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Dear Honorable Members of the House Committee on Education:

Thank you for the opportunity to provide information on HB 2203. I'm a proponent for HB 2203, Adding FASD to the Conditions that May Establish Eligibility for Special Education. FASD (fetal alcohol spectrum disorder) is the developmental disability that results from prenatal exposure to alcohol. The CDC indicates it impacts up to 1 in 20 students, a higher rate than autism or other developmental disabilities. Despite its high prevalence, FASD is rarely diagnosed due to ignorance and stigma.

People with FASD have permanently altered brain structure and function that leaves them with specific deficits that may not be reflected on traditional assessments. These deficits are typically seen in the areas of receptive language, short term or working memory, abstract reasoning, inconsistent performance, impulse control, executive functioning and emotional self-regulation. Despite these deficits, students with FASD can have a normal IQ and can be articulate, therefore they are often deemed ineligible for SpEd. These students, because of the above mentioned deficits, fail to match their peers academically and socially. Without the IEP and SpEd services, and thus the needed supports and accommodations, they generally develop a wide range of social, behavioral and learning challenges. Worse, it sets the stage for FASD's known secondary characteristics, identified by the CDC to include school dropout, substance abuse, problems with stable housing and employment and involvement with the criminal justice system.

I am Kristin McArthur, an adoptive mom to a 17 year old son with FASD. My son was able to obtain an IEP and SpEd services because he had many of the challenges seen with FASD, but not just because he had the diagnosis. In addition to the behavioral challenges, my son has intellectual disabilities caused by FASD. Many, however, with the same diagnosis as my son, are left without the IEP and special accommodations.

HB 2203 is needed to ensure that students with FASD are identified early and provided appropriate supports and accommodations that allow them to succeed. It is also needed, in my opinion, as a starting point to not only identify the need for special education but more awareness and knowledge of FASD, leading to appropriate supports for kids with FASD. Unfortunately, despite having an IEP, the public school system my son attended in Kansas was not suitable for his educational needs nor the ability to keep him and others safe. We were forced to find a school outside of Kansas for our son, even though he was in the school with the highest level of supports in our district, it was not enough. More education and training on FASD is needed for educators. The prevalence is staggering and the consequences are frightening, if FASD is left misunderstood and unsupported. Please support HB 2203.

Thank you for the opportunity to share my perspective and experience.

Kristin McArthur