

**Kia ora koutou. Anita Gibbs and whānau (from Ōtepoti/Dunedin).**



## A Training and Support Course for Parents and Caregivers

Associate Professor Anita Gibbs - Academic, social worker, and 100% Ninja MUM

# FASD

TRAINING FOR PARENTS/CAREGIVERS SUPPORTING SOMEONE WITH DIAGNOSED OR SUSPECTED FETAL ALCOHOL SPECTRUM DISORDER (FASD)



## Dunedin Parent and Caregiver Training Course

### Sessions will cover:

- What is FASD? Understanding the impact of prenatal alcohol exposure on the brain. FASD across the lifespan
- Interventions and strategies that work with individuals and families where FASD is an issue
- Self-care, parental survival, managing stress
- Building Family strengths and resilience
- Dealing with systems of education, health, welfare and justice
- Accessing supports and getting on with professionals



### Course Leader:

- ◆ Anita Gibbs (PhD) is an adoptive parent, social worker, and University academic. She has both lived experience and research knowledge of FASD.
- ◆ Ann Donkin is a nurse and foster Mum, seeking to understand and share the complexities of this challenging condition.

### Date & Time:

Each Monday evening  
14<sup>th</sup> August to 25<sup>th</sup> Sept 2017  
(7 weeks)  
7.30 to 9.30pm

A no blame, no shame course run by professionally qualified parents who have experience of FASD.

### Location:

Mirror Services  
7<sup>th</sup> Floor  
Evan Parry House  
43 Princess St  
Dunedin

A course for caregivers by caregivers!



CONTACT: e/mail: [abasd@donkinfamily.com](mailto:abasd@donkinfamily.com) or phone: 03 453 5178

COST: Free, but places available

RSVP: 7th August 2017

# Theoretical Frameworks

## Foetal alcohol spectrum disorder: Effective helping responses from social workers

Anita Gibbs , Kerryyn Bagley, Dorothy Badry, more...

[Show all authors](#) ▾

First Published October 23, 2018 | Research Article |  Check for updates

<https://doi.org/10.1177/0020872818804032>

[Article information](#) ▾



### Abstract

Foetal alcohol spectrum disorder (FASD) is a lifelong neurodevelopmental disability that often requires extensive intervention and support from the helping professions, notably social work. This article considers why a social work response to FASD is needed and explores social work frameworks and models that underpin current FASD-informed practice. It illustrates the discussion with three international models used in Canada and New Zealand, the Key Worker model, the Communities of Practice model and an advocacy and mentoring model.

