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PCAP Annual General Meeting

This years Alberta PCAP Annual General Meeting took place on June 20th, 2017 at the St. John's Institute in Edmonton. In addition to the business meeting portion, attendees took part in an all day training session presented by Alana Peters. The "Intro to Coaching" training taught participants by engaging in partner exercises that refined the practice of Coaching. The practice of Coaching involved facilitating a conversation between a coach and a coachee in a meaningful way that allows the participants freedom to realize answers to their questions on their own, rather than being told what is the right choice. A structured set of questions that move from engaging, to enlightening, to empowering guide the conversation. Participants practiced techniques on one another and broke off into groups to brain storm new questions to add to each category. Attendees found the session to be useful and will integrate coaching practices into their future work.

Thank you to Alana for conducting the workshop and to all who participated!



Welcome!

Welcome, Brandy Berry!

The PCAP Council is excited to introduce our newest member, Brandy Berry! Brandy will be taking on the role as Banker for the PCAP Council. She comes to us from Healthy Families Healthy Futures where she has been for almost 10 years in various positions, and is now the Executive Director. Brandy is originally from Westlock and alongside her work will be completing her Bachelor of Social Work from the University of Calgary next year. Social work has been her passion for quite some time. She completed a social work practicum in Peru, working with orphans with disabilities.

Alongside her role at Healthy Families Healthy Futures, with the PCAP Council, and continuing her education, Brandy is also a mother to two teenage daughters, enjoys the outdoors with activities like hiking, kayaking and photographing her adventures. Thank you and welcome!

PCAP Trainings

ASI Training

The PCAP Addiction Severity Index (ASI) Training took place from June 28 to 29 at the St. John's Institute in Edmonton. Dedicated ASI trainer Ron Jackson joined us from Seattle, Washington to conduct the training. The ASI training covers the ASI intake interview in detail and covers all aspects of the intake procedure such as coding, how to refer to the ASI manual, and how to ask questions in an appropriate manner.

Congratulations to the 6 participants who completed their ASI training!

Core Training

The PCAP 3-Day Core Training is an essential training to introduce new staff to the PCAP Model and provide strategies for challenges you may face in the role as a PCAP Mentor. Our Alberta PCAP Trainers have been trained by Dr. Therese Grant from the University of Washington, founder of the PCAP Model. Trainers deliver the content in an interactive and engaging way, providing stories from personal experience in PCAP and related programs. Participants receive a PCAP Training Manual, the Difference Game card deck, and handouts of information and resources.

At this time, dates for upcoming trainings have not been set. If you would like to express interest in a future ASI or Core training and be notified in advance, please email main@alberta-pcap.ca!

PCAP Around the Province: FASD Awareness Day

Fetal Alcohol Spectrum Disorder (FASD) Awareness Day takes place annually on September 9th. Beginning in 1999, it is an international recognized day created to raise awareness. This year, events took place around the province including events hosted by PCAP programs. Thank you to all who participated in spreading awareness and for sharing your day's events!



The team at **Catholic Social Services** in Edmonton put on a fun game of Jeopardy! The Jeopardy categories included: Youth and Alcohol, FASD, Daily Challenges, Strategies, and Interesting Facts. It came down to a suspenseful close game in final Jeopardy! The CSS team has been creative in its events in the past, last year the group competed in a FASD themed "Who Wants to be a Millionaire" and plan to continue with the game theme for future awareness days.

Camrose Association for Community Living participated with Prairie Central FASD Association, McMan, and The Open Door to an event to gather partners in the area for a walk around Mirror Lake in Camrose, and then to watch programming bringing awareness to FASD. Later, the group gathered for refreshments at the Bill Fowler Centre.



Northwest Central FASD Network connected with the local high school in Edson for Edson FASD Day. They put up an information table and served mocktails to 100 students! They had 50 good conversations about FASD with students, 5 with teachers and 5 with other service providers.



The Hinton Friendship Centre set up a FASD Awareness booth at the Hinton Registration with great success. They served over 450 mocktails while having prevention conversations with any who entered, this was a mix of parents, students, teachers, and service providers from Parent Link, Victim's Services, HIV West Yellowhead, other local non profits.



Lakeland FASD Centre for FASD was busy hosting events across many towns for FASD awareness. These events included community BBQs with information displays and prizes in Bonnyville, St. Paul, and Lac la Biche. They also coordinated free breakfast or lunch with FASD presentations in Buffalo Lake and Kikino Metis Settlements and Kehewin First Nations.

