NEAFAN
NORTHEAST ALBERTA FASD NETWORK

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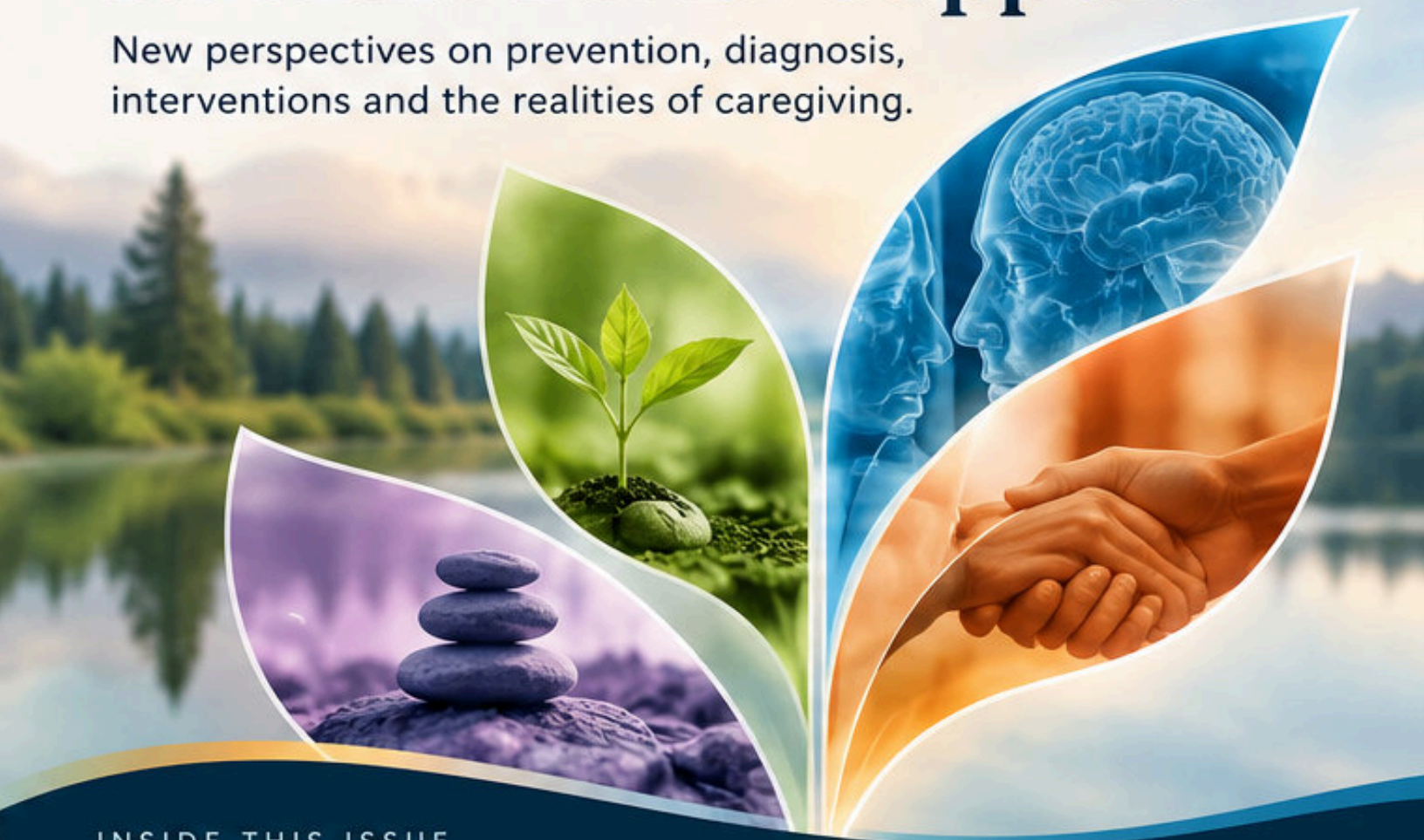
FASD: Research That Informs Better Support

New perspectives on prevention, diagnosis, interventions and the realities of caregiving.



