

Fetal Alcohol Spectrum Disorder Ontario Network of Expertise (FASD ONE) is a volunteer collaborative of practitioners, specialists and caregivers committed to the prevention of Fetal Alcohol Spectrum Disorder and the development and dissemination of information that will support individuals and their families affected by FASD.

FASD ONE believes Ontario has the capacity to meet many of the needs of those living with FASD and to reduce the use of alcohol during pregnancy. We are advancing a strategy that focuses on the protective and risk factors so the existing system of care has information that will allow it to deliver effective programs.

Check our website for:

- ☐ Education and training opportunities
- ☐ List of communities with diagnostic capacity
- ☐ Current FASD & Education tools, reports and resources
- ☐ Reports on *Effective Service Provider Practices and Effective Respite Practices*
- ☐ Archived newsletters
- ☐ List of provincial coalitions and networks
- ☐ List of provincial parent support groups
- ☐ Listserv for members to exchange information
- ☐ FASD ONE award program
- ☐ FASD ONE province-wide framework



www.fasdontario.ca

FASD describes a range of disabilities that result from exposure to alcohol during pregnancy.

VISION:

Our vision is a province in which FASD is prevented, and where individuals living with FASD have the opportunity to lead full and productive lives as valued and contributing members of their communities.

OBJECTIVES:

1. Promote the prevention of alcohol use in pregnancy and FASD.
2. Advance the implementation of an integrated, evidence-informed system that offers accessible services and life-long supports for people affected by FASD.

CONTACT INFORMATION

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Fetal Alcohol Spectrum Disorder
Ontario Network of Expertise

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DRIVING PROGRESS ON FASD



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FASD ONE collaborates to build awareness and provide resources to help support Ontarians in effective FASD prevention and best practices.



FASD ONE is comprised of seven action groups:

Diagnosis

FASD is estimated to affect 2-5% of people in western countries.¹ This means that there may be over 300,000 living in Canada today with FASD.²

¹ Developmental Disabilities Research Reviews

² Public Health Agency of Canada

Diagnosis is the first step in determining the impact of prenatal alcohol exposure and helps determine appropriate interventions and supports.



Education

The Education Action Group focuses on building capacity within the education system through collaboration with families and the community to respond appropriately to the diverse needs of students living with FASD. Thousands of Ontario students have FASD. Educators often react to their behaviour and learning challenges without the understanding that the students

have an organic, brain-based, physical disability. Frustration, anxiety, reactive behaviours and school drop-out may result. Students with FASD will be more successful if educators change their practice to brain-based, FASD-focused strategies supporting their unique needs.



Prevention

Everyone requires accurate information regarding the risks of alcohol use during pregnancy and access to services they require in order to reduce or abstain from alcohol use in pregnancy.

- Approximately 1/2 of all pregnancies are unintended (SOGC 2010)
- 77% of Ontario women drink alcohol (CAMH 2016)

If a woman is pregnant or planning a pregnancy, it is safest not to drink any alcohol. No safe time. No safe amount. No safe kind.

Justice

FASD is an invisible brain-based disability – a disability that impairs thinking. Individuals are at increased risk of involvement with the justice system as victims and perpetrators of crime.

No one tracks how often they are victimized but research shows:

- Individuals with FASD cycle through the justice system without receiving adequate accommodation for their disability
- Youth with FASD are 19 times more likely to be incarcerated than non-affected peers and there are high rates of false confessions
- The rates of FASD in the adult federal system may be as high as 30%
- Treating those with FASD as bad or willfully non-compliant handcuffs us to a cycle of counterproductive, expensive, and ineffective responses diverting resources from prevention programs.

Indigenous

Indigenous heritage brings unique opportunities to addressing the needs of individuals with FASD.

Culturally-based strategies can ensure programs and services reflect strengths within the community.

Communication

People affected by FASD or working in the FASD field often feel isolated. It's important for individuals to learn about FASD issues and the events and resources available to them in their local communities.

Websites, listservs and newsletters provide vital links so individuals, groups and organizations interested in FASD feel connected.

Intervention and Support

Individuals and families affected by FASD who are not supported appropriately are at risk of experiencing secondary disabilities or disorders. Complications include school disruption, mental health problems, addiction, homelessness, unemployment and a disproportionate involvement with child welfare and the justice system.

(Streissguth et. al. 1996 and the American Academy of Pediatrics)

