

Father chronicles his struggle with FAS

by Sen. John Binkley
for the Tundra Times

JUNEAU — Michael Dorris first decided he wanted to have a child while doing anthropological field work in the village of Tyonek, across Cook Inlet from Anchorage.

"My desire for a child was as clear and basic to me as instinct. . . it was pure want. . ."

OPINION

Single, 26 years old, an American Indian seeking an Indian child — he knew fulfilling his goal of parenthood, and consequently becoming one of the first unmarried men in the United States to legally adopt a young child, would not be easy.

But when Dorris first set eyes on the little 3-year-old clad in a red snowsuit, who immediately greeted him with, "Hi, Daddy," he knew the role of father was made for him.

What Dorris did not know was that his new son, Adam — a Sioux Indian child who came to him malnourished, possibly retarded and showing signs of physical abuse — would never be able to fulfill the dreams that a typical father has for his son.

Adam was small for his age, late to toilet train, and he lagged behind in learning his colors, counting numbers, recognizing his abc's. But Dorris thought this was the result of a bad start, of three years of abuse after Adam's birth. He thought by lavishing undivided attention, special teachers and loads of love, his son would surely blossom.

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But Adam remained a slow, and at times an impossible learner. He never caught up. And it was only years later when Dorris visited South Dakota Indian reservations on a research trip that he saw other children with the same characteristics as Adam and first learned his son suffered from Fetal Alcohol Syndrome as a result of his biological mother's consumption of alcohol during her pregnancy.

Dorris' — and Adam's — story is chronicled in his book *The Broken Cord*. It is a moving account of one family's journey from ignorance to denial to acceptance of life with a victim of FAS.

Reading this book was a highly emotional experience for me. Certainly, the statistics were not new — the physical problems associated with alcohol-related birth defects, the tragedy of mental retardation among FAS and the less severe Fetal Alcohol Effects children, the grim knowledge that there is absolutely no cure. Yet these are birth defects that are completely preventable, simply by avoiding alcohol during pregnancy.

What struck me especially hard

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were the behavioral effects of FAS and the less severe Fetal Alcohol Effects: these children aren't able to learn from experience, to determine cause and effect, action and reaction. They have short attention spans and are highly distractible; they may be hyperactive, inattentive, impulsive, fearless and indiscriminate in their reaction to friends and strangers.

In relatively mild cases, FAE might be suggested by a repeated failure to learn the multiplication tables, to grasp how to gauge time or to conform to manners of social behavior which indicate a certain knowledge of long-term consequences or morality. They may show poor judgement and repeat behaviors even though they've had bad outcomes in the past. They're often the victims of abuse.

Since the physical and mental characteristics come in a multitude of combinations, it's hard to diagnose FAE accurately.

What's so frightening is that medical researchers really don't know how much alcohol does what kind of damage. It all depends on the mother's health, age, her life and drinking history.

But more and more research indicates that the effects of drinking alcohol while pregnant could be far greater than originally thought. It's quite possible that moderate drinking could be shaving IQ points off the unborn child, or could result in hyperactivity, or maybe contribute to irresponsibility later in life.

I think about how our jails are filled to the bursting point — many with young men and women who keep breaking the same laws over and over — who are repeatedly caught shoplifting or sexually abusing someone.

How many times have we said, "They just don't seem to learn from their mistakes!" How many of these acts are actually the result of their mothers drinking before they were born?

How many teachers in our schools are frustrated because of the hyperactive kids, others who never seem to be able to get the hang of things?

These behaviors might seem too vague to point the finger at alcohol as the culprit, but researchers are finding a consistent pattern all the same.

In recent years I've focused my efforts on helping to educate the public that drinking may harm an unborn child. I've done this by sponsoring legislation establishing Fetal Alcohol Syndrome Awareness Week for the past three years, and most recently, by sponsoring legislation mandating warning signs in all places that sell alcohol and working with the court system to see that information on FAS is given to every couple requesting a marriage license.

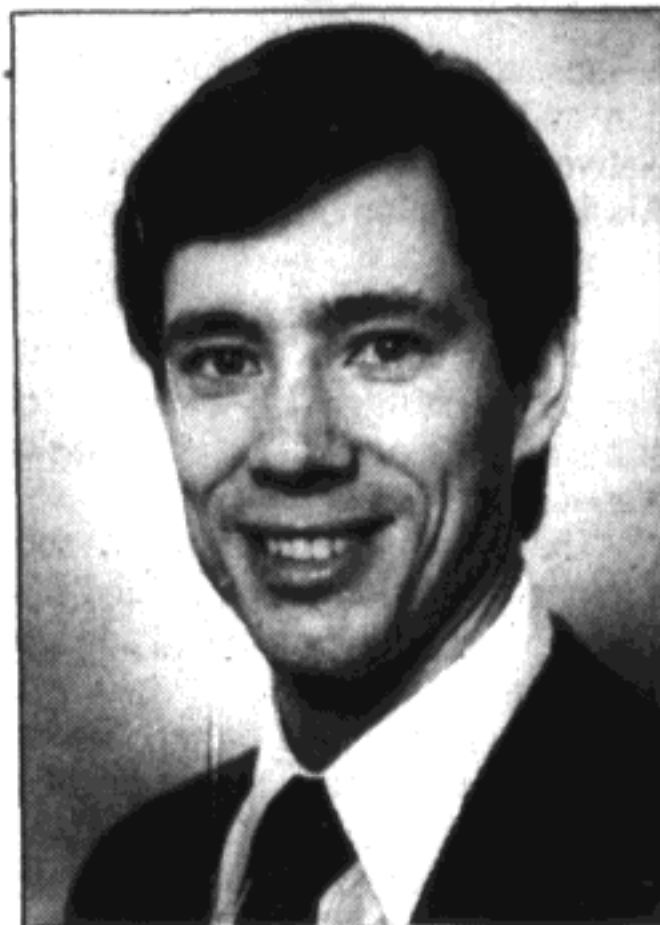
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me realize this is not enough. Certainly, educating women of child bearing age and their partners, families and friends is worth every ounce of effort we can give to it.

The state created an FAS coordinator position in 1988 and has produced two public service announcements on FAS. In addition, IHS has recently announced plans to create a treatment program for women who are pregnant and abusing drugs or alcohol in Alaska.

Prevention is very important, but it's only a partial answer. What are we doing for the kids themselves — the kids who are bright enough to know they can't learn their multiplication tables, but who see that their classmates don't seem to have any problems doing so?

What about classroom teachers? Not all of these children are identified for special education.



And how are families coping? Frustration, anxiety and anger are common feelings among parents and caregivers of FAS/FAE children. In Fairbanks an FAS/FAE support group has formed.

It's fairly new, but the members already have had inquiries from parents and teachers around the state. Sharing experiences, providing emotional support — it's a beginning, and it seems to be helping.

A sign in my office reads: Pregnancy and Alcohol Don't Mix. This has been true from time immemorial, but it's only been clinically recognized over the past two decades.

We've made progress in education and prevention, and we should continue and strengthen our efforts there. But we need a new focus — and new energy — in the area of caregiving and preparing FAS and FAE children for life.