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Prevention Begins with Understanding the Bigger Picture

New research shows why effective FASD prevention must consider the circumstances surrounding alcohol use during pregnancy—not simply awareness of the risks.

Knowing that alcohol use during pregnancy can cause harm is an important part of Fetal Alcohol Spectrum Disorder (FASD) prevention. But knowledge alone does not explain why alcohol use occurs or why reducing it may be difficult for some individuals.

A 2025 Canadian research review by Nancy Poole, Lindsay Wolfson, and Ella Huber explores the interconnected circumstances that influence alcohol use during pregnancy. The researchers examined published studies and identified five broad areas of influence: information and knowledge, stress, social determinants of health, health-related circumstances before and during pregnancy, and structural factors such as access to services.

These influences often overlap. Stress, relationship circumstances, financial insecurity, mental health concerns, and difficulty accessing appropriate care can shape health decisions in ways that traditional awareness campaigns may not fully address.

The researchers emphasize that effective prevention requires more than communicating the risks of alcohol exposure. It also means creating opportunities for supportive conversations, reducing stigma, and ensuring that individuals can access services appropriate to their circumstances.

For community organizations and FASD service networks, the findings reinforce the value of trauma-informed, culturally safe, and nonjudgmental approaches to prevention. When health professionals understand the circumstances influencing alcohol use, they are better positioned to offer meaningful assistance.

The study is a narrative review rather than a trial of a particular prevention program. Its contribution is a broader understanding of how different influences interact—and why effective prevention must address more than individual behaviour.

RESEARCH AT A GLANCE

A Canadian review identified five interconnected areas influencing alcohol use during pregnancy, reinforcing the importance of supportive, nonjudgmental prevention approaches that consider social circumstances, stress, health, and access to care.

> Awareness is important. Understanding the circumstances makes **prevention more responsive.**

Source:
Poole, N., Wolfson, L., & Huber, E. (2025). Health promotion and support grounded in interconnected influences on alcohol use in pregnancy. *International Journal of Environmental Research and Public Health*, 22(8), 1309. https://doi.org/10.3390/ijerph22081309

Why FASD Diagnostic Criteria Matter

A review of diagnostic systems reveals important differences in how FASD is identified—and raises questions about consistency in assessment.

A diagnosis of Fetal Alcohol Spectrum Disorder (FASD) can help individuals and families better understand developmental differences, identify support needs, and plan appropriate interventions. But what happens when different diagnostic systems do not always reach the same conclusions?

A 2025 systematic review by Grayson Myers, Michael Burd, and Larry Burd investigated agreement among commonly used FASD diagnostic criteria. The researchers examined six studies involving eight diagnostic systems and 17 different comparisons.

Their findings revealed substantial variation. Agreement on whether an individual met the criteria for FASD ranged from approximately 54% to 91%, depending on which diagnostic approaches were compared.

These differences matter because diagnostic systems may emphasize different combinations of physical characteristics, neurodevelopmental functioning, documented prenatal alcohol exposure, and other clinical information.

When diagnostic approaches produce different outcomes, individuals and families may face uncertainty about assessment results. Differences can complicate comparisons between research studies and potentially influence access to services where eligibility depends on a diagnosis.

RESEARCH AT A GLANCE

A systematic review found substantial variation in agreement among FASD diagnostic systems. The findings highlight the importance of consistent assessment practices and further research into diagnostic differences.

> ***Different diagnostic criteria can lead to different conclusions.***

The researchers recommend further large-scale, multicentre studies to better understand why these differences occur and how diagnostic consistency might be improved. The findings do not establish that one diagnostic system is necessarily superior to another. Rather, they demonstrate the importance of understanding how diagnostic criteria are applied and why consistency matters.

