

**Event #28 - FASD prevention and public policy**  
**CAPE CoP Roundtable**  
September 19, 2024

## Event Summary

### Facilitators

- Lindsay Wolfson, Research Manager, Centre of Excellence for Women's Health
- Audrey McFarlane, Executive Director, CanFASD Research Network
- Nancy Poole, Prevention Lead, CanFASD Research Network and Director Centre of Excellence for Women's Health

### Presentation slides

[https://www.uvic.ca/research/centres/cisur/assets/docs/cape/20240919\\_fasdprevention\\_slides\\_combined.pdf](https://www.uvic.ca/research/centres/cisur/assets/docs/cape/20240919_fasdprevention_slides_combined.pdf)

- Four-part model of FASD prevention. Importance of having synchronization of all levels, today will focus on essential nature of supportive alcohol policy in FASD prevention.
- Alcohol distributors have a social responsibility mandate. Approaches vary across provinces and territories.

### Resources shared during session

- CanFASD [prevention resources](#), [campaign tools](#) and [online training](#)
- Prevention of Fetal Alcohol Spectrum Disorder (FASD): A multi-level model: <https://canfasd.ca/wp-content/uploads/publications/PREVENTION-of-Fetal-Alcohol-Spectrum-Disorder-FASD-A-multi-level-model.pdf>
- Genetic and Epigenetic Perspectives on the Role of Fathers in Fetal Alcohol Spectrum Disorder <https://canfasd.ca/wp-content/uploads/publications/Fathers-Role-1-Issue-Paper-Final.pdf>
- The Role of Partners in Fetal Alcohol Spectrum Disorder Prevention <https://canfasd.ca/wp-content/uploads/publications/the-role-of-partners-in-fetal-alcohol-spectrum-disorder-prevention.pdf>
- FASD Prevention : An Annotated Bibliography of Articles Published in 2023: <https://cewh.ca/wp-content/uploads/2024/08/FASD-Prevention-Annotated-Bibliography-2023.pdf>
- Supportive alcohol policy as a key element of fetal alcohol spectrum disorder prevention (Wolfson and Poole, 2023, Women's Health): <https://doi.org/10.1177/17455057231151838>
- Towards Healthy Outcomes: A Framework for Integrated Community Intervention (Pei et al., 2024): <https://canfasd.ca/wp-content/uploads/publications/Towards-Healthy-Outcomes-2.0.pdf>
- Sex, Gender and Alcohol: What Matters for Women in Low-Risk Drinking Guidelines? <https://www.ccsa.ca/sites/default/files/2022-08/CCSA-LRDG-Sex-Gender-and-Alcohol-what-matters-for-Women-in-LRDGs-en.pdf>
- "Let's Get Real" about alcohol and sex campaign, Adolescent Prevention Conversation (Alberta): <https://getrealab.ca/educators/>
- "This is Why" campaign, Saskatchewan Prevention Institute: <https://thevillagesk.ca/>
- Alcohol use in pregnancy, resources for health care providers (BC Centre on Substance Use): <https://helpwithdrinking.ca/healthcare-providers/alcohol-use-in-pregnancy/>
- Alcohol and Pregnancy: Warning Signage Information Kit for Local Governments in British Columbia (2014): [https://cewh.ca/wp-content/uploads/2014/09/FASD\\_WarningSignageInfoKit\\_Booklet\\_web.pdf](https://cewh.ca/wp-content/uploads/2014/09/FASD_WarningSignageInfoKit_Booklet_web.pdf)
- Drymester campaign (Manchester, UK): <https://www.drymester.org.uk/wp-content/uploads/2023/01/Digital-Campaign-to-Increase-Awareness-of-Alcohol-Exposed-Pregnancy.pdf>
- Provincial Alcohol Action Plan: Reducing Harms and Costs in Newfoundland and Labrador: <https://www.gov.nl.ca/hcs/files/ProvincialAlcoholActionPlan.pdf>
- 7th European FASD Alliance conference: <https://eufasd2024.com/>

## Discussion summary

**Question:** What is being done to educate men about their role in preventing prenatal alcohol exposure and FASD?

**Response:**

- Role of partners in FASD prevention gaining traction, still early phases of direct campaigns targeting partners.
- Push for preconception care to include partners.
- Examples in Canada of campaigns include “This is Why” (Saskatchewan Prevention Institute) and section of [Dry 9](#) (Alberta Gaming, Liquor and Cannabis).
- Need to ensure support for women to have alcohol-free experiences, messages supportive not coercive
- Men’s contribution to fetal impacts and later child health (e.g. epigenetic impact from men’s use) is not an easy public health message to convey. Most messages to date focus on how men can support women to not drink during pregnancy, need to raise awareness among men about alcohol effect on fertility, epigenetics, and being an engaged father. Important role of partners in creating post-birth equity and health.
- Canadian Centre on Substance Use and Addiction (CCSA) education piece in development connected to [Guidance on Alcohol and Health](#) that looks at what matters when planning a pregnancy, during pregnancy and post-birth, broken down by roles, based on research about sex-specific impacts of alcohol use.
- Alberta’s “[Let’s Get Real](#)” program of the FASD network talks to youth of all genders about risks of alcohol and pregnancy. Starting to talk about these issues early can influence behaviours.

