

Prevention Conversation x Towards Healthy Outcomes Foundations Training:
Full Length Script

Content Section 1

1. Prevention Conversation & Towards Healthy Outcomes Foundations Training

2. Title Slide (Content Section 1): Towards Healthy Outcomes: We Go Where We Look

- *Presenter note: Read slide title*
- Today we are going to be learning about perspectives. Specifically, we will talk about mindset, or how the way in which we think about things, or ‘the direction we look in,’ often shapes ways we think and then act.
- Put practically, where we look is often where we go – physically but also in our interactions, planning and support provision. Our mindset sets our focus, and this sets the direction we invest our energies in moving towards. What is really interesting is that sometimes our mindset is shaped by fear or worry. As a result, we invest in focusing on or looking at risks in an effort to avoid risks.
- Unfortunately, in doing so, we often fail to invest energy in those things that may actually protect us from risk or help us to avoid risk.
- In other words, by focusing solely on fear, we may actually increase risk rather than move in a safer direction.

3. Metaphor Slide (Bike)

- Let’s talk about this using an everyday example:
- *Note for presenters: if you are able, feel free to adjust this metaphor to a personal story/experience that you have had if it is a good fit here. Otherwise, please use the following example. You can adjust the words to fit your own style as needed.*
 - One day, a little boy is out riding on his bike with his parents. Helmet on and training wheels locked and loaded, he is excited to be riding his big boy bike all by himself!
 - He is riding his bike on the sidewalk while his parents walk behind him and watch his progress.
 - There are lots of cars parked beside the sidewalk, close enough that the mom, who is watching her son’s excited and somewhat unsteady ride, is

beginning to worry that he is going to hit one of the parked cars. So she decides to warn him by saying “watch out, don’t hit the cars!”

- Her son hears her and begins to pay more attention to the parked cars. At first, the mom is relieved. But as she watches her son continue to bike along the sidewalk, her worry increases, as do her warnings: “watch out!” “Not so close!” “Look out for the cars!” “Don’t hit anything!”
 - Despite the mom’s warnings and her son’s apparent concentration, he does eventually hit the car. Much to the mom’s dismay.
 - When asked why he didn’t watch out for the car, the son says, frustratedly, “I did mom! I was watching the cars!”
 - **It’s then the mom realizes her mistake:** In focusing so much of her and eventually her son’s attention on avoiding making a mistake – rather than highlighting the clear path ahead, she had limited his view. He became more focused on the cars than the clear path in front of him.
 - **In focusing on avoiding risks, she had steered him right into one.**
- The same is true in other parts of life too: **The direction we direct our attention and effort is the direction we move towards.** The way we set goals and view challenges shapes how we move forward.
 - Now it is fair to say that life is often not this simple, and the clear path is not so clear – and we cannot simply ignore the risks. But working from this example we simply highlight the risk of OVER focusing on the worry – rather than clearly defining the desired path.
 - Even in complicated spaces, like addiction, a clear definition of healthy living, healthy coping, self-care and/or stability, may help to reveal an alternative to the risk. It offers something to aim towards. And it gives us a way to consider how we support progress (remember those training wheels).
 - Also, and perhaps at a more basic level, it reminds all of us that there is something positive to work towards. There is *hope*. And although it may be a windy, and bumpy road, together we can navigate forward. This perspective can change the way we interact with others and the foundations we set for movement towards healthy outcomes.
 - Today we are going to talk about the impacts of where we look and how we can change where we look in two ways:

1. the way we interpret behaviour and how we interact with other people, and
2. the way we set goals and plan for the future with the people with FASD we are working with alongside their support teams.

4. Presentation Outline

- *Presenter note: read outline*
- By the end of the presentation, participants will be able to:
 - Learn how our beliefs and attitudes can shape the interpretation of behaviours and decision-making in practice - what we believe matters!
 - Be able to understand that all behaviour is a way of communicating what we need, or in other words, all behaviour is functional: how we act is a way of communicating what we need. This includes understanding the unique ways people with brain based differences may show up in their day to day functioning.
 - Be able to describe the Towards Healthy Outcomes framework, otherwise referred to as THO throughout this presentation, and its pathways of healthy functioning.
 - Begin to apply principles of the towards healthy outcomes framework to their understanding of people with FASD.
- This section is about increasing our brain responsiveness, so that we can promote relationships with the people we are supporting that underlie our ability to provide supports.

5. Attitudes & Perceptions: The Direction We Look Towards

- Our attitudes and beliefs are the foundation for our thinking, or **mindset**. They influence the way we think about or make sense of others – and in doing so what we focus our attention on, and then how we interact with others.
- Our attitudes and beliefs can be considered “me” factors in our interactions with others. This means that our attitudes and beliefs reside in each of us and are shaped by our experiences, values and learning, creating the foundation for our mindset.
- **Mindset** is the direction we look towards.
- By reflecting on our mindsets we become more aware of how our beliefs influence our thinking and in turn our behaviour – which impacts our interactions with others.

- This reflective process helps us to explore how subtle shifts to our thinking may create opportunities in our work with others.
- By recognizing that our mindset guides what we notice and how we make sense of behaviour, we open the door to exploring ways that changing our thinking may impact how we interact with others, and ultimately support their success.

6. Attitudes & Perceptions: What We Believe Matters

- It's important to understand that what we believe matters - and so where we look matters.
- Our beliefs shape a lot of the ways we experience day to day life.
- Let's all take a moment to reflect on the following experiences that we have all had, and how you feel after each of these kinds of experiences.
 - How do you feel when you make a mistake? When you get something wrong? How does it feel if someone gets mad at you about that mistake? It probably doesn't feel very good does it?
 - Well, how do you feel when someone is always focusing on your flaws? Not even considering your strengths and all the good things you can do, but instead focuses on where you messed up. That feeling probably feels pretty bad right?
 - What about times when you have been able to contribute meaningfully to your community? Maybe it's through your job or vocation, or maybe training you've done. Or perhaps it's just small random acts of kindness. Being able to leave a positive impact on the people and environment around you, that probably feels pretty good doesn't it?

7. Attitudes & Perceptions: What We Believe Matters (#2)

- The ways we think about the mistakes of ourselves and others is very important, because it can shape the ways we think about...

8. Attitudes & Perceptions: What We Believe Matters (#3)

- Ourselves

9. Attitudes & Perceptions: What We Believe Matters (#4)

- Others

10. Attitudes & Perceptions: What We Believe Matters (#5)

- And the people with FASD we work with.

11. Mindset in Action: How Our Thinking Shapes Interactions

- Let's unpack mindset a bit more.

