

# Supporting Families & Individuals Impacted by FASD "Guerrilla Support"

Emma Baldwin



Describe FASD and the effects of PAE

- Discuss approaches to supporting people with FASD
- Identify ways of supporting families impacted by PAE

# FASD United the National Hub for FASD

# Vision

An FASD-informed world where people living with FASD and prenatal substance exposure are recognized and supported.

# Mission

FASD United empowers people living with FASD and prenatal substance exposure to educate systems of care and the public, enact policies, and unite communities everywhere.









Justice Center Affiliate Network



Policy & Training
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### What is FASD?

### Fetal Alcohol Spectrum Disorders (FASDs)

Group of conditions that can occur in a person who was exposed to alcohol before birth

### A person with an FASD might have:

### Behavioral issues

• Hyperactive behavior, impulsivity, dysmaturity, difficulty with attention, poor reasoning and judgment skills

### Learning challenges

• Poor memory, learning disabilities, speech and language delays, intellectual disability

### Physical problems

• Low body weight, problems with the heart, kidneys, or bones, poor coordination, vision or hearing problems

# Impact on Cognitive Abilities



# **Executive Function Deficits**

Individuals with PAE often struggle with planning, organizing, and problemsolving due to deficits in executive functioning (Mattson et al., 2019).



### **Memory Impairments**

Memory, particularly shortterm memory, is often affected, making it difficult to retain and recall information (Mattson et al., 2019).



Slower Processing
Speed

Affected individuals may need more time to process information and respond, which can be challenging in fast-paced environments like school (Kodituwakku, 2007).



**Learning Disabilities** 

Many individuals face specific learning disabilities, especially in areas like math and language, which can further impact academic success (Kodituwakku, 2007).

# Impact on Social Abilities



### Difficulty with Social Cues

Individuals with PAE often struggle to interpret social cues like body language and facial expressions, which can lead to misunderstandings in social interactions (Mattson et al., 2019).



### **Immature Social Behavior**

They may exhibit behaviors that are more typical of younger children, such as being overly trusting or having difficulty maintaining appropriate boundaries with others (Wartnik et al., 2022).



### **Challenges with Peer Relationships**

These social deficits can lead to isolation, peer rejection, or even bullying, which further compounds their social challenges (Mattson et al., 2019).



### **Example**

"A child with PAE might be overly friendly with strangers, not understanding the risks involved, or they might struggle to make and keep friends due to social misunderstandings."

# Impact on Emotional Abilities

### **Emotional Dysregulation**

Many individuals with PAE experience mood swings, irritability, and difficulty managing frustration or anger (Pei et al., 2011).



### **Higher Risk for Anxiety and Depression**

Emotional struggles, combined with social difficulties, often lead to anxiety and depression. These mental health issues are more prevalent in individuals affected by PAE (Streissguth & O'Malley, 2000).



### **Poor Impulse Control**

These social deficits can lead to isolation, peer rejection, or even bullying, which further compounds their social challenges (Mattson et al., 2019).



### **Example**

"Imagine trying to control intense emotions but not having the tools to do so, resulting in meltdowns that seem out of proportion to the triggering event. This is common in individuals with PAE."





# What do we mean by "spectrum" disorder?

# Using labels to be more inclusive



FASD - the "Umbrella Term" to describe the category of diagnoses that result from prenatal alcohol exposure (PAE)



PAE - Useful in order to include people who do not have access to FASD assessment or diagnosis.



PSE – prenatal substance exposure is important to include in conversations about FASD because co-exposure is so common.

# The FASD "Umbrella"

The most common way people describe the different diagnoses on the FASD spectrum.

