FASlink

FASlink, Fetal Alcohol Disorders Society – FASlink, la Société des Désordres d'Alcool Foetal Research, Information, Support and Communications

The International 24/7 FASD Conference Centre

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The FASlink Website

FASlink has become the primary Canadian Fetal Alcohol Spectrum Disorders research. information, support and communications resource. FASlink's Internet Home Page serves more than 400,000 people per year in addition to countless online searches of more than 100,000 FASD related documents in the FASlink Archives. It is the largest information resource for FASD issues in the world. We also provide extensive links to other related online information.

FASlink is within the first three listings on Google and other key Internet search engines for the term "fetal alcohol".

For offline use, the FASlink CD contains a wealth of key articles and publications on FASD.

The FASIink Discussion Forum

The FASlink Discussion Forum provides online information and support 24/7 and serves parents (birth, foster and adoptive), caregivers, adults with FASD, doctors. teachers. social workers, lawyers, students, law enforcement, psychologists, judiciary, corrections professionals and government policy makers. The listserv shares 25 to 100 letters daily. Our membership is worldwide but most are in Canada and the USA. Membership varies seasonally as we also help to educate students in academic and professional courses.

Our members are from remote areas, rural areas, First Nations Reserves, urban aboriginal communities, small towns and large cities throughout Canada as well as in other countries. The ability to "connect" with other families in Canada, the U.S.A. and overseas has built a strong, supportive "family" that is online 24/7. For many, this is the only support resource available. With hundreds of members and the FASlink Archives. the knowledge base on FASlink is incredible.

The FASlink Discussion Forum has been the primary communications vehicle for International FAS Day, organized by FASworld. (fasworld.com)

There is a strong code of civility on FASlink, along with the latitude to vent when needed, as long as it is not attacking another member. Moderator "keeps the peace". Members must feel "safe" on FASlink.

There is safety in the anonymity of FASlink for many members, allowing discussions of issues online that they would not be able to discuss in a local support group. Many subtle "bias triggers" are also eliminated.

FASlink provides a large resource base for best practice guidance on effective parenting approaches. Many of our members have been dealing with these issues for many years and share what works and what does not work. In many cases it is our parents who are training the professionals. In other cases, many of the parents of FASD children are also professionals in their career fields who share their expertise. FASlink embodies the very definition of collaboration.

URL: www.faslink.org

E-Mail: info@faslink.org

Information & Issues

FASlink provides a network that shares information on FASD issues. conferences and government initiatives as well as practical parenting ideas for families living with FASD. We monitor company, governmental and NPO activities, research, legislation and grant funding affecting individuals with FASD. We deal with an extraordinary range of issues. Most FASD families are under tremendous health, financial. emotional and structural stress. FASD tears many families apart and many struggle to survive in poverty and isolation. Often FASlink is their only link support. understanding mobilization of resources. We help teach parents how to advocate for their children and we help teach teachers how to teach our special children. Suicides have been averted and families have received desperately needed services because of FASlink.

History & Evolution

In 1995, Val Surbey persuaded the Canadian Centre on Substance Abuse to form FASlink, an online discussion forum for Fetal Alcohol Syndrome. CCSA is funded by the beverage alcohol associations and The Public Health Agency of Canada. FASlink evolved from being an academic forum for professionals to include dedicated parents and caregivers of individuals

with FASD. Funding for CCSA's FASlink project was terminated in early 1999. Bruce Ritchie, an original FASlink member, took personal responsibility for FASlink and transferred the E-mail list to his own servers, adding to the extensive FASD website he had been building since 1995. He is Moderator of the very active discussions.

The Moderator

Bruce Ritchie is a single father, the biological and adoptive parent of David, now age 15, diagnosed with Fetal Alcohol Syndrome as an infant. David is now in Grade 10 in a regular classroom, with supports. Although there are still many challenges, early diagnosis and intensive intervention have clearly worked. Bruce serves on School Councils and has worked on children's issues for many years, particularly in the field of Family Law.

He designs knowledge systems for medical, legal, justice, educational and business organizations and publishes the FASlink website, CD's and other educational material.

He was a Founding Director of the Fetal Alcohol Support Network (Hamilton 1991), an organization that has evolved to become FASworld and that was the initiator of many other FASD organizations.

He also deals with many direct queries from the general public and speaks at seminars and conferences.

He is the recipient of the St. Michael's Hospital Award for Pioneer Work in the Area of Fetal Alcohol Spectrum Disorders. St. Michael's is a major FASD Diagnostic Clinic and a teaching hospital affiliated with the University of Toronto.

Our Mission

Prevention - To prevent and relieve sickness and disabilities, both physical and mental, caused by prenatal exposure to alcohol and known as Fetal Alcohol Spectrum Disorders (FASD).

Intervention & Support - To provide support and services to victims of FASD and their parents and care givers.

Research - To collect, evaluate, analyze and share with the public, knowledge related to FASD, to include medical research, diagnosis, intervention, prevention, education, career preparation, justice, parenting, care and protection.

Communications - To maintain a website and a moderated discussion forum on the Internet as a means of collecting, evaluating, analyzing and sharing information related to FASD;

Collaboration - To develop an association of parent and care giver organizations devoted to supporting individuals with FASD.

FASIink Funding

FASlink is funded by voluntary donations and through distribution of its educational resources, such as the FASlink CD.

To assure our editorial integrity and independence, FASlink does NOT accept any funding from the beverage alcohol industry.

Exposure Rates

The StatsCan Canadian Community Health Survey reports that between ages 12 to 34, **19.9%** of females report having 5 or more drinks on one occasion, twelve or more times a year. An additional **32.2%** ages 15 to 34 report using 5 or more drinks on one occasion, 1 to 11 times a year. Five drinks will give a typical 100 lb (45 kg) female a Blood Alcohol Level of 0.25%, three times the legal limit.

About 50% of pregnancies are unplanned. Most girls are 2 to 3 months pregnant before they find out.

The meconium (the newborn's first bowel movement) based Fatty Acid Ethyl Esters assay detects maternal alcohol use during the last 20 weeks of pregnancy. Studies with the Avitar/USDTL MecStat-EtOH assay found fetal exposure to alcohol in 15-

18% of newborns tested, approximately 4% of the newborns had elevated results. The meconium test does not detect exposure in the first 4.5 months. It would not include those mothers who drank during the first trimester and quit when they discovered they were pregnant. Major damage could have already occurred to the baby.

It is probable that about 20% of babies have been exposed to multiple binges in high levels of alcohol in the first trimester, before the girl even knew she was pregnant.

Alcohol damage to the fetus occurs throughout pregnancy, over a wide continuum. Damage varies due to volume ingested, timing during pregnancy, peak blood alcohol levels, genetics, nutrition and environmental factors. Even 1 drink per week can affect the child's behaviour.

Under-diagnosis

Very few physicians have been trained to screen for or diagnose FASD. FASD symptoms are usually diagnosed as ADHD, ADD, PDD, ODD, ASD, RAD, MR, CP, or CAPD, etc. Consequently, conventional FASD incidence statistics are grossly misleading. Yet typically about 20% of elementary and high school students are receiving special services for conditions of the types known to be cause by prenatal alcohol exposure.

The TRIUMF Project

The TRIUMF Project is a proposed self-sustaining village that will include farming, manufacturing, rehab (particularly for pregnant women with their families), camping, recreational and conference facilities. This is not an institution. It is a "theme park" designed first for those disabilities and then for the general public. The village is designed to be run by those with disabilities and to attract revenue from the general public. It will be designed to embody the Accessibility for Ontarians with Disabilities Act.