The team also took on larger activities such as sending letters to Mayors, Council Chairs, Chiefs, and Reeves to proclaim FASD day, a live public service announcement on local radio, and new advertising on busses. The local office in Cold Lake also live-streamed a Team Mocktail Challenge on their Facebook page!



FASD Awareness Day, con't



On the morning of September 9th, bells at Edmonton and area churches rang to bring awareness to FASD. Bells rang for a full minute at 9:09am.

Retrieved from: www.tinyurl.com/ycdllhwr

FASD Awareness Day was celebrated across Canada as well with the Rocking Red for FASD initiative, hosted by **Red Shoes Rock Stop FASD**. Participants wore red to start conversations and raise awareness. Check out their Facebook page! @redshoesrock



For FASD Awareness Day, the **Canadian FASD Research Network** developed a new infographic regarding FASD and how to approach the conversation of alcohol use during pregnancy.

For more information and to download the full infographic, visit: www.tinyurl.com/yco8zusn



Message from the Minister of Health - International Fetal Alcohol Spectrum Disorder Awareness Day 2017

"Many factors can contribute to FASD, and there is no single solution to preventing it. That is why the Government of Canada is partnering with provincial and territorial governments, communities, Indigenous organizations and experts to support a variety of education and prevention initiatives.

For example, we are funding five projects that focus on developing knowledge and skills among health professionals on how to screen, counsel and discuss alcohol use with girls and women. The goal of these projects is to help prevent alcohol use during pregnancy and to promote behaviours that set the conditions for lifelong health. We are also supporting the Kids' Brain Health Network to provide health care professionals, policy makers, caregivers and families with tools and information to promote earlier diagnosis, better treatment and optimal outcomes for children with neurodevelopmental disorders, including FASD.

In order to increase awareness of FASD among First Nations and Inuit communities, as well as educate front-line workers, our government is also developing culturally appropriate prevention and intervention programs that educate and raise awareness about the impacts of FASD. We are also exploring opportunities to advance the Truth and Reconciliation Calls to Action #33 and #34 related to FASD by working in collaboration with Indigenous people to implement preventive programs that can be delivered in a culturally appropriate manner.

By working together, we can encourage healthy pregnancies and support those living with FASD. This month, learn more about FASD prevention and join the conversation on social media by using the hashtag #FASD.

Ginette Petitpas Taylor
Minister of Health

To read the full statement, visit: www.tinyurl.com/ybna2a9e

Messy Parenting 101 by Alana Peters

Parenting, at the best of times, is a challenge. Parenting a child who has special needs adds another layer to the expectations we have for ourselves and the message that others around us may be conveying. The reality of how photoshopped and edited our world is, can add a layer of pain to an already difficult situation.



The other day I was in a second hand store where there were many people milling about, browsing and finding treasures. The steady drone of people noise was suddenly punctuated with the shrill, harsh and intense cries of a young child in distress. The cries, as cries do, pierced every person in that store with its intensity. It seemed to go on forever... for everyone.

As I continued to look for the second hand treasure I hoped to find, it became apparent that the child had some special needs.

As the cries continued, it appeared that the rest of people in the store had polarized reactions to the situation ranging from judgement to compassion. The flow of both positive and negative energy was palpable.

People who expressed judgement looked at each other, huffed and even engaged with strangers about what what the care-giver ought to do. Eye rolling and grimacing were expressions that were visible to everyone else including the care giver. Their response to the pain of the situation said, "Not on my watch."

Then there were people whose face expressed a different kind of pain; there was a gentleness about their expression. It seemed to say "That's hard. I've felt that struggle before and it's not easy." They stepped into empathy. They took the perspective of the people in struggle and they stayed out of judgement.

"When we know our own darkness well enough, we can be present with the darkness of others. Compassion becomes real when we recognize our shared humanity." Pema Chodron.

The care-giver managed herself remarkably well. I know, from my own parenting experience, that there have been times when my kids were acting less than Pinterest worthy and found myself looking to see if there was disapproval around me. This woman courageously stayed focused on the needs of the child and didn't appear flustered, even in the space of judgement. I was in awe. This was hard. This takes work.

As I walked out of the store, the Theodore Roosevelt quote that's become so special to me, came to the front of my mind:

"It's not the critic who counts; not the man who points out how the strong man stumbles, or where the doer of deeds could have done them better. The credit belongs to the man who is actually in the arena, whose face is marred by dust and sweat and blood; who strives valiantly; who errs, who comes short again and again, because there is no effort without error nor shortcoming; but who does actually strive to do the deeds...."

