THE FACTS

The research on ALCOHOL & PREGNANCY is very clear:

No Safe Amount of Alcohol No Safe Type of Alcohol No Safe Time for Alcohol

Prenatal alcohol exposure can impact fetal development causing permanent birth defects to the brain, spinal cord, heart, face, immune system, & bones.

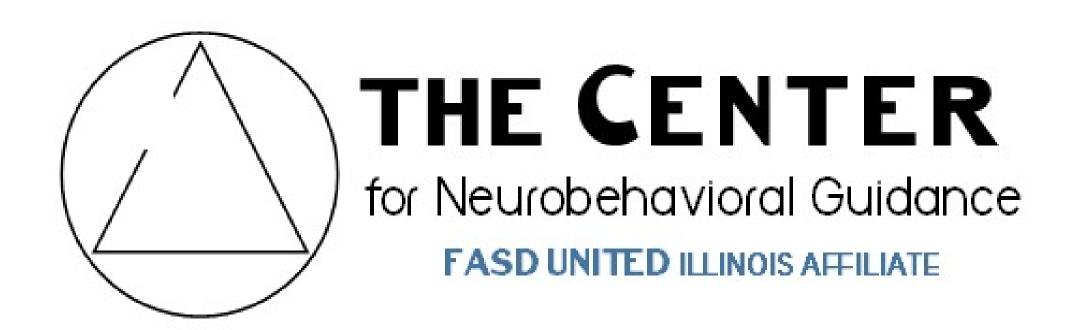
OVER of pregnancies in Illinois are UNPLANNED

Many people don't know they are pregnant until 4-6 weeks after conception, drinking alcohol before realizing they are pregnant is common.

The safest decision is to STOP drinking alcohol for the remainder of your pregnancy.

Steps to plan pregnancies help reduce the likelihood of unintended prenatal alcohol exposure.

Early diagnosis and interventions are critical and significantly improve long-term outcomes. Please talk to your medical provider if you suspect prenatal exposure to alcohol.



Prevention | Education | Intervention | Guidance | Advocacy

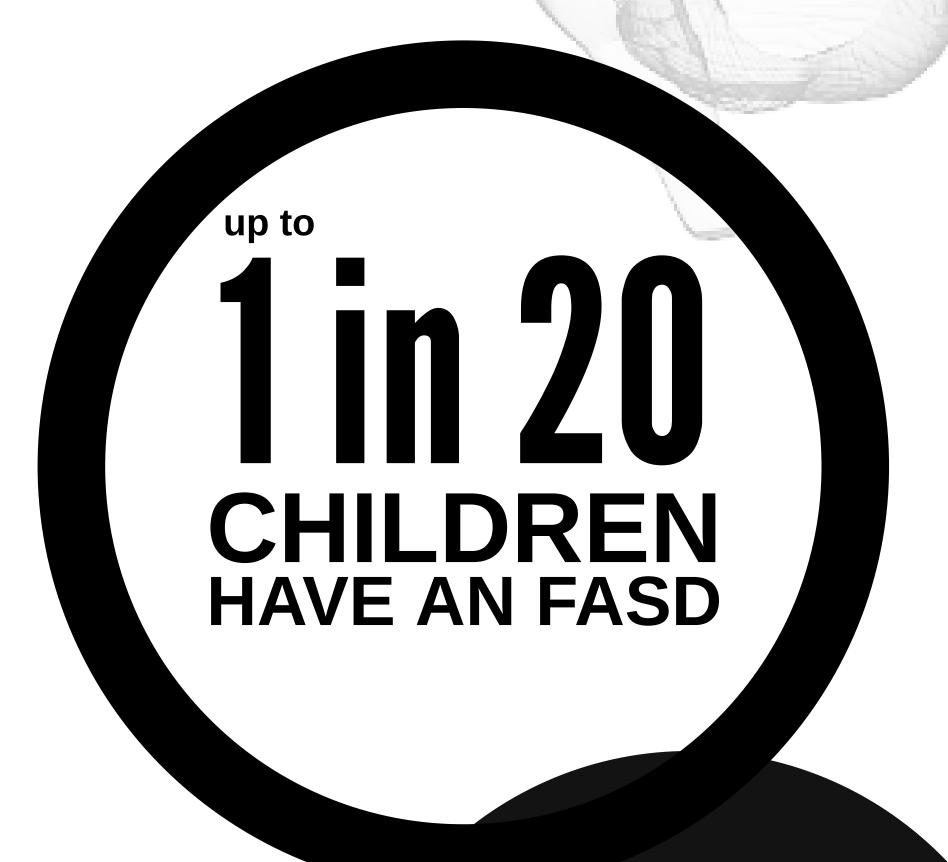
The Center for Neurobehavioral Guidance is the Illinois
Affiliate to FASD United. FASD United and its Affiliates join
together to support individuals, families, communities, and
systems affected by prenatal alcohol exposure.

