



# **Parenting with FASD: Challenges, Strategies & Supports**

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# Project Team and Partners

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## **Project team:**

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## Project purpose

- Explore the challenges, accomplishments and support needs of adults with FASD, in relation to ***living with FASD and parenting***.
- Identify ***alternatives*** (policies, programs and practices) that better address needs and improve the quality of day to day living for adults with FASD.

# This is one of 3 inter-related projects

- *“**Parenting with FASD: Challenges, Strategies and Support Issues in BC**”*
- *“**Fetal Alcohol Spectrum Disorder and the Criminal Legal System: Are We Criminalizing Disability?**” and*
- *“**Fetal Alcohol Spectrum Disorder and Employment: Supporting Adults with FASD on the Job**”*

## Additional context/background

- Increasing awareness of the (high) number of people parenting and living with FASD
- Awareness heightened by reality that many people diagnosed with FASD as children have grown up and have children
- Emerging appreciation of the multiple, complex issues affecting adults with FASD, and the need to identify effective supports to prevent FASD
- Emerging appreciation of importance of gender lens – i.e., parenting → ***mothering*** with FASD

# Project Methodology

- **5 communities in BC**
- In-depth, face to face individual and small group **qualitative interviews**, most of which were **videotaped**
- 15 adults (prenatally exposed to alcohol)
- 8 support people (e.g. parents or partners)
- 37 service providers (e.g. perinatal program staff, FASD program staff, social workers, community support workers, adult education educators. managers)

# Parenting with FASD:

## Parents' hopes and goals included...

### Trying to “break the cycle”

Cycle of addiction      Cycle of abuse  
Cycle of foster care      Cycle of not being there for children

Having children become “good people” who would have “a good life”

Having children have self-respect, be respectful of others, and be “citizens instead of spectators”

*“When I grew up my mom and dad used to always drink around me, and I don’t want that. I want to break that cycle, and I don’t want to live like that how I grew up. I don’t want my kids to go through that. So I don’t really hang around with people that drink or do drugs.”*

# Parenting with FASD: Challenges included...

## Primary effects of FASD

- Memory
- Planning and organization
- Perseveration & routines
- Using consequences effectively
- Temper/patience & impulsivity
- Understanding (social) cues

*When I first had my son it was tough.... It was very tough. There were times when he was still up at 3 in the morning because I didn't even realize what time it was.*

# Parenting with FASD: Challenges included...

## Secondary effects of FASD

- Drug and alcohol use/addiction
- Vulnerability and victimization – domestic situation is fragile or abusive
- Not having positive role models
- Poverty, lack of resources & social supports
- Transience and homelessness
- ***For some parents***, the child has FASD or another brain-based disability

# Parenting with FASD: Challenges

included...

Societal attitudes & ignorance about FASD

- Stigma
- Scrutiny
- Other people's lack of understanding of FASD leads to over-estimation of abilities

***Lack of recognition of the need for ongoing support.***

## Parenting with FASD:

### **Policy Issues and barriers** included...

- Many parenting supports (e.g., respite) can only be accessed within a child protection context

*Our system is set up to be a reactive system rather than a proactive system...*

- Eligibility criteria for Community Living supports don't fit with many people with FASD
- Supports/resources are differentially available to different "categories" of parents
- Timeframes are out of synch

# Parenting with FASD: Challenges reframed...

## Social determinants of health framework

- Poverty, lack of resources, food insecurity
- Lack of social support
- Transience, homelessness unsafe housing
- Violence in relationships, vulnerability, victimization and trauma
- Disconnection from culture and traditions
- Alcohol and drug use/addiction
- Stigmatization and social exclusion
- Unemployment
- Not completing school

## Parenting accomplishments and approaches that worked

- Focusing on goal of having my children in my care - motivation to stay on track
- Not sweating the small stuff;  
taking a 'time-out' to reflect and calm down
- Using aids and cues to help memory (calendars, organizers, post-its, writing everything down)
- Using strategies to make transitions in the day's activities (e.g., verbally rehearsing what happens when & shifting from one activity to another)

## **Parenting accomplishments and approaches that worked**

- Being consistent with guidance/discipline; learning to use “consequences”
- Being consistent in the day’s schedule and activities
- Praising children’s accomplishments
- Working on personal healing