Rights, human and disability and child rights' perspectives

Developmental or Brain-Based perspectives

Eco-systems perspectives

Some disabilities look like this



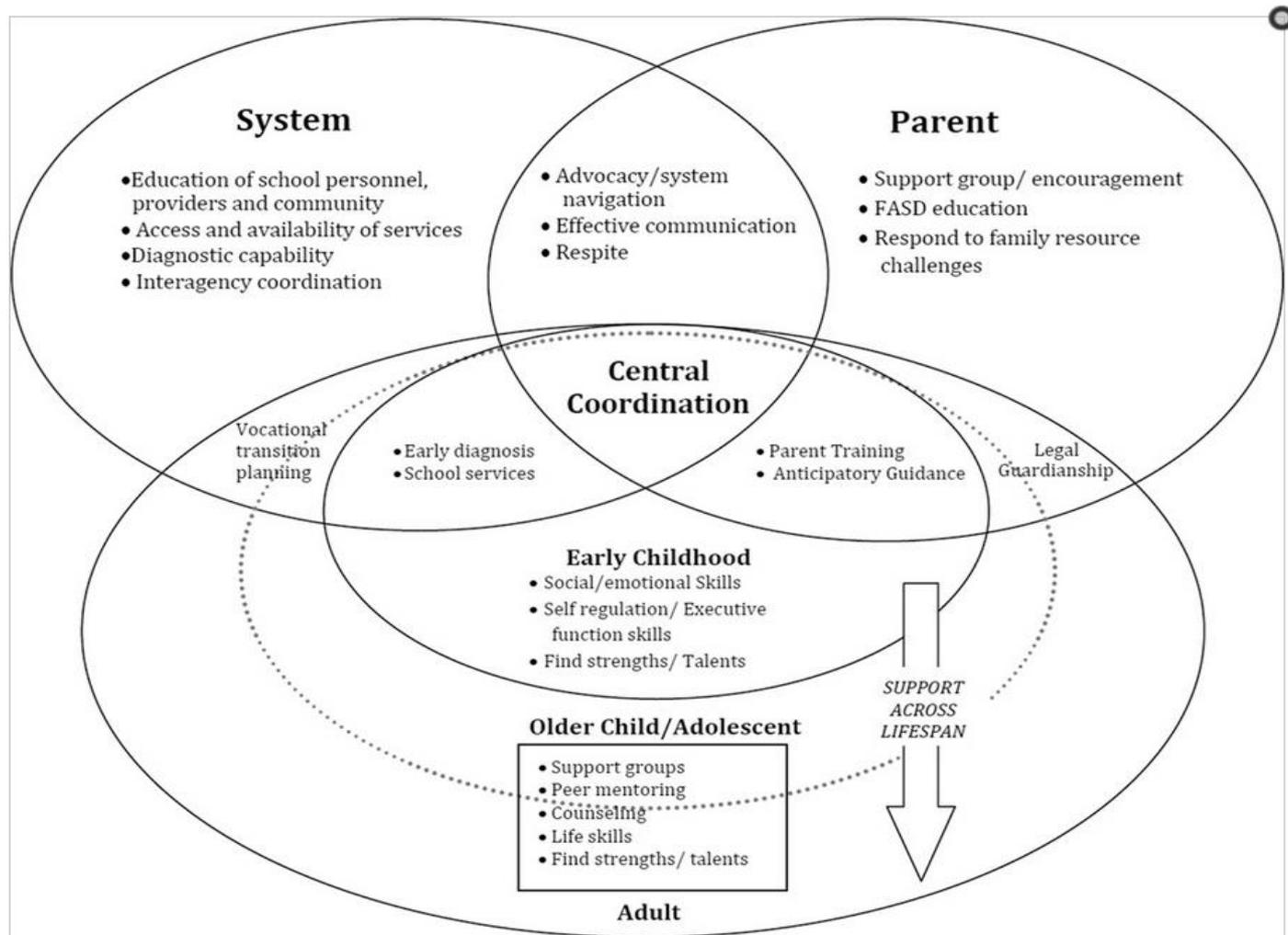
Some look like this



*No child with FASD chose to be born with permanent brain damage and lifelong impairment, so why do we treat them as if they did and blame them for their disability?*

# LIFELONG.....

Figure 1



Petrenko et al. (2014)

# Aims

To assist parents and caregivers who are caring for children with, or suspected to have FASD, develop greater resilience and strategies to help their families live successfully with impairments in a disabling society.

Thirteen parents and caregivers received a 7 \*2 hour weekly programme of talks, exercises, and case study discussions. Followed up with small scale evaluation and interviews.