- We all hold basic beliefs about what is important. These shape our priorities and interactions.
- We also hold beliefs about what different behaviours might mean or message to us – this is what we refer to as **behavioural interpretation**.
- This means that when we interact with someone, or observe behaviour, our brains automatically “make sense” of what we see - assuming the interaction or behaviour occurred because of something about the person (ex: “they’re rude” or “they don’t care) or something about the situation (ex: “they must be having a bad day, “maybe they didn’t notice me.”)
- We interpret what we see through the lens of our own experiences, our current mood or stress level, and often incomplete information.
- **That process of making sense is guided by our mindset** or the internal framework of beliefs, attitudes, and expectations that influence how we understand others.
 - For example, what sort of assumptions might we make when someone cuts us off in traffic? Or when a pedestrian yells at us about where we parked our car?
 - Or when a friend cancels plans at the last minute, a neighbour ignores our wave, or a client doesn’t show up for their appointment?
 - In each of these moments, our mindset is quietly at work - guiding how we interpret what’s happening.
 - Depending on how we think about the situation, we might feel angry, dismissed, understanding, or simply curious.
- The situation doesn’t change, but our interpretation of it - and so does our emotional and behavioural response.

12. Mindset in Action: How Our Thinking Shapes Interactions (with animation)

- Often in these situations, especially when we are frustrated, we assume a negative motive is behind the behaviour, which changes the way we not only interpret the behaviour, but how we see the person. So as a result of the negative interpretation, we may view these people in a negative light.
- *Presenter’s note: Read slide.*
- These assumptions then go on to directly inform our interactions and relationships with those people.

13. Mindset in Action: How Our Thinking Shapes Interactions

- When we focus on the negative, we don't leave room for different understandings or ways of thinking about the person's behaviour. Reframing how we interpret behaviour can not only change our feelings about what happened but also how we think about the person.
- Although we are using familiar, day to day examples, reframing the way we understand people's actions can have a radical impact on the way we offer support.
- In fact, shifting our perspective in this way creates space for us to consider that everyone is trying to move towards the open road. If we believe that then we can ask what might be a barrier.
- When trying to understand why someone might be acting a certain way, try to understand that the behaviour seemed to help meet a need, even when it did not lead to the desired results.
- If we want to walk alongside folks with FASD as they achieve success, we need to understand that what we see (i.e., their behaviour) is not the end of the story. By doing so, we are set up to build relationships with the people with FASD we are supporting. These relationships become the heart of the support we provide.
- **So the first step is to understand that all behaviour is functional.**

14. Metaphor Slide (Bike)

- This was demonstrated by our earlier metaphor of the boy on his big boy bike. Where the mom saw him struggling and eventually making a mistake, what the boy experienced was different. He worked so hard to avoid making a mistake, he knew it was important to listen to his mom, he became more nervous as he heard her anxiety, and biologically, physically, his arms steered in the direction he looked.
- In other words, despite his best efforts – and maybe even because of his intention and efforts – his body took him in the direction of his focus.
- What if instead, the mom had said “look straight ahead, pay attention to the road in front of you”, or even “look at how much space you have on the sidewalk”. What do you think would have been the outcome in that case? The boy's attention might have been on the sidewalk and the path ahead rather than the car beside him.

15. All Behaviour Is Functional

- It's important that we understand that we as other people can only see the observed behaviour; what is missing (usually) are the underlying intentions around the behaviour, along with its usefulness.
- We might not fully understand why someone is late to an appointment with us, or why a stranger yelled at us when we parked our car.
- But we especially won't be able to understand when we look at their behaviour and don't consider what might be underlying it.

16. All Behaviour Is Functional

- And we certainly won't be able to develop that understanding of the underlying causes of behaviour when we then jump right into thinking: What do I do? How do I solve this problem?
- When we do that, we are likely to miss two crucial underlying pieces of information:
 1. The **underlying intention** or the "why" behind the behaviour and
 2. The **function of the behaviour**, or the need the behaviour is meeting.
- Understanding the underlying causes of behaviour makes our lives easier. We can take a moment to pause before moving into action and first ask ourselves, "What do I know" about this person, this situation, this behaviour?
- It gives us some space to understand the behaviour. It provides more information that will be super useful when it's time for us to begin considering solutions.

17. Shifting From What do I Do to What Do I Know?

- By shifting our initial thinking from "*what do I do*" to "*what do I know*", we are setting ourselves up to think about the situation from a mindset of curiosity and openness, which helps to inform our understanding and way forward, rather than jumping into judgment and action.
- When we can think of ourselves as explorers or scientists who are curious about what we are seeing, we can approach situations with openness and understanding.

18. The Direction We Look Matters

- So going back to our earlier examples with our new mindset of asking "What do I know?", let's revisit what we might assume about these people based on these observed behaviours.
- *Note for presenters: depending on time you can make this an open discussion and include responses from the audience.*

19. The Direction We Look Matters (with animation)

- *Presenter note: Read slide*
- As discussed earlier with our bike metaphor, when we focus only on problems and challenges, it becomes much harder to see or think of anything else.
- We can always learn to look somewhere new, and sometimes all we need is to know that there is another way to look - we can get so stuck in our habits and ways of doing things that we forget that there are different options.
- But when we do start looking at things differently, it becomes easier and easier over time.
- And growth becomes easier and easier to see.
- So where we might have been feeling offended or even disrespected with our old assumptions, now we might be feeling more curious and open minded to the function of these behaviours.

20. Shifting From What Do I Do to What Do I Know?

- This shift is a critical first step in working with folks with FASD.
- By making this shift towards “What do I know” we are better equipped to be able to think about the person we’re supporting from a more balanced perspective that allows us to consider both strengths and challenges.
- Developing an understanding of the person we are supporting, including their unique areas of strength and weakness is necessary to walking alongside folks with FASD as they strive towards success.
- Without a balanced understanding, it is much harder to identify the ideal conditions needed for growth and success for each person with FASD.
- From this balanced position, we are better able to think in creative ways about solutions and leveraging strengths when supporting people with FASD.

21. Activity

- The best way to shift our mindset is to practice!
- Now it’s time for a brief activity break to give us a chance to apply what we’ve been learning so far.

22. Activity: Pause, Reflect, Reframe

- This activity will give us a chance to put the “all behaviour is functional” perspective into practice.
- Often, professionals working with individuals with FASD deal with situations where behaviour can feel confusing, frustrating, or even disrespectful.

