

[00:00:00.840] - Melissa Corkum

Is your parenting journey turning out differently than you imagined? It's never too late to begin your family's transformation journey.

[00:00:09.100] - Lisa C. Qualls

Welcome to the Adoptionwise podcast, formerly the Adoption Connection podcast, where you'll rediscover the confident and connected parent you long to be. I'm Lisa C. Qualls.

[00:00:21.470] - Melissa Corkum

And this is Melissa Corpam. Don't worry, we get it, and we're here for you.

[00:00:28.270] - Lisa C. Qualls

Welcome to part 2 of our workshop with Sandra Flach, Accommodating and Supporting Kids with FASD. If you did not hear part one of this great workshop, we'd encourage you to pause and go back and listen to part one or just catch it later. It is two parts of a great, great workshop that I think you'll really enjoy. Sandra Flach is a mom of eight children, five through adoption, two diagnosed with fetal alcohol syndrome. She encourages and equips foster and adoptive parents through her weekly Adoption and Foster Care Journey podcast and blogs at [sandraflach.com](http://sandraflach.com). Sandra is co-founder of Justice for Orphans, and author of *Orphans No More: A Journey Back to the Father*. She is also a trained facilitator of the FASCETS neurobehavioral model. Sandra and her husband, Wayne, have been married 35 years. They reside in upstate New York, where they love to spend time with family, especially their eight grandchildren. So thank you for joining us for part two of this workshop.

[00:01:30.770] - Sandra Flach

FASD is an invisible, brain-based physical disability with behavioral symptoms. We oftentimes want to fix behaviors, but a neurobehavioral approach really looks at what is the source of the behavior. If this is a brain-based condition, what does the brain have to do with it? I often like to ask to take a moment to think about what did your brain have to do this morning or today, from the time you woke up to the time you got on this call or started listening to this podcast, what did your brain have to do? There's a lot of things, and we don't often stop to think about what our brain does for us. But we had to make decisions. We had to decide to turn off the alarm and get up. We had to decide, are we going to take a shower first or are we going to go make the coffee first? Many of us multitask. I can put the coffee on and feed the dog and empty the dishwasher or make the kids' lunches. We're doing multiple things at a time. You had to probably maybe manage some money. Maybe you had to go to the bank and do some things or go to the store and make some purchases, or You had to drive your car and take kids to the bus stop, whatever those things are. There's a lot of decision making, a lot of anticipating, a lot of different things going on there.

[00:02:57.250] - Sandra Flach

You had to remember that you were going to come this call or listen to this podcast. So there's memory things that are going on. While listening, you're actually filtering out distractions, possibly. So many different things that our brain does for us without us even thinking about them. But every one of those that I just listed, and I'm sure that your brains did way more than that today so far, but every one of those is actually very difficult for a person who is prenatally exposed to alcohol. But let's think about our kids. One thing that I find most of us parents typically say in a day is, Go clean your room. Age appropriately, we want them to, at some point, be able to pick up their toys or go clean their room. So we send them in there and do that. I remember our oldest daughter that I shared about earlier who came in as the kinship placement. I would send her to her room to clean her room, which was always very messy. I'd go check on her later, and she'd be sitting in the middle of the mess on the floor with a book that she found in the pile of mess, reading the book, and nothing else got done. And that's when we're going to issue some consequences because you're being defiant, you're not obeying the rules, you're not following the instructions, and then there's the meltdown.

[00:04:06.470] - Sandra Flach

But let's stop and think, what does anybody's brain have to do to clean a room? Well, the first thing, maybe, maybe not the first thing, but one of the things is plan. Where are we going to start? Are we going to vacuum the floor or pick up the toys first? Do I make the bed or is it time to change the

sheets? We have to have a plan on what we're going to do and how we're going to do it. We have to be able to organize. The clean clothes go... Do the socks and underwear go in this drawer? Do the T-shirts get hung up or folded? Where do the things go? Do the blocks go here? The books go? Where does everything go? What does organizing look like? We have to be able to know that. We have to be able to remember where things go. We have to remember the steps to do things. There's steps to making a bed. There's steps to cleaning a floor. We have to be able to remember all of the steps. What does a clean room entail? We have to remember all of the things, which might be in some households, it might be making the bed and picking up the toys and putting away the clothes and vacuuming the floor, and then you're done. But you have to be able to remember to do all of those things. You have to be able to visualize what does a clean room look like. That way we know when we get to that picture, when it looks like that, Then it's clean. And whose idea of clean? Who defines what clean actually is? We have to be able to make those decisions. What are we going to do first? What's going to come next? Is this clean? Is this dirty? Do I make the bed? Do I change the sheets? There's a lot of decision-making involved in cleaning a room. Staying focused long enough to get all of those tasks accomplished.

