

Appendix C

Interview Guides

Interview Guide –Senior Managers

Government Consulting Services has been engaged by the Public Health Agency of Canada (PHAC) to conduct an evaluation of the federal FASD Initiative. The evaluation will focus on assessing the program during the period of April 1, 2004 to the

Present. The FASD Initiative has a national and regional scope and is a \$5M/year initiative of which Population and Public Health Branch (PPHB) has \$3.3 million per year and First Nations and Inuit Health Branch (FNIHB), \$1.7 million. This evaluation covers only \$3.3 million associated with the PPHB.

The evaluation study will play an important role in decisions that will be made by the Public Health Agency regarding the future structure and operation of this program. Your participation in this study will have a significant impact, therefore, on the future of this program. All individual answers will be confidential.

Background

- 1) Please outline your role and involvement with the federal FASD Initiative.

Probe: # of years working in FASD field, # of years in current position

Program Relevance

- 2) Do you think there is a continued need for the federal FASD Initiative? Why or Why not?

- 3) If yes, is it necessary for the Government of Canada to operate this Initiative?

Probe: role of federal government vs, provincial government, vs community groups

- 4) What is your understanding of the rationale of the federal FASD Initiative?

Probe: validity of the initial premises, the policy objective outlined in the 1999 budget

- 5) (1.2a) To what extent is the federal FASD Initiative in line with current federal and provincial objectives (including Health promotion, and the children and Aboriginal agendas)?

Probe: international priorities

Design and Delivery/Cost Effectiveness

- 6) In terms of the management of the federal FASD Initiative, what is working well and what could be improved?

- a) National level –
- b) Regional level –
- c) Other –

- 7) In your view, are program management practices (financial/accounting and project reporting) adequate?

- 8) The federal FASD Initiative supports FASD activities in three ways: 1) by funding national strategic projects, 2) by allocating funds to the regions and 3) with available Operations and Maintenance (O&M) dollars. Do you think this is the most appropriate and efficient means to achieve the objectives of the Initiative?

Probe: Can you provide any examples that demonstrate how the Initiative achieves efficiencies/delivers value for money to Canadians?

- 9) Did the federal FASD Initiative experience any funding delays?
- 10) Were all of the funds that were allocated to this Initiative expended (budget vs actual)? If not, please explain.
- 11) Overall, what are the current strengths and weaknesses of the Initiative?
- 12) Is there anything else you would like to add?

Interview Guide –National Capital Region (NCR)

Government Consulting Services has been engaged by the Public Health Agency of Canada (PHAC) to conduct an evaluation of the federal FASD Initiative. The evaluation will focus on assessing the program during the period of April 1, 2004 to the

Present. The FASD initiative has a national and regional scope and is a \$5M/year initiative of which Population and Public Health Agency of Canada (PHAC) has \$3.3 million per year and First Nations and Inuit Health Branch (FNIHB), \$1.7 million. This evaluation covers only \$3.3 million associated with the PHAC.

The evaluation study will play an important role in decisions that will be made by the Public Health Agency regarding the future structure and operation of this program. Your participation in this study will have a significant impact, therefore, on the future of this program. All individual answers will be confidential.

Background

- 1) Please outline your role and involvement with the federal FASD Initiative.

Probe: # of years working in FASD field, # of years in current

Program Relevance

- 2) What do you consider to be the most reliable current source (name of document, survey etc.) of information on the following:
 - a) Incidence and prevalence rates of FASD –
 - b) Impacts and costs of FASD –
 - c) Awareness level of FASD –
 - d) Evidence of continued “risk-taking” behaviours by pregnant women and women of childbearing age –
 - e) Knowledge and attitudes of health professionals about FASD –
- 3) Do you think there is a continued need for the federal FASD Initiative? Why or Why not?
- 4) If yes, is it necessary for the Government of Canada to operate this Initiative?

Probe: (1.2c,b) has the rationale evolved since the inception of the FASD initiative?

- 5) What is your understanding of the rationale of the federal FASD Initiative?

Probe: (1.2c,b) validity of the initial premises, the policy objective outlined in the 1999 budget

- 6) To what extent is the federal FASD Initiative in line with current federal and provincial priorities (including Health promotion, and the children and Aboriginal agendas)?

Probe: (1.2a) international priorities

Design and Delivery

Program Design

- 7) In your view, are program management practices (financial/accounting and project reporting) adequate?

Probe: Did the federal FASD Initiative experience any funding delays or cuts?

