



**Welcome to FASD Across the Lifespan**  
A training series for Alaska families

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### Land acknowledgment

"We are gathered today on the historical land of the Dena'ina Athabascan peoples. I ask you to join me in acknowledging the Dena'ina community, their elders both past and present, as well as future generations. We also acknowledge that our founded in the aftermath of influences that led to exclusions and erasures of many Indigenous peoples, including those on whose land we are currently located. This acknowledgement demonstrates a commitment to continuing the process of working to dismantle the ongoing legacies of settler colonialism including racial, cultural, and political accusations and judgments about risk and blame associated with alcohol use and the role it plays in shaping and reinforcing stigma in our communities."

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### In this series

- Introduction and Diagnosis
- Infant Learning and Early Intervention
- Preschool and Social Development
- ➔ School Age and Learning
- Middle School and Challenging Behaviors
- High School and Transition to Adulthood
- Adulthood and Interdependence

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### Session Objectives



By the end of this session, participants will:

- Identify the primary characteristics of FASD
- Understand how these characteristics result in learning differences
- Learn how to support children with FASD as they move through the school system

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Morgan Fawcett

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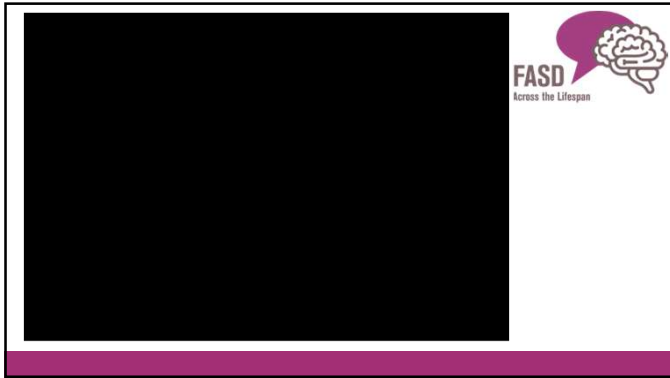
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**Characteristics of FASD**  
These affect each individual differently.

**Primary – brain based**

- Impulsivity
- Memory failure
- Anxiety/depression
- Concrete thinking
- Sensory disorders
- Time management
- Dysmaturity

**Secondary – trauma based**

- Social isolation
- School/employment breakdown
- Alcohol/other drug misuse
- Family breakdown
- Homelessness
- Trouble with the law




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**What currently happens to many children with FASD?**

- Early Childhood - when they usually perform the best they're going to do in our system
- Elementary Grades - we start to see problems
- Middle/Junior High - they start to fall through the cracks
- High School – many leave school
- Early Adult Life – the toughest time in life

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- Early
- Childhood

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3<sup>rd</sup> Grade (age 8)

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5<sup>th</sup>  
Grade (age 10)

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Middle School  
(ages 11-13)

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High School (ages 14-18)



FASD Across the Lifespan

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Then comes the proverbial Edge of the Cliff...

