

TALKING ABOUT SPECIAL EDUCATION SERIES
VOLUME 7

FETAL ALCOHOL SPECTRUM DISORDERS

INFORMATION BOOKLET



This pamphlet is one of a series of resources prepared by the First Nations Schools Association (FNSA) and First Nations Education Steering Committee (FNESC) to share information about how to support all First Nations students, regardless of their needs.

FNSA MANDATE:

to collaborate with First Nation schools to create nurturing environments that develop learners' pride and competence in their First Nations language and heritage and equip them to realize their full potential within self-governing First Nations communities.

FNESC MANDATE:

to facilitate discussion about education matters affecting First Nations in BC by disseminating information to and soliciting input from First Nations. FNESC's primary goal is to promote and support the provision of a quality education to First Nations learners.

We hope that these pamphlets provide a useful overview of key special education topics, representing an introduction to issues that some people may want to investigate in more detail. Anyone who requires more information or has specific questions is welcome to contact the FNESC/FNSA special education staff.



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© First Nations Education Steering Committee and First Nations Schools Association, 2018
Suite 113 - 100 Park Royal South, West Vancouver, BC V7T 1A2 www.fnesc.ca

Phone (604) 925-6087 | Toll-free in BC 1-877-422-3672

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What Are Fetal Alcohol Spectrum Disorders

Fetal Alcohol Spectrum Disorders (FASD) is an umbrella term that is used to describe a range of effects that can be seen in people who were prenatally exposed to alcohol. The effects may be physical, mental, behavioural, and / or related to learning disabilities that will have lifelong impacts.

Prenatal alcohol exposure damages the brain of the developing fetus. This irreversible brain damage is associated with a number of primary disabilities. All areas of the brain can be damaged, depending on the stage of development at the time of exposure to alcohol.

FASD shows itself differently in every individual, and it is a complex disorder. Diagnosing Fetal Alcohol Syndrome (FAS), the most involved end of the FASD spectrum, can be difficult because there is no clear medical test, and other disorders, such as Attention Deficit Hyperactivity Disorder, can present some of the same issues. Generally,

to diagnose FASD doctors might look for different facial features, lower-than-average height, weight, or both, central nervous system problems, brain differences, and evidence of prenatal alcohol exposure.

FASDs last a lifetime. There is no cure, but research shows that early intervention treatment services can improve a child's development.

There are also many types of treatment options, including medication to help with some symptoms, behaviour and education therapy, and family training. No one treatment is right for every individual. Good treatment plans will include close monitoring, follow-ups, and changes as needed along the way.

Understanding People with FASD

Educators and families who are unfamiliar with FASD may wrongly assume that an affected person is behaving badly, when in fact they are desperately trying to do what is expected.

The following are some general descriptions of how people of different ages will show signs of FASD.

- **Infants** may experience a range of characteristics. Severely affected infants may have disorders that impact their major organs and may be prone to infections and develop more slowly than other babies. They may have difficulty sleeping, sucking, and swallowing, keeping food down, gaining weight, and may be irritable and unpredictable. It is critical that their caregivers are patient and maintain low levels of stimulation for these babies.
- **Young children** from toddlers to preschool level may develop more slowly than usual and may experience continued health problems. Delays in speech and language ability may be noticeable at these ages and motor skills may be delayed. Changes in daily routines may cause serious disruptions for these children, and they may experience difficulties interacting with other children. An assessment may be needed to determine what special services will help these children transition to school.

- **School age children** may have speech and language delays, may have problems processing information, and may be less able to understand consequences. Learning disabilities are common for students with FASD, and some children may have a shorter attention span, less well-developed motor skills, and reasoning and learning challenges that can result in inappropriate behaviour. Challenges for individuals living with FASD also may include both short and long-term memory issues.
- **Adolescents and young adults** with FASD, and their caregivers, often have to deal with normal teenage challenges as well as concerns related to FASD. People in this age group can be easily misled, and they need interventions to help develop their social skills, sometimes including a well-supervised environment and appropriate school setting. Youth with FASD may have difficulty making friends because they may display unacceptable or immature behaviour, and they may have challenges in communicating and understanding instructions. Abstract thinking can be delayed, and their literacy and numeracy skills may be below age and grade level. Attention deficits and hyperactivity may affect their learning and relationships, and they may have difficulty with rules, daily living skills, and managing money and time - requiring adequate reinforcement of life skills throughout their adolescence.

Basic Needs of People Living With FASD

Most importantly, people affected with FASD need patience, nurturing, understanding and support.

People with FASD can be vulnerable, and they need to feel that they are valued members of their families, schools, and communities. Efforts to develop their positive self-esteem and acceptance are crucial.

People with FASD also benefit from a stable home, responsive school, supportive friends, and a caring team of professionals who can coordinate relevant services and programs.

Parents of children with FASD also need connections with their community, other parents, and service agents who provide family-centred and culturally sensitive supports. Parents may need help dealing with addictions, guilt, and unique parenting skill needs. People who are working with children and families affected by FASD should be respectful and non-judgmental, recognizing that parents are performing a demanding job and are almost always doing their best.

A community safety net will be needed to meet the needs of families and provide early assistance for children who have FASD. Families should have access to appropriate assessments and assistance with intervention planning, and they should be empowered to contribute to all discussions about their children.