- This activity is designed to help us support others in slowing that process down and practice using an FASD-informed lens before jumping to conclusions.
- *Presenter note: Depending on time, you can always shorten this activity only to include one story. Depending on your audience you could select the story that best fits their roles and then present that story and the corresponding discussion points.*
- We're going to work through one or two short stories from everyday settings. For each, we'll move through the three steps you see on the screen: Pause, Reflect, and Reframe.
- First, we *pause* and notice our initial reactions to the behaviour(s). These reactions might include irritation, confusion, or assumptions about intent such as "they're not trying" or "they're being rude."
- Next, we *reflect* by asking, "What else might be going on?" We'll consider how brain-based differences related to FASD, like difficulties with memory, regulation, or executive functioning, might be influencing the behaviours we are seeing.
- Then we reframe by exploring an alternative interpretation. An interpretation that views the behaviour as functional or as an attempt to communicate a need.
- This final step helps us shift our thinking from judgment to understanding and allows us to imagine how *our* response might change with this new perspective.
- The goal here is NOT to excuse behaviour but instead to strengthen our ability to respond in ways that support regulation, dignity, and connection.
- After we introduce each story, we'll work together as a group to identify the brain-based differences that could be contributing to the observed behaviours, discuss what the person might be trying to communicate, and consider how this new understanding might change how we respond.

23. Evan's Story: Pause, Reflect, Reframe

- *Presenter Note: Present Story on Slide*

24. Discussion: Pause, Reflect, Reframe

- *Presenter Note: Present information on the slide and encourage the audience to answer the questions, either as a group or in smaller breakout groups.*
- *Presenter Note: Potential prompts for discussion:*
 - What might Evan think of this behaviour? What might his reactions be to your prompts/reminders?

- Have you ever interrupted someone before? If so, what was your rationale/reason? Presenter's note: feel free to share some reasons you may have interrupted someone in the past.
- What do you think Evan's teacher might be thinking or feeling when trying to help Evan stay on task? (e.g., frustrated, overwhelmed, disrespected) How might these thoughts and feelings be impacting the teacher's ability to adapt and respond to Evan's needs?

25. Leanne's Story: Pause, Reflect, Reframe

- *Presenter Note: Present the story on the slide*

26. Discussion: Pause, Reflect, Reframe

- *Presenter Note: Present information on the slide and encourage the audience to answer the questions, either as a group or in smaller break out groups.*
- *Potential prompts for discussion:*
 - It sounds like Leanne is aware of the problems that her being late causes, what might some of her feelings about this be? (e.g., negative, self-defeating, negative self-talk). Could those feelings be making it hard for her to be proactive or responsive when she is late?
 - What might be some potential road blocks to Leanne being proactive to her difficulties with time management?
 - It is likely that if Leanne is late so often for work that this may be a pattern that presents in other parts of her life. How could you help work with Leanne's employer to understand that her being late is not personal or specific to the job, but rather a reflection of the unique ways Leanne sees the world. What might be helpful reframes for the employer to understand when working with Leanne? What might be some roadblocks to Leanne being able to be proactive and start to implement strategies for time management?

27. Fetal Alcohol Spectrum Disorder: Establishing Shared Understandings

- Now that we have established the importance of reflecting on and being aware of the impacts of **HOW we know**, and ways our perceptions (mindset) have influence, let's shift to building our knowledge base about FASD. The **WHAT we know**.

- By establishing a shared understanding about what FASD is, and how it impacts brains and bodies, we can better understand impacts on daily living and ways in which we might help them strive towards healthy outcomes.

28. FASD Is...

- FASD is a neurodevelopmental disorder that is caused by prenatal alcohol exposure. It is estimated that approximately 4% of people in Canada have FASD.
- Prenatal alcohol exposure is the most common cause of neurodevelopmental disability in Canada, more common than Autism, cerebral palsy, down syndrome, and Tourette's syndrome combined.
- **People with FASD are diverse:** multiple areas of cognitive, behavioural, and physical functioning can be impacted by prenatal alcohol exposure. How it affects each person is different = each person with FASD has unique strengths and needs.
- People from all social, cultural, economic, and ethnic backgrounds can be affected by prenatal alcohol exposure.

29. FASD Is (#2)

- Individuals with FASD, like all people, have a wide range of potential strengths that, when identified, can inform goal setting and supports. Success is easier when people are equipped to use their strengths within systems of support.
- After receiving a diagnosis of FASD, people with FASD and their families are likely to have a wide range of thoughts and feelings, like feeling validated, empowerment, and increased understanding and support from others. They may also experience feelings of grief, worry, and concern for the future.
- This means that a diagnosis of FASD can also lead to many questions, as people with FASD and their families seek to understand how this will impact daily life.
- **This can be a chance** for supporters to help set goals and begin thinking broadly about what it means to work towards a happy and healthy future.
- Supporters can be very helpful in finding ways to work together to offer help where it is needed, while drawing on the person's unique strength.
- Too often though, these questions are accompanied by strong feelings of fear and worry, so the focus may be how to address a potential risk. In many cases this risk is very significant and it leads us into **reactive responding** – where we overly lean into ensuring safety as a priority and ignore any other goals.

- While safety is an important priority, this can sometimes set a pattern of focusing on risks rather than finding a balance between navigating risks and working towards goals.
- The **mindset** shift we have been talking about is essential early steps in supporting individuals with FASD to achieve success, no matter your role. By understanding the unique brain-based differences that may be present for those with FASD, we may be poised to best address risk and identify and work towards meaningful goals.

30. FASD: Brain Domains

- *Presenter note: The pictures of the domains are in the same order as those listed below starting in the top left hand corner and then moving towards the right. The first picture on the top line represents academic achievement, and the first picture on the bottom line represents neuroanatomy.*
- The **Canadian Guidelines for FASD Diagnosis** identify 10 brain domains that are affected by prenatal alcohol exposure. These are the areas of functioning that are assessed during the diagnostic process to gain an understanding of the unique needs of each individual with FASD. The areas assessed include: academic achievement, attention, cognition, language, memory, neuroanatomy, executive functioning, adaptive behaviour, motor skills, and affect regulation. Although these are presented as individual domains, in reality they are highly connected - **no part of the brain works on its own.**
- Clinicians know this and will often share information about patterns of functioning and how that may impact daily living. If you have access to this information it can be helpful. Often however, you will not see this information.
- That means that you may have to use your knowledge of the brain domains, as shared here, as a way to generate possible explanations for the questions you may have. As we discuss the domains we will highlight how this knowledge can help you to imagine alternative ways to interpret behaviour, identify strengths, and offer meaningful support to individuals with FASD in a way that is **brain responsive.**
- In short, your job as supporters is not to be able to identify which brain domain is directly responsible for a certain behaviour that we might be seeing. Rather, your job is to understand possible brain-based contributions that lead to the unique

strengths and needs in each person with FASD to help you to modify your responses and build relationships.