[00:06:13.580] - Sandra Flach

Managing sensory could come into play because maybe you sent them in there to clean their room before dinner and they're hungry, and then they're smelling the delicious dinner being made, and they can't focus on the cleaning because they're smelling the dinner. So sensory can be involved. Controlling impulses. Maybe the dog comes into the room or the cat comes into the room and that's a distraction, and then they want to just go play with the dog. Or maybe the neighbor kids are on the trampoline right outside their bedroom window. They see that and then they drop everything and run out to join the neighbor kids. Very impulsive. This is not an exhaustive list of all of the brain tasks involved in cleaning the room, but you get the picture. There's a lot of brain tasks that come into play. If you think back to all of those primary symptoms of FASD that we listed, every one of these brain tasks is very difficult, if not impossible, for a kiddo or a person with an FASD to be able to do because their brain just does not work this way.

[00:07:22.580] - Sandra Flach

But what can we do? We do want our kids to learn to clean a room, to be able to pick up after themselves. What accommodations could be put into place to help our kiddos be successful? We talk about accommodations because if you think of any disability, say, for example, if a person has a spinal cord injury and they're in a wheelchair. If we have a kiddo in a wheelchair, we know that when they go to school, we can see that they have a disability. It's diagnosed. Everybody can see the wheelchair, which is also an accommodation in and of itself. But we know that this kiddo is not going to be expected to run track in order to pass PE, in order to graduate high school. There's accommodations that are going to be put into place so that this kiddo can graduate high school, so that they can pass. And think about it, our communities are equipped with special parking spaces for people with disabilities. Curbs are removed from parking lots. We have ramps. We have modified restrooms. All of those are accommodations to help a person be able to be successful in the community because they have a visible disability.

[00:08:39.510] - Sandra Flach

Our kiddos also have a brain-based disability. However, it's not necessarily visible. So when they do not meet the expectations that are placed upon them, that's when we see that breakdown, and that's where we see the secondary and even eventually tertiary symptoms. Because if we're yelling at the kiddo to just try harder to get up and run track so that you can pass. If you just try harder, if you have a visual impairment, just try harder to see the board, right? Whether they're using whiteboards or blackboards or a computer screen or whatever it is in schools these days, demanding that they just try harder over time when we know that kiddo is not going to be able to run track because they have a spinal cord injury. No matter how much we punish them or give them consequences or yell at them or encourage them or give them a sticker chart or whatever we may try to do to get that behavior to change, they have a disability. They're never going to be able to do that, but they need accommodations to be able to be successful. Our kiddos can learn a lot of things. We can't necessarily say that they can never be able to learn things, but this is a lifelong condition. Nobody outgrows FASD. And while they can learn things and skills over time as they're ready, they will need

accommodations to be able to be successful, just like a person with any type of a physical disability needs accommodations. So it's only ethical and fair and right that we provide those accommodations, even if we can't see the disability.

[00:10:13.690] - Sandra Flach

So some of the accommodations that we could actually provide for a kiddo who we want to clean their room is always, and this is with any expectation, consider their developmental age. Because if you have a kiddo who's 12, but developmentally, cognitively, they're more like six. We need to set our expectations on how that room gets cleaned to what a six-year-old can do, not what a twelve-year-old can do, because they're really not twelve. Same thing if they're 16, a neurotypical 16-year-old should be able to really do a great job on that room. However, if our neurodivergent kiddo at 16 is really like an eight-year-old, we need to set our expectation at what an eight-year-old can do. Meet them where they're at. Over time, there can be some improvements. I do find, however, though, with the dysmaturity and with these deficits, when our kiddos get to school, especially middle school and high school, then the gap really widens between what they're able to do and what their neurotypical peers are doing. It becomes more obvious the older they get, and they need more of those supports to be successful. Break down into simple steps what is required to clean a room. So rather than just make a blanket statement, Go clean your room, I have learned with my kiddos to be able to give them one task at a time.