Source:
Myers, G., Burd, M., & Burd, L. (2025). Comparing rates of agreement between different diagnostic criteria for fetal alcohol spectrum disorder: A systematic review. *Alcohol, Clinical and Experimental Research, 49*(1), 81–91. https://doi.org/10.1111/acer.15492

What the Evidence Says About FASD Interventions

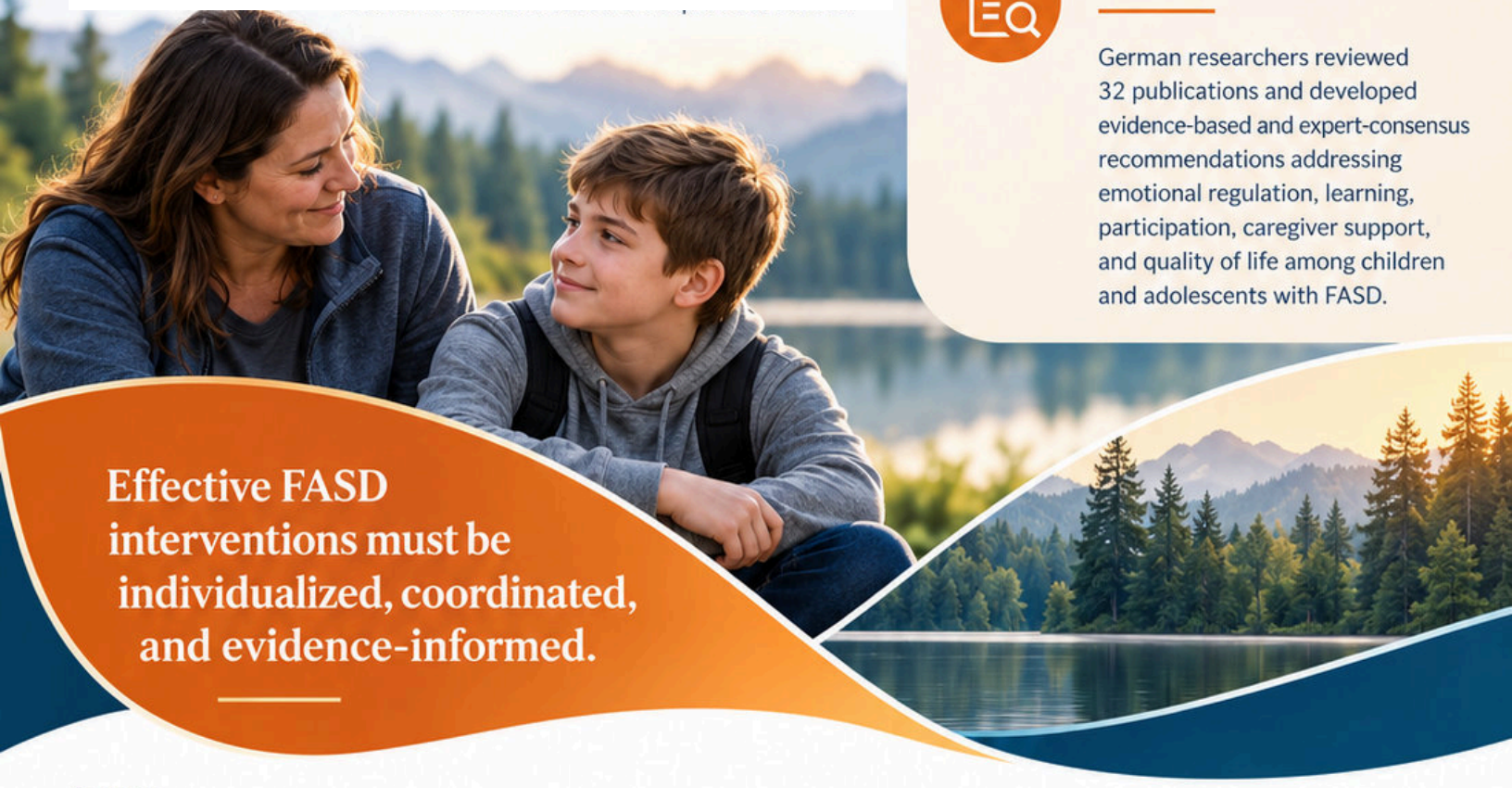
New intervention guidelines bring together research and clinical expertise to help improve everyday functioning and quality of life for children and adolescents with FASD.