Probe (3.2a) Perception of management competency

- 8) In terms of the management of the federal FASD Initiative, what is working well and what could be improved?
 - a) National level –
 - b) Regional level –
 - c) Other –

Selection Process

- 9) Please describe:
 - a) How O&M funded activities were selected -
 - b) How strategic projects were selected -
 - c) How funding allocations to the region were decided –

Probe: Is this the most efficient way to support Initiative activities?

- 10) What is your perception of the selection process for Initiative funded projects/activities?

Probe: How did you ensure a link between Initiative objectives and funded projects/activities?

Probe: Was the selection process fair, right criteria, transparent, timely?

- 11) Approximately what percentage of the applications put forward were approved for funding?

Probe: What are some of the typical reasons that a project/activities would not be approved?

- 12) To what extent are applicants required to leverage resources from other sources? Please provide examples of other sources.

Probe: What is the added advantage of Initiative funds (overlap, duplication)?

Cost Effectiveness

- 13) Were all of the funds that were allocated to this Initiative expended (budget vs actual)? If not, please explain.

- 14) In your view, are the most appropriate and efficient means being used to achieve the objectives of the federal FASD Initiative relative to other design and delivery approaches?

Probe: Can you provide any examples that demonstrate how the Initiative achieves efficiencies/delivers value for money to Canadians?

Outcomes and Impacts

- 15) Please read each of the statements listed in the table below and answer the following questions:

- **Maturity** - rate where you think the FASD community was 5 years ago and where you think the FASD community is now using a 5-point scale, where 1 = *Immature* and 5 = *Mature*

- **Attribution** – for each statement where you noted a change from 5 year ago relative to now, rate whether you think the change is attributable to the federal FASD Initiative using a 5 point scale, where 1= *Not at all Attributable* and 5 = *Entirely Attributable*.
- **Examples** - If you think the Initiative is attributable (rating of 3 or higher on attribution) than provide an example of how.

	Maturity		Attribution Rating	Examples
	Immature 1--2--3---4--5	Mature 1--2--3---4--5		
	5 years ago	Now	No 1--2--3--4--5	Entirely 1--2--3--4--5
15.1 <u>Evidence</u> on the use of alcohol during pregnancy and by women of childbearing age				
15.2 Public and professional <u>awareness</u> of FASD; the impact of alcohol consumption during pregnancy; and of available resources				
15.3 <u>Availability</u> and effectiveness of FASD tools and resources for screening and diagnosis of affected individuals and pregnant woman				
15.4 <u>Uptake</u> of tools and resources for screening and diagnosis of affected individuals and pregnant woman				
15.5 Effectiveness of <u>coordination and cooperation</u> with and between stakeholders (e.g., OGDs, provinces, territories, NGOs etc.)				
15.6 Adoption of <u>common approaches</u> to addressing FASD, including best practices related to prevention and intervention				
15.7 Stakeholders prevention and intervention <u>capacity</u> focused on the disorder its effects, and ability to address risk factors				
15.8 Stakeholder capacity to deliver <u>culturally appropriate</u> programs services, tools and resources				

- 16) The following are projects/activities that have been supported by the federal Initiative. Please indicate whether you are familiar with the project and how useful you find the project/activity (using a 5-point scale, where 1= *Not at all Useful* and 5 = *Very Useful*)

	Familiar with project (✓)	Usefulness	
		Not at All Useful 1—2—3---4—5	Very Useful 1—2—3---4—5