**Question:** What policy and practices can municipalities strengthen to help bring awareness for FASD?

**Response:**

- Cities and towns proclaiming FASD awareness day as part of their activities.
- Municipalities can identify opportunities to work with agencies and service providers who intersect with people with FASD who may not be doing well, experiencing substance use or criminal activity. Strategies tend to be siloed, need to recognize folks may experience difficulty navigating services and systems.
- Municipalities can bring training and communication to these areas/services.
- Example: CanFASD prior work with BC municipalities about how to engage with local campaigns.
- Municipalities connecting with people and agencies working with women and supporting people with FASD to identify what might work. For example, is warning signage important? (e.g. bus signage, sexual health clinics etc). It takes some creativity to avoid further stigmatization and to promote more discussion, linking it to substance use, mental health concerns, part of the complex situation.
- Example of municipal-level campaign in Manchester, United Kingdom: [Drymester](#) - key message “no safe time, no safe amount”. Campaign linked to pre-conception care and raised public and professional awareness about FASD, screening and antenatal brief interventions, created support groups, sought to understand prevalence of FASD in Manchester, offered services choices, comprehensive collaborative policy initiative.

**Question:** When local data on FASD limited/challenging to collect, what can be used to drive priority for health unit?

**Response:**

- Obtaining data on FASD is very challenging. Not currently enough diagnostic capacity for surveillance across Canada. Prevalence studies are costly and require a very large population. Approach is to talk to all women.
- 4% of the population is best current estimate nationally and internationally. 4% is more than it sounds. Prevalence indicates needs for FASD to be addressed at public health level.
- There are lots of opportunities for brief conversations and connecting people to support.
- Training public health and community partners. CanFASD offers online training tailored to various needs.
- Ideally, we get to a situation where awareness of FASD is high enough that the conversation about alcohol use doesn’t feel problematic for health service providers.



- Unlikely to have accurate prevalence data until we can break down stigma and the barrier of providers not asking/not wanting to have the conversation due to concern that women will disengage. There is fear about losing custody of children if they disclose alcohol use and not getting the support they need to reduce use.
- This is a stigmatized and marginalized topic. Need for universal screening (talk to all women) rather than 'who we think is at risk'.
- Biases impact the data. Studies from Canada and the US that show women of color are disproportionately screened for FASD while white women are not. That affects how duty to report plays out and hesitancy to have uncomfortable conversations. Talking with all women can lead to better data.
- The "[Women want to know](#)" campaign in Australia educated medical professionals about the effects of alcohol consumption during pregnancy and encouraged them to relay this information to their patients. Based on study that found women want providers to engage in this conversation and see health care providers as a trusted source of information.

**Question:** When it comes to alcohol policies across many domains, are there trade-offs that need to be navigated? How to balance tension between FASD being seen as a specific area versus a whole of population approach?

**Response:**

- Want to avoid women bearing the weight of public health messaging, while at same time bring more attention to women's alcohol use.
- Potential to be collaborating on alcohol policy areas such as labelling of alcohol containers (e.g. cancer labels, pregnancy labels). Solidarity across alcohol policy efforts.
- Labels on containers raise awareness and also need point of sale warning signs. Sandy's law in Ontario – hoping for update to imagery to be more representative of diversity.
- Perhaps CAPE could add to their assessment rubric/report card which provinces and territories have strategies for raising awareness of FASD. For example, FASD is included in [Newfoundland and Labrador's Alcohol Plan](#). Other provinces and territories have specific strategies for FASD.
- Including specific messages, more women are drinking than historically, think about how alcohol is being marketing and addressing 'wine mum' culture strategy to counter strategy.

**Question:** What key points would you suggest including in presentations about FASD prevention to indigenous youth by community members and elders?

**Response:**

- Consider approaches that incorporate art, storytelling, photovoice, walks - where the conversation about FASD prevention is part of an overall health conversation (might also include consent, healthy relationships).
- One example, "Friends help friends" (British Columbia Aboriginal Network on Disability Society) in which community created posters. Other communities taking inspiration from these positive, supportive approaches.

FASD prevention monthly network meetings are open to all working in research, practice, policy and people with lived and living experience. To get involved, email [lindsay.wolfson@gmail.com](mailto:lindsay.wolfson@gmail.com)

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