

Start Healthy, Stay Healthy: Prenatal Substance Exposure and Fetal Alcohol Spectrum Disorders “Overview of Fund Resilient Nevada Project”

Ongoing Prenatal Substance Exposure and Alcohol Exposure Psychoeducational, Diagnostic and
Evidenced-Based Intervention Program –

Education and Training for Parents, Caregivers and Professionals

By: Julie Foutz Beasley, Ph.D. and Holly N. Summers, Ph.D.

Grant-A-Gift Autism Foundation Ackerman Center

April 17, 2025

Children born with PSE and FASD (e.g., marijuana, cocaine, methamphetamine, opioids, heroine, hallucinogens, inhalants, fentanyl, and non-medical use of prescription medication) have substantially more developmental delays, mental health illness, executive functioning deficits, substance use disorders, learning deficits and overall challenging behaviors compared to their peers.

The rates of prenatal alcohol exposure resulting in a diagnosis of a Fetal Alcohol Spectrum Disorder (FASD) is 5 percent of live births. Prenatal Substance Exposure accounts for an additional 5 percent with the majority of youth also needing the same services as youth with FASD. Many of these youth are polysubstance exposed. The annual cost of an adult with FASD is \$288,000 with the US spending 4 billion dollars annually for these youth.

Despite ongoing prevention campaigns, there was a rise in alcohol consumption and marijuana use during the Covid-19 pandemic in women in childbearing age.

Ackerman Center is the leader in diagnosing and understanding the complex and intensive needs of these youth:

- Since 2016 have evaluated 256 children and teens through our multidisciplinary team clinic
- We provide on-going training, psychoeducation and now evidenced based intervention for youth with PSE/FASD
- With this Intervention program we will reach more youth and address the complex needs including their significant risk of SUD

Fund Resilient Nevada Project: Evidenced- Based Practice for High-Risk Nevada Youth with PSE and FASD

Understanding Prenatal Drug and Alcohol Effects

“The Numbers”

- 2019 Approximately 3.75 million live births occurred in the United States
 - 2021 study by Jansson & Velez estimated 800,000 to 1 million infants are born to mothers who used some type of drugs in the United States.
 - 1 in 5 infants are exposed to Nicotine
 - 1 in 9 infants are exposed to Alcohol (1 in 20 are diagnosed with FASD)
 - 1 in 20 infants are exposed to Illicit Drugs (marijuana, cocaine, heroine, opioids, hallucinogens, methamphetamine, fentanyl, non-medical use of prescription medications) *note, Marijuana is currently the most widely used illicit drug used during pregnancy; **new syndrome noted with prenatal fentanyl exposure
 - JAMA Network indicated that between 2011 and 2020, pregnant women reported a 9% increase in binge drinking (4+ drinks per occasion) and 11% increase in heavy drinking (8+ drinks per week)
 - When looking at “Effects” of substances:
 - Youth with PSE/FASD are easily exploited, victimized and taken advantage of as children and adults. They have much higher rates of out of home placements, foster care, multiple foster care placements, executive functioning deficits, behavioral disorders, homelessness, abandonment, incarceration and early death.
 - These Youth and Adults are in our systems of care, but more often unrecognized with poorer treatment outcomes, ongoing/chronic issues with SUD, being removed from programs due to lack of progress/compliance, and coming in and out of care

“The Numbers” in Nevada

- July 2024 Dept of Health and Human Services published *Addressing Gaps in Care: Health Outcomes of Infants with Gestational Exposure to Substances in Nevada (2018-2020)*
 - Substances included (but were not limited to) alcohol, opioids, cannabinoids (cannabis), sedatives or hypnotics, cocaine, other stimulants, hallucinogens, narcotics (general category for drugs of addiction, unspecified), amphetamines, and tobacco.
- Within this sample, if a mother had two births , the second birth was also substance-exposed 69.5% of the time.