	Familiar with project (✓)	Usefulness Not at All Useful Very Useful 1—2—3—4—5
<p>16.1 TITLE: Parenting Guidelines for Families of Children with Fetal Alcohol Syndrome/Fetal Alcohol Effects (FAS/FAE)</p> <p>SPONSORING ORGANIZATION: Victorian Order of Nurses for Canada (VON Canada)</p> <p>DESCRIPTION: The project built on the personal experiences of parents and front-line care providers (including foster and adoptive families) as well as existing research and resources in developing the best practice tool for those caring for children with FASD.</p>		
<p>16.2 TITLE: National Database of FASD and Substance Use During Pregnancy Resources</p> <p>SPONSORING ORGANIZATION: Canadian Centre on Substance Abuse (CCSA)</p> <p>DESCRIPTION: The database provides a central access to the many resources that are available in Canada for work in prevention, education, identification and intervention.</p>		
<p>16.3 TITLE : La Boîte à Outils (Prévention du SAF)</p> <p>SPONSORING ORGANIZATION : SAFERA</p> <p>DESCRIPTION : This project partnered with francophone Canada Prenatal Nutrition Programs, Aboriginal Head Start and Community Action Programs both in Quebec and outside of the province to design an interactive internet site, a Francophone video for parents and care givers, a collection of accessible resources and information.</p>		
<p>16.4 TITLE : Nurturing Change: Working effectively with high-risk women and affected children to prevent and reduce harms associated with FASD Promoting Effective FAS-related Practices in CAPC/CPNP Projects Through Targeted Knowledge and Skills Transfer</p> <p>SPONSORING ORGANIZATION : Mothercraft (Breaking the Cycle)</p> <p>DESCRIPTION : This project developed and delivered eight two-day "Live" interactive training sessions to front-line workers focussed on knowledge and skills to screen and support women at risk and affected children within the context of CAPC/CPNP projects. A training manual was developed along with a web-based tool kit.</p>		
<p>16.5 TITLE : FASEout: Fetal Alcohol Spectrum Outreach Project</p> <p>SPONSORING ORGANIZATION : Canadian Institute of Child Health (CICH)</p> <p>DESCRIPTION: FASEout was a four-year project, designed to take current evidence on Best Practices relating to FASD and FAE off the bookshelves and into use across Canada. A bilingual website providing power point presentations, a national database of trainers, and a forum for trainers to share up-to-date information and resources is available at www.faseout.ca</p>		
<p>16.6 TITLE : National Indian and Inuit Community Health Representatives Organization FAS/FAE National Training Session</p> <p>SPONSORING ORGANIZATION : National Indian and Inuit Community Health Representatives Organization (NIICHO)</p> <p>DESCRIPTION : This project developed a "Train-the-Trainer" model to deliver FAS/FAE skills training in both official languages to approximately 275 Community Health Representatives (CHRs) and other front-line workers.</p>		
<p>16.7 TITLE : Applied Studies in Fetal Alcohol Syndrome/Effects</p> <p>SPONSORING ORGANIZATION : Red River College (RRC)</p> <p>DESCRIPTION : This project developed a 16 course outline for the Applied Studies in Fetal Alcohol Syndrome/Effects Certificate Program into stand-alone modules that can be offered through a joint certificate program with other colleges across Canada.</p>		

	Familiar with project (✓)	Usefulness Not at All Useful Very Useful 1—2—3—4—5
<p>16.8 TITLE : National Networking Project</p> <p>SPONSORING ORGANIZATION : Prostitutes Empowerment, Education & Resource Society (PEERS)</p> <p>DESCRIPTION : This project developed a national FASD information and resource network with agencies that work with sex trade workers and with health experts across Canada. It increased the front-line workers' capacity by developing workshops which included training in harm reduction, practical day-to-day tools and ways to identify high-risk clients.</p>		
<p>16.9 TITLE : Training of Trainers Workshop and a series of Webinars and a Physicians Handbook</p> <p>SPONSORING ORGANIZATION : PRIMA</p> <p>DESCRIPTION : The PRIMA (Pregnancy-Related Issues in the Management of Addictions) project is designed to assist Canadian health professionals in providing obstetric care for women using substances of abuse, and in providing neonatal and pediatric care for children who were substance-exposed in utero.</p>		
<p>16.10 TITLE : Knowledge and Attitudes of Health Professionals about Fetal Alcohol Syndrome: Results of a National Survey</p> <p>DESCRIPTION : The objective of this study was to determine, on a national level and across selected health care professional groups, knowledge and attitudes regarding alcohol use and Fetal Alcohol Syndrome.</p>		
<p>16.11 TITLE : Alcohol Use During Pregnancy and Awareness of Fetal Alcohol Syndrome and Fetal Alcohol Spectrum Disorder : Results of a National Survey</p> <p>DESCRIPTION : In February 2006, Environics Research Group Limited was retained by Public Health Agency of Canada (PHAC) to conduct a survey of population segments, to measure knowledge of the effects of alcohol use during pregnancy, and awareness of Fetal Alcohol Syndrome and Fetal Alcohol Spectrum Disorder.</p>		
<p>16.12 TITLE : Webcast for FACE Research Roundtable</p> <p>DESCRIPTION : FACE was established in 2000 to promote open discussion and collaboration in all areas of medical and social science research related to the effects of alcohol use during pregnancy and lactation. Today the FACE Network includes researchers, clinicians, front-line workers, government and industry representatives and policy-makers from across Canada. PHAC funded part of the Webcast so that the presentations could be accessible to a wider audience.</p>		
<p>16.13 TITLE: Fetal alcohol spectrum disorder: Canadian guidelines for diagnosis</p> <p>DESCRIPTION: The purpose of this paper was to review and clarify the use of current diagnostic systems and make recommendations on their application for diagnosis of FASD-related disabilities in people of all ages. PHAC contributed to the guidelines' development by supporting the process through which they were elaborated.</p>		
<p>16.14 TITLE: FASD: A Framework for Action</p> <p>DESCRIPTION: The FASD Initiative is reflected in the <i>Fetal Alcohol Spectrum Disorder (FASD): A Framework for Action</i> that was developed in consultation with organizations at the community, provincial, territorial and national levels. FASD: A Framework for Action, includes the basic building blocks required for concerted action within communities, provinces and territories as well as within the federal government.</p>		

- 17) Do you think these are the types of activities/projects that the federal FASD Initiative should be supporting?
- 18) Overall, what are the current strengths and weaknesses of the Initiative?
- 19) Is there anything else you would like to add?

