



Factors to Consider In the Court System For Adolescents and Adults with Fetal Alcohol Syndrome Disorders

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Prenatal alcohol exposure can cause permanent brain damage that may adversely affect behavior. Individuals with Fetal Alcohol Spectrum Disorders (FASD) are at high risk of getting into trouble with the law and/or developing a substance abuse problem.. These individuals require special consideration if they are to succeed in a substance abuse treatment program or probation. If FASD is identified or suspected as a factor, taking the following into account may reduce recidivism and maximize potential to succeed in a program suited to the individual's needs.

Accountability

The individual with FASD cannot be held accountable for behavior over which she/he has no control. Aberrant behaviors have a basis in organic brain dysfunction, over which the individual has little control. Destructive and/or dangerous behaviors are reinforced in a maladaptive environment. It is unrealistic to expect a person with the functional abilities of a child to be accountable as an adult. The person with FASD is often not capable of understanding the system well enough to be found competent.

Arrested social development

Dr. Ed Riley's research (San Diego State University) indicates that individuals with FASD may have stunted social development. A teen who is 14 or 15 years old may have the moral-social development similar to that of a child of only 5 or 6 years old.

Delayed emotional development

Individuals with FAS disorders may be immature and emotionally volatile. They may go through normal childhood stages along a slower timeline. The emotional development might be at an age level of half the chronological age. Individuals with FASD may not reach their emotional maturity until age 25 or 30.

Communication skill deficits

Although persons with FASD have good expressive language skills, their ability to comprehend may be lower than would be expected, and their inability to read social cues accurately may interfere with their ability to understand the expectations of others. Their writing skills may also be lacking, making it difficult to fill out forms, take tests, or keep records.

Co-occurring conditions

Persons with FASD are at high risk of having psychiatric conditions, such as Bipolar disorder, clinical depression, Reactive Attachment Disorder (RAD), or Sensory Integration Disorder (SID). Many also have Attention Deficit Hyperactive Disorder (ADHD). Some persons with FASD are misdiagnosed as having Cerebral Palsy (CP) or Asperger's Syndrome (mild Autism). Symptoms of these disorders often mask the symptoms of FAS or FASD. About 25% of individuals with FASD have some degree of mental retardation, but this is often not recognized, even with court evaluations.

Attention deficits

Although not all persons with FASD have ADHD, they most likely have some attention deficits, which interfere with ability to listen, learn, remember, and apply information adequately.

Sensory integration disorder

Most individuals with FASD have some degree of sensory integration disorder (SID), due to overload of the sensory input, causing difficulty with processing incoming information. They may overreact to noises, lights, or touch by becoming disruptive, anxious, withdrawn, or aggressive.

Medications

Most persons with FASD benefit from medications to help balance brain chemicals that might be out of kilter. If medications are withheld (as they may be after arrest), or if they are not taken, this greatly diminishes the individual's ability to control impulses and behavior. The most beneficial combination of medications is a stimulant (Ritalin, Adderall, Dexedrine) plus an anti-depressant SSRI (Paxil, Prozac, Zoloft). If the person has underlying psychiatric conditions, other medications might be more helpful.

Pregnancy and paternity

The lack of good judgment and inability to control impulses means the person with FASD is at greater risk of unintended pregnancy or paternity. The use of alcohol increases the risk. The individual with FASD lacks the ability to be responsible for daily use of contraceptives. The individual with FASD also lacks the ability to parent a child, unless there is continual daily support of extended family members.

Sexuality issues

The person with FASD may function emotionally at the level of a child. Sexual development is usually normal. This is like putting a six-year-old child in the body of an adult. The poor judgment and lack of impulse control and difficulty understanding social cues results in increased vulnerability, putting the individual with FASD at higher risk of becoming a victim or a perpetrator of sexual assault, or both.

Money management

Persons with FASD usually have difficulty with abstract concepts like time and money. Ten dollars may have as much value as Ten thousand dollars. They may not be able to pay bills or stick to a budget. They may not even be able to figure change when paying for a \$2.99 bottle of milk with a five-dollar bill. They may appear to be intelligent enough to handle this, but too often they can't.

Behavior issues

Individuals with FASD are generally immature, have a grandiose sense of themselves, and often have an unrealistic view of the world. They have difficulty handling everyday stress, and when overwhelmed, they may react by withdrawing or by becoming aggressive. They may have trouble controlling their temper, and may be self-abusive. They may be unable to assess risk or danger, but may have unreasonable fears. They may have difficulty accepting the limitations imposed by their disability.

Information processing deficits

Information is not filtered properly through the senses, information may not be organized in the brain efficiently, and there is usually difficulty with memory storage and/or retrieval. Information that can be retrieved at one time may not be there at another. The ability to process information correctly is sporadic and unpredictable.

Independence

The person with FASD requires guidance, mentoring, structure, and supervision. Even in the best of circumstances, with good role modeling, effective medications, verbal and visual cues, and a supportive environment, when the person with FASD is left on his or her own, eventually there will be failure due to poor judgment and they will act on impulse without regard for the consequences. The high risk of making the same mistakes over and over requires close monitoring, sometimes 24 hours a day, 7 days a week. Independent living programs are rarely successful. It has been said that "Self-Determination" for the person with FAS becomes "Self-Termination." They need a parent figure to be their "external brain."