In **Table 4.1**, the distribution of births per cohort from 2018-2020 is depicted, along with the percentage of births per year within each cohort. Between 2018-2020, Nevada mothers gave birth to **12,901 infants identified as gestationally exposed to substances. That is 12.4% of infants born in the time period.**

Table 4.1: Births by Cohort in Nevada, 2018-2020

Year of Birth	PSE Cohort		No-PSE Cohort	
	N	%	N	%
2018	4,378	12.3%	31,164	87.7%
2019	4,286	12.3%	30,699	87.7%
2020	4,237	12.6%	29,353	87.4%
Total	12,901	12.4%	91,216	87.6%

Prenatal Drug/Alcohol Exposure Effects in Adolescence

Adolescence through Young Adulthood

*****Drug/Alcohol Use/Abuse is higher risk across
all substance exposure*****

**Higher risks of developing depression and
anxiety**

**Delays/deficits in Adaptive
Functioning and Employment**

**Inappropriate Sexual
Behavior (often related
to their social immaturity
and abuse history)**

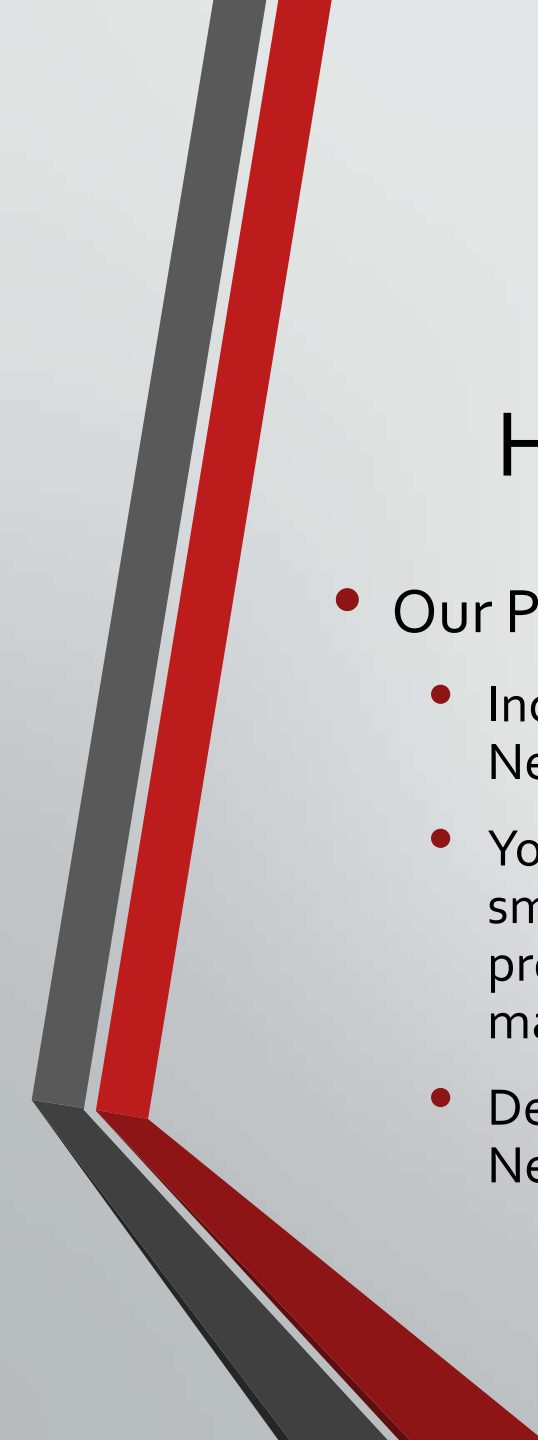
**Legal Troubles;
Psychiatric/Residential
Treatment Facilities**

Fund Resilient Nevada Project: Evidenced- Based Practice for High-Risk Nevada Youth with PSE and FASD

Our Project is an PSE/FASD Evidenced-Based Program (PSE/FASD EBP) for Nevada's children and their families and caregivers that is long needed, overdue and critical for children's mental health.

