1 in 20: What to know about working with students with Fetal Alcohol Spectrum Disorders

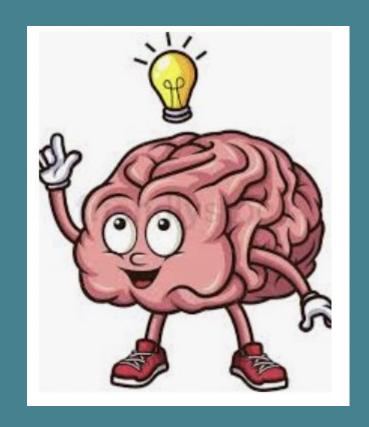
Michelle Trager

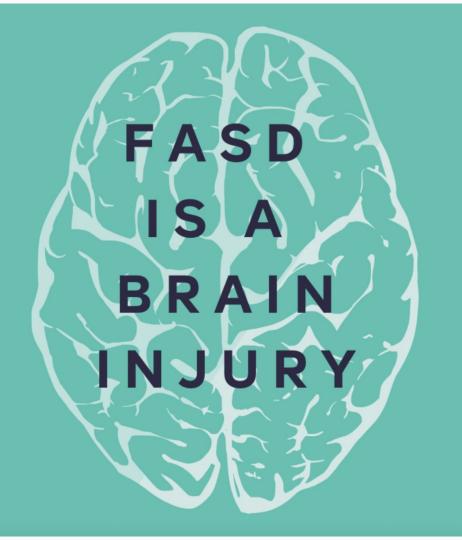
# SUPPORT HR 4151/SB 2238 The FASD Respect Act

As many as 1 in 20 people have a Fetal Alcohol Spectrum Disorder, they deserve support. Find out more at https://bit.ly/FASDRespect

1 IN 20

# What did your brain do today?





### What is FASD?

CanFASD: FASD is a lifelong disability that affects the brain and body of people who were exposed to alcohol in the womb. Each person with FASD has both strengths and challenges and will need special supports to help them succeed with many different parts of their daily lives.

FASD United: Fetal alcohol spectrum disorders is an umbrella term describing a range of effects that can occur in an individual prenatally exposed to alcohol. These effects may include physical, mental, behavioral, and/or learning disabilities with lifelong implications. The term FASD is not intended for use as a clinical diagnosis.

ALCOHOL AND PREGNANCY

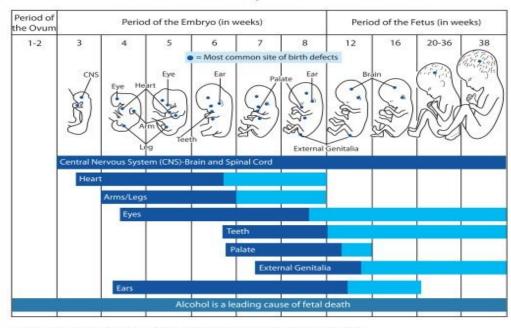
> NO SAFE Time.

> NO SAFE Amount.

> NO SAFE Alcohol.

