Fetal Alcohol Spectrum Disorders (FASD)

**Diagnosis** is important - knowing and understanding increases ability for empathy. Diagnosis provides strengths and weaknesses in each child and recommended therapeutic approaches.

**Facts**

- FASD occurs when a fetus is exposed to alcohol during pregnancy
- FASD is a serious global mainstream health issue
- FASD occurs throughout society and is not confined to particular racial or socio-economic groups
- Irreversible brain damage (causes challenging behaviour, e.g. temper tantrums, hyperactivity, difficulty paying attention)
- High rate of undiagnosed FASD
- FASD is over represented in Out of Home Care
- Generational and siblings
- High number of grandparents raising children with FASD
- High risk group to suicide
FACTS

- Average lifespan for adults with FASD is 38 years
- Only 10% will be born with physical characteristics of FASD (particular facial features)
- Growth retardation
- Issues with teeth, skeleton and organs (e.g. smaller heart and kidneys)
- Chronological age is NOT indicative of developmental/functioning levels (dysmaturity)
- Brain function issues (e.g. difficulties with memory)
- Cognitive functions and language problems
- Difficulty translating learning across other areas
- FASD is the most common preventable non-genetic cause of developmental and intellectual disability in the Western world
Risks

- Memory problems, for example – a child may learn times tables but the following week may not remember, a child may learn to swim competently but 6 weeks later may jump into a pool and not remember how to swim
- Unable to read social cues, difficulties with making and keeping friends (due to dysmaturity)
- Lack of understanding cause and effect
- No fear, are risk takers
- None to poor impulse control
- Early onset of depression
- Early mortality
- Lack of awareness by adults
Secondary Disabilities

Early diagnosis and intervention is critical in assisting the prevention of secondary disabilities.

- Ongoing issues with school
- Trouble with Criminal Justice System
- Mental Health
- Alcohol and Drugs Misuse
- Inappropriate sexual behaviour

Comorbidity

Majority 90% will have FASD plus one or more of the following:

- Behavioural problems, disruptive or impulsive (conduct disorder)
- Receptive language disorder
- Developmental disorder of speech and language
- Middle ear problems (chronic serious otitis media)
- Mental and behavioural disorder
Strategies

- Avoid talking in abstract terms (abstract terms can be triggers)
- Use simple language and give simple instructions/rules (state the behaviour you want to see, e.g. keep your hands to yourself, rather than saying don’t touch)
- Use visual aids (pictures)
- Sensory bands, oral sensory necklaces – helps with sensory overload
- Brain gym exercises
- Motor skill activities
- Reward good behaviour immediately, give praise for achievements
- Focus on strengths
- Be clear, consistent and organised
- Ask questions to check for understanding
- Try different ways
Interventions

- Diagnosis – treatment plan
- FASD Informed case management
- Behaviour therapy
- Speech therapy
- Art, sports, music therapy – uses both parts of the brain
- Animal therapy
- Medication (monitored)
Specialist FASD diagnostic clinics in Australia for children


References

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