FASD Across the Lifespan

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Early Adult Life



FASD Across the Lifespan

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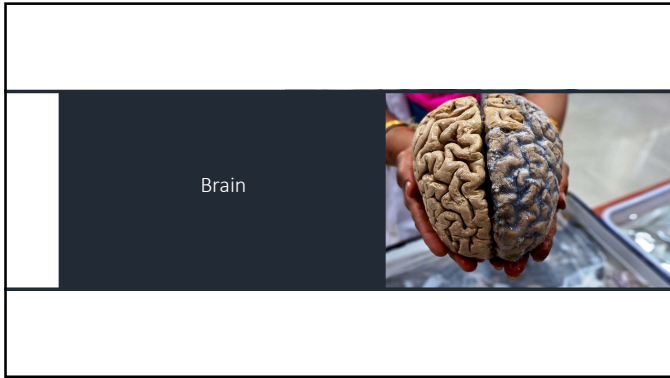
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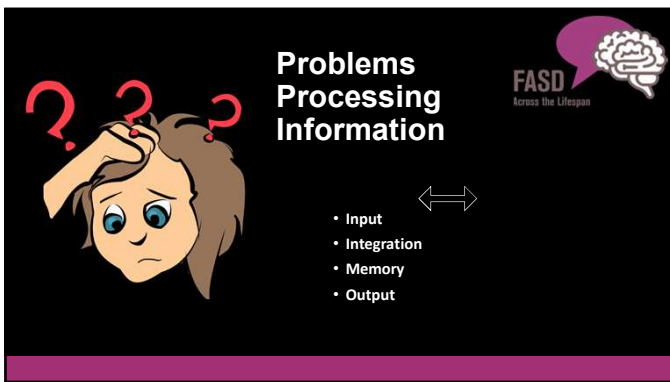
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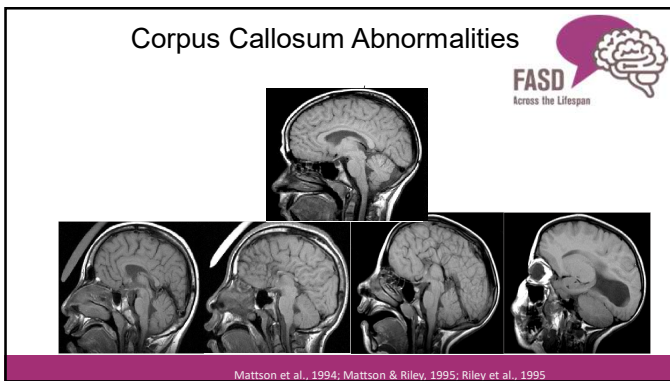
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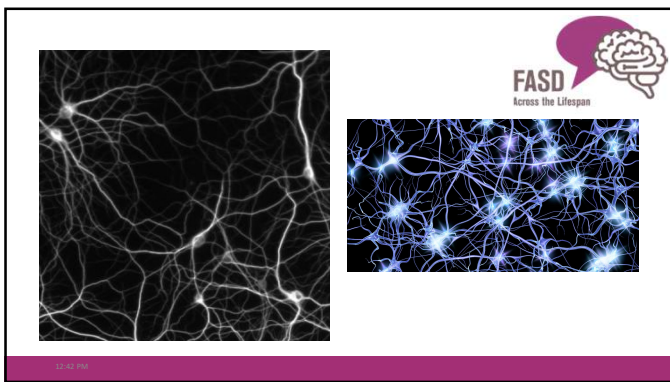
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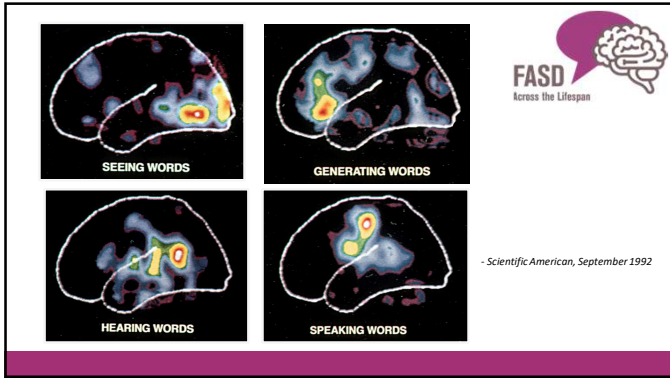
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“Brains at Work”  
Kee Warner

FASD  
Across the Lifespan

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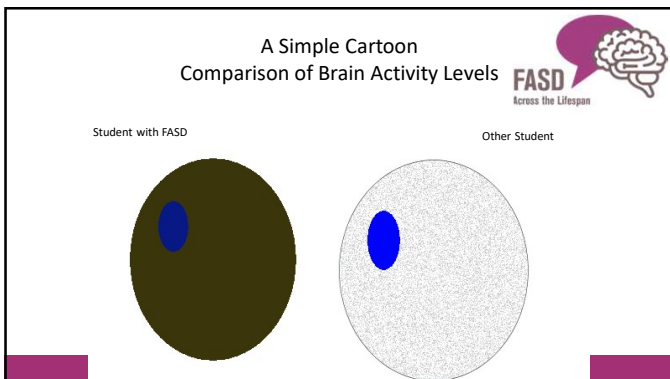
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### Information Processing Difficulties



Remember: They appear to understand more than they do!