31. FASD: Brain Domains (What I might see...#1)

- One way we have helped to bridge the gap between brain based differences and daily living was to create some tables that help us to compare how brain responsive thinking sets us up to explore alternative supports and strategies.
- Here you see three columns. The first *What I might see* describes some common stories we've heard from support workers that they have experience working alongside folks with FASD.
- The next, *why I might be seeing this*, lists some potential underlying brain based differences that may account for what you are seeing.
- Finally, the column *what can I do* offers some suggestions for discussion prompts and questions to ask the person you are working with.
- *Presenter note: read through the slide, if time allows feel free to allow for conversation with the audience as you walk through these points.*

Further reading for presenters: this example was based off of a [resource](#) provided in the appendix (starting at page 62) of: [A systematic and person-centered harmonizing framework for housing individuals with FASD](#). More information is available through these links or at the Canada FASD Research Network's website. The second link takes you to the corresponding blog post that outlines the document, which is linked in the first link and also linked in the text of the blog post.

32. FASD: Brain Domains (What I might see...#2)

- *Presenter note: Read through the content on the slide row by row (rather than going through each column). If time allows, feel free to make this slide more conversational and incorporate audience feedback.*
- This helps us to understand that the people with FASD we are supporting are likely to interact with the world in a different way than we do.
- **Brain-responsive approaches** encourage creative, and responsive solution finding as we navigate towards our goals.
- We will return to goals later.

33. Towards Healthy Outcomes: Using Shared Understanding to Pursue Goals

- So far, we have been talking about how we might reflect on our attitudes and beliefs, and apply knowledge of FASD to reframing our interpretations of behaviour – to create space for positive interactions with individuals with FASD. Such positive interactions can balance strengths alongside our understanding of brain-based differences within our interactions with people with FASD. This can shape the ways we provide supports.
- Now we will shift our focus from one-on-one interactions, to consider broader thinking and planning – how we support individuals with FASD in goal setting in a way that makes sense for their unique strengths and needs.
- The framework, Towards Healthy Outcomes, highlights goals, including how to *identify* and set goals, and the ways we might modify strategies in a brain responsive way.

Further reading for presenters: The updated Towards Healthy Outcomes (THO) includes more in depth explanation of the philosophies, and a deeper dive and resources in each of the 10 pathways listed in the visual. It can be found at this [link](#) or at the Canada FASD Research Network's website.

- Towards Healthy Outcomes framework, or the THO, offers a different approach to setting goals. It offers insights into how supports can help people with FASD, and suggestions for future planning – geared towards destination goals.
- The Towards Healthy Outcomes framework is meant to be a guide for supports, such as families, caregivers, service providers, and other professionals working to help individuals with FASD achieve healthy outcomes.

34. Towards Healthy Outcomes Visual

- The THO framework does this by offering a shared understanding of goals and pathways to success.
- Notice we are using the word *shared*. Understanding needs to be more than a word. Understanding must be created through collaboration between the individual with FASD and their support team. Shared understanding can include knowing why an individual may be struggling, how they have experienced success and/or challenges.
- **Shared understanding creates space for creative and responsive support and goal setting tailored to the person's unique strengths and needs.**

- Shared understanding includes a shared language that can be used by people with FASD, caregivers, and support workers to help create mutual understanding of not just FASD, but the unique people we are working to support.
- With this shared understanding, THO provides a road map that can help service providers understand the unique developmental considerations that people with FASD experience, and potential areas for growth when planning for the future.
- THO helps guide our goal setting and planning: When we are thinking about navigating towards an outcome or goal within a system, what we are doing is stepping on to one of the 10 THO pathways.
- Our brain responsive mindset sets up our readiness to navigate the THO pathways.
- By shifting some of my foundational competencies, that is my mindset, I am better set up to meet my client on their particular pathway, and the framework helps me identify goals to navigate within THO.
- Using a framework like THO allows for greater consistency among service providers. It can also act as a mechanism that can streamline the link between research evidence and community wisdom.

35. Towards Healthy Outcomes Emphasizes...

- THO emphasizes quality of life! We are looking **beyond** worries and fears for the future, and instead focusing on our goals. Like the boy on his big boy bike, we are helping the people we are supporting focus on the road ahead, not the barriers around them. By shifting our mindset, we are set up to focus on growth, healthy living, and considering strengths.
- By setting goals focused on healthy outcomes, we must consider strengths and new ways of understanding needs.
- That's not to say we don't consider needs and challenges, but they are not our focus. That's why THO emphasizes appropriate expectations and goal setting. We must consider strengths alongside areas of need to understand the person with FASD we are supporting and help them move towards success.

36. Towards Health Outcomes: Underlying Philosophies

- These three tenets guide the design and implementation of the THO framework.
- *Presenter note: read the three bubbles.*

- At the heart of these philosophies is the understanding that we have already developed that all behaviour is functional. So after today's presentation we are all one step closer to implementing the THO.
- In the following few slides, we will review and explain these underlying philosophies.

37. Towards Healthy Outcomes: Developmental Lifespan Perspective

- As represented by the figures in the middle of the framework, we move through developmental stages as we grow. This means we are influenced by the past while also looking towards the future. Our past and our future influence the way we are acting today.
- Like all of us, people with FASD continue to grow and develop throughout their lives. The 10 THO pathways are also represented in order across the lifespan, showing a developmental trajectory of intervention needs. This highlights that **intervention is lifelong**; it does not begin or end at any specific point.
- Recognizing this ongoing development, we must also base our goals on the unique strengths and needs that each person we are working with possesses. I wouldn't set the same goals for myself as another person in this room, so why would we treat people with FASD any differently?

38. Towards Healthy Outcomes: Interactive Systems

- People with FASD often depend on multiple, complex systems over their lives. As they age, these systems can actually become more complex. The influence of these systems is crucial to consider, along with the understanding that each system is **connected** to both the individual as well as to other systems.
- These connections are often interactive; they impact each other. For example, someone who struggles with housing may interact with housing systems and mental health and medical systems.
- At the same time, housing requirements, mental health service delivery models and health systems often interact. When they work together, we see coordinated and brain responsive care. When they do not we see people unhoused due to conditions that impact mental health needs and ultimately compromise housing success.
- Given the number and complexity of these systems, support workers need to try their best to work alongside those systems fluidly and flexibly.

39. Towards Healthy Outcomes: Strengths-Based and Empowered

- The strengths-based philosophy helps us think about areas of need AND strengths.
- Like we have said earlier, our **mindset** - where we focus our attention and efforts, shapes the direction we move toward.
- Remember, everyone has access to different resources, abilities, and strengths, and these strengths can be used to support areas of need and difficulty.
- The strengths and empowered approach used by THO helps us recognize that all people want to achieve success, however we define that for ourselves.
- It also helps the client feel their voice is heard throughout the decision-making and intervention process.