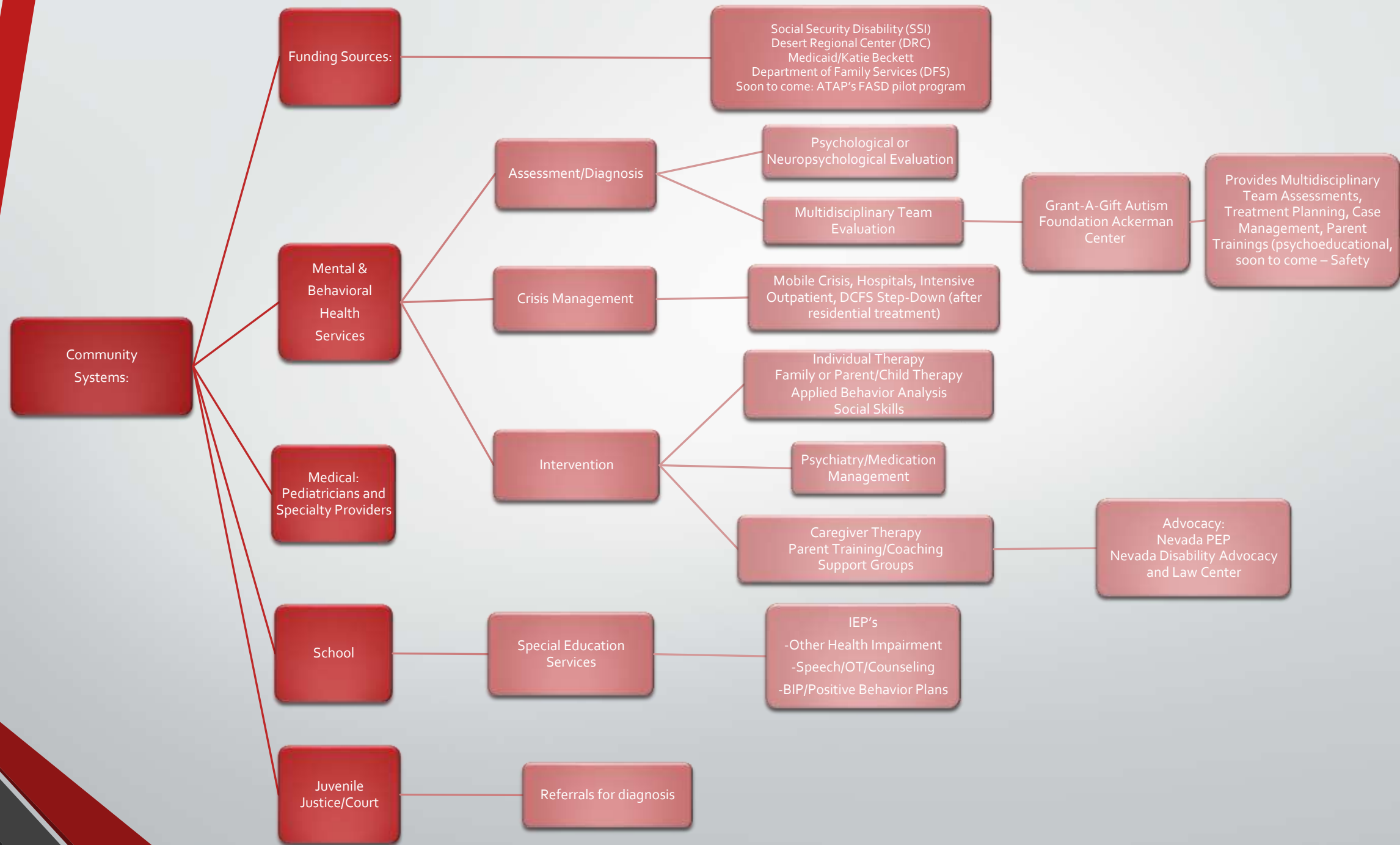
Children with PSE/FASD are at **much higher risk** for the development of a **substance use disorder** in adolescence and adulthood.

Children need an early correct diagnosis of their PSE/FASD, stable homes of good quality, alcohol/drug free environments, substance use prevention, education and treatment, access to PSE/FASD informed mental and behavioral health professionals, ongoing and more intensive services and care across time.



Fund Resilient Nevada Project: Evidenced-Based Practice for High-Risk Nevada Youth with PSE and FASD

- Our Project Involves:
 - Inclusion of both PSE and FASD in an Evidenced Based, Strengths and Strategies and Neurobehavioral Approach to Intervention
 - Youth from 8-12 and 13 to 18 and a Parent/Caregivers (including psychoeducation, small group interventions for social-emotional, behavioral, adaptive, substance use prevention and safety, ongoing follow-up, access to individual therapy, and case management)
 - Development of a sustainable model of intervention for Youth with PSE and FASD in Nevada



Neuropsychological & Behavioral Effects

Neurological abnormalities
Cognitive impairment
Motor skill difficulties
Sensory sensitivities
Executive dysfunction
Language impairment
Verbal processing
Academic challenges
Adaptive functioning delays
Emotional and behavioral symptoms

Secondary disabilities

School problems, criminal justice involvement, substance use, sexual behavior, adverse childhood experiences, employment challenges, homelessness

SPECTRUM OF
PRENATAL
SUBSTANCE USE
EFFECTS

Birth Defects

- Growth deficiencies
- Medical anomalies (vision, hearing, heart, kidneys, bones)
- Facial features (>10%)

At risk for over 400 co-occurring conditions, mental health diagnoses, and chronic disabilities

Most often in foster/kinship care

Mental health examples:
ADHD, depression, anxiety, oppositional defiance, conduct disorder

Substance dosage/type

Duration of consumption

Gestational age

Maternal mental & physical health

Maternal genetics

Maternal metabolism

Questions?

