

Objectives

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- **Introduce FASD**
- **Rethink intervention strategies**

Why talk about FASDs?

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- Invisible
- Prevalent
- Increasing
- Costly to family, individual, society

Invisible

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- School-aged children usually identified when referred for learning disabilities or AD/HD
- Care will often focus on co-morbid conditions (autism, AD/HD, learning disabilities, ODD, CD, adolescent depression, bipolar disorder, reactive attachment disorder)*

*Onoye, J. (2018) addressing FASD in Hawaii. Powerpoint presentation 6/6/2018.

*Quality Improvement Center for Research-Based Infant-Toddler Court Teams. www.qicct.org

Invisible, cont.

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- Stigma discourages reporting of maternal alcohol use
- <5% are ever diagnosed*
- ~85% missed or misdiagnosed in sample of foster and adopted children**

*Onoye, J. (2018) addressing FASD in Hawaii. Powerpoint presentation 6/6/2018.

*Quality Improvement Center for Research-Based Infant-Toddler Court Teams. www.qicct.org

** Chasnoff, I., Wells, A.M., & King L. (2015). Misdiagnosis and missed diagnoses in foster and adopted children with prenatal alcohol exposure. *Pediatrics*, **135**(2), DOI: 10.1542/peds.2014-2171.
<http://pediatrics.appublications.org/content/early/2015/01/07/peds.2014-2171>



Prevalent

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- 2018 conservative estimate:
One in 20 (5%) first graders are affected by FASDs
- FASDs are at least twice as common as autism



May, P.A., Chambers, C.D., Kalberg, W.O, Zellner, J., Feldman, H., et al. (2018). Prevalence of Fetal Alcohol Spectrum Disorders in 4 US Communities, 319(5):474-482. doi:10.1001/jama.2017.21896

Increasing

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- CDC: 2015-2017 (Alcohol use in past 30 days)
 - 1 in 9 pregnant women drank alcohol
 - 1 in 3 engaged in binge drinking
- 55% increase in alcohol sales since mid-March shut down for COVID-19



Cost of FASD

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- Human & social costs: Unmeasurable
- 94% Mental health issues (multi-morbidities)
- 95% unable to live independently
- 80% Difficulty with employment
- 70% Trouble in school
- 60% Trouble with the law
- 50% Adults abuse alcohol/drugs
- 45% Legal problems with sexual behaviors

(CDC, 2004; Lange et al., 2013; Lupton et al, 2004; Thanh et al., 2011)

Basic FASD

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- Permanent/Irreversible Brain Damage
- Affects the entire body (CNS) --pervasive
- No two people alike
- Overrepresented in certain populations (e.g., homeless, SUD, adoption/foster care, criminal justice system)