PERIOD

#### **Your Baby in Weeks**

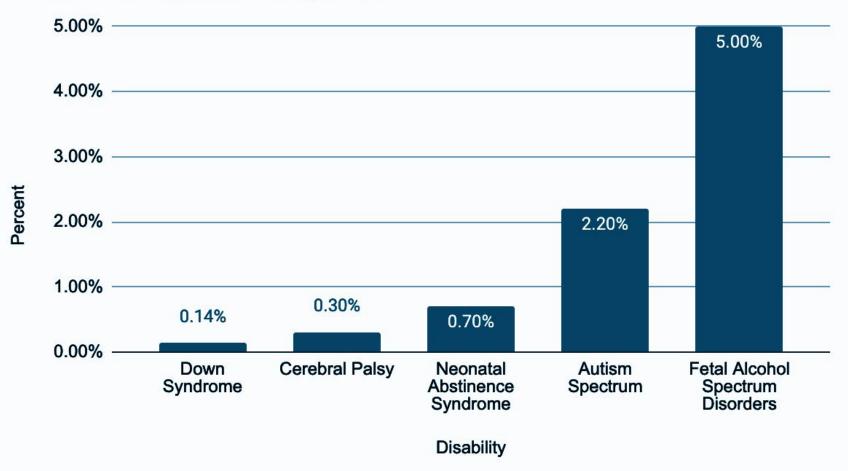


Adopted from: Jacobson, S. Assessing the impact of maternal drinking during and after pregnancy. Alcohol frealth & Research World; 21(3), 1997.

The chart shows your developing baby's vulnerability to alcohol-related defects during specific periods of development. The dark blue segments represent the most sensitive periods.



### **FASD Prevalence Comparison**



Of the over 140,000 babies born annually in Illinois, almost 7000 babies are estimated to have FASD.

Of the 1.95 million students in Illinois schools, as many as 97,850 may have FASD, yet far fewer are diagnosed.



An estimated 633,000 of the 12.76 million people living in Illinois may be affected by FASD.

Even at lower prevalence rates, the estimated average annual cost to Illinois for FASD is over \$7.84 billion in health care, special education, residential care, productivity losses, and corrections costs.



Most people with FASD will not qualify for disability services, even with a diagnosis.

FASD is not tracked in special education under IDEA. Most schools lack training and supports for students with FASD.

In 2018 NIAAA supported a prevalence study of 6,639 first graders in four US geographically separated communities found 222 children (3.3%) had FASD. The study's conservative prevalence estimate ranged up to 5%. The weighted prevalence estimate ranged from 3.1% to 9.85%. Only 2 youths had a previous diagnosis of FASD.

A study published in 2015 indicated that among the population of foster and adopted children the rate of missed diagnosis for FASD was 80%.

Over 90% of individuals with FASD will develop co-morbid mental health conditions. A 2019 study found that the rate of adolescent males with FASD who reported a serious suicide attempt was 19.5 times higher than for adolescent males in the general population.

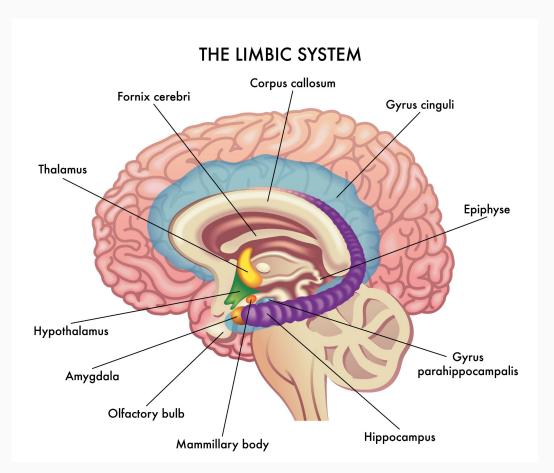
A 2015 review or studies on FASD in the juvenile justice system found that adolescents affected by FASD are 19 to 40 times more likely to become involved in the juvenile justice system. The average age that children with FASD begin having trouble with the law is 12.8 years.

A study published in September 2020 found that the rate of binge-drinking by women of child-bearing age during the pandemic had increased 41%.

In 2020 an Adolescent brain Cognitive Development Study found 25.9% (or 1 in 4) youths had been exposed to alcohol in utero.

In January of this year CDC researchers published an article that stated about 1 in 7 pregnant people (nearly 14%) in the United States reported drinking alcohol, and 1 in 20 pregnant people (5%) reported binge drinking. The dates of the reports were 2018-2020.