Please take our quick survey to support continued funding for GGAF Ackerman Center to offer trainings about prenatal substance exposure.



Local	Online
GGAF Ackerman Center – FREE Quarterly PSE and FASD Psychoeducational Groups	FASD United and the FASD United Family Navigator program (FASDunited.org) for individuals with prenatal alcohol or drug exposure and their families.
Nevada Families for FASD Awareness. FREE Support Group via every 1 st & 3 rd Monday of the month at 7pm. Zoom ID: 460-341-0383	The FASD Collaborative Project – Many trainings, support groups for individuals and caregivers, as well as special interest groups for professionals www.fasdcollaborative.com
The Parenting Project offers a series of FREE programs to help parents be more effective in raising their children. To register, call (702) 455-5295. https://www.clarkcountynv.gov/residents/family_services/parenting_classes.php	FASCETS (Fetal Alcohol Spectrum Consultation Education and Training Services) explains the Neurobehavioral Model, including functional neurobehavioral assessments.
Foster Kinship (support and training for foster/kinship caregivers)	Brain-First Parenting (Eileendevine.com) – podcasts, blogs, and support community for caregivers
Mobile Crisis 24/7 (https://knowcrisis.com/) 702-486-7865 – Southern & Rural NV 775-688-1670 – Northern NV	“FASD Strategies, not Solutions” PDF by The Child and youth Working Group at Edmonton and Area Fetal Alcohol Network
Children with PSE/FASD may be eligible and should apply for Medicaid/SSI Disability and Desert Regional Center.	SAMHSA – TIP 58 – Addressing Fetal Alcohol Spectrum Disorders
Transitions Services Planning Handbook PDF available through Nevada Disability Advocacy and Law Center.	Towards Healthy Outcomes (THO 2.0): A Framework for Integrated Community Intervention
Nevada Parents Educating Parents – Parent advocacy https://nvpep.org/	CDC FASD Treatments: https://www.cdc.gov/ncbddd/fasd/treatments.html
School/Teacher Resources	
Duke University’s Understanding FASD: A Comprehensive Guide for Pre K-8 Educators	NHS Ayrshire & Arran 2019 “Understanding Fetal Alcohol Spectrum Disorder What Educators Need to Know” PDF
Other Helpful Resources	
The GoFAR program helps FASD youth with regulation and adapting to situations (dotolearn.com)	Me & My FASD – interactive learning with games and applications, also a magazine https://fasd.me/
Collaborative Proactive Solutions (CPS) can help caregivers and teachers assist youth with developing foundational problem-solving skills. Many CPS resources and training are free on the website (livesinthebalance.com).	<i>The Zones of Regulation</i> , <i>The Alert Program</i> (“How Does Your Engine Run?”), or the <i>Ruler Method</i> , are evidence-based tools for all youth that promote social emotional learning, emotional/behavioral regulation.
Reframe & Reconsider Series by the Asante Center https://www.asantecentre.org/	Aware Program – for teens about mindfulness https://awareprogramonline.com/online-for-teens-with-fasd/
Books for PSE	Books for Challenging Behaviors or Trauma
<i>Trying Differently Rather Than Harder</i> by Diane Malhin	<i>Brain-Body Parenting and Beyond Behaviors: Using Brain Science and Compassion to Understand and Solve Children’s Behavioral Challenges</i> by Mona Delahooke
<i>Essential FASD Supports</i> by Nate Sheets	<i>The Explosive Child and Raising Human Beings</i> : Ross Greene
<i>Bruised Before Birth</i> by Joan McNamara	<i>Raising Kids with Big Baffling Behaviors</i> : Robyn Gobbel (book and podcast)
<i>Fantastic Antone Grows Up</i> Series edited by Judith Kleinfeld	<i>Securely Attached: How Understanding Childhood Trauma Will Transform Your Parenting</i> by Mike and Kristin Berry
Podcasts	
<i>The FASD Success Show</i> by Jeff Noble	FASD Hope