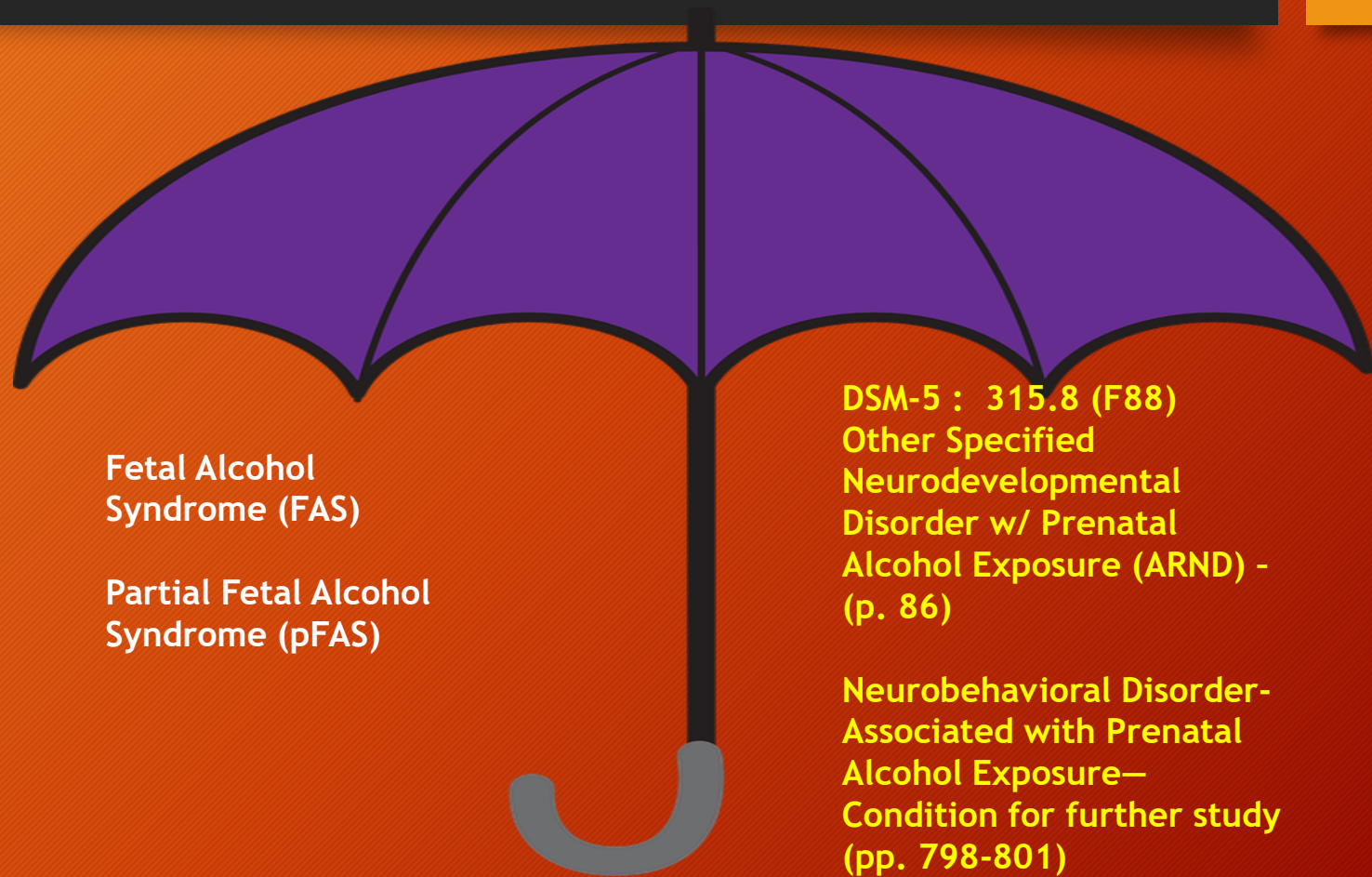


www.canfasd.ca

Brown, J. (2017). FASD & the criminal justice system: A review for caregivers and professionals. PowerPoint presentation 10/18/17 for Families affected by FASD

Fetal Alcohol Spectrum Disorders

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Fetal Alcohol
Syndrome (FAS)

Partial Fetal Alcohol
Syndrome (pFAS)

DSM-5 : 315.8 (F88)
Other Specified
Neurodevelopmental
Disorder w/ Prenatal
Alcohol Exposure (ARND) -
(p. 86)

Neurobehavioral Disorder-
Associated with Prenatal
Alcohol Exposure—
Condition for further study
(pp. 798-801)



FASD Spectrum (UW)

