

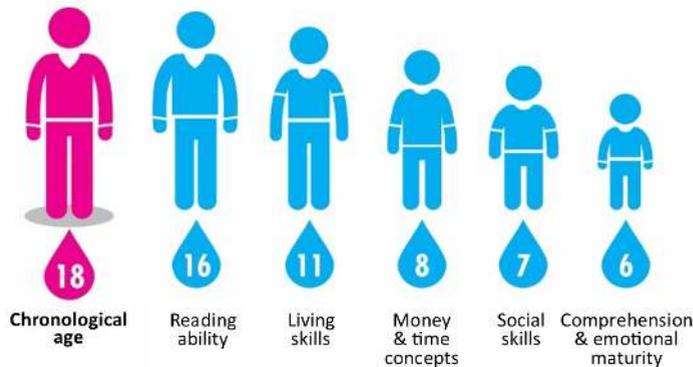
What is FASD?

Fetal Alcohol Spectrum Disorder (FASD) is a diagnostic term used to describe the lifelong neurodevelopmental (brain) impairments and congenital anomalies that can result from prenatal alcohol exposure.

The effects of FASD vary considerably and it is often not diagnosed. High rates of co-occurring conditions mean that a diagnosis of FASD is often missed as it is hidden behind diagnoses of Autism Spectrum Disorder, ADHD, PTSD, anxiety, conduct disorder, oppositional defiant disorder and reactive attachment disorder.

Characteristic features within the FASD spectrum include behavioural and learning difficulties, problems with language, memory, attention and reasoning, impulsivity, and limited social, emotional and daily living skills. These brain-based difficulties are lifelong and have a profound impact on quality of life for individuals and their families.

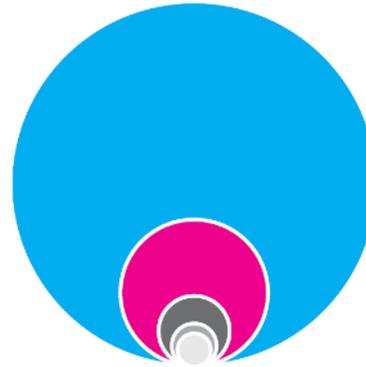
Age Dismaturity



Many people with FASD have developmental delay, and cognitive abilities often develop at different rates. This can mean that, for example, an 18 year old may have the reading ability of a 16 year old, the living skills of an 11 year old, and the social skills of a 7 year old. It is essential that communication and support services are appropriate for an individual's developmental age.

Fetal Alcohol Spectrum Disorder

More children are affected by FASD than Autism Spectrum Disorder, Spina Bifida, Cerebral Palsy, Down Syndrome and SIDS combined.



- FASD
- Autism
- Spina Bifida
- Cerebral Palsy
- Down Syndrome
- SIDS

Further Information

A full reference list for this brochure is available at www.nofasd.org.au/brochure-references

Produced by the National Organisation for Fetal Alcohol Spectrum Disorders (NOFASD) Australia.

Contact us to book your FASD Information Session or Train it Forward workshop.

FASD Facts

What everyone needs to know about Fetal Alcohol Spectrum Disorder



A highly prevalent disability

Estimated to affect 2-5% of the population

FASD is the leading cause of birth defects and developmental and learning disabilities worldwide

FASD results from brain injury caused by prenatal alcohol exposure



Email us: admin@nofasd.org.au

or call us on 1800 860 613

NOFASD Australia is funded by the Australian Government through the Department of Health

For more information visit www.nofasd.org.au

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FASD is a mostly hidden disability

Most individuals have no characteristic facial features, even when the brain is profoundly affected

A high percentage of people with FASD experience sensory processing difficulties

People with FASD have strengths and challenges

A strengths-based approach is important when developing effective interventions

Mental health challenges are common for those with FASD

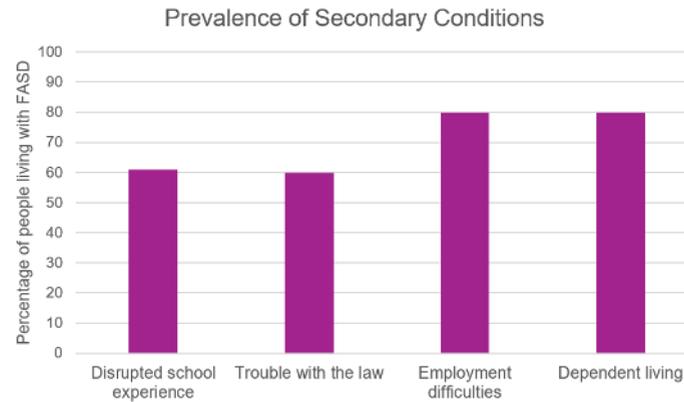
Early diagnosis and support reduces the likelihood of mental health difficulties

People with FASD can have high intelligence

One study found that the IQs of those with FASD ranged from 45-120

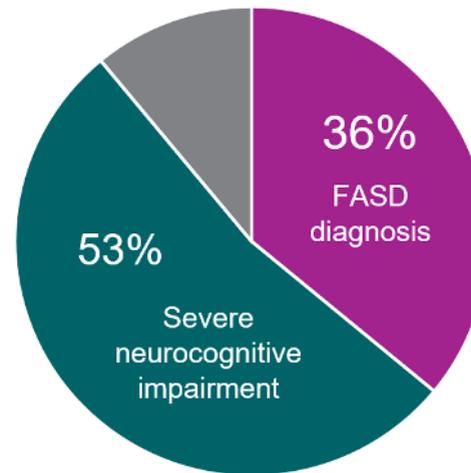
Prevalence of Secondary Conditions

A majority of people with FASD experience secondary conditions including those listed below.



Youth in Detention

FASD is also highly over-represented in prison populations including youth detention centres.



Secondary conditions are 2-4 times less likely to develop if FASD is diagnosed early and individualised professional support provided. Early intervention which includes supporting parents to understand their child's behaviour as a symptom of brain damage can achieve improved outcomes. It is therefore vital that service providers are FASD-informed.

No amount of alcohol is safe during pregnancy

Alcohol can harm a fetus at any stage, even before the pregnancy is confirmed

50-60% of Australian women drink while pregnant

These women often experience shame and fear of judgement or punishment

58% of professionals lack confidence asking a pregnant woman about alcohol use

38% of women are unaware of the dangers of alcohol to a developing fetus

50% of women experience an unplanned pregnancy

Nearly 1 in 5 report binge drinking prior to pregnancy recognition