Families and professionals supporting children with Fetal Alcohol Spectrum Disorder (FASD) often face a difficult question: which interventions are supported by research, and how can they be adapted to individual needs? A 2025 study published in Neuropediatrics addresses this question through the development of evidence-based guidelines for children and adolescents with FASD. Led by Sonja Strieker and colleagues in Germany, the research team examined 32 publications, including systematic reviews and original intervention studies. Working with a multidisciplinary guideline group, they developed 21 evidence-based recommendations and 26 additional recommendations based on expert consensus.

The guidelines address several areas of support, including emotional and behavioural regulation, social skills, learning, daily functioning, and family well-being. They emphasize that interventions should be individualized to reflect each child's developmental abilities, strengths, and circumstances. The researchers also highlight the importance of involving caregivers and coordinating support across home, school, and health-care settings. Although some interventions show promising results, the quality and amount of available research vary considerably. Further studies are needed to determine which approaches are most effective, for whom, and under what circumstances. For families, educators, and service providers, these guidelines offer a useful foundation for planning supports while recognizing that no single intervention will meet every child's needs.

RESEARCH AT A GLANCE

German researchers reviewed 32 publications and developed evidence-based and expert-consensus recommendations addressing emotional regulation, learning, participation, caregiver support, and quality of life among children and adolescents with FASD.



Source:
Strieker, S., Heinen, F., Ziegler, A., Schmucker, C., Kopp, I., & Landgraf, M. N. (2025). First evidence-based guideline for interventions in FASD. *Neuropediatrics*, 56(3), 160–171. https://doi.org/10.1055/a-2547-4610

The Hidden Costs of Caring for a Child with FASD

A new research review reveals how little is known about the full financial demands placed on families—and why those costs deserve greater attention.

The costs associated with Fetal Alcohol Spectrum Disorder (FASD) are often measured through health care, education, social services, and other public systems. Far less attention has been given to the expenses and financial pressures experienced directly by families and caregivers. A 2025 scoping review led by Josie Tait and colleagues in New Zealand examined existing research on the financial and caregiving demands associated with raising a child with FASD. The researchers screened 421 articles but found only five publications that met their criteria. This limited evidence base revealed a significant gap in understanding the personal costs associated with FASD caregiving.

RESEARCH AT A GLANCE

A 2025 review found only five relevant studies examining caregiver-reported costs associated with FASD, revealing substantial gaps in understanding the financial pressures and support needs of families.

> *Families carry costs that public expenditure figures may never capture.*

The studies identified expenses and financial pressures related to medical care, education, social services, additional family needs, and lost employment or earning opportunities. Financial strain was also connected with caregiver stress and psychosocial well-being. Reported annual personal costs varied considerably across the studies, reflecting differences in the countries examined, services available, and methods used to calculate expenses. The researchers cautioned that the existing evidence is insufficient to establish a reliable overall estimate. For families, financial demands may extend beyond direct spending. Time away from employment, travel to appointments, arranging specialized supports, and navigating services can place additional pressure on household resources. The researchers call for more comprehensive studies that capture these experiences directly from caregivers rather than relying primarily on government expenditure data.

Source:
Tait, J., Gibbs, A., McCormack, J., Wilson, H., & Chu, J. T. W. (2025). Fetal alcohol spectrum disorder: The caring and financial burden to caregivers—A scoping review. *Drug and Alcohol Review*, 44(5), 1468–1479. https://doi.org/10.1111/dar.14071

PROGRAM FEATURE

Prevention Conversation

It's time to talk about alcohol and pregnancy.

LET'S TALK ABOUT FASD

MEET AMY

Amy Tobin, B.Ed.

FASD Prevention Conversation Facilitator

Amy Tobin, B.Ed., is the FASD Prevention Conversation Facilitator with NEAFAN 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 through adoption and was introduced, personally, to the beauty and complexity 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.

ABOUT THE PROGRAM

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 toward highlighting the importance of screening women in childbearing 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.

> *"Training increases FASD knowledge"*

TO BOOK A PRESENTATION

To book a Prevention Conversation presentation, please contact:

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