# Sessions

**Session 1: Introduction and All About FASD.**

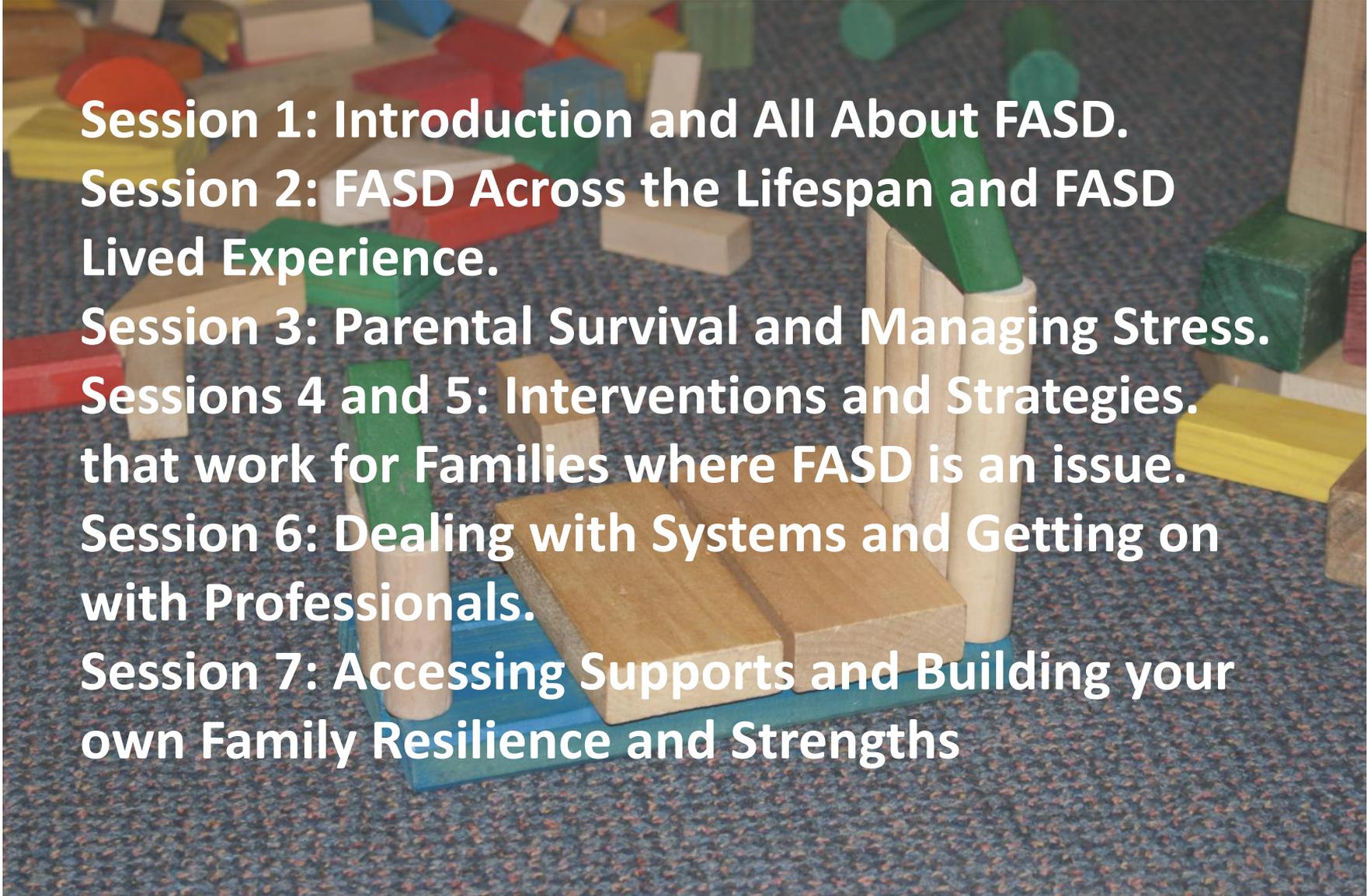
**Session 2: FASD Across the Lifespan and FASD Lived Experience.**

**Session 3: Parental Survival and Managing Stress.**

**Sessions 4 and 5: Interventions and Strategies that work for Families where FASD is an issue.**

**Session 6: Dealing with Systems and Getting on with Professionals.**

**Session 7: Accessing Supports and Building your own Family Resilience and Strengths**



# Quotes from Interviews

- *“We really enjoyed the opportunity to find out a little more about FASD and to meet some more people that understood it better and get a bit of a knowledge base and a support group around what’s going on.”*
- *“Got some ideas on different skills and so it’s really been a process of ‘trial and error’ trying out a few different things along the way and seeing what may or may not work.”*
- *“No frowning looking down or thinking you are making things up. Everybody took everybody at ‘face value’... Everybody was really brave and honest... Everybody was there to help each other, support each other.”*

# Ultimate Quote

*A lot of effort should be put in trying to change the culture of drinking. I mean, our own children say they wouldn't want it (FASD), they don't want it. When there's talk about "Oh well, it should be alright – people can drink..." they're quite adamant – "No! Women shouldn't be drinking!" Because they've had to live with it, you know? We're affected because of them but they've actually got more of the affect obviously. It's sort of ignored, in some ways, because we're the ones talking about it but they're the ones who can't get away from it, you know, it's like a life sentence to them.....*

*A lot of what they do they don't really want to do. I suppose that's one of the things that should really be brought out in the FASD thing is that the children, well certainly from our two, they don't want to be like that. They want to be normal. They want to be able to have friends. They want to be able to learn. So, they want to fit in. They're forever trying to fit in but the way that they're trying to fit in is putting people off. They can't 'read' peoples' emotions and all the rest of it so they're put at a big disadvantage. So, all this talk about "We should have the freedom to let people drink as much as they want!" You ask these boys! They wouldn't say that's freedom!*