40. FASD Brain Domains

- When we go back to these brain domains, you might notice that they are slightly different from the THO pathways in the previous slides. The goal today is not to map out which brain domain here exactly maps onto the THO pathways, because many domains intersect and overlap with one another.
- What these brain domains help us to do is to be **brain-responsive** in our interactions with people with FASD as they strive towards goals.
- The THO helps us to see how we might use a developmental and goal focused lens to support seeking and system connections. We go from looking inward - at our own attitudes and beliefs that make up our mindset - to looking outward at how this mindset informs how we work with others.
- THO incorporates **brain-responsive** thinking by putting the person at the center of their lives within developmentally informed systems of support and offering service providers ways to expand their thinking to modify navigation of these systems as needed to be brain-responsive.
- As we said earlier, the goal for service providers is to understand that the ways people with FASD see and engage in the world around them is likely different from how you or I do those things.

41. THO Visual

- We want to encourage service providers like you to focus on the person we are supporting, and the unique way their brain-based differences impact the ways they engage with services.
- Here we have pulled out our little stick figure from our visual to demonstrate that at the centre of this framework is a neurodiverse *person*.

- Because their brain is unique, the way they're moving towards these goals might be different from one we would use for ourselves, but it fits for them and their unique brain.

42. End of Content Area 1

Content Section 2

43. Towards Healthy Outcomes: The Direction We Move Towards

44. Presentation Outline

- *Presenter Note: Read Slide*
- By the end of this presentation section, participants will:
 - Begin evaluating current goals, considering both strengths and areas in need of support across multiple interacting systems.
 - Be able to differentiate between a growth and a fixed mindset in the context of supporting goal attainment. Also increased understanding of different ways to define “success” and recognition that success is possible when we set meaningful, individualized goals.
 - Consider the role of collaboration alongside the person being supported in co-creating and pursuing goals.
 - Prepare to design meaningful, uniquely tailored goals that are feasible, useful, and impactful for the individual, moving beyond the limitations of standard SMART goals.
- This section builds on our new mindset and the brain-responsive approach to help us build meaningful relationships that shape the ways we as supporters work together with people with FASD to set achievable, destination goals.

45. The Road Ahead: Review

- In Section 1, we focused on *where we look* - how our attitudes, beliefs, and perceptions shape our interpretation of behaviour. We introduced growth mindsets and brain responsive mindsets. And we offered some frameworks that might help us action these mindsets.
- Now we want to make it more applied.
- To make that shift, we begin with the **relational mindset** - which is a collaborative way of seeing our work that shapes how we interpret, respond to, and engage with other people.
 - It reflects how our beliefs and experiences influence the ways we connect, communicate, and collaborate.
- We can think of the **relational mindset** as the foundation for two systems that work together:
 1. a **brain-responsive mindset** that helps us understand the “how” and “why” of behaviour, and

2. a **growth-oriented mindset** that informs our expectations for healthy outcomes and learning.

46. Metaphor Slide: Driving a car

- In Section 1, we used the bike metaphor to show that where we look shapes where we end up.
- Now, we are expanding that idea with a new metaphor: driving a car. This metaphor helps us talk about how people move toward healthy outcomes in different ways.
- *Presenter Note: Destination = Growth Mindset*
 - First, imagine the destination. Maybe it is Calgary. The destination represents our growth mindset: the direction we are aiming for and the belief that progress is possible.
 - Everyone is heading toward healthy outcomes, but each person's route and pace will look different.
- *Presenter Note: Vehicle = Brain Responsive Mindset*
 - Now, consider the vehicle each person is driving.
 - Some cars have quick accelerators. Some have soft brakes. Some can handle rough roads, and others need smoother roads.
 - The vehicle represents our brain-responsive mindset. It reflects each person's unique brain-based profile and the conditions they need to feel safe, capable, and regulated.
 - Understanding that the vehicle helps us adjust expectations. We are not judging the car. Instead, we are learning what kind of support it needs to drive well.
- *Presenter Note: Supports and Guidance = Relational Mindset*
 - None of us drive alone. We use a GPS, we ask for directions, or sometimes we need **co-pilots**: someone who can point out turns, help track the route, or remind them to slow down.
 - Some people may need someone with an extra brake pedal or someone who can "step in" and help when things feel overwhelming.
 - These co-pilots represent our relational mindset. They are the supportive others, guides, and relationships that make the journey safer and more predictable.

- A strong relational mindset means understanding when to step in, when to guide, and when to share responsibility during the drive.
- It is not about better or worse vehicles. Instead, our hope is you will begin to recognize what each driver needs to stay safely on the road or move toward healthy outcomes.

47. The Road Ahead: Setting a Direction and Moving Forward

- *Presenter Note: Read Slide*
- Knowing the destination gives us direction, but every journey includes construction zones and detours.

48. The Path To Success: Destination Vs. Detour

- Progress isn't straight—it depends on a person's readiness, their access to supports, and the environment. That means the journey is just as important as the destination, and sometimes those journeys include barriers.
- **Success is not the same for everyone:** it looks different for each of us, and different than what the systems they're involved in might expect.
- Growth happens when the goals fit the person, when they feel possible and meaningful. These are **destination goals**, they give us direction and the opportunity to grow.

49. The Path to Success: Destination vs. Detour

- For people with FASD, barriers may need to be addressed with different timing, tools, or signs. **Barriers do not mean failure** - they show us when supports need to be adjusted to move towards success.

50. Motivation & Readiness: How we move towards goals

- Mindsets shape what we believe we are capable of. As supporters, we need to invest time, create space, and detour as needed when working towards a goal. Our mindset helps us do that.

51. Mindset Matters: Fixed Vs. Growth

- A fixed mindset frames abilities and people as hard to change.
- Different mindsets help us think about the journey, the people we work with, and the barriers we meet differently:
 - A **brain-responsive mindset** helps us understand why the vehicle may be slowing down or moving too fast. It gives us insight into the vehicle's unique needs.

- A **growth mindset** gives us a destination to move toward, it gives us hope. It helps us see *potential* - that skills can be developed with effort, support, and reliable conditions. A growth mindset helps us see barriers as opportunities for learning and helps us to think about possibilities instead of limitations.
- A **relational mindset** shapes how we travel together. It is the part of the journey that involves trust, shared understanding, and creating space for detours when needed. It reminds us to invest time, adjust goals, and celebrate small, but meaningful accomplishments.
- When we use these mindsets together, we focus on movement, not perfection. Every safe turn, every pause to rest, and every small adjustment along the journey is a success.

52. How to Shift Where We Move: Mindset (Slide 1)

- This slide gives examples of how the same behaviour can be understood differently depending on our mindset.
- If a student fails a few math quizzes, a fixed mindset might conclude that they will never be good at math. A growth mindset, on the other hand, sees that with the right strategies and support, students can learn and apply the material more effectively.
- When a client misses appointments, a fixed mindset might lead to the assumption that they do not care. A growth mindset looks deeper, asking whether barriers are getting in the way, and how we might problem-solve together.
- When someone gives up quickly on a work task, a fixed mindset might label them as lazy. A growth mindset recognizes that they may not yet have the skills or confidence to persist and that these can be developed over time.