[00:11:42.320] - Sandra Flach

The first thing I always say is, Bring out your dirty clothes because they're able to typically bring out the clothes. A lot of times I get clean clothes mixed in with the dirty clothes, but that's okay. But they can bring out their dirty clothes and put them in the laundry room. And then I may say, okay, bring out your dirty dishes. I have teenagers, so there's always dirty dishes in those rooms. So we bring out those dirty dishes. They may make it to the dishwasher, they may maybe just make it to the sink. But the point was to get that step accomplished. So one step at a time, give them that step. And when that step is completed, then give them the next step. So simple steps without a lot of words. A visual chart can be great. I find that if our kiddos are visual learners, that works really well. But if you're going to give a visual chart, you have to teach them how to use it. I've made that mistake where I put a visual chart up in my son's room, which included clean clothes, deodorant. I said I had teenagers, right? I want that deodorant on. But just because it's hanging on his wall with the pictures and everything, so nice, he doesn't pay any attention to it unless I take the time each day to go over steps with him and make sure, okay, now it's time. It's like, See, the deodorant has to go on now, and I'll observe the deodorant going on because he's really good at... If I don't observe it and I say, Oh, did you put your deodorant on? He'll say, Oh, yes. And then later on in the car, I know he didn't put the deodorant on.

[00:13:16.340] - Sandra Flach

So I find that I have another kiddo, don't need to supervise that, but I have a kiddo who that needs to be supervised. So visual charts are helpful. I know one mom who cleaned her kiddo's room and then took pictures of the bed made, the floor clean, the bookshelf, what everything is supposed to look like, and then printed those pictures off and made a nice chart. I don't know if she numbered them or lettered them. But then she'll say to her kiddo, Okay, today, just go do one and two, whatever one and two is on the chart. The kiddo can see what one and two is. Maybe it's make the bed and pick up the floor, whatever it be. But you have to practice the visual chart. Don't just hang it up and assume they're going to do it. So whether you use a whiteboard or a checkoff list or pictures, however, if that works, you do have to practice it with them until they get it.

[00:14:09.560] - Sandra Flach

Some kiddos will need one-on-one support. One of my kiddos needs one-on-one support, so we co-clean. He gets very overwhelmed with all of the steps. And while he can bring out your laundry and bring out your dirty dishes thing, when it comes to cleaning under the bed or cleaning out the closet or organizing his belongings and that kind of thing, usually myself or my husband will co-clean with him. So he's learning the steps. He's going through the process. So he's got body memory, but he's really not able to do that by himself at this point. He's much more successful if he has a support person to do that. And you're also building connection at the same time.

[00:14:56.140] - Lisa C. Qualls

Is your adoption journey turning out differently than you imagined? You had so much love to give, but now you feel ashamed and bewildered by your lack of compassion. You may be experiencing blocked care, a self-protective mechanism in your nervous system that makes it difficult to connect with your child and maintain compassion. When this happens, it's like your heart seems to have left the relationship. But the good news is you are not a bad parent. You can heal from blocked care and compassion can be rekindled in your heart.

[00:15:27.350] - Melissa Corkum

This episode is sponsored by our book, *Reclaim Compassion: the Adoptive Parent's Guide to Overcoming Blocked Care with Neuroscience and Faith*. This practical and powerful guide offers a simple step-by-step process for reclaiming compassion for your child and yourself. Included in the book is a blocked care assessment, which is now free to you, our listeners. You can take the assessment at [reclaimcompassion.com/assessment](http://reclaimcompassion.com/assessment).