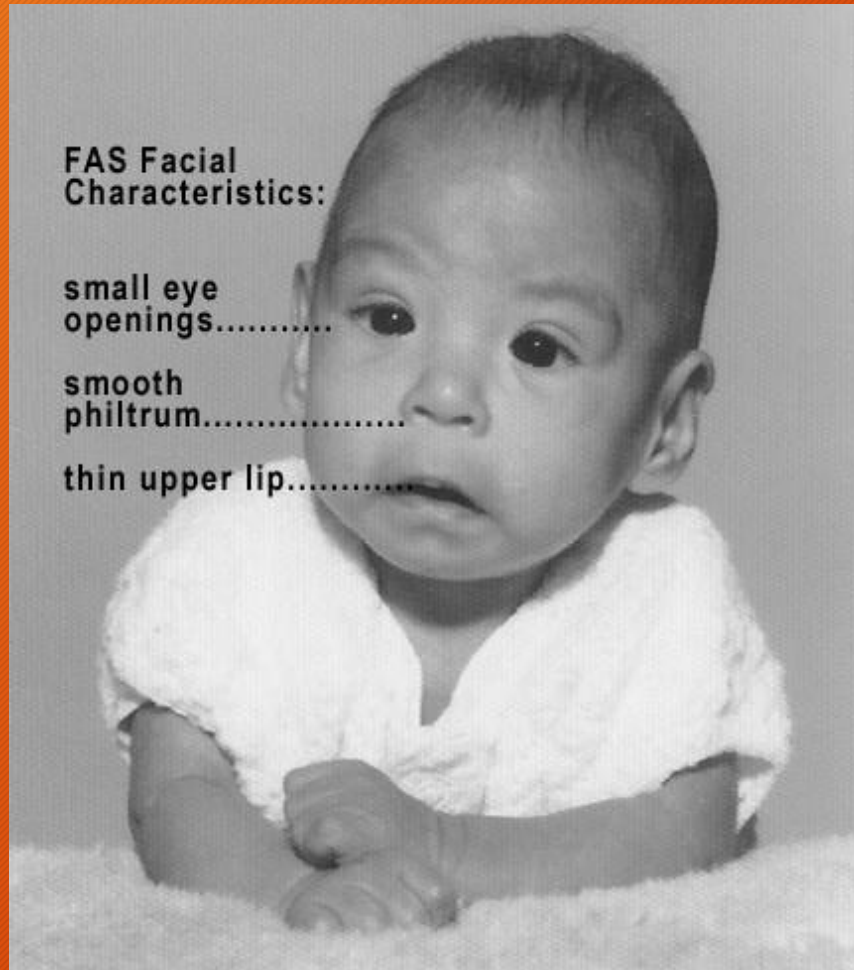
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	Total FASD		
	Fetal alcohol syndrome (FAS)	Partial fetal alcohol Syndrome (pFAS)	Alcohol-related neurodevelopmental disorder (ARND)
Prenatal Alcohol Exposure	Confirmed or Unconfirmed	Confirmed	Confirmed
Central nervous system impairment in 3 or more subdomains	Yes	Yes	Yes
Facial anomalies	Yes (3 features)	Yes (2 features)	Not required
Growth deficiency	Yes	Not required	Not required

*All behaviors begin with
the brain*

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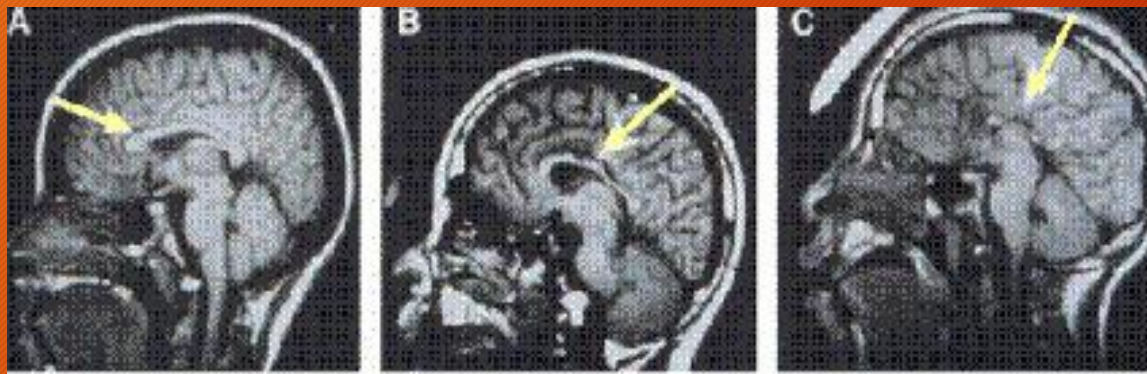




Child with FAS

CNS Damage: Corpus Callosum

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The brain of a normal individual (A) and two with FAS (B,C) shows permanent loss of the tissue indicated by the arrows (portions of the corpus callosum).

Secondary Disabilities of FASD

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- Fatigue, frustration
- Anxious, fearful
- Overwhelmed, shut down
- Rigid, resistant, argumentative
- Feelings of failure, low self esteem
- Isolation, few friends
- Attachment difficulties—empathy, social cues



Secondary Disabilities, cont.