### Section Title



# Primary characteristics of FASD are directly related to brain differences and vary from person to person.

slow processing

memory problems

difficulty with abstract thought and predicting

difficulty with language and communication

may be rigid in thinking

impulsivity

sensory differences

# Secondary characteristics of FASD are behaviors that result when the primary characteristics are misunderstood by others as intentional.

frustration	tantrums	demanding		
disruption	resistant	excessively irritable		
anxious or fearful	shutting down	argues with everyone		
low self-esteem		truancy/running away		
may be socially isolated		sexual acting out		
many physical complaints because they cannot identify their feelings				

# Tertiary characteristics of FASD happen as a result of chronic of chronic misunderstanding and frustration over time.

trouble at home trouble at school

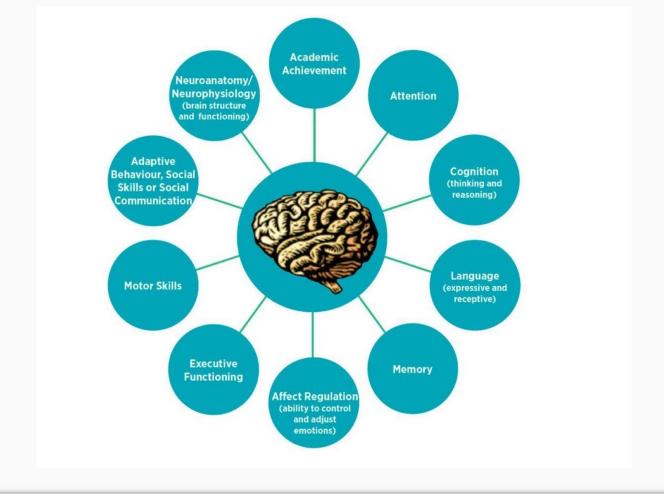
disrupted foster placement disrupted school experience

trouble with the law incarceration

addictions and substance abuse homelessness

self-harm and hospitalizations

at risk of being victimized



### IQ and Executive Functioning

"Executive functions are a set of cognitive processes that are necessary for the cognitive control of behavior: selecting and successfully monitoring behaviors that facilitate the attainment of goals."

--Wikipedia

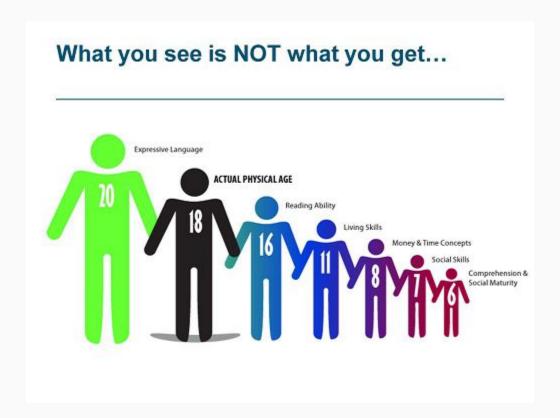
"Executive function and self-regulation skills are the mental processes that enable us to plan, focus attention, remember instructions, and juggle multiple tasks successfully."

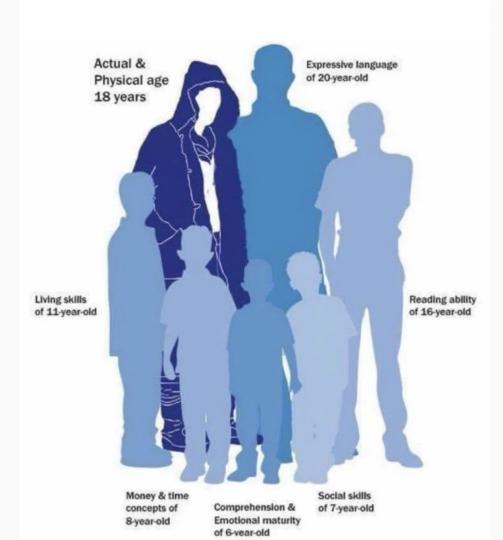
https://developingchild.harvard.edu

### **Executive Functions**

judgment, initiating, set-shifting, inhibition, impulse control, mental flexibility, sequencing, planning, problem-solving, organizing, abstract reasoning, self-monitoring, regulating emotional responses, working memory







