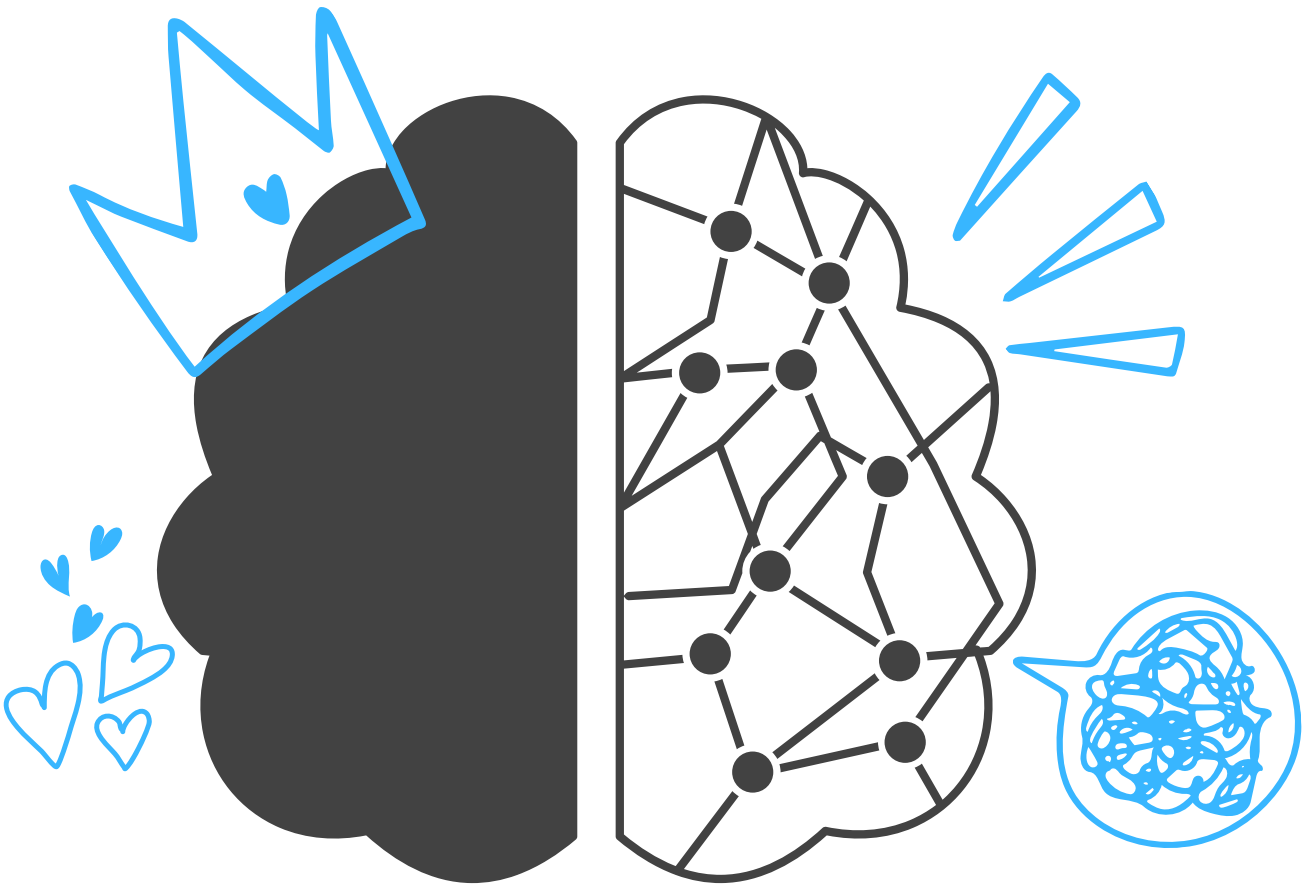


FASD

success



UNDERSTANDING ME: An Individual with FASD

This guide has been created to help educators and helpers connect with their students in the classroom and to create individual success strategies that meet students "where they are at".

