

Coalescing on FASD Prevention from a Women's Health Determinants Perspective

Amy Salmon, Nancy Poole, Kristy Hoyak, Lorraine Greaves and participants in the

Network Action Team on FASD Prevention from a Women's Health Determinants Perspective, Canada Northwest FASD Research Network

Network Action Team

In fall 2006, the BC Centre of Excellence on Women's Health (BCEWH) was selected by the Canada Northwest FASD Research Network to lead a Network Action Team (NAT) focusing on women's health issues in the prevention of FASD. This is one of 5 NATs sponsored by the Canada Northwest FASD Research Network to build FASD research capacity across Western Canada and the Territories. See (www.fasdnetwork.ca).

The goal of the NAT on FASD Prevention from a Women's Health Determinants Perspective is designed to build the knowledge base in FASD prevention through work with women and their support systems on a range of health and social issues, and to bring this knowledge into research, prevention, treatment, policy and community settings.

Our Team's Objectives

- ❖ **To build a network of researchers** dedicated to FASD prevention in the northern territories and western provinces in Canada
- ❖ **To conduct research** examining how social determinants of health shape women's substance use during pregnancy and inform FASD prevention efforts
- ❖ **To incorporate gender-based analysis and traditional knowledge** into FASD prevention efforts, addictions treatment, mental health supports, maternity care and harm reduction services for pregnant women and mothers
- ❖ **To identify, evaluate and promote Better Practices** in FASD prevention
- ❖ **To develop and maintain effective knowledge translation strategies** amongst researchers, policy makers, clinicians, service providers and community partners
- ❖ **To enhance capacity** among community partners in rural and Northern regions and in First Nations, Inuit, and Aboriginal organizations to participate in research activities.

Our Virtual Community

- ❖ The NAT has been successful in bringing researchers and research collaborators together across distance using a virtual "community of practice" model.
- ❖ Virtual communities bring interested people together to discuss a common topic and share what each other knows. In this way, virtual communities build relationships and reciprocity; support exchange of knowledge, wisdom and experience; and facilitate ongoing collaboration and action.
- ❖ NAT participants meet monthly in webmeetings and use a virtual workspace to post and share ideas, documents and weblinks.
- ❖ Face-to-face meetings of the Network Action Team are critical to facilitating the trust, mutuality and reciprocity on which the virtual community depends.

I have enjoyed networking with practitioners from across the country with a broad base of experience and expertise. The blend of academic and front line service providers focused on commonalities in our work as well as promoting practice approaches. NAT Participant

Who Is Involved

Over the past year the NAT has been building a network of researchers, service providers and policy advisors from each of the 7 jurisdictions of the Canada Northwest FASD Partnership. Individuals and representatives from a variety of organizations and institutions are involved (Table 1). Our membership base continues to expand, and we welcome new participants.



NAT members present at the face-to-face meeting held in Vancouver on August 23 and 24, 2007

What We Do

❖ What do we mean by a "Women's Health Determinants Perspective"? FASD is a health issue that impacts women, their children, their families, and their communities. Social determinants of health, particularly those most related to maternal poverty and other forms of disadvantage, have been closely linked to both risks and protective factors for having a child affected by FASD. Social determinants of health include income and social status; social support networks; education and literacy; employment/working conditions; social environments; physical environments; personal health practices and coping skills; healthy child development; health services; gender; and culture (Public Health Agency of Canada). The barriers pregnant and parenting women experience to accessing services are also linked to broad determinants of health and inequities faced by women. Acting on the factors that increase or reduce women's risks for developing substance use problems and having a child with FASD requires broad based, collaborative action among women, service providers, policy makers, and researchers working across the full range of health determinants

- ❖ Synthesizing what we already know about women's health, FASD prevention, and barriers to care
- The Network Action Team developed an short, plain-language summary of research that documents the barriers to access to support faced by pregnant women and mothers with substance use problems. We incorporated these findings with issues identified by front-line service providers and policy makers to identify recommendations for improving women's access to services. This document describes:
- ❖ **System-level barriers** that make it difficult to develop and link comprehensive programs for health care, addictions treatment, harm reduction, housing, nutritional supports, transportation, child care, and other supports for women;
 - ❖ **Program-level barriers**, such as organizational policies and practices, that make it difficult for women to access and coordinate care in their communities;
 - ❖ **Personal and social barriers**, such as negative societal attitudes and depression, that affect women's ability to identify and benefit from prevention and support services