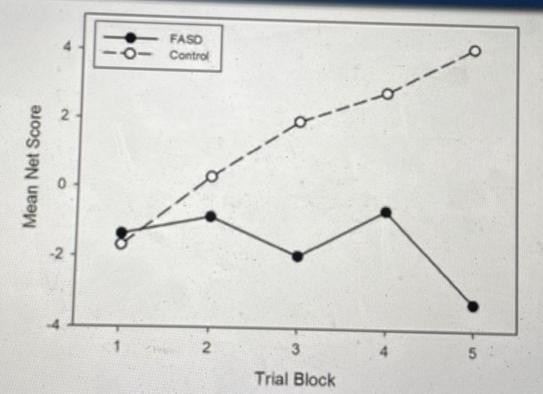
#### WISC Scores on Evaluation from Children's Research Triangle

Index	Score	Percentile
Verbal Comprehension	108	70
Visual Spatial	102	55
Fluid Reasoning	88	21
Working Memory	67	1
Processing Speed	77	6
Full Scale IQ	94	34
General Ability Index	100	50

### **AHA! MOMENT**

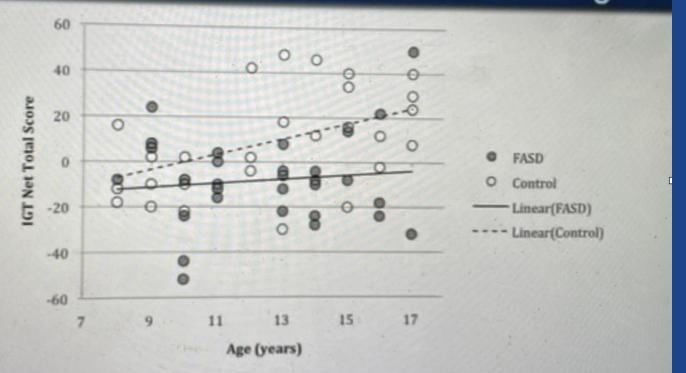


# Performance on IGT – decision making



From: Kully-Martens, K., Treit, S., Pei, J., & Rasmussen, C. (2012). Affective Decision-Making on the Iowa Gambling Task in Children and Adolescents with Fetal Alcohol Spectrum Disor Can FASD Journal of the International Neuropsychological Society

### Age Effects on IGT – decision making



From: Kully-Martens, K., Treit, S., Pei, J., & Rasmussen, C. (2012). Affective Decision-Making on the Iowa Gambling Task in Children and Adolescents with Fetal Alcohol Spectrum Disor Can FASD Journal of the International Neuropsychological Society

### Fetal Alcohol Spectrum Disorders Living every day like a lamp with a short in it



Some days, the FASD brain works like a bright, shining lightbulb. Symptoms are minimal. They are able to do common tasks with little or no help. They remember things they've learned with few, if any, difficulties.

Some days, the FASD brain's bulb seems to have a short in it. Symptoms come and go- they seem to be misbehaving more. They can sometimes do common tasks and sometimes they can't. They sometimes remember things they've learned, but forget other things.

Some days, the FASD brain's bulb won't turn on at all. Symptoms show up throughout the day and what seem to be misbehaviors are nearly non-stop. Tasks they can often do alone, they now are completely unable to do. They can't remember things that they've demonstrated mastery of in the past.

# Common interventions that typically do not work for individuals on the FA Spectrum

time out, "natural" consequences, lecturing/yelling, contracts, reasoning/logic, star charts/sticker charts, points/levels, "store," taking something away

call parents to pick the child up (again), detention, isolate, suspend, incarcerate