[00:15:56.030] - Sandra Flach

Strengths are another important thing that we like to focus on with the neurobehavioral model. Every one of our kiddos are created with amazing gifts and abilities and talents. I always say, mine for gold. Figure out what your kiddos strengths are. Some of our kiddos are musical. Some of them have great sense of humor. Some of them are wonderful with pets or with younger children, or some of them love to play games or are like comedians or they're artistic or build things with their hands or great with Legos or whatever it is that they're good at, focus on those strengths and build on them all the time because they know what they're not good at. They're reminded of that every day as they try to navigate life, school and home in the community. But find out what those strengths are and build on those strengths so that they can feel successful and feel good at things and incorporate them wherever you can. So if you have a kiddo who loves music, allow them to play music while they're cleaning their room. If you have a kiddo who loves games and being silly, make a game out of cleaning the room and do it together and make it fun because, again, you can be building connection at the same time, which is so important.

[00:17:17.320] - Sandra Flach

Revise our expectations. A lot of times, my expectation for my teenagers is if I can get them to bring out the dirty clothes and I can get them to bring out the dirty dishes and any garbage that's in there, that's good enough for me. I've been parenting for 34 years, and at this point, I don't want to spend my afternoon or evening in a battle, and I just shut the bedroom door most of the time, and then we go in every few weeks, my husband or I, and we'll do more of a deep clean side by side with them. But really revising our expectations, including taking into consideration what their primary symptoms are that they may struggle with, what is their developmental age, and then set our expectations there. Not at what their neurotypical peers can do, but really based on what their primary symptoms seem to be. If you know you have a kiddo who probably has slower processing pace, then we know we're not going to be able to give a verbal lecture. I was always the lecture parent. I like to use a lot of words and talk. Maybe you've noticed that by now. But that is lost on our kiddos if they have slow processing pace because they're not catching most of what we say. We need to be able to meet them where they're at and understand that, okay, if they have a slower processing pace, I need to use less words. I need to slow down. I need to give one step directions at a time.

[00:18:29.590] - Sandra Flach

A little bit more about strengths, because I really like to stress strengths. Again, our kiddos know what they're not good at. They hear it every day. They deal with it every day. But let them thrive where they are good. Again, they may have great social skills. They may be mechanical. They may be great with animals. One of my kiddos, my older daughter, was just gifted with interacting with the elderly. She has always had a job in a nursing home, and she just thrives there. It's very structured. Her daily tasks are the same every day, that she has with working with the folks in nursing home. But she just has a way with those folks. She thrives in that environment. It's structured, and she's great with the elderly, so it works for her.

[00:19:41.810] - Sandra Flach

Depending on... We may have kids that are very athletic Maybe they are great at cooking or welding or artistic or whatever it might be. We want them to build on their strengths. One of my kiddos, he was three. He was the one with the scoliosis when we adopted him and fetal alcohol syndrome. But all growing up, he was always enamored with police officers and firefighters, and he always wanted to be a police officer or a firefighter. I always felt a little sad because with his physical condition, very tiny, and even now, he just turned 20. He weighs 93 pounds and is 5'1. A lot of that has to do with he had very low birth weight, and then all of the scoliosis and all of his his anatomy and things just contributed to a lot of different challenges, including the FAS. The likelihood of him ever being a police officer or a firefighter was pretty slim, right? However, he is a volunteer firefighter at our local fire department. He cannot enter a burning building because he cannot physically wear all of the apparatus and the things that you have to wear. But he is a member, and he did take a class. He had to take a exterior firefighter class last year, and I had to help him sign up for that class because that was a challenge, going online and signing up for the class. Not something that he could figure out. But I did see on the application for the class that you could click a box if you needed accommodations. So I clicked that box and I was able to submit his IEP from school. Even though he had graduated from school, they allowed us to submit his IEP, which listed some of the accommodations he needed, which included needing to have test questions read to him in a quiet space, needing to have extra time, needing to have classroom notes provided. Now, most of this class was hands-on, which he's very good with hands-on. That's where he has strengths. However, each unit required a multiple-choice test to pass each unit of this class. So he was able to have those test questions and the multiple-choice voice answers read to him in a separate room. And he did wonderfully and passed every test until the last one, different instructor that night, the instructor read faster, and he read the question faster, the options faster, and my son's brain couldn't figure out what he was going to pick for his answer, and the instructor was on to the next question.

