

Substance Use in Adolescents with Fetal Alcohol Spectrum Disorder

This factsheet will assist secondary school teaching and support staff to **better understand substance use** in adolescents with Fetal Alcohol Spectrum Disorder (FASD). The term 'substance use' refers to the use of both alcohol and other drugs, such as nicotine and cannabis. This factsheet aims to provide practical advice and strategies to **assist educators in supporting young people** and communicating effectively with them about their substance use and the associated risks. It's important to be aware that every individual with FASD is different, each will have their own strengths and challenges. These strategies may not be effective every time or may require ongoing reinforcement.

Additionally, it's important to note FASD is so prevalent, **many educators may not realise they are interacting daily with students who have undiagnosed or misdiagnosed FASD**. The information in this factsheet will be useful to understand substance use in many students, even if a young person does not have a formal diagnosis. As the pathway to a FASD diagnosis can be lengthy, it's important that support **strategies are implemented as soon as possible**.

Finally, it's important to note that each school will have a unique policy and approach to responding to and reporting substance use. Teaching and support staff should **be aware of the relevant procedures** that apply to their school in managing substance-related incidents and risks.

Substance use during adolescence

Adolescence is a period of significant cognitive, physiological, psychological and social transition. This, combined with cultural, economic, and social factors, often leads to an **increase in risk-taking behaviours**, one of the most common being substance use.

Key Facts

Prevalence

In 2022-23, 65% of Australian secondary school students reported having ever consumed alcohol, 30% had ever vaped, and 15% had used an illicit drug (e.g., cannabis, MDMA). Of those who had ever consumed alcohol, around 22% said they drank alcohol in the past month, and 46% had engaged in risky drinking (>5 drinks in a single occasion) in the past month.

Impact

Early substance use can significantly impact brain development, with research showing that even small levels of alcohol can result in neurobiological changes which **affect cognitive, social and emotional functioning**. Adolescent substance use is also linked to decreases in memory, attention, information processing, and executive functioning skills.

Indirect Harms

Young people who use substances are between **1.5 to 2.5 times** less likely to complete Year 12. Other indirect harms can include a negative impact on mental health, and increased risk of injury, violence, suicide, and high-risk sexual activity.



FASD and substance use in adolescence

Prenatal alcohol exposure has been associated with greater alcohol, cannabis and tobacco use, even when other factors such as age, sex, education and prenatal exposure to other substances are accounted for. Individuals prenatally exposed to alcohol are **more likely to initiate alcohol use earlier** and engage in risky alcohol use by age fourteen. Earlier age of alcohol use initiation is one of the strongest predictors of alcohol use disorder in adulthood. Approximately **46% of adults with FASD engage in risky substance use**, and over the course of their lifetime, are up to 20 times more likely to develop substance use disorders.

While the underlying mechanisms that drive this risk aren't entirely clear, adolescents with FASD are more likely to experience certain factors that increase the risk of early substance initiation, such as co-occurring mental health conditions, stressful or traumatic life events, or an unstable home environment. Adolescents with FASD may have heightened sensitivity to the effects of substances due to altered brain development, making them more vulnerable to negative consequences even with lower amounts of alcohol or drugs. Challenges with **memory, impulse control, problem-solving** and **understanding abstract concepts** can also make it difficult to remember and connect the consequences of actions (e.g., drinking too much could lead to feeling sick), or to anticipate the long-term effects of substance use. Other social factors such as **peer influence** and **dysmaturity** (i.e. behaving in a way that seems younger than their chronological age) may also contribute to risky substance use.

What role do teaching and support staff play?

Teaching and support staff play a pivotal role in equipping adolescents with the knowledge, skills and support needed to navigate their developing understanding of substance use. While the entire school community shares responsibility for substance use education, teaching and support staff are uniquely positioned to guide safe, supportive and educative discussions. Some young people may also feel more comfortable talking about sensitive topics with a trusted adult outside of their home environment.

Many adolescents will experiment with substances. As such, **providing education on harm reduction strategies can help reduce the risks.** Harm reduction refers to strategies that can minimise the potential negative impacts associated with substance use. This approach focuses on safety, informed decision-making and knowing where to access support, rather than relying on abstinence or fear-based messaging.

