

**Improving Supports for Fetal Alcohol Spectrum Disorder and Autism**

Mr. Speaker, our government made a mandate commitment to ensure that effective supports and programs are in place for persons with disabilities. The NWT Disability Review and Renewal Project is part of that commitment.

Through this work, the government has identified the challenges residents with complex disabilities, such as autism or Fetal Alcohol Spectrum Disorder, or FASD, have in accessing assessment and diagnostic services across the territory. Identifying these challenges is an important step towards putting effective supports in place for persons with these disabilities.

Children living with autism or FASD require ongoing assessment, intervention and follow-up support through an integrated care approach that involves the child, the family and many different practitioners including: pediatricians, speech language pathologists, occupational therapists, physiotherapists, audiologists, social workers, and child development team coordinators.

Currently, the Department of Health and Social Services supports at-risk children and families through early intervention screening as part of the NWT Well Child Clinics, rehabilitation services, the Stanton Territorial Hospital Child Development Team, and the territorial FASD Family and Community Support Program.

The Child Development Team works with families and community service providers to provide medical and therapeutic intervention services to each individual child based on findings from a comprehensive diagnostic assessment. The team also monitors and revises an intervention plan that is specifically tailored to each child.

This specialized support is offered to children with autism and FASD in the Dehcho, Tłı̨chǫ, and the Yellowknife areas.

The FASD Family and Community Support Program assesses children up to 16 years of age for FASD. Where a diagnosis is made, this territorial program develops and implements intervention strategies for these children. It accepts referrals from health care providers and social workers across the NWT. Currently this program only covers 10 FASD assessments per year. Following their 17<sup>th</sup> birthday, patients are referred to the same support services offered to all residents with disabilities so that support can continue in adulthood.

We heard from the NWT Disabilities Council, the Yellowknife Association for Community Living and the NWT Autism Society of the need for more support and to improve existing programs. This is why we proposed \$848 thousand dollars in the 2018-2019 budget that will be used to enhance services for autism and FASD. Those enhancements will include a child development team coordinator in the Beaufort Delta Region as well as speech language pathology and occupational therapy autism coordinators for the Child Development Team at Stanton Territorial Hospital. It will also provide funding to establish and enhance the existing Territorial FASD Community and Family Support Program.

The department will also be working with Northwest Territories Health and Social Services Authority towards establishing a territorial FASD assessment and support program for adults, as this is something that does not currently exist in the territory. This funding will allow the addition of an Adult FASD Assessment Team Coordinator.

The Department of Health and Social Services also contributes to a national FASD database. This database, the first of its kind in the world, gathers detailed information about FASD assessments from across the country. This national

database makes it possible for practitioners to better communicate and collaborate when it comes to different FASD assessment programs.

This year the Government of the Northwest Territories is the lead jurisdiction of the Canada Northwest FASD Partnership, which contributes funding to the CanFASD Research Network. This network produces and sustains national collaborative research related to FASD. The partnership recently approved an FASD language guide that outlines common but unproductive language that is often used when speaking about FASD. The guide presents alternative, more respectful language and the rationale for its use.

By being involved in wider partnerships such as the Canada Northwest FASD Partnership, along with territorial and community organizations that represent the disability sector, our government is better positioned to receive reliable information we can use to improve the outcomes for our residents affected by Fetal Alcohol Spectrum Disorder and autism.

Mr. Speaker, our government is committed to removing barriers to access, to improve service quality, and to work to build stronger supports for all persons with disabilities. The actions I have outlined are some of the ways that we are working to provide for Best Health and Best Care for all NWT residents, including those with autism and FASD.

Thank you, Mr. Speaker.