Ask:

- What is it they don't understand?
- How can we help – with out without a deeper understanding?

Do not make the mistake of jumping straight to behavior.

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Brains affected by FASD *work harder* and need more energy and rest!  
 Lots of *sleep* and *great nutrition* to keep the brain fed cannot be over-emphasized!




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### Learning Theory

Assumes the student is capable of:

- *Learning a rule or principle*
- *Understanding the underlying concepts of that principle*
- *Remembering these concepts*
- *Generalizing this learning to many different situations*

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Let's look deeper...



**FASD**  
Across the Lifespan

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**FASD**  
Across the Lifespan

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**1 - Impulsivity**

"#1 reason kids with FASD can have low self-esteem and struggle to be seen as positive"  
• Nora Boesem

**FASD**  
Across the Lifespan

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## 2 - Memory

- Often misinterpreted as oppositional because people say child "knows the rule"
- Memory is a big part of the reason they are unable to sustain a consistent level of functioning.



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## 2 - Memory

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## 3 - Anxiety/Depression

- When behavior escalates, it means they are the most anxious.



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### 3 – Concrete/Literal Thinking

- Literal thinkers focus on the exact meaning of words and find it difficult to interpret a less factual or more metaphoric meaning.

Started growing my own pot...  
Not sure if I'm doing it right...




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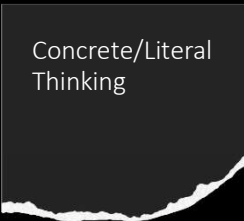
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### Concrete/Literal Thinking



- All words that have to do with emotion are abstract.
- Social expectations and most rules for behavior are abstract.
- Most school discipline plans are abstract: e.g., after-school detentions for *disrespectful* behavior.
- Understanding and managing time and money, including future planning are abstract.
- What we consider to be common sense involves using abstract concepts in an appropriate way.

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### Concrete/Literal Thinking

- Most humor is based on having a good comprehension of abstractions and the mores of society.
- Cultural innuendos are abstract.




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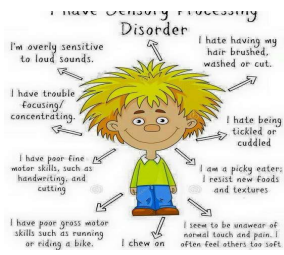
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### 5 - Sensory Disorders




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### 6 - Time Management

- What do we need to be able to do to manage time?




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**FASD**  
Across the Lifespan

### 7 - Dymaturity

- Stretch toddlers
- Treat with dignity
- Make sure recognize that they see some of their differences.
- Don't speak down to them.

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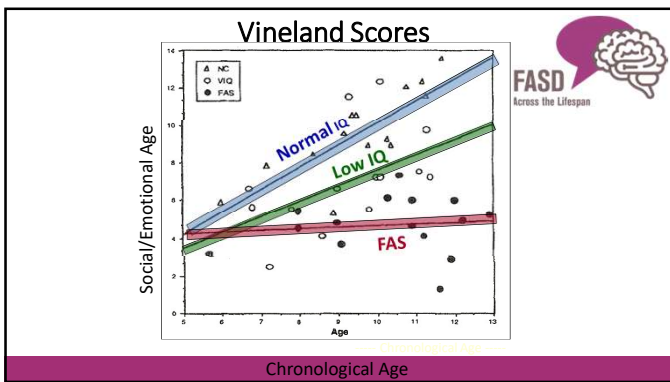
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**FASD**  
Across the Lifespan

### Vineland Adaptive Behavior Scale II

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### Ask 4 Thoughtful Questions



1. What is the child's Developmental Age?
2. Would this behavior be more normal/typical if that was his/her actual Chronological Age?
3. What is it that the child needs or **does not understand**?
4. How can we help develop appropriate **Habit Patterns of Behavior** with or without current deeper understanding?