Interview Guide –Provincial/Territorial

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The evaluation study will play an important role in decisions that will be made by the Public Health Agency regarding the future structure and operation of this program. Your participation in this study will have a significant impact, therefore, on the future of this program. All individual answers will be confidential.

Background

- 1) Please outline your (and your province's) role and involvement with the federal FASD Initiative.
Probe: # of years working in FASD field, # of years in current

Program Relevance

- 2) What do you consider to be the most reliable current source (name of document, survey etc.) of information on the following:
 - a) (1.1a) Incidence and prevalence rates of FASD –
 - b) (1.1b) Impacts and costs of FASD –
 - c) (1.1c) Awareness level of FASD –
 - d) (1.1d) Evidence of continued “risk-taking” behaviours by pregnant women and women of childbearing age –
 - e) (1.1e) Knowledge and attitudes of health professionals about FASD –
- 3) Do you think there is a continued need for the federal FASD Initiative? Why or Why not?
Probe: Federal dollars relative to other sources of funding
- 4) If yes, is it necessary for the Government of Canada to operate this Initiative?
Probe: role of federal government vs, provincial government, vs community groups
- 5) To what extent is the federal FASD Initiative in line with current federal and provincial objectives (including Health promotion, and the children and Aboriginal agendas)?
Probe: (1.2a) international priorities

Design and Delivery

- 6) In terms of the management of the federal FASD Initiative, what is working well and what could be improved?
 - a) National level –
 - b) Regional level –
 - c) Other –

- 7) The federal FASD Initiative supports FASD activities in three ways: 1) by funding national strategic projects, 2) by allocating funds to the regions and 3) with available Operations and Maintenance (O&M) dollars. Do you think this is the most appropriate and efficient means to achieve the objectives of the Initiative?

Outcomes and Impacts

- 8) Please read each of the statements listed in the table below and answer the following questions:
- **Maturity** - rate where you think the FASD community was 5 years ago and where you think the FASD community is now using a 5-point scale, where 1 = *Immature* and 5 = *Mature*
 - **Attribution** – for each statement where you noted a change from 5 year ago relative to now, rate whether you think the change is attributable to the federal FASD Initiative using a 5 point scale, where 1= *Not at all Attributable* and 5 = *Entirely Attributable*.
 - **Examples** - If you think the Initiative is attributable (rating of 3 or higher on attribution) then provide an example of how.

	Maturity		Attribution Rating	Examples
	Immature 1--2--3--4--5	Mature		
	5 years ago	Now	No 1--2--3--4--5	Entirely
8.1 <u>Evidence</u> on the use of alcohol during pregnancy and by women of childbearing age				
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8.3 <u>Availability</u> and effectiveness of FASD tools and resources for screening and diagnosis of affected individuals and pregnant woman				
8.4 <u>Uptake</u> of tools and resources for screening and diagnosis of affected individuals and pregnant woman				
8.5 Effectiveness of <u>coordination and cooperation</u> with and between stakeholders (e.g., OGDs, provinces, territories, NGOs etc.)				
8.6 Adoption of <u>common approaches</u> to addressing FASD, including best practices related to prevention and intervention				
8.7 Stakeholders prevention and intervention <u>capacity</u> focused on the disorder its effects, and ability to address risk factors				
8.8 Stakeholder capacity to deliver <u>culturally appropriate</u> programs services, tools and resources				

- 9) The following are projects/activities that have been supported by the federal Initiative. Please indicate whether you are familiar with the project and how useful you find the project/activity (using a 5-point scale, where 1= *Not at all Useful* and 5 = *Very Useful*)

