



"Our mission: To increase understanding of people from a neurobehavioral perspective"

Twelve points regarding Fetal Alcohol / Neurobehavioral conditions (FA/NB)

1. People with FA/NB have an invisible, brain-based, physical condition. Recognition of FA/NB is synonymous with recognition of brain differences.
2. People with FA/NB are a "hidden" population often diagnosed with ADD/ADHD, LD, PDD, ODD, ASD, and others.
3. FA/NB includes a wide spectrum of neurobehavioral effects that overlap other brain-based conditions including exposure to teratogens, TBI, ABI and others.
4. Those most at-risk for psychosocial problems are those with FA/NB with no observable physical characteristics -- the majority.
5. FA/NB is an invisible brain-based physical condition with behavioral symptoms.
6. Neurobehavioral characteristics of people with this physical condition are at odds with learning theory-based assumptions about brain function.
7. Interventions based on the principles of learning theory are often incompatible with neurobehavioral characteristics, or differences in brain function.
8. Well-intended but inappropriate and ineffective interventions implemented over time have been associated with chronic frustration and the development of debilitating secondary characteristics in children and adults.
9. An emerging neurobehavioral theoretical foundation systematically links brain function with behaviors and supports a shift in understanding, reframing the meaning of presenting behaviors -- from "won't" to "can't"-- and redefining both the nature of the problem and the focus for interventions in a manner consistent with research.
10. This shift in thinking is the basis for providing appropriate environmental accommodations for people with FA/NB in all settings, preventing deterioration and maximizing realization of developmental potential. This principle of providing environmental accommodations for people with FA/NB is the same as for other physical handicapping conditions.
11. Children, parents and professionals, and all systems and strata of communities and cultures benefit from a shared understanding and a common language that enhances communication and helps establish and sustain an informed, community-based, continuum of care.
12. Adequate accommodations at home and in the community provide appropriate levels of support, over time. An informed community-based continuum of care assures conceptual consistency and congruent accommodations in all settings. This is associated with fewer challenging behaviors, stronger relationships, and improved outcomes. Change is indicated at the level of individuals, families, practice, programs, institutions, policy and law.