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<h2 style="margin: 0;">IEP vs 504 Plan</h2>	<p><b>Individual Education Program</b></p> <ul style="list-style-type: none"> <li>- Need to be evaluated by a school psychologist or outside team.</li> <li>- Diagnosis</li> <li>- Meet criteria under federal categories: OHI, LD, Autism, ED, HI, VI, TBI or MD</li> <li>- Students with FASD qualify under OHI when it impacts them academically.</li> <li>- Re-evaluated every 3 years.</li> </ul>	 <p><b>504 Plan</b></p> <ul style="list-style-type: none"> <li>- Students in general education who need specific modification or support in the classroom.</li> <li>- Need a medical diagnosis</li> <li>- Re-written yearly.</li> </ul>

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Even after a child's PDD, "being mainstream" is what you share your child's medical diagnosis of a Fetal Alcohol Spectrum Disorder, educators will be better able to create an environment geared to your child's unique needs.

Our school nurses can answer questions and share information with you about the diagnostic process and local resources in a confidential environment. For more information contact your school nurse.

**FASD Connections:** [www.fasdconnections.ca/](http://www.fasdconnections.ca/)  
 Website from Canada that provides information on a range of issues relating to substance and alcohol use (FASD)

**E-Learning Module:** [www.fasdsupport.ca/learning/module/guidebook-the-guide/](http://www.fasdsupport.ca/learning/module/guidebook-the-guide/) Website that provides video presentations and a variety of FASD topics for families and educators

**http://findingsplus.knowledge.ca/:** Website where families living with FASD, educators and healthcare professionals share their stories and resources for help

**http://www.KTFASD.org:** Website of resources from the Kentucky FASD project

**www.fasdonline.ca/** Website from a college in Canada that has several support resources and programs to improve the lives of those living with FASD

**www.nad.ca/programs/fasd:** Website for the STEEP Centre, the parent resource centre for the Anchorage School District



**Let's talk about it!**

Brought to you by the Anchorage School District FASD Committee, 2012 Caring About Kids

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**Executive Function**

- Poor judgement
- Brain damage
- Heart and kidney problems
- Cognitive impairment

It's a fact that a child can be prenatally exposed to alcohol even before the mother knows she is pregnant. Both defects resulting from prenatal exposure to alcohol will last a child's entire life.

- I have a hard time listening to my teacher and mean speeches. ("Do the right thing.")
- I have a hard time learning from experience. Every situation is brand new to me.
- I think I am slow just. It may take me longer to respond because my brain needs more time to process.
- I am likely to make impulsive decisions and then be surprised by the outcomes. A typical behavior plan might not work for me.
- Choice I've learned something it's difficult for me to change or I'd hard for me to quietly listen to a lecture in the gym because to me the gym is fun playing.
- I don't readily understand non-verbal communication like body language, facial expression, tone of voice. It's hard for me to get to know and get along with other kids.
- My short-term memory is inconsistent. Sometimes I remember things and sometimes they get lost in my brain. I can expect something to you, and then forget it as soon as I walk away.
- I experience my senses differently than most people. A slight touch may feel like a sharp, painful light may feel like strobe lights, some noises seem really loud. I struggle with things that seem normal to everyone else.

*"Liane Nagle,  
Marquette Regional Prevention Center 2010"*

**Strategies that work**

**Eight Magic Keys**

- Concrete** – talk in literal terms using words without double meanings or idioms (*break young or when providing assistance, giving instructions*)
- Consistent** – use the same words for important phrases and oral directions (*get up an environment with as few changes as possible*)
- Repeat** – if you want the child to remember something it may need to be taught again and again (*short term memory is a big problem*)
- Routine** – develop routines that don't change from day to day (*knowing what to expect decreases anxiety and increase learning potential*)
- Simple** – keep the learning environment uncluttered and to the point (*over-stimulation leads to shutdown*)
- Specific** – say exactly what you mean and tell them why to help them to do (*abstractions and generalizations are very difficult to comprehend*)
- Structure** – teach habit patterns as the pathway to understanding (*this is the glue that holds the child's world together*)
- Supervision** – provide constant supervision to help develop habit patterns of appropriate behavior (*there is often a nature to daily life situations*)

*\* Eight Magic Keys: 1997*

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This series is brought to you by...



With funding from the State of Alaska FASD Program and the Alaska Mental Health Trust Authority.



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