

[Date]

To Whom it May Concern,

RE: Information about Fetal Alcohol Spectrum Disorder (FASD)

This letter is written to provide an overview of FASD in support of the NDIS application for [Name]. NOFASD Australia has been advised that [Name] has received a FASD diagnosis from [practice name] on [date].

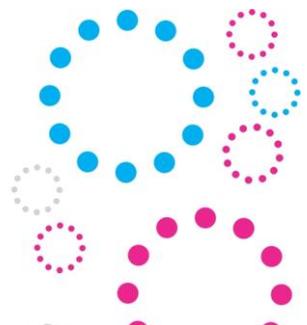
What is FASD?

Fetal Alcohol Spectrum Disorder (FASD) is the term used to describe the physical and/or neurodevelopmental disorder that can result from prenatal alcohol exposure. The changes in brain development are permanent. The brain does not repair itself over time. However, people with FASD are able to learn (differently). Appropriate supports have a huge impact on learning and life outcomes.

How does FASD impact individuals?

FASD is a specific, very often hidden and complex disability. Recent research identified that people who are prenatally exposed have a diverse range of executive function and cognitive impairments often with other health and mental health conditions and disabilities. Without early intervention, secondary disabilities and co-morbid conditions can develop, such as:

- Autism Spectrum Disorder
- ADHD
- Reactive Attachment Disorder
- Conduct Disorder
- Oppositional Defiant Disorder
- Vision impairment
- Otitis media
- Conductive hearing loss
- Mental health disorders
- Alcohol or other drug dependence
- Expressive language disorders
- Receptive language disorders
- Intellectual disability.



Researchers note that these secondary conditions are experienced at rates often 100 times higher than general population figures. These conditions can combine to further isolate and exclude people with FASD and reduce their quality of life.

Individuals with FASD often have difficulty generalising new information. When teaching children new skills, parents and teachers need to be involved to help generalise these skills in the child's everyday environment. Individuals with FASD often need services or supports from multiple service systems, including special education, developmental disability services, mental health, and specialised medical care.

Most children with FASD have immature social development, disorders with sensory processing, a lack of impulse control and an inability to predict consequences, link cause and effect or learn from their mistakes. For many of these children this can sometimes lead to them becoming easily and extremely upset, yelling and/or to experience aggressive outbreaks. Without an understanding of specific management strategies, these traits can increase as they get older and may lead to violent behaviour in teens or adults. It is important that such behaviour is understood as a symptom of their underlying brain damage and not as bad behaviour. It is also important to understand that traditional methods of education and discipline are not effective for young children and young people who have FASD. The most effective management strategy is to try to prevent the behaviour from escalating out of control in the first place, but this is often easier said than done.

Where I can find out more information about FASD?

NOFASD Australia is the National Peak Body for parents, carers and individuals impacted by Fetal Alcohol Spectrum Disorder (FASD). Founded in 1999 and funded by the Commonwealth Department of Health, we provide the essential bridge linking those with lived experience with researchers and clinicians.

NOFASD Australia provide a helpline for people impacted by FASD and those wanting information on how to support individuals with FASD. We also maintain an up-to-date comprehensive website with curated resources and links.

If you would like additional information about FASD or to read more about FASD and the NDIS, please visit the [NOFASD Australia website](https://www.nofasd.org.au).

Kind Regards,

NOFASD Australia