## Why it's hard to switch tasks (Let's call it Tendril Theory)

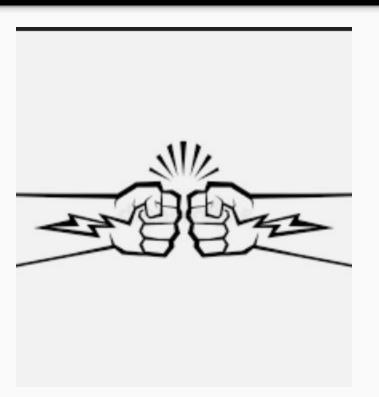
When I'm My mind sends out focused a million on something tendrils of thought Expands When I into all of the need to switch thoughts tasks & feelings

I must This retract takes all of the tendrils some of my mind time But when Eventually I am o. I can interrupted shift to or must the new task

switch abruptly 3 It feels That's like all of why I the tendrils don't O are being react well ripped out ·0. To switch Please tasks just give when I'm

me time ready

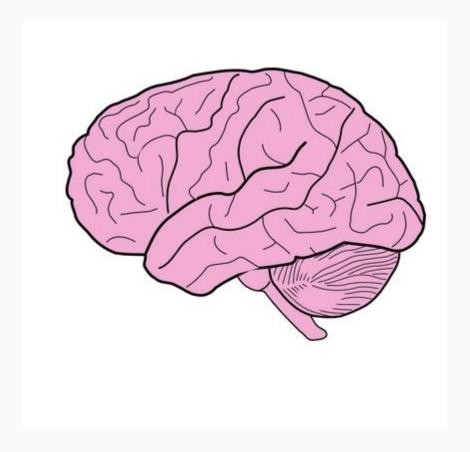
### Values Clash



You can't convince some people with Fetal Alcohol that their thinking is off because their thinking is off. Thinking is their disability. Save your energy for interventions, not lectures.

> FASD CAREGIVER Success

# Bring it back to the brain!



AN EXPLOSIVE OUTBURST-LIKE OTHER FORMS OF ALADAPTIVE BEHAVIOR-UTSTRIP THAT PERSON'S **CAPACITY TO RESPOND** 

ROSS W. GREENE, THE EXPLOSIVE CHILD

### Comparing ODD, ADHD and FASD

(D Dubovsky 2002)

	ODD	ADHD	FASD		
Behavior	Does not complete tasks				
Underlying cause for the behavior	<ul> <li>Takes in the information</li> <li>Can recall the information when needed</li> <li>Chooses not to do what they are told</li> </ul>	<ul> <li>Takes in the information</li> <li>Can recall the information when needed</li> <li>Gets distracted</li> </ul>	<ul> <li>May or may not take in the information</li> <li>Cannot recall the information when needed</li> <li>Cannot remember what to do</li> </ul>		
Interventions for the behavior	Provide positive sense of control, limits, and consequences	Limit stimuli and provide cues	Provide one direction at a time		

### What might work? Some Ideas:

NOT talking when they are escalated (no matter how quiet and calm we are and don't say their name over and over

Roleplay: we show them what we want them to do and then they roleplay what they saw us do

Repetition, repetition, much more than we think we should need to do (especially if they are older or have a high IQ); we have to get past the damaged working memory to get it into long term memory



### What else works?

Modifying the environment, visual cues, preparing for transitions, structure and habits, supervision, distractions, humor, break it down into fewer and smaller steps, "less is more" in their environment, food/sleep/exercise, bribery, "enabling," giving them time to respond (sometimes at least 30 seconds), verbal cues such as "we're going to talk about this question, don't answer it right now, just think about it and we'll talk after we finish this page."



### Any other ideas?

External support person who can co-regulate them

Focus on Interdependence rather than Independence

Don't point out consequences in the heat of the moment; don't tell them it's no big deal; don't take away things they like; don't use logic in the heat of the moment; don't respond to cursing in the moment



Every time you think of calling a kid 'attention-seeking' this year, consider changing it to 'connection-seeking' and see how your perspective changes.