FAS
pFAS
ARBD

ND-PAE ARND

- FAS Fetal alcohol syndrome
- pFAS Partial fetal alcohol syndrome
- ND-PAE Neurobehavioral disorders associated with prenatal alcohol exposure
- ARND Alcohol-related neurodevelopmental disorders
- ARBD Alcohol-related birth defects

### FETAL DEVELOPMENT CHART

This chart shows vulnerability of the fetus to defects throughout 38 weeks of pregnancy.\*

• = Most common site of birth defects

PERIOD OF THE OVUM	PERIOD OF THE EMBRYO						PERIOD OF THE FETUS			
Weeks 1-2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Week 12	Week 16	Weeks 20-36	Week 38
Period of early embryo development and implantation.	CNS		ey		ear pal eth	ear	genitals	ain		
	Central Nervous System (CNS)—Brain and Spinal Cord									
	Heart									
	1	Arms/Legs	;							
		Eyes								
		Teeth								
				P	alate					
		External Genital								
Pregnancy loss		Ears							Adapted from Mo	

Period of development when major defects in bodily structure can occur.

Adapted from Moore, 1993 and the National Organization on Fetal Alcohol Syndrome (NOFAS) 2009

Period of development when major functional defects and minor structural defects can occur.



### **Pregnancy Health Factors:**

- Genetics
- Nutrition & Metabolism
- Overall health
- Maternal Age
- Quantity/Frequency/Timing of exposure

### **Social Drivers of Health:**

- Access to/quality of healthcare & education
- Access to nutritious foods
- Social and community context
- Economic stability
- Neighborhood & built environment

# FASD awareness doesn't match its prevalence.

Rate of <u>alcohol use</u> during pregnancy Rate of co-exposure of other substances 40% with alcohol use during pregnancy. Rate of <u>drug use</u> during pregnancy

1 in 20

Source: Centers for Disease Control and Prevention. (2023, October 10). Data & statistics on fasds. https://www.cdc.gov/ncbddd/fasd/data.html#Prevalence-of-FASDs

Rate of FASD in US school-aged children



Although FASD is common, it remains under-diagnosed, in part due to:

- Social stigma
- Complexity of diagnosis
- Reliance on facial features
- Overlap with alternative diagnoses, such as ADHD and autism

Many individuals with FASD have subtle neurodevelopmental effects that do not prompt clinical attention.



- Anxiety
- Depression
- Attention-Deficit/Hyperactivity Disorder (ADHD)
- Bipolar Disorders
- Substance Use Disorders
- Oppositional Defiance Disorder
- Autism Spectrum Disorder

94% of individuals with FASD have a co-occurring mental health condition



# Adverse Life Experiences

People with FASD experience more adverse life experiences than those without. This includes:

- Disrupted School Experience
- Trouble with the Law
- Inappropriate Sexual Behavior
- Alcohol or Drug Dependence
- Dependent Living and Problems with Employment

# FASD Through the Lifespan



Behavior issues, mental health struggles

Childhood

School challenges, developmental delays, behavior issues

Infancy

Birth defects, feeding issues, may be diagnosed as "failure to thrive"



# Early Identification sets people up for success

Identifying FASD, especially before the age of 6 years of age, helps to reduce risks later on by:

- Empowering parents with a sense of understanding
- Reducing the risk of maltreatment toward the child if behaviors are misunderstood
- Increasing opportunities for counseling
- Identifying appropriate specialty care
- Finding peer and community programs
- Making it easier to discuss accommodations or considerations in education

# Supporting People with FASD

People with FASD can thrive and succeed when systems are FASD-informed and FASD is given a seat at the table.

Recognition and accommodation of people with FASD and PAE is crucial. Modifications and shifts in practices and policies will support the complex needs of people with FASD.

### **Key systems:**

- Child Welfare
- Education
- Justice System
- Health



# Strengths-Based Approach

Research shows that parents and caregivers of children with FASD report wide-ranging strengths and positive influence.

A person-centered, strengths-based approach is effective for people with FASD.

### Important elements include:

- Reduction of stigma
- Improved measurement of strengths and thriving
- Utilization of strengths-based frameworks
- Increased efforts to reach underserved populations

# Strengths-Based Approach



A strength-based approach focuses on abilities and capacities and the value of an individual's experiences and perspectives, rather than deficits, or things that are lacking.