COMMON MISINTERPRETATIONS OF RESPONSES OF STUDENTS WITH FASD

BEHAVIOUR	MISINTERPRETATION	ACCURATE INTERPRETATION
Noncompliance	Willful misconduct, attention seeking, stubbornness	Difficulty translating verbal directions into action, doesn't understand
Repeatedly making the same mistake	Willful misconduct, not listening	Can't link cause to effect, can't see similarities, difficulty generalizing
Often late	Lazy, slow, poor parenting, willful misconduct	Can't understand the abstract concept of time, needs assistance organizing
Not sitting still	Misbehaving, disruptive, willful misconduct	Neurologically based need to move while learning, sensory overload
Poor social judgement	Seeking attention, bothering others, willful misconduct	Not able to interpret social cues, doesn't know what to do
Overly physical	Willful misconduct, deviancy, bullying	Hyper or hypo-sensitive to touch, doesn't understand social cues regarding boundaries
Doesn't work independently	Willful misconduct, poor parenting	Chronic memory problems, can't translate verbal directions into action

An Ideal Learning Environment for Students with FASD

Helping students who have FASD is challenging! There are days when it can feel frustrating, and progress will take time, determination, repetition, plus a constant focus on the positive.

All students with FASD are unique, and often their difficulties will vary depending on their age and the social context. When settings change and students are put into more complex situations, they may have more difficulty coping. Therefore, flexibility is key.

A team approach will help meet the complex needs of students with FASD. Successful collaboration involves teachers, parents, students and administrators, as well as community service providers from areas of mental health, social services and developmental disabilities.

The most important thing to remember when teaching a student with FASD is that he or she has the capability to learn. Educators must work hard to find a way to assist the students discover what helps them to learn and enjoy the learning process. Educators can help students with FASD become prepared for living the rest of their lives and working to their potential.

Students with FASD have challenges in their lives, but they also have many strengths and talents that, once discovered, can be used to support their growth and development.

There are some keys to working successfully with students with FASD: structure, consistency, variety, brevity and persistence. It is important to understand that students with FASD can lack internal structure, so external structures are crucial.

- Educators should be consistent in their responses and in the daily routine so that the student can benefit from predictability.
- Students with FASD have difficulty maintaining attention so it is important to be brief in explanations and directions, and to take the time to check for understanding.
- Educators should use a variety of ways to get and keep the student's attention.
- The most important thing to remember when working with students with FASD is to repeat, repeat and then repeat again what it is that you want them to learn.
- Students with FASD may be easily distracted by colours, smells, clutter and noise from outside the classroom, the humming sound from the lights or heaters, or any other environmental factors.
- In addition, students with FASD may be unorganized, need help following schedules or routines, can become easily frustrated, and may find it challenging to transition from one activity to the next.
- Students with FASD become easily overwhelmed in everyday situations, which may result in unpredictable behaviours.

Tips for Helping Students with FASD

- Use calm, minimal colours and do not include too many decorations / materials that are overly distracting or stimulating.
- Maintain regular routines, structures, and ensure order in the classroom.
- Establish a few simple rules that are regularly reinforced.
- Reduce the brightness of the lighting in the classroom or specific areas in the classroom.
- Arrange desks to minimize distractions.
- Limit noise and allow students with FASD to use headphones or other strategies for quiet time / to retreat if they feel overwhelmed.
- Organize the students' immediate surroundings so they can focus on the task at hand instead of trying to locate the materials they may need.
- Gain the student's full attention before communicating.
- Be concrete in your communication with the student, speak slowly and clearly, and be aware that you may have to help the student to understand and interpret non-verbal cues.
- Write down steps for students to use, especially for activities that will be repeated often. Provide visual supports when possible.
- Allow the student time to process before answering a question, and recognize and honor the student's attempts to communicate.
- Use uncluttered worksheets and wide spaced paper.
- Intentionally teach the student organizational, memory and problem-solving skills.
- Avoid excessive amounts of school work / homework and teach students about prioritization.
- Provide the student adequate time for assignments and tests, and focus on process, not just product.

- Interrupt inappropriate behaviours, control disruptions, do not allow talking out without hands-up, and use positive reinforcement to encourage good habits.
- Offer the students options for alternative activities when necessary, and involve them in selecting the skills they will learn and practice.
- Aim for consistency, ideally having the same teacher/Educational Assistants all year.
- Intentionally teach and reinforce lifeskills, especially after elementary school.
- DO NOT personalize behaviours.
- Listen to parents. Involve them. They know their child best.

Most importantly, remember that students with FASD are unique and have a right to every opportunity to reach their full potential.

With the help of understanding, caring teachers, families, and a network of appropriate support people, students with FASD can succeed.

REFERENCES

Facts About FASDs. Center for Disease Control and Prevention. www.cdc.gov

Fetal Alcohol Spectrum Disorders Education Strategies. www.oregon.gov

Understanding Fetal Alcohol Spectrum Disorders (FASD). A Comprehensive Guide for Pre K-8 Educators. www.sites.duke.edu

OTHER VOLUMES AVAILABLE IN THE
TALKING ABOUT SPECIAL EDUCATION SERIES:

VOLUME 1: AN OVERVIEW

VOLUME 2: AN INTRODUCTION FOR PARENTS / FAMILIES

VOLUME 3: INDIVIDUAL EDUCATION PLANS

VOLUME 4: A PARENT'S GUIDE TO INDIVIDUAL EDUCATION PLANS

VOLUME 5: SPEECH AND LANGUAGE ISSUES

VOLUME 6: ATTENTION DEFICIT / ATTENTION DEFICIT HYPERACTIVE
DISORDER

VOLUME 7: FETAL ALCOHOL SPECTRUM DISORDERS

VOLUME 8: AUTISM SPECTRUM DISORDERS

VOLUME 9: GIFTED EDUCATION

FOR MORE INFORMATION:



FIRST NATIONS EDUCATION STEERING COMMITTEE
FIRST NATIONS SCHOOLS ASSOCIATION

#113 - 100 Park Royal South, West Vancouver, BC V7T 1A2

604-925-6087 | Toll-free in BC 1-877-422-3672
info@fnesc.ca

www.fnesc.ca