# People, programs & resources that helped

- Natural supports
- Supportive and collaborative social worker, foster parents & child welfare policy options
- Parenting programs, particularly those that integrate parenting & other areas of life
- FASD prevention programs, with outreach, advocacy & transportation/accompaniment
- Life Skills programs
- Teaching homemaker
- Drug and alcohol counseling

## Noteworthy programs

- PCAP-based programs, especially those geared to mothers/parents who may have FASD, e.g.:
  - Step by Step (Edmonton, AB)
  - SOAR (Inter-Tribal health Authority, BC)
  - Parent Coach program (Regina, SK)
- Outreach, mentoring & advocacy-focused FASD Prevention programs, e.g.:
  - Healthier Babies, Brighter Futures (Burns Lake, BC)
  - Mothers to be Mentoring program (Cold Lake, AB)

# Components of Promising Practices/Approaches & Program Design

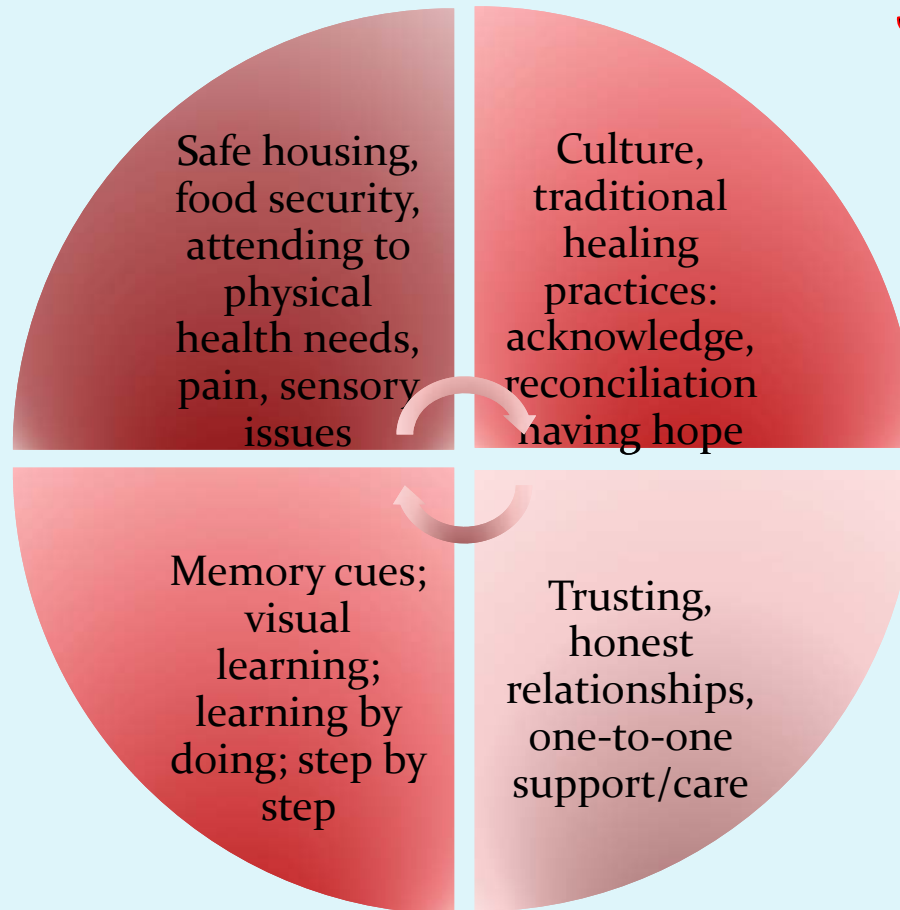
- Relational approach (respectful, non-judgemental, honest, safe)
- Use of accommodations informed by understanding of FASD as a brain-based disability
- Wholistic and/or integrated (multi-faceted, recognizing connections between various life areas)
- Individualized support; flexibility & outreach
- One to one support; coach/mentor model
- Ongoing support

**PROMOTING HOPE**

# Parenting with FASD – Successes, Challenges, Effective Strategies & Supports **reframed**

*Physical*

*Spiritual*



*Mental*

*Emotional*

## What needs to change

- Increase understanding of FASD
- Shift our expectations
- Recognize the cost effectiveness of long-term supportive services for adults who (may) have FASD
- Shift child welfare policies (e.g., so that access to supportive services is not contingent on IQ or system involvement; toward collaborative approaches)
- Community/practitioner education about FASD, involving those with FASD as educators