	Familiar with project (✓)	Usefulness Not at All Useful Very Useful 1—2—3—4—5
<p>9.1 TITLE: Parenting Guidelines for Families of Children with Fetal Alcohol Syndrome/Fetal Alcohol Effects (FAS/FAE) SPONSORING ORGANIZATION: Victorian Order of Nurses for Canada (VON Canada) DESCRIPTION: The project built on the personal experiences of parents and front-line care providers (including foster and adoptive families) as well as existing research and resources in developing the best practice tool for those caring for children with FASD.</p>		
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<p>9.5 TITLE : FASEout: Fetal Alcohol Spectrum Outreach Project SPONSORING ORGANIZATION : Canadian Institute of Child Health (CICH) DESCRIPTION: FASEout was a four-year project, designed to take current evidence on Best Practices relating to FASD and FAE off the bookshelves and into use across Canada. A bilingual website providing power point presentations, a national database of trainers, and a forum for trainers to share up-to-date information and resources is available at www.faseout.ca</p>		
<p>9.6 TITLE : National Indian and Inuit Community Health Representatives Organization FAS/FAE National Training Session SPONSORING ORGANIZATION : National Indian and Inuit Community Health Representatives Organization (NIICHO) DESCRIPTION : This project developed a "Train-the-Trainer" model to deliver FAS/FAE skills training in both official languages to approximately 275 Community Health Representatives (CHRs) and other front-line workers.</p>		
<p>9.7 TITLE : Applied Studies in Fetal Alcohol Syndrome/Effects SPONSORING ORGANIZATION : Red River College (RRC) DESCRIPTION : This project developed a 16 course outline for the Applied Studies in Fetal Alcohol Syndrome/Effects Certificate Program into stand-alone modules that can be offered</p>		

	Familiar with project (✓)	Usefulness Not at All Useful Very Useful 1—2—3---4—5
through a joint certificate program with other colleges across Canada.		
<p>9.8 TITLE : National Networking Project</p> <p>SPONSORING ORGANIZATION : Prostitutes Empowerment, Education & Resource Society (PEERS)</p> <p>DESCRIPTION : This project developed a national FASD information and resource network with agencies that work with sex trade workers and with health experts across Canada. It increased the front-line workers' capacity by developing workshops which included training in harm reduction, practical day-to-day tools and ways to identify high-risk clients.</p>		
<p>9.9 TITLE : Training of Trainers Workshop and a series of Webinars and a Physicians Handbook</p> <p>SPONSORING ORGANIZATION : PRIMA</p> <p>DESCRIPTION : The PRIMA (Pregnancy-Related Issues in the Management of Addictions) project is designed to assist Canadian health professionals in providing obstetric care for women using substances of abuse, and in providing neonatal and pediatric care for children who were substance-exposed in utero.</p>		
<p>9.10 TITLE : Knowledge and Attitudes of Health Professionals about Fetal Alcohol Syndrome: Results of a National Survey</p> <p>DESCRIPTION : The objective of this study was to determine, on a national level and across selected health care professional groups, knowledge and attitudes regarding alcohol use and Fetal Alcohol Syndrome.</p>		
<p>9.11 TITLE : Alcohol Use During Pregnancy and Awareness of Fetal Alcohol Syndrome and Fetal Alcohol Spectrum Disorder : Results of a National Survey</p> <p>DESCRIPTION : In February 2006, Environics Research Group Limited was retained by Public Health Agency of Canada (PHAC) to conduct a survey of population segments, to measure knowledge of the effects of alcohol use during pregnancy, and awareness of Fetal Alcohol Syndrome and Fetal Alcohol Spectrum Disorder.</p>		
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<p>9.13 TITLE: Fetal alcohol spectrum disorder: Canadian guidelines for diagnosis</p> <p>DESCRIPTION: The purpose of this paper was to review and clarify the use of current diagnostic systems and make recommendations on their application for diagnosis of FASD-related disabilities in people of all ages. PHAC contributed to the guidelines' development by supporting the process through which they were elaborated.</p>		
<p>9.14 TITLE: FASD: A Framework for Action</p> <p>DESCRIPTION: The FASD Initiative is reflected in the <i>Fetal Alcohol Spectrum Disorder (FASD): A Framework for Action</i> that was developed in consultation with organizations at the</p>		

	Familiar with project (✓)	Usefulness Not at All Useful Very Useful 1—2—3—4—5
community, provincial, territorial and national levels. FASD: A Framework for Action, includes the basic building blocks required for concerted action within communities, provinces and territories as well as within the federal government.		

- 10) Do you think these are the types of activities/projects that the federal FASD Initiative should be supporting?
- 11) Overall, what are the current strengths and weaknesses of the Initiative?
- 12) Is there anything else you would like to add?