It's **not** the critic who counts.

**Which voice will you choose to share today?
Which voice will you choose to focus on today?**



Article by:

Alana Peters BA, BEd, ACC, CDWF
Certified Executive Coach &
Speaker
Certified Daring Way Facilitator

www.nowsthetime.ca

@nowsthetimeca

FB - Now's The Time

Penny's Corner

Supervisors - Got a new client for Penelope? It's almost painless!

Just complete our form linked below and click SUBMIT. Once you receive confirmation everything is set up, it's only 3 clicks in Penelope for you or your Mentors to get to your client's ASI or Biannual. What could be easier?

www.TinyUrl.com/AddNewPCAPID

10 YEAR EVALUATION REPORT

Well everyone, we are looking forward to sharing the data report being prepared for the 10 Year Evaluation.

This report couldn't have been prepared without the hard work of all the PCAP supervisors and mentors diligently inputting their ASIs and Biannuals into the Penelope Database.

The report will cover the number of networks and agencies participating in Penelope. The report will include graphs and summaries for a number of presenting issues at intake and changes for the client over the 36 month program. These cover: client housing, income, employment, education and family planning practices.

Detail on alcohol and drug use at intake and onwards plus pregnancy outcomes including data on "target" children outcomes (legal custody, access to CFS, etc.) will all be in the report.

We will be sending the final report near the end of this month. We can't wait to share it with you!

OTHER HELPFUL LINKS

New simplified procedures? Penelope Support site (incl. Biannual forms): www.penelope441.wordpress.com



Penny's Corner is written by Keith Covey, Quality Analyst. For more information about Penelope, report building, or data management, contact Keith at qa@alberta-pcap.ca

Sharing Success of PCAP

In every newsletter we encourage PCAP mentors and advocates to share success stories about how the program is impacting women, children, families, and/or communities, or about how they are overcoming barriers to be able to provide services to individuals. PCAP Council is happy to share the story without disclosing the name, location, and agency of the advocate who authored the article. If you have a story that you would like to contribute please submit it to laudine.herzog@alberta-pcap.ca.

A PCAP mentor shared her memorable experience with a client who chose to give her daughter to a healthy friend to watch because she knew she was currently unable to provide adequate care due to her addiction. This choice was best in the current situation and healthy for the child.



A PCAP mentor shared her experience with a client who after initially joining the program, lost contact with the mentor. Thanks to the mentor's perseverance and numerous phone calls, connection was reestablished. A reminder that it can take some time to connect and persistence is key in establishing trust between mentor and client.

Event Summary: Dr. Maté's Compassionate Inquiry



*Dr. Gabor Maté is a renowned speaker on topics of compassionate inquiry, and addictions and recovery. He is the author of many books, such as: *In the Realm of Hungry Ghosts: Close Encounters with Addiction*; *When the Body Says No: The Cost of Hidden Stress*; and *Scattered Minds: A New Look at the Origins and Healing of Attention Deficit Disorder*, and co-authored *Hold on to Your Kids*.*

The Compassionate Inquiry was held in Edmonton on September 14 and 15, at Scotiabank Theatre, and locally sponsored by Rhonda deLorme at Hand over Healing.

Compassionate Inquiry is a method of therapy developed by Dr. Maté that reveals what lies beneath the appearance of what is presented to the world. Using this method, the therapist unveils the level of consciousness, mental climate, hidden assumptions, implicit memories and body states that form the real message that words both express and conceal. Through Compassionate Inquiry, the client can recognize the unconscious dynamics that run their lives and how to liberate themselves from them.

There are no steps to compassionate inquiry, only stepping stones. Dr. Maté uses the analogy of walking through a marsh and finding the stepping stones and step on which ever one is appropriate. The steps he advises one follows while conducting a compassionate inquiry are:

- Establish safety. Always ask permission to continue, this empowers the client.
- Check in with the body. Ask the client to describe what they are feeling, and address nervous system responses first such as fight or flight. Sometimes a person is not able to articulate with words or find the words to associate what they are feeling, checking in with the body is beneficial as it skips asking “how are you feeling” and change it to “what are you feeling.”
- Define the core belief of the client and ask whenever appropriate, “Is this the first time you have experienced this? If not, when was the first time?” Show that the origins go far back and find the first experience that might have induced that feeling.
- Notice and separate what the person *feels* versus what is being *perceived*. A feeling, such as fear, sadness, anger, tiredness, hungriness, is to be worked with and accepted while perceptions should be understood at their source.
- Actively recognize body states, voice patterns, and body language. Recognize if the client is speaking very quietly, is seeming closed off, or fidgeting. These can be nervous system responses that are triggering fight or flight responses, address these first.
- Reassign meaning of the core belief by going back to the first experience of it and looking at it from a different point of view. Help them to try and imagine a person of similar age experiencing what they experienced. What would that person feel?
- Discuss actions to best support the client. Remember that the intention of the inquiry is to liberate people into the present moment. Bring the current issue back to them, it is about them and not someone else. Bring their awareness to being more compassionate towards themselves, and moving them away from placing themselves in the wrong.