Dear Reader,

My name is Jeff Noble from www.FASDSUCCESS.com, and I am the Founder and CEO of Noble Initiatives Inc., an organization that teaches parents/caregivers how to gain a deeper understanding of Fetal Alcohol Spectrum Disorder so that they can have better days at home and school.

Why am I telling you this? Because the parent/caregiver who sent this to you has a loved one with FASD or is considered to be on the spectrum. We want to help you have the best year possible with your student - and being prepared and informed will allow you to move along your journey even quicker, with fewer road bumps, making for a smoother trip.

As you can imagine, school is a big challenge for many individuals on the FASD spectrum (and their families). It is tough when over 90% of individuals do not have facial features typical of FASD, making it challenging to see their big behaviors as symptoms, but that is exactly what they are.

Here are a few things I would love for you to consider while reading this student success package:

- FASD is the most significant cause of developmental disabilities in the western world
- In the United States, studies have shown that FASD affects 1 out of 20 students
- Compared with other common disabilities, at an estimated prevalence of 4%, FASD is at least:
 - 2.5 times more common than autism spectrum disorder (1.52%²⁶)
 - 19 times more common than Cerebral Palsy (0.21%²⁷)
 - 28 times more common than Down Syndrome (0.14%²⁸)
 - 40 times more common than Tourette's Syndrome (0.10%²⁹)

Source: <https://canfasd.ca/wp-content/uploads/publications/Prevalence-1-Issue-Paper-FINAL.pdf>

The Canada FASD Research Network states: *The complexities of this disability are what make it unique, and also potentially misunderstood. Although many disability groups experience similar challenges, FASD is distinct in that these challenges often occur at the same time, at greater magnitudes, and with greater complexity than in other groups.*

This means that no two individuals/students with FASD are the same or will even experience the same challenges. That is why we have created this student success package -- so you can understand the student first, their behavioral symptoms, and what is causing them. This will not only help you with this student, but others, I am sure - and that sounds like a win to me!

If you have any questions about this package, email me at: Jeff@fasdforever.com.

Thanks. We appreciate your help in making a difference for this student.



P.S. We all want kids to be successful, right? Parents want you to understand their kids, collaborate with you, and make your job easier with this toolkit. *So, welcome to the team!*



Name:

Date:

Birthday:

Grade:

Age:

Primary Contact:

UNDERSTANDING ME:

An Individual with FASD

What makes me happy:

My strengths are:

My ideal learning environment is:

I respond best to people who are:

This is me:

[Insert Picture Here]



THINGS YOU NEED TO KNOW:

Diagnosis:

Medications:

Things I find hard:

I get upset when:

You can help me by:

My Support Team:

Who I live with:

FASD: AN INVISIBLE DISABILITY

FASD is not physically visible for most individuals. A small number of individuals diagnosed with FASD (approximately one in 10) will have certain distinctive facial features and/or growth deficiency.

FASD stands for Fetal Alcohol Spectrum Disorder. It 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.

There are often no physical features to show the person has FASD, even though the brain is impacted. This is why FASD is often referred to as a hidden disability.

There are ten brain domains that can potentially be impacted by alcohol exposure during pregnancy:

- academic achievement
- attention
- cognition
- language
- memory
- affect regulation
- executive functioning
- motor skills
- adaptive behaviour, social skills or social communication
- neuroanatomy/ neurophysiology

SOURCE(S): 1. What Educators Need to Know About FASD, Healthy Child Manitoba Office, Manitoba Education and Training, 2018 2. CANFASD, <https://canfasd.ca/fasd-faqs>, 2019

What it looks like for me:

SENSORY SYSTEMS AND FASD

Individuals with FASD may be under or over sensitive to their surroundings. They may not be able to communicate their responses to the environment clearly and directly... and will more likely communicate their response to their environment through their behaviour. *Diane Malbin*

Students with FASD who have sensory processing difficulties misinterpret everyday sensory information such as touch, sight, sound, movement and smell.

The overwhelming feeling of being bombarded by all this sensory information may affect students inner sense of calm and their ability to organize themselves and process the information being presented in class.

Consequently, students may appear disorganized, confused, emotionally upset, scared, shut down or become out of control.

Strategies to help:

- Structure and routine are of utmost importance in the classroom
- Less is best for students with FASD when it comes to visually appealing classrooms
- A tuned down class is one tuned into the student, not a result of lack of interest or effort on the teacher's part

SOURCE(S): What Educators Need to Know About FASD, Healthy Child Manitoba Office, Manitoba Education and Training, 2018

What it looks like for me:

MEMORY

working memory ● sensory memory ● short-term memory ● long-term memory

Challenges with memory for individuals with FASD is related to the brain's reduced ability to store and retrieve information, as well as make associations and generalize. Memory impairments may affect both short and long-term memory.

Common examples of memory difficulties experienced by individuals with FASD are being unable to do a task they've done several times before, or repeatedly forgetting easily predictable things.

Strategies to help:

- be patient when explaining the same thing multiple times
- reteach concepts in different settings
- give time to process
- ask them to repeat the instructions back
- don't assume the individual will remember

SOURCE(S): The FASD Network of Saskatchewan, 2018

What it looks like for me:

DYSMATURITY

When planning/supporting for an individual with FASD, don't forget: it's **STAGE** not **AGE**.

An individual with FASD will simultaneously exhibit behaviours common to people of different ages. For example, someone with FASD might be 18 years of age, sound like a 22 year old, act like a 6 year old in a social and moral sense, read like a young teen and understand time and money at about the same level as a 12 year old.

Dysmaturity is different from immaturity. While 'immaturity' suggests the person could function in a manner compatible with age, dysmaturity means the person is functioning at a level younger than their chronological age.

Strategies to help:

- adjust expectations
- focus on level of function, not actual age
- give them responsibilities that are appropriate to their developmental age

SOURCE(S): 1. 2012, FETAL ALCOHOL/NEUROBEHAVIORAL CONDITIONS: Understanding and Application of a Brain-Based Approach, Diane Malbin, fascets.org
2. <https://oursacredbreath.com/2017/08/07/fasd-and-dysmaturity>, 2017
3. The FASD Network of Saskatchewan, 2018

What it looks like for me:

BRAIN VS. BEHAVIOUR

When an individual with FASD is giving you attitude, ask yourself:
Is it misbehaviour or misunderstanding?

If you get stuck on what to do: **ALWAYS** bring it back to brain.

Ask yourself:

- Is the **brain** hungry?
- Is the **brain** tired?
- Is the **brain** overwhelmed?

Ask yourself:

Is **my** brain hungry or tired or overwhelmed?



Be a detective. Look for patterns of behaviours.

Ask yourself:

- Do they show symptoms every time I ask them to do this?
- Is there an anniversary of some previous trauma or major life event coming up?
- What's the environment like? Ex. loud, bright, noisy, large group, etc.

SOURCE(S): 2012, FETAL ALCOHOL/NEUROBEHAVIORAL CONDITIONS: Understanding and Application of a Brain-Based Approach, Diane Malbin, fascets.org

What it looks like for me:

CONFABULATION

Stop asking **WHY?** Especially if you know the answer. That way a student with FASD isn't forced to defend themselves with "lies", confabulations and I don't know.

Confabulation is the term used for when individuals with FASD 'fill in the blanks' of their stories. This story-telling may be the result of trouble with short-term memory, issues with thinking in a logical way, or struggles distinguishing reality from fantasy.

Confabulation can be misunderstood as lying, but often **this exaggeration makes sense or becomes true in the moment to those who are saying it.**

Strategies to consider:

- ask short questions with definite answers
- ask them to tell you in a different way such as writing it down or drawing it
- remain respectful and understanding
- understand that lying has intent, confabulation doesn't

SOURCE(S): The FASD Network of Saskatchewan, 2018

What it looks like for me:

SKILLS VS ACTUAL AGE

Solutions are not found in pointing out what you cannot do.
Solutions are found in pointing out what is possible and building upon that. Dr. Peter Choate

Students with FASD may experience difficulty functioning independently and acquiring daily living skills. The term adaptive skills refers to the ability to perform skills necessary to function independently in everyday life.

Students experiencing difficulties with adaptive and social skills may:

- act younger than their chronological age
- have no friends their own age/play with younger children
- have problems in gym class because they don't follow game rules
- have problems with time management
- be unable to manage their money in age-appropriate ways
- come to school dirty and unkempt
- be naïve and gullible
- say inappropriate things or act in ways that disturb others.

SOURCE(S): 1. What Educators Need to Know About FASD, Healthy Child Manitoba Office, Manitoba Education and Training, 2018 2. Alberta Learning. Special Programs Branch. Teaching students with Fetal Alcohol Spectrum disorder, 2004

What it looks like for me:

Expressive Language:

Reading Ability:

Comprehension:

Social/Emotional Skills:

"Expectations are premeditated resentments."

COGNITIVE PACE AND INFORMATION PROCESSING

FASD can cause impairments in an individual's cognitive pace, meaning they may need extra time to process information. Individuals with FASD may struggle to grasp everything being said to them or asked of them, they may only understand approximately every third or fourth word; or it may just take them a bit longer to retrieve information from their memory.

Many individuals with FASD will have a slower processing speed. Processing speed is a cognitive ability that could be defined as *the time it takes a person to do a mental task*.

It is related to the speed in which a person can understand and react to the information they receive, whether it be visual (letters and numbers), auditory (language), or movement.

Individuals with FASD are "ten-second people in a one-second world."

SOURCE(S): 1. The FASD Network of Saskatchewan, 2018
2. www.cognifit.com/science/cognitive-skills/processing-speed

What it looks like for me:



ACCOMMODATIONS

Suspending a student with FASD from school is like suspending a blind person and telling them, "when you come back from your suspension, you better not be blind."

FASD is a person first disability. Learn about FASD and also learn about the person... and then how the disability affects them. If we don't take time to learn about the individual, we won't come up with appropriate accommodations and tailored interventions.

REMEMBER: Despite what people might say, you are not enabling your student with FASD, *you are accommodating their disability.*

CONSIDER THIS:

Beliefs dictate behaviours. The belief that neurobehavioral symptoms of FASD are willful or intentional generates punishment. This in turn, often results in an array of secondary defensive behaviors.

The key to prevention is linking the idea of brain dysfunction with presenting behaviours, reframing perception, and moving from punishment to support.

SOURCE(S): 2012, FETAL ALCOHOL/NEUROBEHAVIORAL CONDITIONS: Understanding and Application of a Brain-Based Approach, Diane Malbin, fascets.org

What it looks like for me:

DON'T HATE, ACCOMODATE!

STRUCTURE, ROUTINES AND SYSTEMS

Individuals with FASD have permanent brain damage. This can cause them to have trouble learning and remembering new things, or understanding actions that have consequences. Even minor changes can be very difficult to cope with for individuals with FASD.

Structure helps ease the stress created by constant change and a **consistent routine** can help your child learn important life skills.

Strategies to help:

- create routines: routines help a child know what comes next in the day
- give advance warning to help ease transitions
- break tasks into small steps
- use visual aids and verbal prompts for reminders of routines
- review your routines with schedule picture cards or a checklist

SOURCE(S): FASD Waterloo Region, www.fasdwaterlooregion.ca/strategies-tools

What it looks like for me:

If you change the rule one time it becomes the new rule. There is no such thing as "just this once" for many individuals with FASD.
Consistency creates calm.

OVERLAPPING SYMPTOMS OF FASD

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	
Poor problem solving	X			X	X		X			
Difficulty seeing cause & effect	X			X						
Exceptional abilities in one area	X			X						
Guess at what "normal" is	X			X						
Lie when it would be easy to tell the truth	X				X	X				
Difficulty initiating, following through	X	X			X		X			
Difficulty with relationships	X		X	X	X	X	X			
Manage time poorly/lack of comprehension of time	X	X			X		X			X
Information processing difficulties speech/language: receptive vs. expressive	X			X						
Often loses temper	X		X		X		X	X	X	
Often argues with adults	X				X			X		
Often actively defies or refuses to comply	X				X			X		
Often blames others for his or her mistakes	X	X			X		X	X		
Is often touchy or easily annoyed by others	X				X		X	X		
Is often angry and resentful	X						X	X		



IMPULSIVITY

What it looks like for me:

Individuals with FASD tend to have poor impulse control. FASD is a brain-based disability, the frontal lobe, a part of the brain that controls inhibitions and judgement, may not function properly for those with FASD.

Individuals often act first and process the information later. By the time they realize what they've done, it's often too late.

Strategies to consider:

- model impulse control out loud
- use social stories to act out situations
- cues and reminders
- create and post a list of rules
- find a mentor or a friend to help monitor
- avoid situations where impulse control has been an issue in the past

SOURCE(S): The FASD Network of Saskatchewan, 2018

FIGHT OR FLIGHT?

Co-regulation is helping another person reach a state of emotional regulation. It lays the foundation for a person to learn to meet his or her own needs and be able to regulate their body and mind on their own. *Honestly Adoption*

What it looks like for me:

When students with FASD are escalated they are in *fight, flight or freeze*. Talking or reasoning isn't going to work. What do you do?

REGULATE: Help the child to regulate and calm their flight/fight/freeze responses.

How? Soothing but limited language, a safe space to go, stepping back and allowing them time to process. Don't add to the feelings by shouting or 'adding fuel to the fire'.

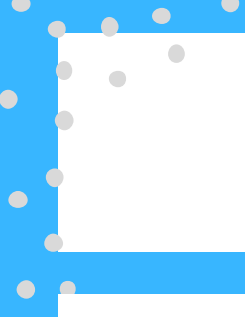
RELATE: We need to connect with and relate to the child.

How? Develop a calm, sensitive dialogue, acknowledging how they feel and how that is hard for them.

REASON: We can support the child to reflect, learn, remember, articulate and self-regulate their emotions.

How? Teach them the language of emotions, strategies for regulating them, use story to explore emotions and remind them of their safe places and safe people.

SOURCE(S): Dr. Bruce Perry, The 3 Rs: Reaching the Learning Brain



Empty rectangular box for writing.

What it looks like for me:

Empty rectangular box for writing.

Wide empty rectangular box for writing.

What it looks like for me:

Empty rectangular box for writing.

Empty rectangular box for writing.



NOTES:

RESOURCES

What Educators Need to Know about FASD, Healthy Child Manitoba (2009)

www.fasdoutreach.ca/resources/all/w/what-educators-need-to-know-about-fasd

FASD Educational Strategies

www.usd.edu/-/media/files/medicine/center-for-disabilities/handbooks/fasd-educational-strategies-handbook

Tips for Supporting a Child at School, FASD South Africa

www.fasdsa.org/tips_school.html

A Roadmap for Education, Mary Cunningham / FASD Waterloo Region

www.fasdwaterlooregion.ca/at-school-1/fasd-in-the-classroom/a-roadmap-for-education

Tips for Teachers, FASD Network Saskatchewan

www.saskfasdnetwork.ca/resources

Teaching Students with FASD, Florida School Board

www.fldoe.org/core/fileparse.php/7690/urlt/0070099-fetalco.pdf

6 Things Educators and Teachers Should Know, Nate Sheets

<https://youtu.be/fSsCXnsYKRI>

Education Essentials, FASD ONE

canfasd.ca/wp-content/uploads/2018/03/2014-11-27-Final-Education-Essentials-for-FASD.pdf