

FASD IN FOCUS

CHARACTERISTICS BY AGE

General characteristics of FASD change over time. People with FASD follow an asynchronous developmental pathway

STRENGTHS

- Often ambitious with a range of practical strengths
- Articulate, with engaging personalities
- Enjoy being with other people
- Learning strengths around literacy and practical subjects, such as Art, Performing Arts, Sport, and Technologies, although often have comprehensions difficulties
- While they have working/short-term memory difficulties, rote learning and long-term memory can be strengths

GENERAL

- Memory/learning/information processing difficulties
- Planning/temporal skills – difficulty organising daily tasks
- Behaviour regulation/sensory motor integration difficulties
- Abstract thinking/judgement difficulties
- Spatial skills/spatial memory difficulties
- Social skills and adaptive behaviour challenges including behaving at a level notably younger than their chronological age, poor social/adaptive skills
- Motor/oral motor control difficulties
- Cognition/academic achievement
- Language/social communication
- Physical symptoms

Every person with FASD is different, these are generalised statements.

NEWBORNS/INFANTS

- Low birth weight/small size
- Difficulty sleeping - unpredictable sleep cycle
- Failure to thrive
- Feeding difficulties and weak sucking reflex
- Heart defects, kidney problems, or skeletal anomalies
- Increased sensitivity to light and sound and easily over stimulated
- Poor fine motor control
- Poor gross motor control
- Seizures, tremors, or jitteriness
- Susceptibility to infections
- Vulnerable to ear infections

PRESCHOOL

- Missed or delayed developmental milestones such as walking, talking and toilet training
- Increased emotional over-reaction and tantrums
- Impulsivity and hyperactivity
- Difficulty with gross and fine motor skills.
- Lack of understanding of danger and stranger danger
- Small stature
- Speech delays (may include poor articulation, slow vocabulary or grammar development, or perseverative speech)
- Difficulty in learning new skills that other children find easy
- Difficulty with co-ordination and balance and muscle control

PRIMARY

- Attention deficits and hyperactivity
- Language difficulties (delayed development or difficulties with expressive and/or receptive language)
- Learning difficulties
- Difficulties with short term memory
- Poor impulse control (often seen as lying, stealing or defiant acts.)
- Small stature
- Social communication difficulties (may include being overly friendly with strangers and peers, immaturity, being easily influenced and difficulty in making choices).

ADOLESCENTS

- Difficulties with abstract reasoning
- Difficulty in understanding cause and effect/anticipating consequences
- Lack of appropriate academic achievement
- Low self-esteem
- Memory impairments
- Pronounced impulsiveness (often seen as lying, stealing or defiant acts)
- Poor judgment
- Hyperactivity/inattention
- Ego centric behaviour leading to isolation from peers
- Immaturity in social and emotional development
- Inappropriate sexual behaviour

HELPFUL RESOURCES

Developing Inclusive Practice for Young Children with Fetal Alcohol Spectrum Disorders: A Framework of Knowledge and Understanding for the Early Childhood Workforce (2017), Carolyn Blackburn.

Educating Children and Young People with Fetal Alcohol Spectrum Disorders: Constructing Personalised Pathways to Learning (2012), Carolyn Blackburn, Barry Carpenter, et al.

Fetal Alcohol Spectrum Disorders: Interdisciplinary perspectives (2013), Barry Carpenter, Carolyn Blackburn, et al.

Teaching a Student with FASD, National Organisation for FASD.

Understanding Fetal Alcohol Spectrum Disorder (FASD): What Educators need to know, Ayrshire and Arran NHS.

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Source: Carolyn Blackburn, Primary and Secondary Frameworks, Teaching and Learning Strategies to Support Students with Foetal Alcohol Spectrum Disorders, NOFAS-UK 2010.

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