53. How to Shift Where We Move: Mindset (Slide 2)

- This slide gives us two more examples of how mindset can shape interpretation.
- When an adult becomes frustrated during therapy, a fixed mindset might say they will never be able to regulate their emotions. A growth mindset reframes it.
 - With the right support, they can learn new ways to manage frustration.
- When a parent resists new recommendations, a fixed mindset might assume they are unwilling to change. A growth-oriented mindset helps us recognize that

they may need more time, trust, or clarity before they feel ready to take the next step.

- These examples show how shifting from fixed to growth helps us see possibilities for progress, support, and growth.

54. Mindset & Motivation: Pursuing Goals

- Aside from mindset, other theories of **motivation** can help us understand how people move towards goals.
- Before we talk about a couple of theories of motivation, it is important to know that motivation does not happen by itself. Our environment, relationships, and supports shape our motivation. Motivation is also informed by our mindsets about ability, behaviour, and growth.
- A mindset-informed approach helps shift how we look at motivation. Instead of asking, “*why aren’t they motivated?*”, we begin to ask, “*what do they need to feel motivated?*”
- Our role as supporters is to create the conditions that make movement toward goals possible. This means investing time, adjusting expectations, and allowing for detours. Motivation becomes about supporting meaningful, achievable progress.
- The theories we are about to review help us understand how motivation develops and how we can support it. In the context of FASD, we must apply these theories with a flexible, brain-responsive lens.

55. Motivation: Self-Determination Theory

- One theory of motivation, **self-determination theory**, explains that people are more motivated when their actions feel like they come from *themselves*, not from outside pressure, rewards, or fear of consequences.
 - Having external motivators, like grades or money, might get quick results; but external motivators do not help long-term.
 - Goals must be *meaningful* and connected to what the person cares about. Their motivation increases when they are involved in decision-making.
- Self-determination theory for people with FASD would include creating environments where choice is possible and relationships feel safe.
- Self-determination keeps us moving forward over time, especially when goals feel big.

56. Motivation: Achievement Goal Theory

- **Achievement goal theory** helps us understand what *drives* motivation. This theory explains that people pursue goals in different ways, based on how capable they think they are. It describes capability in two ways:
 - Mastery: Focusing on learning, improving, and building skills
 - Performance: Focusing on how my performance compares to someone else.
- Some people look to grow their skills, that is take a mastery approach, and others try to avoid mistakes or negative judgement, which is the performance avoidance approach.
- The Achievement Goal Theory helps us understand that people with FASD likely experience many comparisons with others, and pressure from systems. It provides support for our brain-responsive approach, growth mindset and relational mindset we've been talking about so far.
- A mastery approach is a better fit when working with people with FASD. It helps shift away from comparison and toward practice and personal progress.

57. Title Slide: The Direction We Move Towards Goal Attainment

- Up to this point, we have considered how goals give us purpose, how motivation shapes readiness, and how mindset influences what feels possible.
- Now we shift to **goal attainment**. We focus on the practical aspects of moving forward:
 - setting goals that fit for the individual,
 - collaborating through the process, and
 - using tools to guide progress and adapt when things do not go as planned.
- This shift takes us from thinking about goals to thinking *how* to move towards them.

58. Collaboration Matters: Co-Creating Goals

- Goal setting is a first step in turning our mindset into action.
- As we talked about with the motivation theories, goals are most effective when they are created *with* the individual, not for them. When we build goals together, we honour their experiences, preferences, and the realities of THEIR day-to-day life by setting goals that are **attainable** and **meaningful**.

- **Co-created goals** - meaning goals that we create alongside the person with FASD we are supporting - reflect their unique experiences and goals, and the systems that shape their development.
- Co-created goals are easier to sustain: When goals are built based on *shared understanding*, the individual is more likely to stay engaged, even when progress is slow or when plans need to be adjusted.
- When goals are person-centred, they become flexible, responsive, and tailored to what best suits the unique person we are supporting.
- When we collaborate with setting goals, we are also building connections that will help us move forward in a meaningful way.

59. Pathway Forward: Pursuing Goals

- Progress is easier to notice when we regularly look for it. Regular progress monitoring helps us decide if our goals are still realistic, useful, and meaningful.
- Regular progress monitoring helps us notice when progress slows, so we can reflect on what may need to change:
 - Sometimes it is the goal itself,
 - sometimes the supports around the person, and
 - sometimes the way progress is being measured.
- This leads us into a framework that helps us think through these decisions step by step.

60. Activity Break

61. Activity Break: Pursuing Goals: Jordan's Story

- *Presenter Note: Read Slide*
- This story explores how readiness, confidence, and mindset influence goal pursuit. We'll think about how to identify a destination goal, what strengths Jordan brings, and where he may need support. The goal here is to look beyond what's not happening and consider what might help him move forward meaningfully.

62. Activity Discussion: Jordan's Story

- *Activity/Discussion Prompts:*
 - Identify a main destination goal for Jordan.
 - Identify strengths that could be leveraged.
 - Identify one area in need of support.

- How might the definition of “success” vary between Jordan and the program staff?
- How might applying a growth mindset change how you approach his goal setting.
- *Notes on Scenario (if discussion is brief):*
 - *Ask: Might Jordan’s destination goal be to find and maintain meaningful employment?*
 - *Identify strengths, such as a desire for independence, social interest, and some insight into his challenges.*
 - *Areas in need of support could include planning, organization and confidence.*
 - *Success may look different. For staff, it could mean securing a job.*
 - *For Jordan, it might simply mean taking the first step: completing one application or practicing an interview.*
 - *Using a growth mindset, we might focus on progress over perfection - acknowledging small wins, helping Jordan see effort as learning, and scaffolding steps to build readiness.*

63. Activity Break: Pursuing Goals: Renee’s Story:

- *Presenter Note: Read Slide*
- Renee’s story highlights motivation, frustration, and mindset in goal pursuit.
- We’ll use it to consider how a fixed mindset might influence persistence and how collaborative, strengths-based goal-setting can shift direction.