Interview Guide –Recipients

Government Consulting Services has been engaged by the Public Health Agency of Canada (PHAC) to conduct an evaluation of the federal FASD Initiative. The evaluation will focus on assessing the program during the period of April 1, 2004 to the

Present. The FASD initiative has a national and regional scope and is a \$5M/year initiative of which Population and Public Health Agency of Canada (PHAC) has \$3.3 million per year and First Nations and Inuit Health Branch (FNIHB), \$1.7 million. This evaluation covers only \$3.3 million associated with the PHAC.

The evaluation study will play an important role in decisions that will be made by the Public Health Agency regarding the future structure and operation of this program. Your participation in this study will have a significant impact, therefore, on the future of this program. All individual answers will be confidential.

Background

- 1) Please outline your role and involvement with the federal FASD Initiative.

Probe: # of years working in FASD field, # of years in current

Program Relevance

- 2) What do you consider to be the most reliable current source (name of document, survey etc.) of information on the following:
 - a) (1.1a) Incidence and prevalence rates of FASD –
 - b) (1.1b) Impacts and costs of FASD –
 - c) (1.1c) Awareness level of FASD –
 - d) (1.1d) Evidence of continued “risk-taking” behaviours by pregnant women and women of childbearing age –
 - e) (1.1e) Knowledge and attitudes of health professionals about FASD –
- 3) Do you think there is a continued need for the federal FASD Initiative? Why or Why not?
- 4) If yes, is it necessary for the Government of Canada to operate this Initiative?

Probe: role of federal government vs, provincial government, vs community groups

Probe: (1.3a) # of other organisations involved, overlap and duplication?
- 5) What is your understanding of the rationale of the federal FASD Initiative?

Probe: (1.2c,b) has the rationale evolved since the inception of the FASD initiative?
- 6) To what extent is the federal FASD Initiative in line with current federal and provincial objectives (including Health promotion, and the children and Aboriginal agendas)?

Probe: (1.2a) international priorities

Design and Delivery

Program Design

- 7) In your view, are program management practices (financial/accounting and project reporting) adequate?
Probe: Did the federal FASD Initiative experience any funding delays?
- 8) In terms of the management of the federal FASD Initiative, what is working well and what could be improved?
- a) National level –
 - b) Regional level –
 - c) Other –

Selection Process

- 9) Please describe the process through which you received funds for your Initiative sponsored activities.
Probe: (3.2a, 3.1a) Is this the most efficient way to support Initiative activities?
- 10) To what extent were you required to leverage resources from other sources? Please provide examples of other sources.
Probe: (1.3a) What is the added advantage of Initiative funds?
- 11) In general, what is your perception of the selection process for Initiative funded projects/activities?
Probe: Was the selection process fair, right criteria, transparent, timely?

Cost Effectiveness

- 12) Were you able to spend all of the funds that were allocated to you? If not, please explain.
- 13) In your view, are the most appropriate and efficient means being used to achieve the objectives of the federal FASD Initiative relative to other design and delivery approaches?
Probe: (4.1b) Can you provide any examples that demonstrate how the Initiative achieves efficiencies/delivers value for money to Canadians?

Outcomes and Impacts

- 14) Please read each of the statements listed in the table below and answer the following questions:
- **Maturity** - rate where you think the FASD community was 5 years ago and where you think the FASD community is now using a 5-point scale, where 1 = *Immature* and 5 = *Mature*
 - **Attribution** – for each statement where you noted a change from 5 year ago relative to now, rate whether you think the change is attributable to the federal FASD Initiative using a 5 point scale, where 1= *Not at all Attributable* and 5 = *Entirely Attributable*.
 - **Examples** - If you think the Initiative is attributable (rating of 3 or higher on attribution) then provide an example of how.

	Maturity Immature Mature 1--2--3---4--5	Attribution Rating	Examples

	5 years ago	Now	No 1--2--3--4--5	Entirely
14.1 <u>Evidence</u> on the use of alcohol during pregnancy and by women of childbearing age				
14.2 Public and professional <u>awareness</u> of FASD; the impact of alcohol consumption during pregnancy; and of available resources				
14.3 <u>Availability</u> and effectiveness of FASD tools and resources for screening and diagnosis of affected individuals and pregnant woman				
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14.5 Effectiveness of <u>coordination and cooperation</u> with and between stakeholders (e.g., OGDs, provinces, territories, NGOs etc.)				
14.6 Adoption of <u>common approaches</u> to addressing FASD, including best practices related to prevention and intervention				
14.7 Stakeholders prevention and intervention <u>capacity</u> focused on the disorder its effects, and ability to address risk factors				
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- 15) The following are projects/activities that have been supported by the federal Initiative. Please indicate whether you are familiar with the project and how useful you find the project/activity (using a 5-point scale, where 1= *Not at all Useful* and 5 = *Very Useful*)