### Common strengths

- Loving, form close family bonds
- Social, want to be liked by others
- Trusting
- Warm, full of positive energy
- Creative thinkers

# General Strategies

- Use concrete language; avoid idioms and metaphors
- Allow extra time to process information
- Check for understanding
- Create a calming environment
- Practice regulating techniques
- Build a network of support
- Model healthy boundaries



# Talking about education? Give FASD a seat at the table.

A prevalence of 1 in 20 means that there is likely at least 1 student with FASD in every classroom.

- Learning and behavioral problems
- Developmental disabilities
- Speech-language deficits
- Co-occuring conditions

# Checking for Comprehension

The florgle ramooted through the gralley as Lorp bahooed. "There's no time for bahooing," the florgle memered. So, they ramooted until lore eepen.

- 1. What was the florgle doing?
- 2. What did they did they not have time for?
- 3. When did they ramoot until?

# Checking for Comprehension



The florgle ramooted through the gralley as Lorp bahooed. "There's no time for bahooing," the florgle memered. So, they ramooted until lore eepen.

### FASD is often misunderstood in the classroom

Students with FASD can be seen as being oppositional and resistant, when they may not understand what they were asked, or have been reprimanded for trying to understand in the past.





## Good to Know:

Students with FASD may process language slower and need time after being asked a question before they can respond. This is misunderstood as "ignoring" or defiance.

# Helpful Tip:

Students with FASD require flexible strategies rather than strict or zero-tolerance policies and procedures.





# Reducing stress and encouraging comfortable conversation

- **Do not enforce eye contact.** If it is safe to do so, be in sitting position when talking to someone with FASD. Try to stand parallel rather than face-to-face, which can feel confrontational.
- Do not repeat their name in conversation. Bodies respond urgently when it hears it's name, which can heighten someone's stress response.
- Repeat, repeat, repeat.
- Reword, reword, reword.
- Make an effort to understand and/or establish the person's support network. People with FASD may need outside help remembering appointments or following up on tasks.
- Check for comprehension...

### **IEP**

- Must fit an IDEA disability
- Provides specially-designed instruction, not just accommodations
- Provides progress monitoring and goals & annual review/revision
- Procedures or parent involvement and accountability
- Departmental overseeing (IDEA & Dept of Education)
- ALL public schools must comply

- Free/no cost
- Should meet child's needs
- Requires
   confirmation of
   disability with
   evaluations
   (though
   requirements
   differ)

### 504 Plan

- Any disability
- Focus on how the child learns
- Accountability & parents involvement limited
- No goals, progress monitoring,
- Not a SPED program
- Overseen by OCR and HSS
- School does not need to involve parent in in development or revisions
- Applies to any school recieving public funds



# What can I do?

- Keep learning about FASD
- Advocate for FASD-informed systems
  - Encourage organizations, schools, and agencies to get trained on FASD.
  - Educate people in your community on FASD.
- Connect with FASD United and use our Family Navigators!



## Resources at FASD United



**Family Navigator** 



The Family Navigator program is a zero-barrier national resource where individuals, families, and professionals can call to find local resources. Navigators provide personalized one-on-one peer support, referrals to vetted resources and services, and assistance with medical, educational, and disability benefits.



We answered over 1000 inquiries in 2024, offering support to more than 800 individuals.



Over 1200 professionally vetted resources for all 50 states. Customized referrals for each individual and family request.



- A FASD Family Navigator can be reached from 9am-10pm Eastern Time, Monday through Friday via phone at 202-785-4585 or by completing an online form: fasdunited.org/family-navigator/
- Available for people with FASD, caregivers and family members, professionals, pregnant people
- This service is free and does not require a referral.



# Reach Out to FASD United

1054 31st Street NW #204 Washington, DC 20007

<u>FASDunited.org</u>

202-785-4585

https://fasdunited.org/family-navigator/