ATTACHMENT 1

Extract from the website of the

National Organisation on Fetal Alcohol Syndrome, Washington D.C.

Teaching Students with FAS/FASD

Common areas of concern in the classroom:

- Distractibility
- Easily frustrated
- Poor fine and gross motor skills
- Poor attention
- Lack of organizational skills
- Problems with concrete thinking
- Poor peer relations

Remember:

- FAS/FASD students are persons with some degree of brain damage.
- Children with FAS/FASD may have trouble expressing themselves. Be aware of their body language and know the warning signs for frustration, sadness, anger and other potentially hurtful emotions.
- Concepts that may be problematic include decision-making, time, impulsiveness and distinguishing between public and private behaviours.
- Memory tasks are difficult. Children with FAS/FASD may not be able to generalize information they have learned from one day to the next. It is important to make eye contact (unless this produces anxiety), repeat things and use short instructions.
- Math skills are difficult. Most students do not advance beyond a second- or third-grade level.
- Be prepared for inconsistent performance, frustration with transitions and the need for individual attention.
- Many children experience sensory integration problems. Crowds, holding hands, hugs, certain textiles and tags in clothes or seams in socks may induce sensitivity.

Strategies for Teachers:

- Place the child near the front of the room for the whole year to help him or her focus.
- Allow the student to have short breaks when necessary.
- Create borders around children with FAS/FASD such as armrests, footrests and beanbag chairs. This helps them feel more secure and calms them.
- Before the bell rings to go home, stop the activity and give them enough time to prepare to exit the classroom.
- Have them perform one task at a time. To make sure they understand, have them repeat the instructions. If the activity is brand new, walk through it with them first. As children grow older, assignments will become longer and more difficult. For longer projects, giving them deadlines for sections and checking on their progress is helpful.
- Taking notes can be difficult and may create a distraction as the child may focus more on writing than the context of the lecture. Provide them with a copy of the teacher's or another student's notes.

Because their handwriting is often poor, a computer may be a better way for them to complete their assignments.

- Behavior problems become more apparent as children enter grade school. Often, a slight bump from a fellow student feels like a push to someone with FAS/FASD. This may result in an outburst or fight. Punishment is not always the best answer since FAS/FASD children may not understand why they are being punished. Try defusing the situation as calmly as possible and moving into a new activity.
- Using visuals, concrete examples and hands-on learning makes school easier. If one technique is not successful, try something new. Children with FAS/FASD can learn-they just need to use different paths to get there.
- Encourage success and reward positive behaviour with praise or incentives. Positive reinforcement should be immediate.
- Middle school students with FAS/FASD should shift academic learning to daily living and vocational skills.
- Reduce the visual and auditory distractions in the classroom (e.g., remove hangings from the ceiling, organize bulletin boards and bookshelves so they are uncluttered and close the door to reduce hallway noise).
- Keep the classroom schedule the same all year and use visuals to reinforce the schedule (e.g., hold up a book for reading time or show a picture of children playing for recess).
- Keep the seating assignment consistent all year long.
- Use a consistent signal when a change in routine is about to happen (e.g., a soft bell, a tap on the board, a song or a raised hand).
- Institute simple assists like the use of a calculator, a manila folder placed on the student's desk to block out distractions or a ruler on the page while reading to help the student keep his or her place.
- To verify understanding, have the student explain instructions in his or her own words or demonstrate what he or she has learned.
- Provide a daily list of homework assignments with a check box next to each assignment.
- Post and enforce specific consequences for good and bad behaviour in the classroom.
- Remember that the student's misbehaviour may be an expression of frustration or lack of understanding.
- Design worksheets with no more than three or four problems and a lot of white space.
- Allow students to use the computer to carry out activities whenever possible. Computers provide immediate feedback and unwavering consistency of approach.
- Give directions one step at a time. Wait for the student to complete the first step in the directions before describing the second step.

ATTACHMENT 2

Extract from the website of

New York State Citizens' Coalition for Children

Parenting Tips on FAS children

Do not take the behaviors personally: A child who has FAS is very likely to steal from the parents, lie to them, and sneak around. The parents have to accept these behaviors as part of the child and work toward long term change. This can only be done when the parents clearly understand that the child is not doing these things to them. He is simply getting through his day in the way in which his mind allows him to. He is not actively trying to harm the parents or destroy his relationship with them.

Use most of the techniques from the <u>attachment</u> and <u>aggression</u> sections: These continue to be useful when adapted for children with FAS. Many children with this diagnosis also have attachment challenges which are confused with other symptoms.

Establish predictable routines: Keep a calendar on the wall with daily events notes so that the child can check what is happening next and perhaps begin to see patterns in the week.

Use rewards rather than punishment: There is no point in punishing someone for having brain damage. Therefore, use rewards to create a more positive atmosphere and willing participation.

Change rewards frequently: To keep the child's interest in the rewards, change them frequently and make sure they are immediate.

Teach boundaries: This was explained in the section on aggression and is highly relevant to children with FAS and other organic brain disorders.