	Familiar with project (✓)	Usefulness Not at All Useful 1—2—3—4—5 Very Useful
<p>15.1 TITLE: Parenting Guidelines for Families of Children with Fetal Alcohol Syndrome/Fetal Alcohol Effects (FAS/FAE)</p> <p>SPONSORING ORGANIZATION: Victorian Order of Nurses for Canada (VON Canada)</p> <p>DESCRIPTION: The project built on the personal experiences of parents and front-line care providers (including foster and adoptive families) as well as existing research and resources in developing the best practice tool for those caring for children with FASD.</p>		
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	Familiar with project (✓)	Usefulness Not at All Useful Very Useful 1—2—3---4—5
<p>15.3 TITLE : La Boîte à Outils (Prévention du SAF)</p> <p>SPONSORING ORGANIZATION : SAFERA</p> <p>DESCRIPTION : This project partnered with francophone Canada Prenatal Nutrition Programs, Aboriginal Head Start and Community Action Programs both in Quebec and outside of the province to design an interactive internet site, a Francophone video for parents and care givers, a collection of accessible resources and information.</p>		
<p>15.4 TITLE : Nurturing Change: Working effectively with high-risk women and affected children to prevent and reduce harms associated with FASD Promoting Effective FAS-related Practices in CAPC/CPNP Projects Through Targeted Knowledge and Skills Transfer</p> <p>SPONSORING ORGANIZATION : Mothercraft (Breaking the Cycle)</p> <p>DESCRIPTION : This project developed and delivered eight two-day "Live" interactive training sessions to front-line workers focussed on knowledge and skills to screen and support women at risk and affected children within the context of CAPC/CPNP projects. A training manual was developed along with a web-based tool kit.</p>		
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<p>15.6 TITLE : National Indian and Inuit Community Health Representatives Organization FAS/FAE National Training Session</p> <p>SPONSORING ORGANIZATION : National Indian and Inuit Community Health Representatives Organization (NIICHRO)</p> <p>DESCRIPTION : This project developed a "Train-the-Trainer" model to deliver FAS/FAE skills training in both official languages to approximately 275 Community Health Representatives (CHRs) and other front-line workers.</p>		
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<p>15.8 TITLE : National Networking Project</p> <p>SPONSORING ORGANIZATION : Prostitutes Empowerment, Education & Resource Society (PEERS)</p> <p>DESCRIPTION : This project developed a national FASD information and resource network with agencies that work with sex trade workers and with health experts across Canada. It increased the front-line workers' capacity by developing workshops which included training in harm reduction, practical day-to-day tools and ways to identify high-risk clients.</p>		
<p>15.9 TITLE : Training of Trainers Workshop and a series of Webinars and a Physicians Handbook</p> <p>SPONSORING ORGANIZATION : PRIMA</p> <p>DESCRIPTION : The PRIMA (Pregnancy-Related Issues in the Management of Addictions) project is designed to assist Canadian health professionals in providing obstetric care for</p>		

	Familiar with project (✓)	Usefulness Not at All Useful Very Useful 1—2—3—4—5
women using substances of abuse, and in providing neonatal and pediatric care for children who were substance-exposed in utero.		
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<p>15.12 TITLE : Webcast for FACE Research Roundtable</p> <p>DESCRIPTION : FACE was established in 2000 to promote open discussion and collaboration in all areas of medical and social science research related to the effects of alcohol use during pregnancy and lactation. Today the FACE Network includes researchers, clinicians, front-line workers, government and industry representatives and policy-makers from across Canada. PHAC funded part of the Webcast so that the presentations could be accessible to a wider audience.</p>		
<p>15.13 TITLE: Fetal alcohol spectrum disorder: Canadian guidelines for diagnosis</p> <p>DESCRIPTION: The purpose of this paper was to review and clarify the use of current diagnostic systems and make recommendations on their application for diagnosis of FASD-related disabilities in people of all ages. PHAC contributed to the guidelines' development by supporting the process through which they were elaborated.</p>		
<p>15.14 TITLE: FASD: A Framework for Action</p> <p>DESCRIPTION: The FASD Initiative is reflected in the <i>Fetal Alcohol Spectrum Disorder (FASD): A Framework for Action</i> that was developed in consultation with organizations at the community, provincial, territorial and national levels. FASD: A Framework for Action, includes the basic building blocks required for concerted action within communities, provinces and territories as well as within the federal government.</p>		

- 16) Do you think these are the types of activities/projects that the federal FASD Initiative should be supporting?
- 17) Overall, what are the current strengths and weaknesses of the Initiative?
- 18) Is there anything else you would like to add?