Event Summary: Dr. Maté's Compassionate Inquiry, con't

Some tips that Dr. Maté suggests to keep in mind:

- Accept and address triggers during the conversation.
- Be grateful to the person when they share their discomfort.
- Be cautious when dealing with trauma. Trauma may result in a disconnection from the self, or from the present moment. Trauma may impact relationships with ourselves, with others, our view of the world, and our perceptions of safety.
- Always thank the person for the interaction and for sharing.

Dr. Maté describes the “myth of normal.” This states that a diagnosis of a person is not an explanation of their being but rather a description. The explanation of a disorder is far deeper. This also expands to a diagnosis not defining the person, a person is not their illness. Dr. Maté describes pathologies as adaptive dynamics that were developed in order to cope with various levels of trauma. Dr. Maté also defines implicit memory as when people are influenced by past experiences without any awareness that they are remembering. Pathologies can be developed by an individual without their conscious awareness due to implicit memory, compassionate inquiry assists in delving into these and identifying core causes.



Dr. Maté presenting at Compassionate Inquiry, Edmonton, 2017

Dr. Maté defines five types of compassions:

1. Ordinary compassion
2. The compassion of truth
3. The compassion of understanding
4. Compassion of recognition
5. Compassion of possibility

Dr. Maté defines some qualities of an empathetic therapist:

- Self-awareness
- Compassions
- Trust in your gut feeling
- Authenticity
- Non-judgement
- Confidence
- Playfulness

Skills to be a successful therapist:

- Create safety
- Attune to the client by asking the client specifically what they would like help with and would like to gain from the conversation.
- Invite openness
- Encourage feeling
- Give the client lots of space to experience and identify the feelings present, even if they can not talk about it.
- Notice language and speech patterns.
- Notice body language and breathing patterns
- Acknowledge the client
- Clarify information. Ask the client to describe a situation specifically without interpretation. What is happening.
- Mirror the client
- Appropriate self disclosure
- Admit to being triggered
- Self-care
- Be playful
- Express gratitude

To find out more about Dr. Gabor Maté and his upcoming events please visit

www.drqabormate.com

Pumpkin Recipes to Enjoy this Fall

Pumpkin Bread

3 1/2 cups all-purpose flour	1/2 teaspoon ground cloves
2 teaspoons baking soda	3 cups white sugar
2 teaspoons salt	1 cup canola oil
1 teaspoon baking powder	4 eggs, beaten
1 teaspoon ground nutmeg	2 cups solid pack pumpkin puree
1 teaspoon ground allspice	2/3 cup water
1 teaspoon ground cinnamon	Optional: nuts or chocolate chips



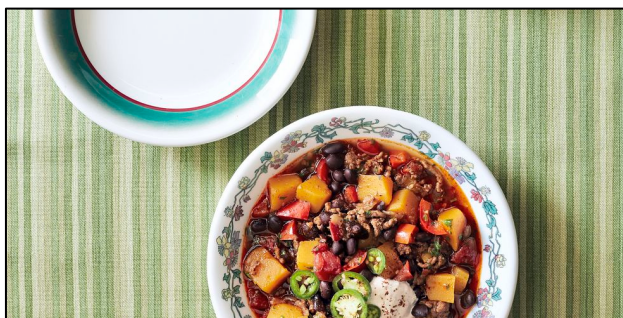
Preheat oven to 350 degrees Fahrenheit and grease two loaf pans



In a bowl, combine flour, baking soda, salt, baking powder, nutmeg, allspice, cinnamon and cloves. In a large bowl with an electric mixer, blend sugar, oil and eggs. Stir in pumpkin. Slowly blend the flour mixture into pumpkin mixture. While blending the mixture add water incrementally. Pour the batter into two prepared loaf pans



Bake in a oven for 90 minutes. Let cool for 10 minutes before removing from the pans.