64. Activity Discussion: Renee’s Story

- *Discussion Prompts to be used as needed:*
 - Identify a main destination goal for Renee.
 - Identify strengths that could be leveraged.
 - Identify one area that needs support.
 - How might the definition of “success” vary between Jordan and the program staff?
 - How might applying a growth mindset change how you approach goal-setting?
- *Potential discussion prompts if needed:*
 - *Renee’s destination goal could be calmer, more positive morning routines with her child.*

- *Her strengths might include commitment, insight, and care for her child.*
- *Her area of support might be sustaining strategies over time and shifting from “quick fixes” to skill-building.*
- *Success for Renee might mean fewer conflicts or feeling less overwhelmed, while the system may define success as consistent routines.*
- *Ask about opportunities for applying a growth mindset. It could involve reframing setbacks as learning opportunities, highlighting her progress, and celebrating moments of calm rather than expecting perfection.*

65. Title Slide - A Framework for Action: Mindset & Possibility

66. A Framework for Action: Decision Tree Visual

- The decision tree supports reflection and action during goal pursuit.
- It highlights barriers, adjustments, and options for next steps.
- This process helps us move from feeling stuck to finding supported progress.
- In the next series of slides, we will review the different components of the decision-making tree.

67. Pausing with Curiosity: Recognizing Barriers

- The first step in the decision tree is to **pause with curiosity**. Instead of reacting with judgment, we take a moment to ask: what might be getting in the way?
- Barriers may be emotional, like anxiety or frustration. Or practical, like transportation or scheduling. Or signs of disengagement or changes in interest.
- When we understand the cause, we have an easier time identifying supports.

68. Adjusting Planning & Support: Strengthening Readiness

- Once barriers have been recognized, the next step is to think about **how planning and support can be adjusted**:
 - Emotional barriers might mean we need more reminders, supportive people, or extra time.
 - Practical barriers might mean we need to plan more, add structure, or add routines.
 - If the client has lost interest in the goal, then the goal itself needs to be adjusted.
- These adjustments build confidence, reduce frustration, and increase the likelihood that the person with FASD can continue moving toward their goals.

- This is one of the key ways the decision tree helps us visualize progress, even when challenges come up.

69. Adjusting the Goal: Reframing the Challenge

- At other times, the goal itself needs to shift.
 - We may need to reduce the challenge, give ourselves more time, or reframe the approach with a growth mindset.
 - Breaking a goal into smaller, more manageable steps can lead to success and keep people moving forward.
- Or perhaps the goal itself needs to be shifted or changed to meet the evolving needs of the person.
 - In these instances, the relationship between people with FASD and their supporters is useful for exploring goals.

70. Taking a Pause: Stepping Back to Re-Engage

- Sometimes the best option is to **pause** for a few hours or maybe longer. Sometimes we need time to regulate and reflect before returning to the conversation.
- **Stepping back lowers pressure.**
- When the goal is revisited later, it can feel more meaningful and thought out.

71. How to Use THO When Goal Setting

- Mapping this process onto the Towards Healthy Outcomes framework, whenever we set a goal and step onto the relevant THO pathway, we can set goals using three steps outlined here on this table.
- The steps are 'what to know', 'what to do' and 'what to plan for'.
- Within THO, each pathway, for example here we have Physical Wellbeing, starts with basic information about the importance of health care across multiple areas of functioning, and then goes on to include resources and recommendations. Using this information, short- and long-term goals can be set.
- **What to know** covers the basic information about the pathway we are on, in this case physical wellbeing, along with the relevant characteristics, strengths, needs, and areas of interest of the person we are supporting. In this example, that includes understanding the critical foundation of good physical health plays in daily life and the ways to promote physical wellbeing.
- **What to do now** is our more immediate, shorter term goals and next steps; plans for the next year or so. This also includes current resources and other evidence-

based support and recommendations. In this example, it includes planning medical appointments, monitoring medications and their effects.

- Finally, the last column is ***what to plan for***. This includes our longer term planning and considerations related to continuity of care. In this example, physical wellness, includes longer term planning, ongoing healthcare, and transitioning between different physicians and health care systems.
- Planning ahead helps us be proactive and focus on providing supports and achieving goals rather than only solving problems as they arise.

72. End of Content Section 2

Content Section 3

73. Towards Healthy Outcomes: Putting It all Together

- Now we are going to talk about how we can start applying some of the things we've learned today. As we do, it's important to remember that the more often we think about and apply these new ideas we've discussed today, the easier it will be to do.
- Or, practice makes perfect.

74. Presentation Outline

- *Presenter Note: Read slide*
- By the end of this section, participants will be able to:
 - Demonstrate increased confidence in applying success-oriented, developmentally focused, goal-oriented supports in real-world scenarios.
 - Identify and apply creative strategies that may be helpful for the unique person we are supporting, and make practice shifts that can influence and contribute to healthy outcomes for individuals with FASD.
 - Integrate knowledge from previous presentation sections into actionable steps, strengthening the connection between “head knowledge” and practice.
- This section builds on our brain-responsive approach, growth and relational mindsets, and goal setting knowledge to understand how they can be applied, practiced, and increasingly integrated in our work moving forward.

75. Metaphor: Skating

- In our previous sections, we've used metaphors to explain our key takeaways from each section. So we talked about learning to ride a bike and driving. Now we're going to use a sports metaphor.
- *Presenter Note: If there is a different sport that you have experience with or would prefer to talk (e.g., golf) about feel free to adjust the metaphor to that experience.*
 - Does anyone remember learning to skate? You probably started off pretty shaky, it probably felt hard to just stay standing upright in your skates when putting them on. And stepping onto the ice felt like such a slow process, it probably took you a long time to even put a foot on the ice.
 - Once I am on the ice, all I'm focused on is skating. Speeding up or stopping feels impossible.

- For some of us, we likely stopped there. So anytime we go skating it feels laborious and really hard.
- But for others, maybe you went skating more often, maybe you even had parents who set up a rink in your backyard for you. Then you skate often enough that you come to believe that you can skate - in fact you're no longer concerned about skating at all anymore.
- You go so much that you're no longer even thinking about skating. It becomes so automatic that skating becomes like walking or breathing, and you don't even have to give it conscious effort.
- Maybe now your focus has shifted to skating in a certain direction, or at a certain speed.
- You skated enough that you not only increased your abilities and skills, but your underlying belief about your ability to skate has changed.
- The same is true in our work. As professionals, there is a process of practicing certain ways of thinking and acting to boost our foundational belief systems and recognize how these things go together.
- The automaticity of the practice comes with the belief - but thinking this way again and again over time can help shift the beliefs.

