



Did You Know?

- In Minnesota, approximately 49,722 individuals are suspected of having FASD.¹
- It is estimated to cost Minnesotans \$107.4 million annually for FAS alone. Which is just *one* of the diagnoses under the FASD “umbrella.”²
- Nationally, Fetal Alcohol Spectrum Disorders affects 1 in 100 live births or as many as 40,000 infants each year. That’s more than Spina Bifida, Down Syndrome and Cerebral Palsy combined.³
- It is estimated that 60% of individuals with FASD will end up in an institution (prison or mental health) at some point in their lives.⁴
- FASD is 100% preventable if women do not drink alcohol during pregnancy.

1. Burd, L., *Prevalence & Cost Calculator*, from www.online-clinic.com/Content/Materials/calculator.asp

2. *The Lewin Group* (2006), www.lewin.com

3. *Ask Me About Fetal Alcohol Syndrome* (2004). *The National Organization on Fetal Alcohol Syndrome*.

4. *Streissguth, A. (1996). Final Report from the Research for Centers for Disease Control and Prevention. Washington State University: Fetal Alcohol and Drug Unit.*



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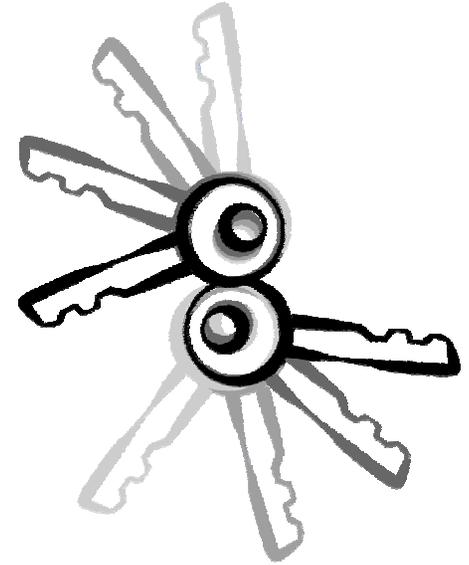
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Don't Drink During Pregnancy-It's Your Safest Choice

Eight Magic Keys:



Developing Successful Interventions for Individuals with Fetal Alcohol Spectrum Disorders (FASD)

developed by
Deb Evensen and Jan Lutke, 1997

adapted by the Minnesota Organization on
Fetal Alcohol Syndrome

8 Magic Keys.

While there is no recommended "cookbook approach" to working with individuals with FASD there *are* strategies that work, based on the following guidelines:

1. Concrete - Individuals with FASD do well when people talk in concrete terms, do not use words with double meanings, or idioms. Because their social-emotional understanding is far below their chronological age, it helps to "think younger" when providing assistance and giving instructions.

2. Consistency - Because of the difficulty individuals with FASD experience trying to generalize learning from one situation to another, they do best in an environment with few changes. This includes language. For example, teachers and parents can coordinate with each other to use the same words for key phrases and oral directions.

3. Repetition - Individuals with FASD have chronic short term memory problems; they forget things

they want to remember as well as information that has been learned and retained for a period of time. In order for something to make it to long term memory, it may simply need to be re-taught and re-taught.

4. Routine - Stable routines that don't change from day to day will make it easier for individuals with FASD to know what to expect next and decrease their anxiety, enabling them to learn.

5. Simplicity - Remember to **Keep it Short and Sweet** (KISS method). Individuals with FASD are easily over-stimulated, leading to "shutdown" at which point no more information can be assimilated. Therefore, a simple environment is the foundation for an effective school program.

6. Specific - Say **exactly** what you mean. Remember that individuals with FASD have difficulty with abstractions, generalization, and not being able to "fill in the blanks" when given a direction. Tell them step by step what to do, developing appropriate habit patterns.

7. Structure - Structure is the "glue" that makes the world make sense for an individual with FASD. If this glue is taken away, the walls fall down! An individual with an FASD achieves and is successful because their world provides the appropriate structure as a permanent foundation.

8. Supervision - Because of their cognitive challenges, individuals with FASD bring a naivete to daily life situations. They need constant supervision, as with much younger children, to develop habit patterns of appropriate behavior.

Not Working?

When a situation with an individual with FASD is confusing and the intervention is not working, then:

- **Stop Action!**
- **Observe.**
- **Listen carefully to find out where he/she is stuck.**
- **Ask: What is hard? What would help?**