Dr. Jody CarringtonPSYCHOLOGIST

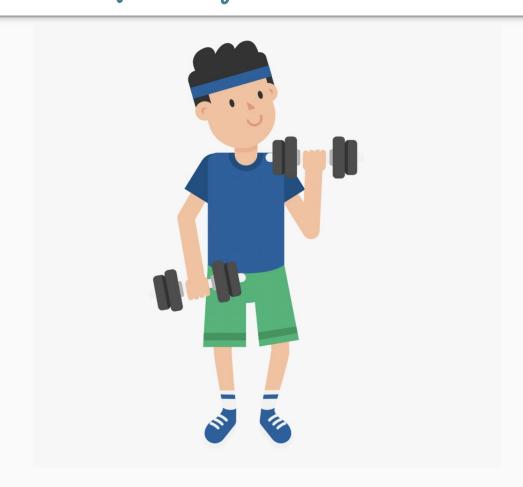
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# Some common areas of strengths for individuals with FASD

Very friendly and engaging (which is also a risk factor when no one is a stranger to them); love to be helpful; love to have a job/hard workers; often creative (music, dance, art, crafts); might be good in sports; good with animals; they do worry about others (but can't see how their own words and actions impact others); determined; may be very good with elderly or young children (caveat is sexually inappropriate behaviors, which are not uncommon); every day is a new day-they don't hold grudges (the flip side is that re-teaching is needed and consequences carried over from the day before probably won't work)



### Find each individual's unique strengths and build on those!



"FASD doesn't excuse behavior, but it explains behavior. And if it explains behavior, then it tells us how we respond to it. It doesn't mean we ignore challenging behaviors, but our focus is on building strengths and abilities and changing the environment so they can be more successful."

Dan Dubovsky on the FASD Success Show podcast with Jeff Noble



**Education In Schools** 

**FASD Informed Interventions** 

Research

Services for Adults with FASD

**Education in Medical and Mental Health Systems** 

Increased Diagnostic Capacity Education in the Justice System

Building FASD Systems of Care in SB 2238 **States** 

Prevention

SUPPORT

HR 4151

### THE FASD RESPECT ACT

**People with Fetal Alcohol Spectrum Disorders** need our support. Find out how you can help at

https://bit.ly/FASDRespect

### Michelle Trager

MSW FASD Advocate

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"If you've told a child a thousand times, and the child still has not learned, then it is not the child who is the slow learner." --Walter Barbe

#### RESOURCES

**FASD United** 

https://fasdunited.org/

https://nofaspolicycenter.org/

Canada FASD Research Network

https://canfasd.ca/

Jeff Noble

https://www.fasdsuccess.com/

(podcasts, trainings, support group)

Jeff Noble

Making Sense of the Madness: An FASD Survival Guide (2012)

Diana Malbin

Trying Differently Rather Than Harder (1999)

Dr. Ira Chasnoff and Ron Powell

\*\*Dr. Chasnoff is a Chicago doctor

Guided Growth: Educational and Behavioral Interventions for Children and Teens with Fetal Alcohol Spectrum Disorders and Early Trauma (2020)

https://www.ntiupstream.com/

Ellen Rodger and Rosie Goswell

Understanding Mental Health: Fetal Alcohol Spectrum Disorder

Dr. Carl Bell

\*\*Dr. Bell was a doctor who practiced in Chicago

Fetal Alcohol Exposure in the African-American Community (2018)

Dr. Vanessa Spiller

Explained by Brain

https://www.jumpstartpsychology.com/

Adrienne Bashista and Families Affected by Fetal Alcohol Spectrum Disorder

https://fafasd.net/index.php/2021/02/25/oppositional-behavior-and-fasd/

Fetal Alcohol Spectrum Consultation Education and Training Services

https://fascets.org/

Collaborative Initiative on Fetal Alcohol Spectrum Disorders

https://cifasd.org/

https://www.facebook.com/groups/FASDaFlyingwithbrokenWings/

https://redshoesrock.com/

Excellent YouTube videos of trainings:

Nate Sheets

Dan Dubovsky

Documentary: <a href="https://thefasdproject.org/">https://thefasdproject.org/</a>

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