Strategies

There are general principles that are best practice in supporting young people with FASD. These include things like **routine, repetition** and **consistency**, and you can read about them on our [What is FASD](#) page. These principles should always underpin approaches to working with students with FASD and be applied in conjunction with the substance use specific strategies described below. Some of these principles have also been woven into the following strategies.



Strategy	Details
<p>Adapt harm-reduction education material</p>	<p>Establish what is age-appropriate information on the risks associated with substance use by observing students and asking questions before program delivery.</p> <ul style="list-style-type: none"> • Students with FASD often struggle to understand and retain harm-reduction messages or engage in meaningful discussion about the risks involved. Messages about substance use risks may need to be repeated frequently and reinforced through multiple formats (e.g., visual aids, role-play) to ensure understanding and retention. • Dysmaturity may affect what is 'age-appropriate' for a young person with FASD. As such, content should be adapted to their varying levels of maturity in different areas.
<p>Use visual or hands-on examples to convey practical information</p>	<p>Young people with FASD may have difficulty with abstract thinking or concepts. Visual aids, such as visually showing standard drink sizes or role-playing how to seek help if needed, can assist with learning.</p>
<p>Model strong communication and social skills</p>	<p>Use role-play and social modelling strategies to practice resisting substances or peer pressure, and handling situations where substances may be present. These strategies can be particularly effective for young people with FASD to help them engage with complex information. Reinforce and revise what you covered in the previous class and make any visuals you used available.</p>
<p>Address motivations for substance use</p>	<p>Young people with FASD may be motivated to experiment with substance use out of curiosity or peer influence, or to cope with commonly co-occurring risk factors like stress, anxiety or trauma. Discuss these motivations and suggest healthier alternatives for managing these challenges, such as engaging in hobbies, talking to peers or trusted adults, or using relaxation techniques.</p>
<p>Implement classroom discussion strategies</p>	<ul style="list-style-type: none"> • A 'one step removed' strategy: This strategy involves using a fictional case study to allow young people to discuss sensitive topics without fear of personal consequences. For example, asking "suppose this happened to someone...what advice would you give them?... What could they do?" • See also: Education NSW's guide for encouraging participation in classroom discussions • Scenario activities: such as Drug and Alcohol Research Training Australia's examples.
<p>Facilitate access to resources and interventions</p>	<p>Guide young people towards evidence-based resources. For young people with FASD, consider consolidating resources into simple, visual information sheets.</p> <ul style="list-style-type: none"> • Such as Positive Choices - Resources for students for students.

Strategy

Details

<p>Collaborate with caregivers and community</p>	<p>Consistency and repetition are important for learners with FASD. Where possible, encourage consistent messaging and strategies between school and home.</p> <ul style="list-style-type: none"> • See also: Positive Choices - Resources for parents • Positive Choices - Talking to a young person about drugs
<p>Consider duty of care</p>	<p>Maintain clear rules and boundaries and know when to refer a young person to appropriate support services.</p>
<p>Build trust</p>	<p>Keep an open mind and create safe, open channels of communication, allowing young people to feel comfortable asking questions about substance use without fear of judgement.</p>
<p>Prepare for an individual discussion</p>	<p>If you think a young person may be engaging in risky substance use, communicating your concern in a supportive, non-confrontational and non-judgmental way can let them know you are there to help.</p> <ul style="list-style-type: none"> • Try to arrange a time to talk privately and avoid any blame or lecturing. • Be patient: If they aren't ready to talk, or react negatively, let them know that you will be there to help if they change their mind.

A strong connection to school has been shown to correlate with reduced substance use. Positive relationships with educators and peers foster a sense of belonging and community, which can serve as protective factors against risky substance use. Through **cultivating trust, providing education, and promoting harm reduction strategies**, teaching and support staff can **empower young people with FASD to make informed decisions about alcohol and other drugs.**

Further Resources

- Alcohol and Drug Foundation: [Drug and Alcohol Resources for People with Low Literacy](#)
- Education NSW: [Drug Education Curriculum](#)
- POPFASD: [8 Magic Keys: Planning for Students with Fetal Alcohol Spectrum Disorder](#)
- Positive Choices: [Talking to a young person about drugs](#)
- Positive Choices: [Where to get help](#)

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