Keep explanations short and to the point: Do not bother with lectures, they do not work with any children. Say it once, demonstrate it once or twice, and then move on.

Break chores down into small tasks: Multiple tasks will become confusing for the child. Instead of saying, "Clean your room" say "Pick up all the shirts from the floor and put them in the laundry basket." When that is done, say "Pick up all the socks and put them in the laundry basket." However, be realistic. If there are more than one or two objects to be picked up, it is unlikely that the child's distractibility will allow her to finish the task without supervision.

Redirect and Intervene: It is important to stay one stop ahead and redirect the child or intervene before problems arise. The pattern of problem situations will become apparent shortly after the placement and so the parent will soon learn what she has to watch for.

Teach relaxation techniques: The child can manage some of his behaviors when he is over stimulated by using simple relaxation techniques. There are many books available to teach the parent first, who can then teach the child those that seem most suitable to her age and abilities.

Use the services of an occupational therapist or a professional skilled in sensory and /or auditory integration therapy: Standard counseling or therapy will not alleviate the symptoms of FAS or other forms of brain damage, but occupational therapy, physical therapy, or medically based therapies which focus on the physical aspects of the condition can be extremely useful for children whose central nervous system is either over or under functioning.

Have the child undergo a thorough medical and psychiatric exam regularly: Some children who have multiple diagnoses (such as fas and adhd) may be helped if the adhd can be modified by medication. The benefits of medications may change with the child's age so it is important to keep updated with this.

Focus on social skills and living skills: These are as difficult for the child as academic skills and require the same teaching and re-teaching in order to prevent him from becoming lonely and isolated.

Help the child with transitions: Going from one activity to another, or one place to another, or one class to another, or one routine to another, may be difficult for the child. Always give as much advance warning as possible for any potential change. A large calendar on the wall (separate from the daily events already mentioned) that indicates no only family routines, but school routines, can be helpful. Begin the day with a short discussion of what is expected to happen during the day and warn the child of any potential changes to the routine.

Attend seminars and conferences on the topic: The understand of how best to support children and adults with FAS is changing rapidly. It is important to keep up with the newest interventions. Many conferences now include the children and youth and this is highly empowering and supportive for them.

Be actively involved in the child's school day: Develop a cooperative relationship with the school system so that issues that cross over between school and home can be dealt with in a consistent manner.

Develop advocacy skills: School systems and social settings are not accommodating to children with organically based behavior disorders. The teacher, the principal, the Scout leader, the swim teacher, etc. may understand that the child has FAS, but will not likely 'put up' with the apparent defiance and consistent breaking of rules for long. Just as the parent has to constantly teach and re-teach the child, the parent will also have to constantly teach and re-teach others who are involved in the child's life.

Teach the child to substitute tracking for memory: Memory is often impaired in children who were pre-natally exposed to alcohol. Therefore, teaching him how to track his day may support or enhance memory. Tracking is done by recalling the events of the last hour (eventually expanded to the last day) by beginning with "What clothes were you wearing?" "What shoes were on your feet?" "Where did you go?" "Who did you talk to first?" "What did you talk about?" "Then who did you see?" Have the child touch his fingers as he does this, as if he was counting each memory. The conversation does not have to be stilted and artificial, but it does have to be lead by the parent and focused on helping the child to describe, in sequence, what happened over a specific period of time. After a few months, or years, of regular practice with the technique, the child will generally transfer this skill to other situations requiring sequential recall.

Say something positive to the child about herself at least once every day: This will help both the parent and the child remember that she is loved. It will also help the parent gain perspective on the days when it is difficult to feel the love for the child.

Be aware that some of the symptoms can be modified, but none will ever go away: These are lifelong problems and the parent may have to provide emotional, and perhaps financial support to the child even when he is an adult. This may include helping him to parent his own children, helping him to find and

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maintain a living situation, and helping him to get through life in general.

Plan for over stimulation: Children and youth with FAS may be easily over stimulated. When this occurs, have a pre-existing plan for dealing with the consequent behaviors. For example, the two weeks before Christmas are often a problem because the normal routine is varied at home and at school and the excitement of the holidays can increase over active and non-compliant behaviors. To counter this, find activities that will absorb some of the energy. The family may wish to go to the local recreation center for a swim each night. This allows the child or youth to yell without being told to be quiet, and facilitates the use of large muscle groups and gets the child tired.

Teach choice: Children with FAS rarely make a thought out, reasoned choice. Most of what parents consider to be a choice is actually an automatic response from the child. To teach choice, show him an apple and an orange and ask him which he likes best, why he likes it, and what are the differences between the two. Show him two shirts and ask the same questions. Show him two toy cars and ask the same. Look at two computer games and ask the same. This can be done informally when helping the child dress in the morning, or at snack time, or at play time. This should be done over a period of years so the child can integrate the task of considering different factors before coming to a decision.

Source: Handout for NYSCCC 2003 conference workshop presented by <u>Brenda McCreight, PhD</u>, May 9, 2003, Albany, NY.