps I could take in changing are:

--

What might get in the way of changing (barriers) and what I can do about it (solutions)?

Possible Barriers	Possible Solutions

Adapted from Centre for Addiction and Mental Health, My Change Plan, 2011

My Community Supports

Which friends and family will support me and how?

What services and supports are available to help me?

How can I be a support to others who are making changes?

My Plan

What were the 3 most interesting things I learned about FASD prevention and skills for change?

1. _____
2. _____
3. _____

Who can I share this information with?

1. _____
2. _____
3. _____

What can I do starting tomorrow?

1. _____
2. _____
3. _____

Resources and Services during Pregnancy and Parenting

Abuse

Assaulted Women's Help Line: A crisis line to help in 150 languages, 24 hours a day, 7 days a week. 1-866-863-0511 or www.awhl.org

Best Start Resource Centre: The *You and Your Baby* handout provides information on abuse and pregnancy. Available in English, Cree – N Dialect and Severn Ojibwe. www.en.beststart.org/for_parents

Safety Planning: To help keep you and your children safe if you are in an abusive relationship. www.phac-aspc.gc.ca/sfv-avf/info/ha-plan-eng.php

Alcohol

Best Start Resource Centre, www.en.beststart.org/for_parents

- **Aboriginal Pregnancy and Alcohol:** This brochure is for Aboriginal women on the topic of alcohol and pregnancy. It includes the effects of drinking, traditional teachings about pregnancy, and where to get help in Ontario.
- **Be Safe - Have an Alcohol Free Pregnancy:** The handout provides information and tips for expectant parents about alcohol use during pregnancy. Available in English, Cree and Ojibway.
- **Mocktails for Mom:** Recipes for delicious non-alcoholic drinks, also called Mocktails.

Canada's Low-Risk Alcohol Drinking Guidelines: If you choose to drink, these guidelines can help you decide when, where, why and how. www.ccsa.ca/Resource%20Library/2012-Canada-Low-Risk-Alcohol-Drinking-Guidelines-Poster-en.pdf

Ontario Drug & Alcohol Helpline: Information about services for drug and alcohol use. 1-800-565-8603 or www.drugandalcoholhelpline.ca

Health

Talk to your health care provider (doctor, midwife, nurse practitioner, etc.).

Health Care Options near You: Find health care services in your community. www.ontario.ca/locations/health/index.php?lang=en

Public Health: To help you find the nearest health unit and services offered in your community. 1-800-267-8097 or www.health.gov.on.ca/en/common/system/services/phu/locations.aspx

Telehealth Ontario: A free, confidential service you can call to get health advice or information 24 hours a day. 1-866-797-0000 or www.ontario.ca/page/get-medical-advice-telehealth-ontario

Mental Health

Mental Health Helpline: Help is available 24 hours, 7 days a week.
1-866-531-2600 or www.mentalhealthhelpline.ca

Parenting

Best Start Resource Centre: A variety of resources about parenting.
www.en.beststart.org/for_parents

Canadian Association of Family Resource Programs: Directory of family resource programs.
1-866-637-7226 or
www.parentsmatter.ca/index.cfm?fuseaction=Page.viewPage&pageId=602

Child and Family Programs: Information about services for young children and their families.
www.edu.gov.on.ca/childcare/FamilyPrograms.html

Pregnancy

Best Start Resource Centre: The *Beginning Journey First Nations Pregnancy Resource* provides information on healthy pregnancies.
www.en.beststart.org/for_parents

Motherisk: Information about medications, alcohol or other substances during pregnancy.
416-813-6780; 1-877-439-2744 or www.motherisk.org

Local Services

Ontario Federation of Indigenous Friendships Centres: Find services near you and programs for you.
1-800-722-9291 or www.ofifc.org

211 Ontario: To help you find programs and services in your area.
211 or www.211ontario.ca

Find out about your local resources and write them down in the space below for quick reference:

Appendix 2: Participant Forms

List of Forms

This appendix includes the following forms that you can consider using or adapting for your workshops:

- Confidentiality Agreement Form
- Participant Feedback Form

Confidentiality Agreement Form

I, _____ agree that I will keep confidential the personal information of other group participants taking part in the workshop.

Personal information refers to information that may be used to identify of another group member such as the name of a group member, the name of a family member, home address, phone number, or personal stories/situations.

I understand that private information of others and personal stories/situations shared in the group must remain private.

I also understand that once the workshop(s) has been completed, I must continue to abide by the confidentiality agreement.

I understand that if I breach this agreement I may be asked to leave the group.

By signing this document, I agree to this confidentiality agreement.

Printed Name of Group Member

Signature of Group Member

Date

Participant Feedback Form

Please fill out and hand back to the facilitator at the end of the day

Facilitators Name: _____ Date of Workshop: _____

Did this session provide you with useful information?

- ☐ A great deal
- ☐ Somewhat
- ☐ A little
- ☐ Not at all

What did you gain from this session (check all that apply)?

- ☐ Greater awareness of the topic
- ☐ Resources/services available
- ☐ New skills and knowledge
- ☐ Tips and tools
- ☐ Nothing

Was the facilitator(s) engaging?

- ☐ A great deal
- ☐ Somewhat
- ☐ A little
- ☐ Not at all

What did you like about this session?

- ☐ Handouts/materials
- ☐ Sharing/exchange of info and ideas
- ☐ Group activities
- ☐ Traditional teachings
- ☐ Atmosphere/Space

Other: _____

What do you think should be changed in this workshop?

Overall, after today's session I feel (please choose one):

- ☐ Energized
- ☐ Good
- ☐ Confused
- ☐ Bored
- ☐ Disappointed

Other comments about the workshop:



by/par health **nexus** santé

**Best Start: Ontario's Maternal, Newborn and
Early Child Development Resource Centre**
www.healthnexus.ca | www.beststart.org

2016