

Behavioral Symptoms & Accommodations for Fetal Alcohol Spectrum Disorder (FASD)

Behavioral Symptoms:	Can look like:	Brain differences	Accommodations
Saying "no" or refusing requests, asking the same question over and over, saying "huh?" or "what?" a lot, not acting when requests are made	Not listening, ignoring, defiance, opposition, daydreaming.	Slow auditory processing	Slow down. Talk less. Give time. Provide visuals, or lists. Teach using hands-on and kinesthetic methods.
Socially and emotionally like a younger child, interest in activities similar to that of a younger person, unable to "act their age," overly friendly with people, misunderstanding personal boundaries	Immaturity, babyishness, laziness, irresponsibility, disregard for consequences, purposefully irritating, pushy.	Dysmaturity, or developmental delay. Poor adaptive functioning	Recognize developmental age (vs. chronological) Adjust expectations to match developmental age Provide opportunities for friendships/social situations that match person's developmental age vs. their chronological.
Difficulty remembering information learned recently, difficulty remembering multiple instructions, may remember one day, not another, repeatedly making the same mistakes. Confabulation.	Manipulation, not trying, purposeful misbehavior, "doesn't care," disrespect, lying.	Impaired memory	Repeat, remind, and provide visual and mnemonic clues. Recognize need to reteach. Drop judgment. Understand confabulation. Don't punish.
Difficulty waiting turn, difficulty complying with rules, interrupting, "see it-want it-take it," blurting, inappropriate language, risk taking	Rudeness, opposition, lying, disrespect, danger seeking.	Impulsivity	Provide structure and support. Understand. Provide non-verbal reminders
Difficulty solving problems, poor organization, trouble making a plan, difficulty predicting outcomes, difficulty with organization, perseveration, inflexibility.	Stubbornness, laziness, "doesn't care" about consequences, messy, disrespect, badgering.	Poor executive functioning	Provide structure. Provide organizational help. Support, support, support! Some people call this an "External Brain."
Frequent behavioral outbursts, low mood, moodiness, explosive reactions, fight or flight, anxiety.	Aggression, anger, opposition, disrespect, depression.	Difficulty modulating emotions	Look for triggers to prevent problems. Anxiety can look like anger or irritability. Allow breaks Figure out what helps soothe and reset, and provide opportunities for this.
Over responsive to stimuli and under responsive to stimuli, often both in the same person, hyperactivity, distractibility, inattention, social difficulties, learning difficulties, emotional reactivity, clumsiness, and poor organizational skills.	Irritability, opposition, "pickiness," manipulation, tantruming, rule breaking, anxiety, aggression, avoidance.	Sensory differences	Look for triggers. Remove or avoid to prevent problems. Figure out what helps soothe and reset, and provide opportunities for this. For those sensory differences that get in the way of safety or healthy living (sensory seeking behaviors, lower/no sensation of heat/cold, lower/no sensation of hunger) provide structure and support.

Additional, IMPORTANT Accommodations for ALL of the symptoms listed on this chart:

- Consider the environment and its fitness for the person with an FASD.
- Prevent problems instead of reacting to them.
- Think: could this be brain?
- Discard judgements or negative thoughts about behaviors and try to see them differently.
- Think "can't" not "won't."
- Modify expectations.
- Focus on strengths!
- Practice self-care.



The behavioral symptoms included in this table are not the only symptoms of FASD. Other symptoms, such as difficulty with visual spatial reasoning, lowered IQ, language delay, learning disabilities, and motor delay, can also be significant difficulties for people impacted by alcohol exposure in utero. When in doubt about the source of a behavior, always consider brain,

Sources:

American Psychiatric Association. (2013). Neurobehavioral Disorder Associated with Prenatal Alcohol Exposure. Diagnostic and statistical manual of mental disorders (5th ed.). Arlington, VA: American Psychiatric Publishing.

Franklin L, Deitz J, Jirikowic T, Astley S. (2008). Children with fetal alcohol spectrum disorders: problem behaviors and sensory processing. *Am J Occupational Therapy* 2008; 62, 265-273.

Jirikowic T, Carmichael-Olson H, Kartin D. (2008). Sensory processing, school performance, and adaptive behavior among young school-aged children with FASD. *Phys Occup Ther Ped* 2008;28:117-136.

Malbin, Diane. (2002). *Fetal Alcohol Spectrum Disorders: Trying Differently Rather than Harder*. Portland, OR: FASCETS.

Mattson, S. N., Roesch, S. C., Fagerlund, Å., Autti-Rämö, I., Jones, K. L., May, P. A., ... the CIFASD. (2010). Towards a Neurobehavioral Profile of Fetal Alcohol Spectrum Disorders. *Alcoholism, Clinical and Experimental Research*, 34(9), 1640–1650. <http://doi.org/10.1111/j.1530-0277.2010.01250.x>

FASCETS. (2010) Understanding FASD (Fetal Alcohol Spectrum Disorders). FASCETS website: <http://www.fascets.org/info.html>. accessed 10/23/2016.