Minnesota Organization on Fetal Alcohol Syndrome
Understanding Fetal Alcohol Spectrum Disorders in the Treatment Setting

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MINNESOTA ORGANIZATION ON FETAL ALCOHOL SYNDROME (MOFAS)

Our mission is to eliminate disability caused by alcohol consumption during pregnancy and to improve the quality of life for those living with Fetal Alcohol Spectrum Disorders throughout Minnesota.

Our vision is a world in which women do not drink alcohol during pregnancy and people living with Fetal Alcohol Spectrum Disorders are identified, supported, and valued.
Objectives

• Describe how prenatal alcohol exposure can affect a person throughout the life span

• Explain the relevance Native American history to health disparities that exist today

• Name three ways treatment programs can be modified for clients with FASD

• Discuss strategies that be used to prevent FASD in the future and support those living with FASD now
FASD Throughout the Life Span
What are Fetal Alcohol Spectrum Disorders?

“A set of physical, behavioral, and cognitive disorders seen in individuals exposed to alcohol prenatally”

**Lifetime disability** with **brain injury** that never goes away

Broad range (spectrum) of characteristics that vary from person to person
The FASD Umbrella

- Fetal Alcohol Syndrome (FAS)
- Partial Fetal Alcohol Syndrome (pFAS)
- Alcohol-Related Birth Defects (ARBD)
- Alcohol-Related Neurodevelopmental Disorder (ARND)
- Fetal Alcohol Effects (FAE) replaced by ARBD & ARND in 1996

Variables

• Timing of exposure
• Blood alcohol concentration of the mother, binge drinking
• Resiliency of fetus
• Metabolism and diet of the mother
• Birth order
• Other health/environmental factors
Characteristic FAS Facial Features

Source: American Family Physician Vol. 72/No. 2 (July 15, 2005)
Most Affected Areas of the Brain
Frontal Lobe Functions

- Understanding connection between future consequences and current actions
- Impulse control & decision making
- Judgment, problem solving
- Generalizing learning

- Perceptions, complex or abstract concepts
- Emotional response & self awareness
- Ability to delay gratification for long term goals
- Attention, being “tuned in”
- Understanding social cues, nuance
Increased Risk for Lifelong Complications

- Wrong treatment or intervention is used
- Unemployment
- Increased Substance Abuse
- Loss of family
- Homelessness
- Jail
- Premature Death

Generational Cycle

In a sample of 30 females with FASD who had given birth,

- 57% no longer were caring for their children
- 40% reported drinking during pregnancy
- 17% of the children were diagnosed with FASD
- 13% of the children were suspected of having FASD

Lack of foresight, poor impulse control and poor judgment often lead to unprepared life events
The Medicine Wheel
FASD in Context of Native American History
Native American Culture?

• There are 562 Federally recognized tribes across the U.S. and each is unique

• Alcohol problems and other health disparities are shared across many tribes—these are NOT part of our culture

• Stereotypes
FASD Among Native Americans

• When alcohol was introduced, it came in such a way that it began to destroy the traditional way of life.

• Today, Native Americans have some of the highest rates of FAS in the Nation.

• The prevalence of FAS in Alaska is 5.6 per 1,000 live births compared with 1.5 per 1,000 in the State overall.
History of Health Services

-Sterilization without informed consent - until 1976

-Surgical experimentation (leaving 1000’s blind)

-"Insane asylums" and public shows - majority not mentally ill, many medicine people

-Biological effects of oppression and racism

-I in 3 urban Indians have no health care
Why is it Important to Address Alcohol Use?

- Alcohol related death is 5 times more likely in Native Americans

- Higher rates of liver disease and drunk driving

- Youth engage in more risky behaviors such as binge drinking
Modifying Treatment for clients with FASD
Screening

• Build trust and safety

• Change the way you ask questions from the T-ACE and TWEAK

• Be aware that any drinking is risk drinking for a pregnant woman!

• Brief intervention for identification and referral
Referral

• If a pregnant woman cannot stop using, support her to find treatment and encourage her to enlist outside help (*Prevention*)

• If a client is showing signs of possible FASD, encourage them to schedule an evaluation (*Diagnosis & Intervention*)

• If a client discusses drinking during her pregnancy, encourage evaluations for the children.
Circles of Care

Individual Intervention Strategies

Dynamic Case Management or Recovery Oriented Systems of Care (ROSC)

Policy Issues

Those strategies furthest from the center result in the most damage when not in place

*From the FASD Regional Training Center and Mountain West ATTC- curriculum for training addiction treatment professionals, Module II pp.27-31. (2010)*
Change of Perspective

“We must move from viewing the individual as failing if he or she does not do well in a program to viewing the program as not providing what the individual needs in order to succeed”

Dan Dubovsky, FASD Center for Excellence
Co-occurring Disorders

• FASDs are rarely a stand-alone diagnosis

• It should not be seen as a separate issue

• Other diagnoses including substance abuse are affected by and should be treated as UNDER and PART OF the brain damage.

• Treatment plans should consider deficits & needs
Modify the Environment

Individuals with FASD cannot change how their brains work, so we must adapt the environment to them.

Prepare environment to avoid sensory overload, reduce distractions to attention.

Maintain a routine, set consistent appointment days and times. Plan for changes & transitions.
Motivational Interviewing

- Help them process all of the information in the session while they are with you
- Provide more help with decision making
- Use lists & visuals
- Make abstract concepts concrete
- Keep records of everything
Strategies for Prevention & Intervention
Healing Through Prevention

• Preventing alcohol abuse during pregnancy is a powerful way to protect future generations

• We are all responsible for making sure that all children have a healthy start

• Accountability for one another in family & community
Healing Through Intervention

The strategies that we teach around working with individuals affected by FASD fall very closely in line with many tribal cultural values.

- Generosity
- Respect
- Courage
- Connection with nature

- What are your cultural values?
Traditional Parenting

• Self-exploratory vs. Punitive

• Bottom-up support vs. Top-down expectations

• Active, hands-on

• Children are sacred gifts
Professional Paradigm Shift

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