Interview Guide –Experts

Government Consulting Services has been engaged by the Public Health Agency of Canada (PHAC) to conduct an evaluation of the federal FASD Initiative. The evaluation will focus on assessing the program during the period of April 1, 2004 to the

Present. The FASD initiative has a national and regional scope and is a \$5M/year initiative of which Population and Public Health Agency of Canada (PHAC) has \$3.3 million per year and First Nations and Inuit Health Branch (FNIHB), \$1.7 million. This evaluation covers only \$3.3 million associated with the PHAC.

The evaluation study will play an important role in decisions that will be made by the Public Health Agency regarding the future structure and operation of this program. Your participation in this study will have a significant impact, therefore, on the future of this program. All individual answers will be confidential.

Background

- 1) Please outline your role and involvement with the federal FASD Initiative.

Probe: # of years working in FASD field, # of years in current

Program Relevance

- 2) (1.1) What do you consider to be the most reliable current source (name of document, survey etc.) of information on the following:
 - a) (1.1a) Incidence and prevalence rates of FASD –
 - b) (1.1b) Impacts and costs of FASD –
 - c) (1.1c) Awareness level of FASD –
 - d) (1.1d) Evidence of continued “risk-taking” behaviours by pregnant women and women of childbearing age –
 - e) (1.1e) Knowledge and attitudes of health professionals about FASD –
- 3) (1.1f) Do you think there is a continued need for the federal FASD Initiative? Why or Why not?
Probe: Federal dollars relative to other sources of funding
- 4) (1.3b) If yes, is it necessary for the Government of Canada to operate this Initiative?
Probe: role of federal government vs, provincial government, vs community groups
- 5) (1.2c) What is your understanding of the rationale of the federal FASD Initiative?
Probe: (1.2c,b) has the rationale evolved since the inception of the FASD initiative?
- 6) (1.2a) How does the Government of Canada’s approach to FASD compare to what other countries are doing?

Design and Delivery

Program Design

- 7) (3.2a) In terms of the management of the federal FASD Initiative, what is working well and what could be improved?

- a) National level –
- b) Regional level –
- c) Other –

8) (3.1a) The federal FASD Initiative supports FASD activities in three ways: 1) by funding national strategic projects, 2) by allocating funds to the regions and 3) with available Operations and Maintenance (O&M) dollars. Do you think this is the most appropriate and efficient means to achieve the objectives of the Initiative?

Outcomes and Impacts

9) Please read each of the statements listed in the table below and answer the following questions:

- **Maturity** - rate where you think the FASD community was 5 years ago and where you think the FASD community is now using a 5-point scale, where 1 = *Immature* and 5 = *Mature*
- **Attribution** – for each statement where you noted a change from 5 year ago relative to now, rate whether you think the change is attributable to the federal FASD Initiative using a 5 point scale, where 1= *Not at all Attributable* and 5 = *Entirely Attributable*.
- **Examples** - If you think the Initiative is attributable (rating of 3 or higher on attribution) then provide an example of how.

	Maturity		Attribution Rating	Examples
	Immature 1--2--3--4--5	Mature		
	5 years ago	Now	No 1--2--3--4--5	Entirely
9.1 <u>Evidence</u> on the use of alcohol during pregnancy and by women of childbearing age				
9.2 Public and professional <u>awareness</u> of FASD; the impact of alcohol consumption during pregnancy; and of available resources				
9.3 <u>Availability</u> and effectiveness of FASD tools and resources for screening and diagnosis of affected individuals and pregnant woman				
9.4 <u>Uptake</u> of tools and resources for screening and diagnosis of affected individuals and pregnant woman				
9.5 Effectiveness of <u>coordination and cooperation</u> with and between stakeholders (e.g., OGDs, provinces, territories, NGOs etc.)				
9.6 Adoption of <u>common approaches</u> to addressing FASD, including best practices related to prevention and intervention				
9.7 Stakeholders prevention and intervention <u>capacity</u> focused on the disorder its effects, and ability to address risk factors				

	Maturity		Attribution Rating	Examples
	Immature 1--2--3---4--5	Mature		
	5 years ago	Now	No Entirely 1--2--3--4--5	
9.8 Stakeholder capacity to deliver <u>culturally appropriate</u> programs services, tools and resources				

- 10) The following are projects/activities that have been supported by the federal Initiative. Please indicate whether you are familiar with the project and how useful you find the project/activity (using a 5-point scale, where 1= *Not at all Useful* and 5 = *Very Useful*)

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