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There is no cure for FASDs, but appropriate interventions & therapies improve children's functioning, adaptability, self-awareness, self-esteem, and parent-child interactions.

(Streissguth et al 2004)



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BRAIN FUNCTIONS

IMPACTED BY
PRENATAL ALCOHOL EXPOSURE

- BRAIN STRUCTURE
- COGNITION (THINKING & REASONING)
- LANGUAGE & COMMUNICATION
- EMOTIONAL REGULATION
- EXECUTIVE FUNCTIONING
- MEMORY ISSUES
- ATTENTION & FOCUS
- SENSORY & MOTOR SKILLS
- ADAPTIVE FUNCTIONING
 (BEHAVIOR, LIVING, LEARNING, & SOCIAL)

WHAT THIS MIGHT LOOK LIKE:

Developmental Delays Regulation Difficulties Impaired Memory Slow Processing Poor Judgement/Reasoning Inability to Link Cause and Effect Difficulty with Abstract Thinking Intellectual Impairment Difficulties with Social Rules & Relationships Learning Difficulties & Academic Challenges Impulsiveness & Hyperactivity Concentration Issues Aggression Confabulation Perseveration Sleep Difficulties Vision or Hearing problems Heart, Kidneys, Bone, or Organ Abnormalities Sensory & Coordination Issues Small Head size, Shorter-than-Average Height Cleft Palate Facial Features*

*Facial features (such as (short palpebral fissions epicanthal folds, absent philtrum, thin upper lip) are not a required criteria for all FASDS; Facial features only appear when an individual is exposed during a very small, specific time frame in pregnancy,).

Prenatal alcohol exposure effects each individual differently; every individual with an FASD is presented with a unique set of strengths & challenges.

FETAL ALCOHOL SPECTRUM DISORDERS

Fetal Alcohol Spectrum Disorders (FASD) is an umbrella term that includes a spectrum of disorders associated with fetal alcohol exposure, including

- FETAL ALCOHOL SYNDROME (FAS)
- PARTIAL FETAL ALCOHOL SYNDROME (pFAS)
- ALCOHOL RELATED NEURODEVELOPMENTAL DISORDER (ARND)
- ALCOHOL RELATED BIRTH DEFECT (ARBD)

FASD includes permanent physical and neurological damage that can manifest in cognitive, behavioral, and psychosocial behavioral problems. FASD is typically diagnosed by a team of professionals who assess: Growth issues, Brain Structure & Function, Facial Features, and Prenatal Alcohol History.

FASDs ARE OFTEN MISDIAGNOSED

FASDs are often misdiagnosed or not diagnosed which leads to ineffective interventions. Other disorders look similar, secondary diagnoses are given based on symptoms only, and co-occurring disorders usually exist.

ACCESS TO CARE & SUPPORTS

Once diagnosed, it's difficult to find providers who understand the complexities of FASDs. Systemic barriers result in limited access to knowledgeable practitioners who can provide support with effective interventions. services, and educational practices.

THE NEED FOR FASD-INFORMED CARE

Inadequate care and chronic unmet needs exasperate challenges and increase the risk and severity of preventable secondary characteristics and tertiary problems. Medical & Nonmedical professionals, educators, families need information, education, resources to effectively support and care for individuals impacted by FASDs.

NATIONAL HEALTH CRISIS

Stigmas and misconceptions prevent society from understanding the full magnitude of FASD. The prevalence of FASD is higher than autism, yet, there is a significant disparity in the resources and supports to the FASD community. This is everyone's issue.

This content is intended for educational purposes only; it is not intended to recommend, replace, or serve as a substitution for professional medical or mental health advice. Nothing in this document is intended to be used for medical diagnosis or treatment; discuss medical concerns with a qualified health care professional.

With up to

1 In 20

If you work with children, you work with children with FASDS.

The quality & type of interventions MATTER. You can help change the trajectory of a child & family's life.

HOW CAN WE

The Center supports professionals & caregivers who are supporting individuals with FASDs.

Through education, consultation, and collaboration, we provide support help others increase their capacity to provide effective FASD- informed care.

PROVIDERS

To effectively assess and treat an individual with an FASD, it's vital to understand the neurodevelopmental disorder and how it can be behaviorally, physically, cognitively, and linguistically manifested in an individual. The Center informs and educates the medical & non medical professionals to increase access to FASD-informed care.

EDUCATORS

To effectively teach an individual with an FASD, it's important to understand the neurodevelopmental disability that impacts a student's behavior, cognition, social and language skills. The Center informs and educates educators and staff to increase the efficacy of strategies and supports in the school environment.

FAMILIES

Using a consultation model to provide education, guidance, & coaching to parents/caregivers who care for individuals with FASD. Parents increase understanding of their child and develop new skills, based on evidence-based interventions. Parents can increase their sense of efficacy and confidence to provide support for their child and in turn increase stability, foster connection, and improve the wellbeing of the whole family.