

## Won't...or can't?

Without an understanding of the physical, behavioral and cognitive challenges faced by people with fetal alcohol spectrum disorders (FASD), typical misbehaviors can be misinterpreted as intentional misconduct or deliberate disobedience, when it is often just the opposite. When it seems like your child won't do something, it might be that they can't do it – at least not without support.<sup>1</sup> Remember that everyone with an FASD has the ability to succeed. Strategies, support, and interventions can help reduce the long-term effects of prenatal alcohol exposure and improve outcomes, behavior, and well-being for people with an FASD.<sup>2</sup>

### Domains impacted by prenatal alcohol exposure

Due to the brain injury caused by prenatal alcohol exposure, people with an FASD may have difficulty with the following:<sup>3-7</sup>

**Sensory processing:** They may have issues processing sensory information, such as touch, sound, or movement. This can lead to overstimulation and anxiety, aggressive behavior, or inability to learn or perform.

**Cognitive skills:** This can include learning difficulties, poor impulse control, and issues with memory and attention.

**Abstract reasoning:** If the frontal lobe has been affected by prenatal alcohol exposure, abstract reasoning can be difficult for the brain to process. Instead, be concrete and speak in literal terms. When giving directions, provide them step-by-step in detail.

**Cause and effect reasoning:** Remembering consequences can often be difficult due to impulsivity and memory issues. Because of this, consequences often will not shape future behavior for people with an FASD.

**Generalization:** What is understood or done in one setting does not automatically transfer to similar settings. Be aware that if you change one part of the person's routine, you have created an entirely new routine and this can require some adjustment.

**Hyperactivity:** This can include difficulty staying focused, being easily distracted, and having issues self-regulating when they are overstimulated or tired.

**Memory:** People with prenatal alcohol exposure often have issues with memory, especially working memory. Visual memory is often better. "Show" them, rather than "tell" them. Use fewer words. Understand that at times, a person with an FASD may not be able to complete a task that they had successfully completed many times before.

**Adaptive functioning:** People with an FASD might have issues with functioning independently and developing and maintain daily living skills.

## Secondary Characteristics

FASD is a lifelong disability, and “secondary characteristics” can occur as a result of living with the struggles associated with prenatal alcohol exposure. Secondary characteristics can include:<sup>8-11</sup>

- **Fatigue**
- **Tantrums**
- **Irritability, frustration, and/or anxiety**
- **Avoidance, withdrawal, being shut down, lying, and/or running away**
- **Trouble at home and/or school**
- **Legal trouble, drug/alcohol abuse**
- **Mental health issues**

The impact of these secondary conditions can be reduced when caregivers and professionals understand the challenges associated with the individual’s history of prenatal alcohol exposure and plan strategies and interventions that can most effectively support both the individual and their family.

## Adjusting Expectations

Caregivers should adjust their expectations of the person with an FASD to the developmental stage they are at in that moment. Expect variability: some days they may seem to function well, and other days they will have frequent struggles. This is typical but not intentional. Provide additional support when they become overwhelmed. Learn to read their behaviors and intervene as early as possible. Know that it’s okay to ask for help or support.

## Strategies

Each person on the FASD spectrum is unique, and a strategy that works well with one child on the spectrum might not work at all for another. You might have to try different strategies before finding which ones work well for your family.

- Be proactive versus reactive. This will help you avoid issues before they have a chance to occur.
- Allow plenty of processing time when talking with your child. For example, when asking them a question, count 10 seconds in your head before expecting a response from them.
- Repeat instructions/tasks as many times as it takes for your child to understand what to do. It can be helpful to write down instructions and give reminders.
- Provide supervision whenever possible.
- Allow frequent breaks from activities.
- Give concrete examples and instructions; children on the spectrum can have difficulty with idioms, sarcasm, and other language that isn’t straightforward.
- Set consequences that are immediate and related to what occurred.
- If your child is feeling frustrated, anxious, or irritable, provide them with a quiet space (when possible) that doesn’t have a lot of sensory stimulation.

Sources:

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