

**PEERS FASD Collaborative Family Care Homes Project  
A 3-Year Demonstration Project funded by the Victoria Foundation**



**Project Coordinator: Tracy Pawson BSW, RSW**



The PEERS FASD Collaborative Family Care Homes Project began in September 2007. The purpose of this project is to provide Collaborative Family Homes for "...sex workers or ex-sex workers with FASD in making the transition to a mainstream lifestyle with their babies/children" (Victoria Foundation, 2007).

The key objectives of the Project are

- To provide support to mothers who have FASD and their children by housing them in a family home environment
- To support mothers whose children would otherwise be apprehended with the opportunity to raise their children
- To create a stabilized, structured environment where women and children will have better opportunities to access informal and formal resources in the community
- To provide parenting role models and support for moms and their newborns/children
- To reduce the number of alcohol related births by providing birth control options to mothers and educate them about the dangers of drinking during pregnancy
- To improve the life skills of mothers with FASD and their children who may/may not have FASD as well
- To provide an opportunity for prostitutes to leave the sex trade and integrate into mainstream society
- Inform research and policy makers how to effectively support mothers with FASD and their children
- Guide research in supporting mothers with FASD and their children

- Enhance our community's overall level of care for their children, decrease family violence, and increase the positive indicators that demonstrate a child is in a safe home



Guiding Principles of the Project are based on the UN Convention on the Rights of Persons with Disabilities (signed by Canada in 2007). The principle of Full and effective participation and inclusion in society is especially significant to this project, as the immediate family members (such as children of parents with FASD) are often discriminated against as well.

The Convention marks a "paradigm shift" in attitudes and approaches to persons with disabilities. It takes to a new height the movement from viewing persons with disabilities as "objects" of charity, medical treatment and social protection towards viewing persons with disabilities as "subjects" with rights, who are capable of claiming those rights and making decisions for their lives based on their free, and informed consent as well as being active members of society.

We at PEERS aim to help make a paradigm shift as well – in the way that child welfare is practiced. The FASD Collaborative Family Care Home project is also based on an infant and child mental health model, as evidence shows that children do best when given every opportunity to maintain their primary attachment, usually to their mother. The Project Coordinator uses the SAFE model Homestudy to find Care Families in the community that welcome both child and mother into their homes, which are equivalent in skills, safety and monitoring to a Level 3 foster home.

Care Home mentor families help the mother with:

- |                                  |   |
|----------------------------------|---|
| • MCFD plans                     | • Scheduling appointments and important tasks |
| • Child development skills       | • Stable housing and home environment         |
| • Transportation                 | • Sense of family relationship                |
| • Money management money         | • Accessibility to community resources        |
| • Grocery shopping               |   |
| • Nutrition and cooking          |   |
| • Interpersonal skills developed |   |

Children living with their mothers in Collaborative Homes thrive due to:

- Infant and child mental health model based on attachment theory
- Continuous and stable relationships
- Extended family
- Medical/dental appointments-infant and supported child development services as needed
- Visibility in community leads to increased health and safety
- Mother supported and empowered - able to care for and maintain secure bond with child leads to good mental health

**Outcomes : up to March 2009**

Two homes are now open, with both mothers and children thriving in our community. Both mothers have been diagnosed through the FASD Community Circle Adult Diagnosis Clinic and better understand their disability. They also now receive Person with Disability income assistance which is more than regular income assistance and has many benefits attached. The children are doing incredibly well. One has been returned full time to her mother's care by MCFD, and she and her mother continue to live in our Collaborative Home. The other child spends 4 nights a week at his mother's collaborative home and the future looks bright for his return to his mother full time. Mothers, care home mentors and MCFD social workers are very impressed with our FASD Collaborative Family Care Home Project.

The Project Coordinator has been travelling throughout BC with the Sex Workers Integrated Model workshop reaching communities such as Prince George, Nanaimo, Campbell River, Vancouver, Kelowna and Kamloops toward the objectives of informing researchers., policy makers and the general population about how to better support families affected by FASD. The Project Coordinator will present in March at the Victoria Conference Centre at the 3<sup>rd</sup> International Conference on FASD.

The final word on our PEERS FASD Collaborative Family Care Homes Project belongs to our mothers with FASD who access our support. When asked what she thinks about her participation as a mother in one of our Homes, one mother said *"I am so glad to have a family of my own – I never had that before. I can support my child; I just need someone to support ME."*

Another mother living in one of our care homes said *"I think the biggest value is keeping the moms and kids together. Without this program there would be a lot of FASD moms who's families would get broken up and this is just giving us a chance to parent our kids."*

*I've had a good experience getting to know my family here, doing outings, meeting new friends. I've been learning a lot about healthy food choices, and how to connect with my community centres and take classes. This program helped me get my daughter back by supporting me in my parenting and otherwise it would have been very challenging and taken a long time. It's been like my fourth leg on the ground - it's given me stability."*

