

FETAL ALCOHOL SPECTRUM DISORDER (FASD): A NOVA SCOTIA PERSPECTIVE

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What is FASD?

- FASD describes the range of harms that can result from prenatal alcohol exposure; leading to lifelong problems with attention, memory, reasoning and judgment.
- FASD is a significant public health and social issue in Nova Scotia.
- FASD is often found in combination with a range of other health and

social problems faced by pregnant women.

- FASD affects 1 out of every 100 children.
- Total annual costs of FASD for Nova Scotia: \$64,351,034 (2006).*

Who We Are:

The FASD Intergovernmental Exchange Group (formed in 2008) is comprised of members from Provincial Government Departments including: Health & Wellness, Education, Justice, and Community Services; Federal partners: Public Health Agency of Canada (PHAC), Health Canada - First Nations & Inuit Health Branch (FNIHB), as well as community and district-level representatives.

Our Purpose:

To support the coordination and exchange of FASD expertise, knowledge and best practices at the local, provincial, regional and national levels across the continuum (*e.g., prevention, diagnosis, treatment, support, intervention, education, & training*) and across government departments to improve the health and well being of Nova Scotia women, children and families.

Our Objectives:

- To provide leadership related to FASD knowledge exchange.

- To facilitate linkages and connections (provincially, regionally, nationally, and internationally).
- To build the knowledge and skills of group members to be leaders for FASD in their organizations and networks.
- To support the coordination of those working to address FASD.
- To inform government policy, programs and services related to FASD.



OUR FOCUS:

Based on consensus, our priorities are:

- ◆ **Partnership and Community Engagement**
- ◆ **Communication and Knowledge Exchange**
- ◆ **Education**
- ◆ **Policy**

Our Connections:

- **Provincial Level:** four government departments, district health authorities, school boards, and family resource centers.
- **Atlantic Level:** membership of the group is also represented on an Atlantic Intergovernmental FASD Partnership.
- **Federal Level:** PHAC (national FASD lead), Health Canada, FNIHB.
- **International Level:** access to research through international conferences, consultation and participation in national initiatives and international conferences.



FASD

A NOVA SCOTIA PERSPECTIVE

By viewing this video the audience will:

- Have had an opportunity to learn more about FASD.
- Gain a better understanding of the range of harms from prenatal alcohol exposure.
- Gain a better understanding of the impact of FASD on the individual, the family and Nova Scotia as a whole.
- Engage in networking dialogue to support the capacity to produce action and collaboration between government and community in addressing FASD related harms (using proven practices).
- Gain insight into the complexity of the social and health environments in which



women live.

- Gain perspective from various stakeholders.

FASD Discussion Points:

- There is a substantial alcohol problem in Nova Scotia presenting a significant Public Health concern and social issue.
- An estimated 9300 people in NS are living with FASD.*
- The prevalence rate of FASD is 1 in 100 which is on par with autism prevalence.
- The NS Alcohol Strategy (2007) identifies that a cultural shift needs to result in FASD being viewed as a community responsibility.
- Nova Scotia's Mental Health and Addictions Strategy, *Together We Can*, suggests using sex, gender and diversity as lenses through which we develop better services and care.
- Drinking among women and girls is increasing. 19% of women who drink engage in heavy monthly drinking. 26% of women age 18-24 who drink, engage in heavy drinking**.
- There is a need to address why women drink, not simply the drinking.
- Women are especially vulnerable to alcohol's harmful physical and social effects: The same amount of alcohol leads to greater blood alcohol concentrations in women compared to men.
- Women face greater stigma and barriers to service when they seek help for alcohol use, particularly when pregnant.
- There is a societal cost of 160 million per year in Atlantic Canada. The average lifetime cost (0-65 years) of FAS per individual is over \$535,000

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Video's message endorsed by: N.S. FASD Intergovernmental Exchange Group membership .

References/resources:

*Forward, Together: Addressing Fetal Alcohol Spectrum Disorder (FASD) in Atlantic Canada – Gary Roberts and Associates

http://www.phac-aspc.gc.ca/canada/regions/atlantic/Publications/FASD_Atl_Canada_07-08/index-eng.php

**Canada's Low-Risk Alcohol Drinking Guidelines- Canadian Centre on Substance Abuse

<http://www.ccsa.ca/eng/priorities/alcohol/canada-low-risk-alcohol-drinking-guidelines/pages/default.aspx>

Fetal Alcohol Spectrum Disorder (FASD) Prevention: Canadian Perspectives – Public Health Agency of Canada

<http://www.phac-aspc.gc.ca/hp-ps/dca-dea/prog-ini/fasd-etcaf/publications/cp-pc/index-eng.php>