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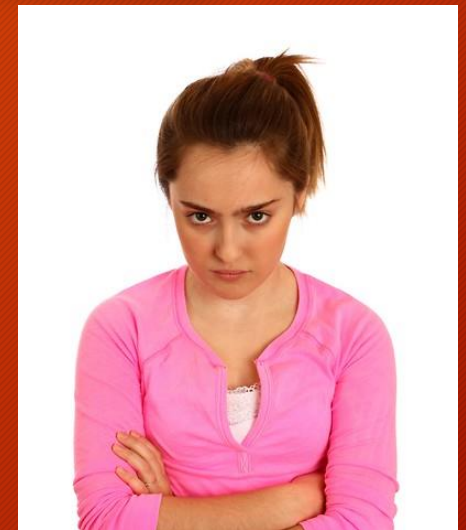
- School disruptions
- Family problems
- Truancy, run away, avoidance, trouble with law
- Depression, self-destructive, suicidal
- Victimization
- Substance Use



Samantha: 14 yo

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- Runs away from home
- Truant
- Uses drugs/alcohol
- Failed 4 schools
- Climbed on roof when upset
- Continues behaviors in spite of consequences
- Aggressive and threatening at times



Samantha, cont.

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- Placed in several foster homes from 6 months old, adopted at 2 years
- Fussy baby with many ear infections as young child



Diagnoses over the years: ADHD, RAD, ODD

Alternative Hypothesis: What if...??

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- Mother used alcohol during pregnancy?
- Samantha's behaviors may be affected by brain damage?

Overlapping Behavioral Characteristics & Related Mental Health Diagnoses in Children

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Overlapping Characteristics & Mental Health Diagnoses	FASD	ADD/ADHD	Sensory Int. Dys.	Autism	Bi-Polar	RAD	Depression	ODD	Trauma	Poverty
	Organic	Organic	Organic	Organic	Mood	Mood	Mood	Mood	Environ	Environ
Easily distracted by extraneous stimuli	X	X								
Developmental Dysmaturity	X			X						
Feel Different from other people	X				X					
Often does not follow through on instructions	X	X					X	X	X	X
Often interrupts/intrudes	X	X	X	X	X		X			X
Often engages in activities without considering possible consequences	X	X	X	X	X					X
Often has difficulty organizing tasks & activities	X	X		X	X		X			X
Difficulty with transitions	X		X	X	X					
No impulse controls, acts hyperactive	X	X	X		X	X				
Sleep Disturbance	X				X		X		X	
Indiscriminately affectionate with strangers	X		X		X	X				
Lack of eye contact	X		X	X		X	X			
Not cuddly	X			X		X	X			
Lying about the obvious	X				X	X				
Learning lags: "Won't learn, some can't learn"	X		X			X			X	X
Incessant chatter, or abnormal speech patterns	X		X	X	X	X				
Increased startle response	X		X						X	
Emotionally volatile, often exhibit wide mood swings	X	X	X	X	X	X	X	X	X	
Depression develops, often in teen years	X	X				X			X	
Problems with social interactions	X			X	X		X			
Defect in speech and language, delays	X			X						
Over/under-responsive to stimuli	X	X	X	X						
Perseveration, inflexibility	X			X	X					
Escalation in response to stress	X		X	X	X		X		X	

Caring for someone with FASD

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- Medical Care
- Medication
- Behavior and Education
- Parent Support and Training
- Alternative Approaches (Biofeedback, animal-assisted therapy, art, auditory training, nutrition & supplements)

Shift our interventions

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- Adjust Expectations from “*I won’t*” to “*I can’t*”
- Build on Strengths
- Supervision = “External Brain”



**WHO SAID PARENTING KIDS
WITH FASD IS STRESSFUL?**



I'M 29 AND I FEEL GREAT!!

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Mahalo!



Resources

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For more information & support:

***Hawai'i Fetal Alcohol Spectrum
Disorders (FASD) Action Group***

www.hawaiifasd.org



Additional Resources

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Hawaii Prevention Resource Center

<https://www.drugfreehawaii.org/hawaii-prevention-resource-center>

American Academy of Pediatrics Fetal Alcohol Spectrum Disorders Program

<https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/fetal-alcohol-spectrum-disorders-toolkit/>

Centers for Disease Control and Prevention

**<https://www.cdc.gov/ncddd/fasd/> and
<https://www.cdc.gov/ncbddd/fasd/alcohol-use.html>**

National Organization for Fetal Alcohol Syndrome

<https://www.nofas.org>