HEALING TOGETHER

BACKGROUND

The Parent-Child Assistance Program (PCAP) aims to prevent future drug- and alcohol-exposed births by assisting women to avoid using substances before and during their pregnancy, and to avoid becoming pregnant if they are unable to achieve sobriety. The work of PCAP is carried out by mentors who work with clients over three years, focusing on intensive case management and home visitation. In this way, mentors connect clients with other community supports relevant to such areas as their physical and mental health care, addictions, parenting, legal issues, and employment. Services are tailored to clients' individual needs and are based on client-driven goals.

In 2014, the Alberta Ministry of Health provided funds to Alberta Community and Social Services to fund six FASD Service Networks to establish or expand PCAP in First Nation communities in Alberta. Between September 2015 and March 2017, PCAP was evaluated as implemented in these six FASD Service Networks. The evaluation was commissioned by PolicyWise for Children & Families, and carried out by members of the Alberta Clinical and Community-Based Evaluation and Research Team (ACCERT) at the University of Alberta.

PURPOSE

PCAP staff in Alberta First Nation communities graciously shared their stories with our evaluation team. This book was created from mentor stories, and consists of (1) quotes from interviews and focus groups with mentors; (2) photos taken by mentors to represent PCAP; and (3) photos of collages taken by mentors to represent the program's success and challenges. The purpose of this book is to give back to the communities that participated in the PCAP evaluation. We hope that, by sharing mentor stories, we can raise awareness regarding the inspirational work of PCAP mentors, and regarding clients' resilience in the face of challenges. This book is set up in three sections. The first section identifies and acknowledges the ${\sf hurt}$ that lives in many Alberta First Nation communities due to the legacy of residential schools, as well as the historical and ongoing impacts of colonialism. The second section identifies relationship as the mechanism by which healing from this hurt takes place. The third and final section reflects the **Growth** that is possible when we walk together.

ACKNOWLEDGING THE HURT



"Instead of asking them 'why do you drink?' I ask them, 'what you would be doing if you weren't drinking?"

"Many of the women haven't had an experience of acceptance—

that positive relationship, somebody that's

going to be in their corner

and back them up."





"The PCAP ladies, they don't have anybody that will come to their home and be able to help them keep their children and address their addiction issues—whether its stresses or housing or finding food. Nobody ever had that **ONE PERSON** before."

"A lot of our communities have no other supports except for us. And it's important for them to have **somebody that cares** about whether or not they have

healthy babies."



"In some instances, clients have no choice but to leave their community and family supports to find a women's shelter. As there is limited space, no financial aid and no transportation, many women resign to stay in unsafe situations. They are asked to find a stable home in order to have their children but there is nothing available to them."

"Trauma goes hand in hand with addictions. Which do you help with first? In treatment centres, the main focus is addictions but most of my clients have so much trauma.

It's not easy watching them."





"Other agencies...the community, as well, not understanding the invisible disability part of it. There's a lot of discrimination and judgment."

Self-Sabotage

Money

Toxic

Joh

"All they see is a bunch of criminals. That's how people with FASD are seen and it's very, very unfortunate."

"...get [community members] to understand that clients may appear to understand what you're saying but they really don't. In many cases, it's an **invisible disability**."





RELATIONSHIPS

"If [the client] has some struggles and she ends up drinking, it's not like she'd be kicked out of the program. It's someone to **Walk with women** on their journey. Saying, 'You stumbled, now let's take the next step. Today is a new day."





"The first couple little steps to know the community are, very, very

important for success."

"Relationship building is so

important because it's that

journey of trust."

"Don't ever think that you know the community. You're there to learn about the community. You're not there to change them. I'm not there to tell them that they're doing things wrong."

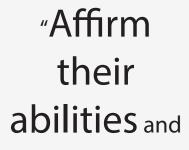




"You've got to be able to prove that, **I'm not going anywhere**"

"Our clients have trust issues and think you're never coming back. It's difficult not to be there for them 24/7. But with a **trusting relationship**, you can reassure them you'll be back Monday."

"Sometimes being shut out by the community when you don't yet have their **trust**, it's intimidating to push yourself to go out there and do what you need to do."



remind them they're capable of looking after their children."







"They feel secure; that they have somebody that they can call. And they feel great knowing that they don't have to do it alone."

"It's a matter of building that relationship so

they can stay in one spot long enough for me to help them."



"Moms really need support with addictions, especially teen and young moms. This programming allows the opportunity for understanding and support."



"If a client is out in camp, you go out to that camp. You have to be very **flexible**. You never know if you're going to be sitting in the back of a tailgate doing paperwork because the driveways are so muddy that you can't even get in. You have to be flexible to drop your tailgate and [say] 'alright then, let's do some paperwork."

GROWTH



"This picture reminds me of PCAP as it is the **light** within the trees." "Their mentors are teaching them how to be successful, how to advocate for themselves, how to **Stabilize** their lives. To the point where gradually, they're not really calling their PCAP mentor. And then they're calling their mentor to tell them, how awesome! They just found a ride to town. They did shopping on their own."





"Ladies are **growing** as moms and Wives, and see they can do programs and finish them. Before, they didn't even want to come to the band office to do programs because of judgement. Now they do."

"Clients have applied for and attended school, rehab services and counselling with the support of the PCAP program. While most programs help a client for a limited time, this program allows the client a period of three years to **grow and achieve**." "Before, they didn't have a name for FASD. Now, going to community meetings where it's **discussed openly**, it's really changed the way we talk about FASD. It isn't an ugly, dirty word. We are instrumental in getting that out there."



"We've got to be part of that— grieving, and loss, and self-care. We go through everything with the community. It's not a matter of, 'oh, that's not my client.' It's community, community, community. First and foremost, it's **COMMUNITY**."



THANK YOU

We extend our sincere thanks to the PCAP participants, mentors, and supervisors, as well as all FASD Network staff, who took the time to openly share their stories and experiences.

This PCAP evaluation project was carried out by members of the Alberta Clinical and Community-based Evaluation and Research Team (AACERT) and was supported by:

