

What is Fetal Alcohol Syndrome?

Fetal Alcohol Syndrome (FAS) is a collection of severe birth anomalies that are the result of a woman drinking alcohol when she is pregnant. The more alcohol a woman drinks, the more likely she is to have a baby with FAS.

Characteristics of FAS

1. **Mental Retardation** -- Average IQ is from 60 to 75. IQ can range from as low as 16 to as high as 112. Most severe symptoms of FAS show up in children with the lowest IQ. The brain may be smaller and have other abnormalities.
2. **Central Nervous System** -- Some effects to the central nervous system can include hyperactivity, poor attention span, distractibility, impulsivity, tremors, unpredictable behavior, difficulty connecting behavior and consequences, fine and gross motor problems, difficulty writing, problems learning to talk and learning disabilities.
3. **Distinctive Features** -- The "typical" FAS facial structure has narrow eye openings, short nose, flat mid-face, elongated space between nostrils and upper lip, narrow upper lip, groove missing between nose and upper lip. The eyes may be affected and there may be vision problems. Cleft lip or cleft palate may be present. There may also be ear anomalies.
4. There may be problems with major organs such as the heart, liver, kidneys, genitals, bones, muscles and skin.

Strategies for working with children who have FAS

- ✓ Establish consistent routines so the child can predict coming events.
- ✓ Encourage independence in self help, play and learning activities.
- ✓ Give child choices when possible and encourage the child to make a choice. Keep the choices simple, give the child the choice between only two things, and be sure both are choices you can live with!
- ✓ Alternate active and inactive times.
- ✓ Limit time the child is expected to sit quietly.

- ✓ Give the child advance warning an activity will be over soon. Use a timer as a visual reminder.
- ✓ Keep a large calendar on the wall, mark planned activities and events, and cross off each day.
- ✓ Give short explicit directions and have the child repeat back his/her understanding of what he/she is to do. Know how many directions the child can remember, and give no more than that. (Many children with FAS can't remember more than one or two directions at a time.)
- ✓ Give the child short tasks to complete. Break tasks into manageable pieces, (Don't say "go clean your room," say "pick up all the toys.")
- ✓ Consistently put the child's clothing and belongings in the same place. Prompt the child to do so also. Organization is vital.
- ✓ Don't assume the child has generalized a learned lesson or task. Have the child repeat back his/her understanding, and know this may have to be repeated over and over.

Stress positive social/emotional growth

- Encourage the use of positive self-talk. ("I can do this. I need to pay attention. I'm smart. I can figure this out.")
- Work with your child on positive self-image and body image.
- Model and practice positive peer interactions.
- Play turn-taking games so the child can try and understand this important social skill.
- Specifically label unacceptable behavior and model an alternative. ("The way you are demanding ice cream is unacceptable. I will get it for you when you ask nicely, 'May I have some ice cream please.'")
- The visual channel is primary with children affected by FAS. Modeling desired behaviors and calling attention to and praising appropriate actions are much more effective than reprimands for inappropriate actions.
- The ability of a child affected with FAS to think in abstract is severely limited. Information and expectations must be presented in concrete terms and experiences.

Strategies for managing unpredictable behaviors

- ⇒ Establish clear rules and limits with definite consequences for violations.
- ⇒ Intervene before behavior escalates, redirect behavior.
- ⇒ Recognize and praise appropriate behavior.
- ⇒ Model and encourage positive self-talk language to help control impulsivity. (Stop, Think, Decide, Act)
- ⇒ When behavior gets out of control, or the child is over-stimulated by noise and people, calmly remove him/her to a quiet place until control is regained.
- ⇒ Encourage the child to self-monitor behavior and to recognize when over-stimulated or at risk of getting out of control. Have a plan for "quiet time/quiet place" that the child can follow when he/she feels overwhelmed.
- ⇒ Anticipate danger signs, role-play to practice high-risk situations and plan appropriate response.

Teaching strategies for optimal learning

In the classroom and at home, teachers and parents can use the following strategies to help the child affected by FAS learn:

- Alternate sitting and moving activities.
- Provide support and emotional reassurance.
- Understand that short-term memory deficits will necessitate re-teaching skills several times until they are plugged into the child's long-term memory.
- Establish predictable, consistent routines with a minimum number of changes.
- Recognize and praise child's appropriate behaviors and accomplishment of tasks.
- Use physical, concrete and verbal cues to direct or redirect child in a task or activity.
- Protect child from over-stimulation (people, noise, light, movement and objects) and from under-stimulation of bland social and environmental experience.
- Alert the child that an activity is about to change. Then guide the child through change and into the next activity.

What do I do if I think my child has FAS

Your child should have a complete medical examination by your pediatrician and/or a physician who specializes in developmental evaluations. At your request, your school can also conduct tests to evaluate your child's abilities and learning challenges. A diagnosis may bring a sigh of relief because there is finally an explanation for the behaviors and learning difficulties exhibited by a child.

There is no cure for FAS. The only prevention is to not consume any alcohol during pregnancy. However the effects of FAS can be modified by early identification and intervention, positive parenting techniques, lots of one-on-one attention, and minimizing stimulation. Training and education on appropriate behavioral management methods for professionals and community members who work with children and adults affected with FAS can also make a difference.

In an article that was printed in *ICEBERG*, an educational newsletter on FAS, the author, the birth mother of a child with FAS who is also a therapist who counsels other parents, says that since she accepted her own alcoholism and her daughter's diagnosis, she has come to recovery. Much of that recovery has been focused on working through the shame, guilt, grief and pain of knowing that the learning and behavior problems experienced by her daughter were a result of the alcohol she consumed while she was pregnant.

Family counseling can help parents, siblings and individuals deal with their feelings, fears and frustrations and provide them with the emotional support they need.

Children and adults with FAS need love, strength, support and advocacy. They are individuals with special qualities and special needs.

For more information about FETAL ALCOHOL SYNDROME

CONTACT:



Information & Referral for Parents
of Children with Disabilities

Parent Information Center

500 W. Lott St, Suite A
Buffalo, WY 82834
1-800-660-9742 (WY only)
(307) 684-2277 (v/tdd)
(307) 684-5314 (fax)
tdawson@wpic.org
www.wpic.org

To talk with the
PIC Outreach Parent Liaison
in your area, contact:

PHP of WY is a non-profit, 501(c) 3 organization; therefore, your donation is tax deductible. We welcome all donations. Every donation helps us strengthen our network of support for families.

The contents of this brochure were developed under a grant from the U.S. Department of Education. However, the contents do not necessarily represent the policy of the Department of Education, and endorsement by the Federal Government should not be assumed.

FETAL ALCOHOL SYNDROME

Disability Brochure #10



Characteristics and Coping Strategies

Parent Information Center

1-307-684-2277

A project of
Parents Helping Parents
of Wyoming, Inc.