Table 1: Collaborators in the FASD Network Action Team

Alberta	Alberta Alcohol and Drug Abuse Commission
	The Aurora Centre, BC Women's Hospital
	BC Association of Pregnancy Outreach Programs
	Dawson Creek Aboriginal Family Resource Society
	Fir Square Combined Unit, BC Women's Hospital
	Intertribal Health Authority
British Columbia	Sheway
	University of British Columbia
	University of Victoria
	Vancouver Island Health Authority
	Women Abuse Response Program, BC Women's Hospital
	Centre For Aboriginal Health Research
Manitoba	Healthy Child Manitoba
	Interagency FASD program
	University of Manitoba
Northwest Territories	Arctic Health Research Network
	Centre for Northern Families
	Government of the Northwest Territories
Saskatchewan	Stanton Territorial Health Authority
	Saskatoon Health Region
Yukon Territory	University of Saskatchewan
	Yukon Alcohol and Drug Services
	Yukon Health and Social Services
National	Yukon Women's Directorate
	Pauktuittit Inuit Women of Canada

- ❖ Mapping services related to FASD prevention
- Current responses to FASD prevention often fail to integrate support for women on addictions, prenatal care, housing and violence issues. The NAT is working with health planners, service providers, and policy makers to understand how we might adjust and expand services to provide seamless, comprehensive care both in one-stop services and through strategies that link and improve care across health and social systems.
- ❖ Development of funding applications and research program
- Members of our NAT have submitted successful funding proposals to the Victoria Foundation, the Canadian Institutes for Health Research, and other sources. We are continuing to evolve a research program that will respond to the most immediate concerns and priorities of diverse communities working with women to prevent FASD.



Our Research Themes

- ❖ **Identification and evaluation of novel strategies for knowledge translation on women-centred approaches to FASD prevention**
- ❖ **goal** of this team is to work with service providers, community partners and decision makers to identify and implement tailored strategies for sharing and expanding our knowledge about FASD prevention from a women's health determinants perspective; and to evaluate these strategies.
- ❖ **Barriers and access to care and treatment for women with addictions**
- ❖ **goal** of this team is to investigate determinants of health, barriers, access to care and treatment for pregnant women and mothers with addictions, and identify how action on these determinants can inform FASD prevention efforts.
- ❖ **Identification and evaluation of good practice in FASD prevention and supporting women's wellness**
- ❖ **goal** of this team is to develop relevant evaluation frameworks and conduct cross-site evaluation research to identify good practice in FASD prevention.
- ❖ **Examining conceptual and measurement issues in social determinants women's health and FASD prevention**
- ❖ **goal** of this team is to address conceptual and methodological issues related to social determinants of women's health and indicator development in the areas of substance use, addiction, mental health, PTSD, colonization, and FASD prevention.

Conclusions

The Canada Northwest FASD Research Network Action Team on FASD Prevention from a Women's Health Determinants Perspective has been successful in building inter-jurisdictional linkages between researchers, clinicians, service providers, community partners and health planners working on FASD prevention issues in the four western provinces and three northern territories. Together, members share, synthesize and translate knowledge about the interwoven domains of women's substance use/addictions, reproductive care, health promotion, service delivery and FASD prevention. Networking, research collaboration and knowledge exchange are facilitated by a virtual community of practice.

The need to expand upon our knowledge about the relationships between women's health and FASD prevention is critical. Our Team is taking an innovative approach to knowledge exchange, synthesis, and translation to address this need.

References

Hoyak, K., Poole, N., Salmon, A., & Network Action Team on FASD Prevention - Canada Northwest FASD Research Network. (2007). *Barriers to accessing support for pregnant women and mothers with substance use problems - Information Sheet*. Vancouver, BC: British Columbia Centre of Excellence for Women's Health, *Coalescing on Women and Substance Use: Linking Research, Practice and Policy Information Project*. See www.fasdnetwork.ca

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