

## Strategies for activities of daily living:

- Establish consistent routines so your foster child can predict upcoming events
- Keep a large calendar on the wall, mark planned activities and cross off each day
- Break down daily activities into specific steps; do everything in the same way and in the same order every day
- If a child can't choose clothing, put entire outfits together on hangers in the order they go on
- Keep all personal grooming aids together in a container; assign a colour to the child to indicate their toothbrush, comb, and so on.
- Post bathroom routines on the mirror in simple words with pictures
- Serve the child meals first if they have trouble waiting for others;
- Have a calming routine that starts an hour *before* bedtime
- Establish bedtime rituals for saying goodnight which visually allow a transition from the "getting ready for bed" routine to the bed itself
- Use routine calming techniques when the child is over-stimulated (e.g. sitting in a bean bag chair, taking a warm bath, listening to quiet music through headphones)

## Support/Resources:

**CHIP - Community Healing & Intervention Program** -supports Aboriginal children (0-12) and Aboriginal youth (13-29 years) who are affected by prenatal exposure to alcohol and live in the EK; CHIP offers resources through the College of the Rockies Library in Cranbrook including:

### Videos~

- ❑ "Worth the Trip- Children Affected By Fetal Alcohol"
- ❑ "Journey Through the Healing Circle: A Training Series for Foster Parents"

### Manuals~

- ❑ "Parenting Children Affected By FAS: A Guide for Daily Living" (strategies in this pamphlet adapted from this source)

### Books~

- ❑ "Fantastic Antone Succeeds!"
- ❑ "Letters to Our Children, Letters From Our Children"

### Helpful phone numbers:

CHIP: 250-489-3373  
FAS/E Support Network of BC:  
604-576-9911  
East Kootenay Supported Child Care  
Program: 250-426-4043  
East Kootenay Infant Development Program:  
250-426-2543

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# Fetal Alcohol Spectrum Disorder (FASD)



## Parenting Strategies

## What is Fetal Alcohol Spectrum Disorder (FASD)?

- FASD is a cluster of birth defects caused when a baby is exposed to alcohol in the womb
- FASD is an umbrella term used to describe Fetal Alcohol Syndrome (FAS), Partial Fetal Alcohol Syndrome (pFAS), Alcohol Related Neurodevelopmental Disorder (ARND), and Alcohol Related Birth Defects (ARBD)

### Children who are alcohol-affected may have:

- difficulty controlling impulses
- memory problems
- a slower processing pace
- difficulty generalizing
- difficulties in abstracting
- over/under sensitivity to stimuli
- an inability to understand consequences
- communication deficits
- problems with social skills
- other organ damage

### The following secondary disabilities may also be present:

- behavioural challenges
- depression/anger/low self esteem
- inappropriate sexual behaviour
- trouble with the law
- drug and alcohol problems
- disrupted school experiences

Because children with FASD may have problems processing information, a supportive environment is encouraged:

#### STRUCTURE~

Create a structured environment for children with FAS, which includes choices within clear and predictable routines.

#### SUPERVISION~

Carefully supervise children with FAS so that they do not get into trouble or place themselves in dangerous situations.

#### SIMPLICITY~

Offer simple directions and orders, stated briefly in simple language that you know the child understands, avoid elaborate verbal justifications and explanations.

#### STEPS~

Break down tasks into small steps and teach each step through repetition and reward.

#### CONTEXT~

Teach skills in the context in which the skills are to be used; avoid assuming children will generalize from one context to another or understand in which situations the behaviour is appropriate and when it is not.

## Parenting Suggestions:

### Effective Communication~

- Offer simple directions; break down tasks into small steps
- Begin all conversations with the child's name and make eye contact
- Be specific when telling the child what to do, e.g. *"hang your coat on the hanger in the closet"* rather than *"put your coat away"*

### Consequences & Positive Feedback~

- Be firm. Set clear, consistent limits
- Post family rules in simple words and/or with pictures

### Transitions~

- Try to keep the child's daily routines as normal as possible
- Give the child advance warning that an activity will be over soon

### Structure & Routines~

- Write down or diagram what needs to be done for the completion of a task ie: morning routine

### Supervision~

- It is impossible to be everywhere all the time; structures in the environment can help support supervision

### Advocacy~

- Remind yourself and others that a diagnosis of FAS can facilitate the child's development so that his/her fullest potential is realized