76. Taking A Balanced Perspective: Moving Beyond Brain-Based Differences

- In the past, supporters have focused on solving problems for people with FASD and avoiding risks, which is important. But by doing that, we have overlooked crucial parts of the story.
- Now, we are looking to shift towards understanding the whole person...
- *Presenter Note: Read slide.*

77. Not the End of the Story: Brain-Based Differences

- So far, we have talked about the spectrum of strengths and needs by reviewing the ten diagnostic domains used to assess folks with FASD.
- *Presenter Note: The pictures of the domains are in the same order as those listed below starting in the top left hand corner and then moving towards the right. The first picture on the top line represents academic achievement, and the first picture on the bottom line represents neuroanatomy.*
- These areas assessed include: academic achievement, attention, cognition, language, memory, neuroanatomy, executive functioning, adaptive behaviour, motor skills, and affect regulation. Our main takeaway from this conversation

earlier was that these brain domains are highly connected - **no part of the brain works on its own.**

- This understanding shapes our brain-responsive approach to providing supports.

78. A Balanced Perspective: Strengths and Needs

- To understand and support people with FASD, we must understand the whole person. When we do that, we can understand what it is they might need help with, and what goals they are striving towards.
- This is what creates our **shared understanding** that we talked about earlier.
- As we discussed in section 1, the Towards Healthy Outcomes framework helps us take a strengths-based approach that helps us to recognize strengths.
- We all have strengths, and our strengths are unique. For some people, that means we can overlook their strengths because they are different from what we might expect.
 - Strengths are not always “skills.” They may be the ways we relate to other people, our effort, curiosity, connection, or persistence.
 - Or strengths can show up in more obvious ways in how we live our lives.
- What’s important is that we notice strengths because they give us clues about what supports may feel natural for the person. Like we talked about earlier in our motivation slides, **effective support develops from meaningful goals that are created in collaboration.**
 - When supports are aligned with each person’s unique strengths, progress becomes steadier and more predictable.

79. Title Slide - Identifying Effective Supports: Professional Collaboration

- **We do not support a person alone.** We work with their family, school, community, health care, and/or social services systems. The systems that work together are better set up to respond to challenges.

80. Systems & Allied Professionals: Building Relationships

- Professional collaboration means systems talking to each other, sharing information, and planning together. It lowers the chance of interpreting behaviour as defiance or lack of effort. It creates that **shared understanding** we talked about in section 1.
 - Shared understanding means that all systems understand the unique strengths and support needs of the person with FASD they work with.

- When professionals collaborate, expectations become clearer and more predictable. Even small changes in communication can improve daily life.

81. Building Relationships: Navigating Systems

- Armed with shared understanding of the unique person we are supporting, we set ourselves up to communicate with other supporters and systems in a brain-responsive way.
- Relationships help reduce mixed messages and offset communication breakdowns across systems which creates clearer pathways towards goals.
- Instead of solving problems, the focus becomes **navigating systems**.
- When systems operate independently or fail to share understanding, people can feel confused or overwhelmed. Systems that have a shared understanding can work together to help the person with FASD navigate their journey towards success.

82. Building Relationships: Navigating Systems

- Shared understanding is crucial to navigating complex systems.
- And as we've talked about so far, understanding is fostered through relationships.
- But how do we go about establishing relationships? Sometimes it can be tricky with the limitations of our roles and environments.

83. Navigating Systems and Barriers: Building Relationships

- This table offers strategy suggestions for challenging behaviours, and it provides some prompts to ask ourselves and the people we are working with to start developing relationships and build understanding.
- In the first column we have some behaviours that we might see in our work.
- Then in the middle column we have strategies that might be helpful to implement for this situation.
- In the last column we have suggestions and questions we can ask to build relationships and understanding.
- *Presenter note: Read slide. Depending on time and the audience, you could make this slide more conversational and accept suggestions for strategies and relationship building tools.*

84. Navigating Systems and Barriers: Building Relationships

- *Presenter note: Read slide. Depending on time and the audience, you could make this slide more conversational and accept suggestions for strategies and relationship building tools.*

85. Navigating Systems and Barriers: Building Relationships

- *Presenter note: Read slide. Depending on time and the audience, you could make this slide more conversational and accept suggestions for strategies and relationship building tools.*

86. Building Relationships Requires that We...

- *Presenter note: Read slide.*

87. Activity Break

- Now we are going to work through an example. To respond to the discussion prompts, feel free to refer to your notes, the slides, or the decision-tree map.

88. Activity Break: Brett's Story

- *Presenter Note: Read Slide.*

89. Activity Break: Brett's Story

- *Presenter note: Potential discussion prompts/topics:*
 - *Invite participants to name what brain-based differences might be shaping these patterns, such as difficulties with transitions, sensory overload, or social skills.*
 - *Ask what might make the classroom or school environment challenging for him and where he might feel more capable.*
 - *Encourage reflection on how behaviour communicates needs.*
 - *Connect to the idea that this is "not the end of the story." What could shift if expectations matched his developmental abilities?*
 - *Explore how enhanced collaboration between caregivers and school might create more consistency.*
 - *Prompt discussion on relationship building and how small supportive interactions could change Brett's daily experience.*
 - *Link to systems and barriers by asking how traditional school responses might miss the underlying needs.*

90. Activity Break: Marissa's Story

- *Presenter Note: Read Slide*

91. Activity Discussion: Marissa's Story:

- *Presenter note: Potential discussion prompts/topics:*

- *Invite participants to notice behaviours that might be connected to brain-based differences related to planning, memory, or emotion regulation.*
- *Ask what daily tasks or expectations might feel especially demanding for her.*
- *Explore how service providers might misinterpret her behaviour and how this can create barriers rather than support.*
- *Encourage thinking about what helps build **trusting relationships** with adults who she is afraid are judging her.*
- *Presenter Note: Highlight opportunities for collaboration where instructions are clear, predictable, and paced in manageable steps. Connect back to “not the end of the story” by asking what could shift if Marissa received support that truly matched her needs.*

92. Activity Break: Xander’s Story:

- *Presenter Note: Read Slide*

93. Activity Break: Discussion

- *Presenter note: Potential discussion prompts/topics:*
 - *Ask participants to identify which brain-based differences might influence his challenges with independence, money management, and work routines.*
 - *Invite discussion around how the transition to adulthood often removes structure and support, creating system-level barriers.*
 - *Encourage participants to name moments in Xander’s story where he is trying, even if it does not appear successful.*
 - *Explore how relationships with supportive adults or mentors could support his goals.*
 - *Prompt thinking about collaboration across systems, such as employment programs, housing supports, or community coaching.*
 - *Reinforce “not the end of the story” by asking what could change if Xander received consistent, predictable, hands-on support.*

94. Activity Break

- *Now we are going to use what we have learned today to think about some of our own experiences and clients.*

95. Activity Discussion: Personal Reflection Activity

- Recall a client or individual with FASD that you worked with who was challenging for you.
- With the information presented today, how would your approach change?
- Reflect and answer the questions/prompts and please share if you feel comfortable.

96. End of Content Area 3

- That brings us to the end of this presentation.
- Are there any questions?
- *Presenter Note: Provide resources and glossary of key terms if needed.*