2 pounds ground beef
1 large onion, diced
1 green bell pepper, diced
2 (15 oz) cans black beans, drained and rinsed
1 (46 fluid ounce) can tomato juice
1 (28 oz) can peeled and diced tomatoes with juice
1/2 cup canned pumpkin puree
1 tablespoon pumpkin pie spice
2 tablespoon chili powder
1 tablespoon cumin
1/4 cup white sugar

Pumpkin, Beef, and Black Bean Chili



In a pot, cook ground beef until brown and drain. Cook onions and bell peppers for 5 minutes and stir in beans, tomato juice, diced tomatoes and pumpkin puree.



Season with pumpkin pie spice, chili powder, cumin, and sugar.



Simmer for 1 hour.

Recipes found from www.allrecipes.com

Recommended PCAP Training



Mandated

- ☐ Alberta PCAP Core Training
- ☐ Addiction Severity Index Training (*if applicable*)
- ☐ Biannual Training (NEW)
- ☐ Outcomes Tracking Application (Penelope)

Priority

- ☐ First Aid & CPR
- ☐ Applied Suicide Intervention Skill Training (ASIST)
- ☐ Cultural Competency
- ☐ FASD: The Basics
- ☐ Motivational Interviewing 1
- ☐ Addictions Training (Alcohol and Drug Abuse Help Kit Training)
- ☐ Family Planning-Sexual Health (methods, contraception, side effects)
- ☐ Trauma Informed Practice
- ☐ Grief and Loss
- ☐ Domestic Violence
- ☐ Harm Reduction
- ☐ Mental Health First Aid
- ☐ Car Seat Safety for Infants and Children
- ☐ Confidentiality and Freedom of Information and Protection of Privacy (FOIP)

