WHY DIAGNOSE FASD

WHEN SERVICES ARE NOT AVAILABLE?

Identifying FASD can change the course of a person's life.

It gives families knowledge, documentation, research, and credible backing to advocate.

Even when formal FASD services are unavailable, an informed caregiver can change how a person is understood and supported at home, at school, in healthcare, and throughout adulthood.

AT HOME, DIAGNOSIS CAN CHANGE EVERYTHING

Knowing that a child has organic brain differences, and is not simply being defiant, changes the way a caregiver sees and responds to that child.

Children with FASD may struggle to:

- Understand consequences
- Connect cause and effect
- Use reasoning in the moment
- Control an overactive fight, flight, or freeze response
- Manage sensory overload
- Apply learning from one situation to another

Typical parenting strategies may not only fail, they can escalate the very behavior they are intended to correct.

When caregivers understand the brain, they can change expectations, reduce conflict, provide external support, and advocate more effectively.

THAT ONE SHIFT CAN BE PIVOTAL.

UNDERSTANDING CAN PREVENT A DOWNWARD SPIRAL

When the disability is missed, everyone may respond by doing more of what is already failing:

MORE CONSEQUENCES • MORE PRESSURE
MORE MEDICATION • MORE BLAME
MORE RESTRICTIVE PLACEMENTS

The child continues to struggle, and adults conclude that the child is unwilling to change.

The child may not need harsher consequences. The child may need a different environment, different expectations, and more support.

AT SCHOOL, FASD OFTEN REQUIRES THE OPPOSITE APPROACH

Schools often expect students to become more independent through consequences, repetition, personal responsibility, and gradually reduced support.

For many students with FASD, that approach does not build independence. It removes the external support their brain needs in order to function.

A diagnosis gives parents documentation, research, and credible backing to request:

- **FASD-informed assessment • Appropriate accommodations**
- **Concrete and repeated instruction • Reduced cognitive demands**
- **Environmental support • Special education based on actual needs**

“Wait and see” costs time a child cannot get back.

DIAGNOSIS PROVIDES ESSENTIAL MEDICAL INFORMATION

FASD is not only a learning or behavior disorder.
Prenatal alcohol exposure can affect the entire body. Over 400 associated health conditions have been identified, and some health problems may appear earlier than expected.

Until every healthcare provider understands FASD, parents may need to bring that information into the room.

“This person has a documented neurodevelopmental disability. Please consider how it may affect symptoms, communication, treatment, medication, and follow-through.”

People with FASD often have atypical responses to medications and need careful consideration when dosing and prescribing.

MENTAL HEALTH TREATMENT MUST FIT THE BRAIN

Mental health conditions are common among people with FASD, but standard treatment may depend on abilities that FASD can impair.

Traditional therapy may expect a person to:

- Remember previous discussions
- Connect feelings, actions, and consequences
- Generalize insight to a new situation
- Accurately describe what happened Independently use coping strategies under stress

When these abilities are inconsistent, treatment may be labeled unsuccessful and the person may be blamed for "not doing the work."

Diagnosis gives families research-backed grounds to ask for a different approach.

SUPPORT NEEDS DO NOT DISAPPEAR AT 18

A person may speak well, have an average or high IQ, and still need substantial help with:

EMPLOYMENT • MONEY • HOUSING
HEALTHCARE • RELATIONSHIPS • SAFETY
JUDGMENT • DAILY LIVING

Without an accurate diagnosis, these needs may be dismissed as immaturity, irresponsibility, mental illness, or refusal to grow up.

Diagnosis documents that FASD is a brain-based developmental disability. It can strengthen advocacy for benefits, vocational support, appropriate housing, healthcare assistance, and Regional Center eligibility.

Diagnosis gives families evidence needed to advocate for services.

DIAGNOSIS CHANGES A PERSON'S LIFE STORY

WITHOUT AN EXPLANATION	WITH UNDERSTANDING
"I am lazy."	"My brain works differently."
"I am bad."	"There is a reason this is hard."
"I am stupid."	"I need appropriate support."
"I ruin everything."	"I need to do things differently."

That difference affects identity, relationships, mental health, education, and the possibility of a meaningful adult life.

An explanation can free a person from believing they are the problem.

SOCIETY PAYS TWICE WHEN FASD IS NOT DIAGNOSED

Public dollars first payfor services that do not match the person's brain. Then society pays again for the consequences when those services fail.

INVESTING IN SUPPORT

Health care and prevention
Education and special education
Mental health services
Social services and foster care
Disability services
Community programs

PAYING FOR FAILURE

Emergency services & crisis care
Substance use and addiction
Repeated justice system involvement
Unemployment and lost productivity
Lifelong family caregiving
Homelessness

When underlying brain differences are not recognized, supports do not match actual need and often fail.

THE COST IS NOT SUPPORT.
THE COST IS FAILURE TO IDENTIFY AND SUPPORT.

SERVICES WILL NEVER EXIST IF FASD REMAINS INVISIBLE

Ignoring FASD because it is uncomfortable does not make it disappear. It leaves people unsupported, families overwhelmed, and communities paying the cost.

NO ACCURATE COUNT • NO DOCUMENTED DEMAND
NO PRESSURE TO TRAIN PROFESSIONALS
NO EVIDENCE THAT SYSTEMS ARE FAILING
NO REASON TO FUND SERVICES

WE MUST END STIGMA, TRAIN PROFESSIONALS, COLLECT DATA AND PROVIDE APPROPRIATE SERVICES NOW!