[00:22:23.070] - Sandra Flach

Needless to say, he didn't pass the test, but he was able to advocate for himself and say, You read the questions too fast. I couldn't keep up. So they gave him the next week to retake the test. The original instructor gave it and read them more slowly, and he passed the test. So that's just that slow processing pace, they are going to need accommodations to have, whether it's in school or whether it's with an employer. It's important to know that that is a symptom. That's how his brain works, and he can advocate now for himself. But he's able to be a firefighter, and he goes to every call, and he goes to every parade. He's very social and just loves that whole environment and has a whole little community now. Because even though he's 20, he has no friends in his peer group because he's never fit in because of the dysmaturity with his peer group. So all of his friends are older adults from the firehouse, which really we've been able to educate a little bit on FASD so that they can understand certain things about why he does certain things and how he's a concrete thinker, so he doesn't understand innuendo or certain types of humor. And he takes things very literally, so they're learning how to communicate with him so that he can thrive there, and he's doing a great job. So focus on strengths.

[00:23:55.360] - Sandra Flach

Before we get to some Q&A, I do want to say that I do offer resources. If this is something that's really resonating with you and you would like more training on FASD, you'd like to look more deeply into this neurobehavioral model that I teach, I do offer online and in-person workshops, and now I'm offering some FASD coaching as well. I host the Adoption and Foster Care Journey podcast, which probably 90% of the time I am talking about FASD, but we talk about all of the things relative to this journey. We also have an online support community called Hope for the FASD Journey. That is a support community of parents, caregivers who, whether their kiddos are diagnosed or not, because we know it's hard to get a diagnosis if you just suspect that this is going on with your kiddo, it is a very difficult journey to parent kiddos who were prenatally exposed. We have an online support group. It's faith-based. We pray at the end together, and it includes three Zoom support group meetings per month, as well as a private Facebook group where we do devotionals for families or for our members, and prayer requests, and just interact in that group and support one another.

[00:25:16.720] - Sandra Flach

Because, again, it is a very difficult journey. The adoption and foster care journey can be very challenging. Then when you add prenatal exposure to alcohol, it makes it even more difficult. We want to support and encourage all caregivers and parents who are on this journey. You can check out all of our resources on our website, [justicefororphansny.org](http://justicefororphansny.org).

[00:25:41.380] - Lisa C. Qualls

This was fantastic. I learned new things, and I'm always parenting two teens. There was so much here for all of us, and even more so for those of us who have kids with some brain difference and FASD. So thank you very, very much. And just to repeat, people can find you and all of your resources at [justicefororphansny.org](http://justicefororphansny.org), for New York. Is that right? Yes.. Org? Yes. Okay. [Justicefororphansny.org](http://Justicefororphansny.org). And if you're listening while you're driving or doing something else, we will have that in the show notes for this episode. But reach out to Sandra. Look for her resources. She has so much to offer. Sandra, you present at conferences as well, like adoption and foster care conferences. So if you're going to be attending a conference, look and see if Sandra is going to be there because you get her live and in-person yourself.

[00:26:35.320] - Sandra Flach

Thank you. Thank you for the opportunity. I appreciate it, Lisa. Thanks, everybody.

[00:26:38.890] - Melissa Corkum

We are so thankful for the amazing guests who share their wisdom and expertise with us. Adoptive parenting gives us both the challenge and the opportunity to keep learning new tools and perspectives.

[00:26:49.880] - Lisa C. Qualls

If you'd like to hear more from our guests and get support on this topic, all of our workshops, including the Q&A's, are available to folks inside our group coaching program called Reclaim Compassion. To learn more, go to [reclaimcompassion.com](http://reclaimcompassion.com).

[00:27:05.100] - Melissa Corkum

Before you go, we'd love to connect with you on social media. Our Instagram handle is [@adoptionwise](https://www.instagram.com/adoptionwise). Or better yet, join our free Facebook community [@adoptionwise.org/facebook](https://www.facebook.com/adoptionwise.org/facebook).

[00:27:19.300] - Lisa C. Qualls

Thanks so much for listening. We love having you. Remember, you're a good parent doing good work.

[00:27:27.340] - Melissa Corkum

Music for the podcast is for the podcast is composed by Oleksandr Oleksandrov.