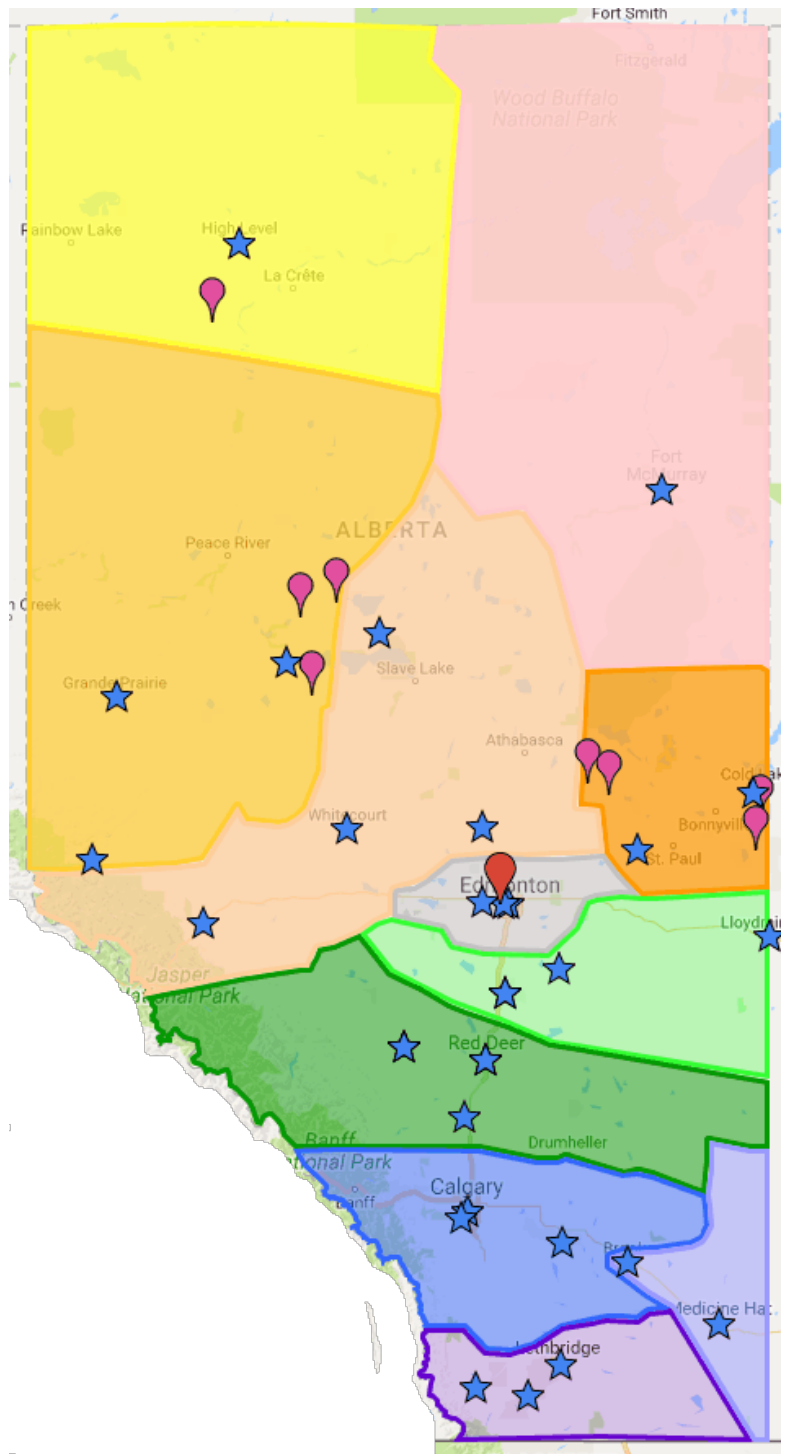
Recommended

- ☐ Non-violence Crisis Intervention
- ☐ Co-occurring Mental Disorders
- ☐ Infant Developmental Stages Observation and Documentation
- ☐ Financial Literacy
- ☐ Nutrition-Maternal/Infant
- ☐ Breast Feeding
- ☐ Compassion Fatigue
- ☐ Family Law
- ☐ Criminal Court Training
- ☐ Developmental Parenting and PICCOLO Training
- ☐ Universal Precautions

Want to know where to access these trainings?
Visit the Members' Section of the Alberta PCAP website for a full list of training and where to find them.
www.alberta-pcap.ca/ab-pcap-council-members

Network Map of PCAP

- Atikameg
- Brooks
- Calgary and Area
- Camrose and Area
- Cold Lake and Area
- Edmonton – Bissell Centre
- Edmonton – Catholic Social Services
- Enoch
- Ermineskin
- Fort McMurray
- Grand Cache and Area
- Grande Prairie
- High Level and Area
- Hinton/Edson
- Kanai Nation
- Lesser Slave Lake
- Lethbridge
- Lloydminster
- Medicine Hat
- Montana Nation
- Olds
- Pincher Creek
- Red Deer
- Rocky Mountain House
- Saddle Lake
- Samson
- Siksika Nation
- Tsuu T'ina
- Whitecourt



The ★'s represent PCAP main offices, however many PCAP programs serve a number of communities. To view our interactive location map and find nearby locations, program websites and contact information, visit the Alberta PCAP website at:

www.alberta-pcap.ca/ab-pcap-locations

Your Current PCAP Council Directors

Chair:	Jailin Threinen, Program Supervisor, Hinton Friendship Centre and Healthy Families Healthy Futures Email: Jailin.Threinen@gmail.com
Vice-Chair:	Stacey Olstad, Program Director Family Services, Camrose Association For Community Living Email: solstad@cafcl.org
Secretary:	Bev Towe, Mothers-to-Be Mentor, Lakeland Centre for FASD Email: BTowe@lcfasd.com
Treasurer:	Ashley Baxter, Manager, FASD Programs, Bissell Centre Email: abaxter@bissellcentre.org
Director:	Anita Anderson, FASD Network Coordinator, Metis Settlements General Council Email: aanderson@msgc.ca
Director:	Benjamin Maze, PCAP Supervisor, First Steps Lethbridge/Family Health Home Visitation Email: Benjamin.Maze@albertahealthservices.ca
Director:	Evelyn Okoh, Mentor, North East Alberta FASD Network Email: Evelyn.Okoh@mcman.ca
Director:	Pam van Vugt, P-CAP Programs Supervisor, McMan Calgary and Area Email: Pam.vanvugt@mcman.ca
Director:	Tammi Crowley, Program Supervisor, Catholic Social Services Edmonton Email: Tammi.Crowley@cssalberta.ca
Director:	Wanda Beland, Executive Director, North West Regional FASD Society Email: Wanda.fasdsociety@telus.net
Banker:	Brandy Berry, Executive Director, Healthy Families Healthy Futures, Westlock Email: Brandy.Berry@hfalberta.com
Staff:	Kristin Bonot, Provincial Coordinator Email: Kristin.Bonot@alberta-pcap.ca
Staff:	Keith Covey, Quality Assurance Email: Keith.Covey@alberta-pcap.ca
Staff:	Laudine Herzog, Administrator Email: Laudine.Herzog@alberta-pcap.ca

Let's Connect!

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