FASD Awareness Month 2025

NEAFAN
Northeast Alberta FASD Network

September is

FASD Month

Wear red to celebrate and raise awareness

#RedShoesRock

fasdmonth.ca

Turning Evidence into Action

The First Evidence Based Guideline for Interventions in FASD

The article "First Evidence-Based Guideline for Interventions in FASD" represents a major milestone in how health systems approach support for children and adolescents with Fetal Alcohol Spectrum Disorder. Developed in Germany but with international input, this guideline is the first attempt to bring together scientific evidence and expert consensus into a comprehensive set of recommendations. The authors systematically reviewed studies published between 2012 and 2022, identifying both rigorous reviews and original research. They then consulted patient advocacy groups, multiple medical societies, and experts across disciplines to create a framework that balances science with practical application.

The guideline highlights the diversity of challenges faced by those with FASD. These include neuropsychological impairments such as difficulties with executive function and memory, the risk of secondary harms like school failure or justice system involvement, and the ongoing stress experienced by caregivers. Because the evidence base is still emerging, the authors combined 21 evidence-based recommendations with 26 consensus statements where research is less developed but expert agreement exists.

Among the interventions discussed are behaviour and cognition-based therapies, structured family support programs, and approaches aimed at reducing caregiver burden through training and respite. Importantly, the document stresses the necessity of tailoring interventions to individual needs, recognizing that FASD presents differently across the spectrum. While the guideline acknowledges gaps in research, it argues that enough is now known to act with confidence in many areas. The authors frame this as a call to health and social service providers to integrate these recommendations into everyday practice. In doing so, awareness efforts can move beyond slogans to deliver meaningful change, ensuring that individuals with FASD and their families receive consistent, evidence-backed support.

The Financial and Emotional Toll of FASD.

In "Fetal Alcohol Spectrum Disorder: The Caring and Financial Burden to Caregivers – A Scoping Review", Tait and colleagues (2025) turn attention from clinical outcomes to the everyday realities faced by families. This study is the first to systematically review the financial and psychosocial costs borne by caregivers of individuals with FASD, mapping out a landscape that has often been overlooked in both research and policy.

The review draws together findings from diverse contexts and reveals a striking range of direct costs. Families often shoulder expenses for medical appointments, special education services, and therapies, alongside indirect costs such as time away from work and travel to distant specialists. Reported figures vary widely, from a few hundred dollars annually to several thousand, depending on severity of needs, age of diagnosis, and national health or social service systems. Yet the authors emphasize that numbers alone cannot capture the full picture. Caring for someone with FASD often involves sustained stress, reduced quality of life, and mental health challenges for caregivers, who may find themselves navigating systems that provide inconsistent or inadequate support.

By highlighting these burdens, the article reframes FASD as not only a public health issue but also a socioeconomic one. The impact ripples beyond the affected individual to their family, workplace, and community. The authors argue that without more robust data, policymakers will continue to underestimate the true cost of FASD. They call for larger, more comprehensive studies that measure both financial and emotional impacts, and for policy reforms that recognize and offset these hidden burdens. Raising awareness of these challenges is an essential first step toward building systems that support not just individuals with FASD, but also the families who stand behind them every day.

‘The impact ripples beyond the affected individual to their family, workplace, and community.”

How Awareness, Access, and Support Shape Life with FASD.

In [“Overcoming barriers to care for individuals with fetal alcohol spectrum disorder:”] the authors explore how Fetal Alcohol Spectrum Disorder (FASD) remains dramatically under-diagnosed and under-treated, especially in regions like New Mexico where factors such as high rates of alcohol use, poverty, and unexpected pregnancies combine to increase risk. The disorder spans a wide range of neurodevelopmental problems—difficulties in cognition, behaviour, social skills—and these are often worsened by adverse childhood experiences like instability or trauma, which many individuals with FASD face.

Because FASD diagnosis is complicated requiring specialized multidisciplinary teams, many people go years without formal recognition. This delay means they lose windows of opportunity for early intervention. Compounding this are social and institutional barriers: stigma surrounding prenatal alcohol exposure discourages disclosure; many healthcare, educational, and social service providers lack training in recognizing FASD; and in many cases, individuals with FASD are excluded from disability services because strict eligibility rules demand criteria that many do not meet, even if their challenges are severe.

The article emphasizes that while specialized clinics and teams are invaluable, there are too few of them, especially in rural or underserved areas. When individuals transition into adulthood, supports thin out even more. Gibson et al. argue that to improve outcomes, awareness campaigns must be paired with structural changes: embedding FASD in policy, expanding service eligibility (including disability benefits), increasing provider training, leveraging telehealth and community-based resources, and ensuring lifelong support. With these in place, many of the negative downstream effects—educational failure, unemployment, homelessness, justice system involvement—can be mitigated.

“... FASD remains dramatically under diagnosed and under-treated”

Let's Talk

The Prevention Conversation

It's time to talk about alcohol and pregnancy

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Amy Tobin, B. Ed, is the FASD Prevention Conversation Facilitator with NEAFAN (Northeast Alberta FASD Network) and an adoptive mother of two. Prior to motherhood, she was an elementary school teacher with the Fort McMurray Public School District for six years. Her passion for FASD, and its prevention, began nine years ago when she became a mother via adoption and was introduced, personally, to the beauty and perplexity of parenting those with prenatal alcohol exposure. Since then, she has dedicated much of her time to learning about, and educating others, on the effects of alcohol during pregnancy and Fetal Alcohol Spectrum Disorder. Her approach is one that takes into consideration the complexities that adoption, generational, and cultural trauma can play within FASD.

PREVENTION CONVERSATION

The Prevention Conversation program aims to raise awareness of FASD and FASD Prevention among target populations including Healthcare and Social Service Providers, Women of Childbearing Age, Partners, Families, Friends and Caregivers. The Project is geared towards highlighting the importance of screening all women in child bearing age for alcohol use and the risks associated with FASD, improving supports for these women and promoting involvement of community members and primary care providers.

The Prevention Conversation is aimed at encouraging a community wide awareness of FASD and prevention, developing the skills within the community to engage in non-judgmental, empathetic conversations about alcohol use during pregnancy. The Prevention Conversation is centered around increasing knowledge of FASD through training service providers on the use of screening tools to engage women in the Prevention Conversation.

To book a **Prevention Conversation** presentation, please contact:

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THE SALINE CREEK BRIDGE IN FORT MCMURRAY IS LIT IN RED ON SEPT. 9TH 2025 TO RAISE FASD AWARENESS.

Fetal Alcohol Spectrum Disorder (FASD) emerges from a complex mix of genetic, environmental, social, and cultural factors, each contributing to the potential for intergenerational trauma, entrenched social injustices, and persistent health disparities. Understanding FASD in its full context requires an acknowledgment of these multifaceted contributing factors to provide effective support and address the comprehensive needs of those affected. This understanding is critical in tailoring interventions that are both supportive and effective. Providing care for individuals with FASD and their families demands empathy, adaptability, and a multidisciplinary strategy that leverages creativity, resourcefulness, and the collective expertise of various disciplines.

Beyond individual care, addressing FASD is a significant societal and public health challenge, requiring concerted, targeted efforts to confront the disorder's unique issues. It calls for a focus on unearthing and fostering individual strengths and resilience, which are crucial in enhancing the quality of life and overall well-being for people with FASD, as well as their families and the broader community. These comprehensive care strategies are essential in mitigating the impacts of FASD and supporting those it affects in a meaningful way.

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