

■ Overview of the Resource Collection

Caring for Children with Prenatal Alcohol Exposure and FASDs in Child Welfare

As a child welfare professional, you work every day to ensure the safety and well-being of children in your community. Part of your role involves working with families to identify their needs and connecting them with the right information, services, and supports to help them thrive. Understanding all aspects of child and family functioning is essential to this work. Such understanding includes recognizing the developmental and behavioral effects of alcohol exposure before birth (also known as “prenatal alcohol exposure”) that can lead to a diagnosis under the fetal alcohol spectrum disorders (FASDs) umbrella. Even low to moderate prenatal alcohol exposure can cause changes in the brain that can affect development. People with FASDs have lifelong effects, including behavior, learning, and physical difficulties. Everyone with an FASD is unique and has both strengths and challenges. By increasing your knowledge of the effects of alcohol exposure before birth, you can help recognize the signs and then support families in accessing FASD-informed services to improve a child’s safety, permanency, and well-being.

FASDs and the Child Welfare System

The prevalence of FASDs is high among children involved in the child welfare system. Recent estimates show that about 18% of children in foster care have an FASD (Engesether et al., 2024), compared to national estimates of up to 5% of school-aged children (May et al., 2018). Children with FASDs are at an increased risk for maltreatment, home instability, and out-of-home placement (Jaudes & Mackey-Bilaver, 2008; Maclean et al., 2017). Early identification and intervention are key to reducing the risk of adverse life outcomes for children with FASDs such as school failure, homelessness, incarceration, and poor health. As a child welfare professional, you can provide supports and access to FASD-informed services to mitigate these risks and promote positive child and family outcomes.



What's Included in the Resource Collection?

The [Resource Collection for Caring for Children with Prenatal Alcohol Exposure and FASDs in Child Welfare](#) includes three types of resources:

- **Practice Guides.** The practice guides include information and practice considerations for child welfare caseworkers, case managers, and agency leaders along with links to related resources and tools.
- **Tip Sheets.** Tip sheets are designed for parents and caregivers to increase practical knowledge. They include concise guidance, strategies, and considerations.
- **E-Learnings.** The three-part e-learning series is designed to increase awareness of the effects of alcohol exposure before birth and build knowledge of FASD-informed practices for working with families. A comprehensive case scenario is applied across the learning modules to provide a connection to practice.

Resources in this collection are designed to strengthen and support child welfare casework practice to use FASD-informed, family-centered, and strengths-based approaches. The resource collection is organized around a four-part, family-focused framework to help child welfare professionals:

- [Recognize the signs](#) of prenatal alcohol exposure and FASDs
- [Engage families and build trust](#) through information and support
- [Coordinate care and referrals](#) for diagnostic assessment and services
- [Strengthen and expand services](#) by enhancing system capacity

Figure 1. Guiding Framework



Who Can Benefit From the Resource Collection?

The resources in this collection were directly informed by former as well as current child welfare agency directors, managers, supervisors, and frontline staff, along with parents and caregivers of children with alcohol exposure before birth and FASDs. Child welfare professionals can use the resources to learn about the effects of alcohol exposure before birth and FASDs to facilitate their work with families. Parents and caregivers can use the strategies and information included in the tip sheets when caring for a child with alcohol exposure before birth or an FASD. In addition to these specific audiences, service providers who partner with child welfare agencies to support children and families (such as educators, behavioral health providers, and early intervention specialists) may also find the resources helpful.



Key Terms Used in the Resource Collection

- **Caseworker** – The child welfare agency staff member working directly with the child and family.
- **Family of origin** – The caregivers and siblings a person grows up with, which are often a person's biological or adoptive family.
- **Kinship caregiver** – Describes the care of children by relatives or, in some jurisdictions, close family friends (often referred to as fictive kin).
- **Resource family** – Provides care for children who cannot live with their parents and plays a supportive role in reunification. Resource families may include foster parents, foster-to-adopt families, and kinship caregivers.

How To Get Started

There are many ways to navigate the resources included in this collection depending on your role and interests.

Figure 2. Crosswalk of Resources

I Need to...	Start Here
Share information about alcohol exposure before birth and fetal alcohol spectrum disorders (FASDs) with a family	• Understanding Prenatal Alcohol Exposure and FASDs • Parenting Children and Youth With Prenatal Alcohol Exposure and FASDs
Provide support to a resource family who is caring for a child with possible alcohol exposure before birth or FASD	• Supporting Children With Prenatal Alcohol Exposure and FASDs in Out-of-Home Care • Social and Emotional Needs of Children With Prenatal Alcohol Exposure and FASDs
Increase my staff's awareness and knowledge of the effects of alcohol exposure before birth and FASDs	• Recognize the Signs of Prenatal Alcohol Exposure and FASDs • Recognize the Signs: E-Learning Module 1



I Need to...	Start Here
Coordinate a referral for an FASD assessment	• Engaging Families Affected By Prenatal Alcohol Exposure and FASDs • Coordinating Services for Children With Prenatal Alcohol Exposure and FASDs
Assess my agency's policies, practices, and service array for children with alcohol exposure before birth and FASDs	• Strengthening Services for Children With Prenatal Alcohol Exposure and FASDs • Strengthen and Expand Coordination of Services as an Agency and Caseworker: E-Learning Module 3
Share information about FASDs with my child's teacher	• FASD: What the Education System Should Know
Talk with my child about alcohol exposure before birth and a possible FASD diagnosis	• How Do I Talk with My Child About Prenatal Alcohol Exposure and FASD?
Understand the availability of FASD services in my community	• Community Landscape Worksheet • FASD United Resource Directory

It is important to note that resources included in this collection are not intended to be used in investigative processes or as part of a child protective services assessment to decide whether children can remain safely in their homes. Instead, they are intended to provide strategies for supporting children with alcohol exposure before birth and their families, including keeping children safely at home when possible.

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References

- Engesether, B., Hoffner, M., Johnson, E., Klug, M. G., Popova, S., & Burd, L. (2024). Prevalence of fetal alcohol spectrum disorder in foster care: A scoping review. *Alcohol, Clinical and Experimental Research*, 48(8), 1443–1450. <https://pubmed.ncbi.nlm.nih.gov/39031634/>
- May, P. A., Chambers, C. D., Kalberg, W. O., Zellner, J., Feldman, H., Buckley, D., Kopald, D., Hasken, J. M., Xu, R., Honerkamp-Smith, G., Taras, H., Manning, M. A., Robinson, L. K., Adam, M. P., Abdul-Rahman, O., Vaux, K., Jewett, T., Elliott, A. J., Kable, J. A., ... Hoyme, H. E. (2018). Prevalence of fetal alcohol spectrum disorders in 4 US communities. *JAMA*, 319(5), 474–482.
- Jaudes, P. K., & Mackey-Bilaver, L. (2008). Do chronic conditions increase young children's risk of being maltreated? *Child Abuse and Neglect*, 32(7), 671–681.
- Maclean, M. J., Sims, S., Bower, C., Leonard, H., Stanley, F. J., & O'Donnell, M. (2017). Maltreatment risk among children with disabilities. *Pediatrics*, 139(4). <https://doi.org/10.1542/peds.2016-1817>