



Alcohol-exposed pregnancies risk Fetal Alcohol Spectrum Disorders.

“Had I known more about FASD when I was in the classroom I like to think that I would have been able to help.”

A personal reflection by a former Virtual School Head

As an educator, the above quote by Mary K. Cunningham has both haunted and inspired me. Fetal Alcohol Spectrum Disorder is a condition that affects more people than autism but is rarely diagnosed. And yet, in the UK, the impact on education is little understood. At the time of writing very few people working in education know of its existence. Figures for the UK suggest that it is more common than autism. With many pupils and students its affects are significant barriers to learning.

As an experienced and senior teacher, I had no knowledge of the condition until about 2008 when we had fostered a family for 4 or 5 years. We then became the girls’ guardians. They left the care system, however the impact of alcohol exposure in the womb continued to have significant effects on their lives and still does.

In the journey that we have all been on since the girls first moved in with us, what has become increasingly clear is that a number of the students that I taught or was responsible for were likely to have been affected and it had a disproportionate effect on the learning environment that I was able to create. My wife worked in residential social care and it also became apparent to her that large numbers of the young people she was working with also might have been affected, but no one knew. Had I known more about FASD when I was in the classroom then I like to think that I would have been able to help those who I now think were affected by FASD to achieve more than they did.

This guide is to help you to understand a little about FASD in order to be better able to answer any questions that your students have.

One of your own questions may well be ‘How can I better provide a learning environment that allows affected students to achieve more?’ The National Organisation for FASD has produced a guide “Teaching a Student with FASD,” for teaching those affected which may be of professional interest and will give you some initial pointers to developing a classroom and practice that better supports those affected (available at www.NationalFASD.org.uk). National FASD’s new e-learning, “Introduction to FASD” will be available from November 2020. A national training programme developed by the Seashell Trust and National FASD as part of a partnership project funded by the Department of Health is also being launched to support professionals working with those affected. Details can be found here: <https://nationalfasd.org.uk/learn-more/training/>.



The impact of FASD is caused by the toxic effect alcohol has on the developing embryo and foetus while in the womb. That includes the physical structure of the baby as well as the way the brain physically develops and makes neurological links.

The challenge for everyone in education is that every presentation is different. Many of our students with FASD appear not to have any physical signs that they have been affected. The impact is hidden and becomes a real puzzle for those in the classroom.

What happens in the womb is a complex interaction between the amount of alcohol consumed, when it is consumed, the mother's genetics, metabolism, nutrition, health and well-being of the mother, the baby's genetics, the mother's support and welfare environment and even social factors like levels of poverty. This explains why the presentations are so variable. In short, any feature of development can be affected in different ways according to the conditions that are found in the mother's body while pregnant. See <http://www.preventfasd.info/> for more information.

This is why no one can suggest a safe limit for drinking other than zero.

UK research indicates that there appears to be far more significantly affected young people in the cohort who have experiences in the care system. This should not be surprising but may be a little misleading because currently, so few individuals are assessed.

Successive global research studies suggest that more than 90% of individuals who are affected have no outward physical indicators that they have FASD. This means that the condition often only really comes to light when traditional classroom strategies to boost attainment start to fail and the student struggles to remember what they have been told in the past or has trouble coping in other ways. As a teacher this is incredibly frustrating because in the classroom, we build on foundations that we and other teachers have laid in the past.

The real key to success is reframing the expectations that you have for the affected young people. This is not dumbing down or expecting them to fail, but it is about providing realistic targets and more support to allow them to achieve. The National FASD publication already mentioned will provide plenty of guidance for you.

Children with FASD will need reasonable adjustments and likely will need full assessment for an Education, Health and Care plan. Even if a student seems to be coping in primary school, it is important to look ahead to their likely ability to successfully access education in secondary school and what support might need to be in place for that transition. An EHCP assessment can be life-changing and as a teacher you can be an important advocate for that young person.

Two other observations for you to take forward. Living with FASD is tiring for both the person who is affected as well as the family that they live with. People with FASD try hard to conform to the expectations that society (including the school) has of them and the brain is working harder to attempt to do this. Often those affected are exhausted, anxious and lack impulse control.

The effects that are seen at school are not always repeated at home and often parents and carers will describe challenges that are far greater than those at school and behaviours that repeat themselves far more frequently. In addition, too many carers also have needed to become the expert to advocate for their child as so few professionals are aware of the condition and its effects. Parents and carers really want the best for their child and often will have some of the answers. It is vital for progress to be made to work collaboratively with them.

Written by Brian Roberts. Brian lives with 3 affected young people and has been supporting them for 17 years. He was formally an Advanced Skilled Teacher, Assistant Head and then Virtual School Head for Children in Care. He now is a consultant and trainer providing information, advice and guidance to professionals support vulnerable families. Source for initial quote: "Building Educational Success for Pupils with FASD," Mary K. Cunningham, FASAware UK, 2009, Revised 2012, ©2020 National Organisation for

