

FASD and the Psychological Evaluation

Areas of Suspected Need to Consider with FASD

Neuropsychological

Cognitive/Intellectual

Academic/Achievement

Executive Functioning

(in addition to interviews, direct, in-depth testing with the student)

Memory

(including Working Memory, Visual Memory, Auditory Memory, Generalizing)

Processing

(Visual, Auditory, Speed, Sequencing)

Adaptive Skills

(regardless of Cognitive Functioning)

Social Communication

Anxiety, Depression, Trauma

Language and Speech

(Expressive, Receptive, Pragmatics, Abstract Language)

Occupational Therapy

(Sensory, Fine-Motor, Dyspraxia)

Assistive Technology

Transition

FASD (Fetal Alcohol Spectrum Disorder) is a complex disability with the potential to impact all bodily systems. When evaluating someone with FASD, knowledge of what to assess and how to accurately interpret the findings is imperative to making appropriate recommendations.

Considerations When Interpreting Assessment Results for Students with FASD

- Scatter is part of the FASD disability profile and should not be dismissed
- Significant variability from one day (or hour) to another, or in different settings is common
- Assessment must include observation and analysis
- Cognition does not predict Adaptive Functioning in FASD (Low Adaptive Functioning is common with average or above average cognition and typically constitutes a greater discrepancy than seen with ADHD)
- Analyze results using a neurodevelopmental/brain-based disability lens (brain-based disability supersedes mental health lens)
- Brain-based disability is the primary challenge, mental health concerns are either part of the brain damage or are a secondary condition due to lack of appropriate services or interventions