

FASD Roundtable Outcomes: From Insight to Action

The Scale Of The Challenge

In Q3 2025, AWARE.org hosted a Fetal Alcohol Spectrum Disorder (FASD) roundtable in Johannesburg to address South Africa's alarming FASD rates. The event brought together government, health, research, education, advocacy, industry and civil society to share research, dispel myths, highlight proven interventions and shape evidence-based prevention strategies. Participants pledged concrete actions to help break the cycle of harm and affirmed that FASD is preventable.

"If people knew that we are among the highest in the world, greater action and momentum would follow."

PROF. IRENE MACKRAJ
Professor of Human Psychology from the University of Kwa-Zulu Natal.

11% Of South African children are born with FASD.

31% In the most affected communities.

100% Preventable when alcohol is avoided during pregnancy.



Background of FASD

CAUSE

PRENATAL ALCOHOL EXPOSURE

FASD begins before birth, alcohol exposure during pregnancy disrupts normal brain and body development.

IMPACT

PREVENTABLE BUT PREVALENT

Although completely preventable, FASD affects thousands of South African children every year, causing lifelong learning and behavioural challenges.

RESPONSE

A COLLECTIVE NATIONAL EFFORT

Aware.org leads a collaborative national effort to change social norms, support mothers, and drive evidence-based, community-led prevention.

Core Insights and Outcomes

#1 Drivers Of Crisis



Unplanned Pregnancies: Over half of all pregnancies are unplanned.



Stigma & Shame: Judgement and blame prevent women from seeking help.



Myths & Misinformation: Some still believe certain drinks are 'safe'.



Limited Research: Insufficient funding and fragmented data.

#2 Gaps in awareness and education



Information alone is insufficient:

Awareness campaigns are vital, but they must be paired with support systems and practical interventions.



Early Engagement Is Critical:

Education should target pre-teens including boys and girls, planting the seeds of responsibility before risky behaviour begins.



Healthcare Touchpoints Are Underused:

Antenatal visits often rely on tick-box questionnaires instead of meaningful conversations that identify risk and offer help.

#3 Prevention Priorities



Evidence-based interventions:

Communities need research-driven initiatives that can be scaled and measured for impact.



Consistent messaging:

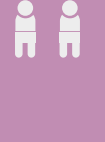
There is no safe amount of alcohol during pregnancy. This simple, clear message must be reinforced nationally.



Curriculum and policy change:

Strategies should include tertiary-level education programmes and stronger integration of FASD awareness into school and health curricula.

#4 Collective Action



Multi-sector Collaboration is Required:

Government, health professionals, researchers, industry and civil society must work together to fund research, implement interventions and sustain prevention efforts.



Resource Allocation:

FASD prevention demands equal urgency and investment as other national health priorities such as HIV and malnutrition.



Support for mothers:

Interventions should avoid blame and instead offer compassionate, practical support to women and families.

"FASD is not only a health concern, it's a social-justice issue."

DR SHARON MALULEKE-NGOMANE

Lecturer at the University of Johannesburg and specialist in maternal and child health.

Gaps Identified

Prevention and Education:



The need for clear, consistent messaging: that no amount of alcohol is safe during pregnancy.



Insufficient integration of FASD awareness: into school and tertiary education curricula to reach young people early.

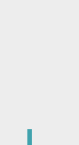


Limited engagement with pre-teens: including boys, to foster responsibility and shift social norms before risky behaviours begin.

Healthcare and Community Support:



A gap in training for healthcare workers: to conduct meaningful, non-judgemental conversations during antenatal visits and provide timely referrals for support.



The need to scale up community-level interventions: that have proven effective in reducing alcohol use during pregnancy.

Research and Collaboration:



Insufficient dedicated funding for FASD research: and standardised national data collection.



The absence of a formal cross-sector working group: to coordinate prevention strategies and track progress.

Pledges and Commitments

COMMITMENT

ONE NATION, ONE GOAL

All stakeholders agreed to act together to reduce FASD across South Africa, from government to healthcare, research, and community partners.

FOCUS AREAS

KEY COMMITMENTS

The roundtable defined four priority action areas to drive long-term prevention.



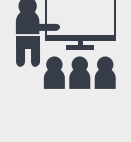
Policy & Support

Strengthen policy frameworks to prioritise FASD prevention.



Healthcare & Community

Improve frontline and community support for mothers and families.



Education & Awareness

Expand prevention and education to reach youth and families.



Research & Collaboration

Invest in data, research, and cross-sector partnerships.

VISION

SHARED DETERMINATION

This isn't about conversation, it's about sustained action and alignment. Together, the participants share a vision of a future where every child is born FASD-free.

"It's more than just dialogues... we want to bring them to action and make sure everyone is engaged and aligned in the same direction."

Jordi Borrut-Bel, Aware.org Board Chairperson

Aware.org Programmes

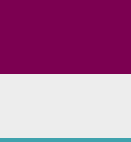
University of Johannesburg Partnership

FETAL ALCOHOL SPECTRUM DISORDER CAMPAIGN

Implemented in Gauteng.



The project aims to empower young South Africans with knowledge that can prevent one of the country's most urgent yet entirely preventable public health crises.



Educating 5,000 people through campus activations, community outreach, and UJ FM's 40,000 listeners.



Research to understand perceptions of women of childbearing age on alcohol consumption during pregnancy.



Findings will shape targeted awareness content for future campaigns.

NXTGENWOMXN FOR MOTHERS (SOHK)



Implemented in Gauteng & Western Cape.

Supporting mothers and mothers-to-be with mental health resources and FASD education.



Provides a safe, supportive space for healthy coping strategies.



44% increase in confidence to say no to alcohol while pregnant.



90% of participants said they do not plan to drink while pregnant.

FARR FOCUS ON PREVENTION.



Implemented in Western Cape, Free State & Eastern Cape.

Committed to raising awareness across South Africa that no amount of alcohol is safe during pregnancy.

Healthy Mother, Healthy Baby© Programme:



Motivational face-to-face interventions with pregnant women.



Includes **9-Month Baby Clinics** where each baby receives a paediatric screening for FASD.



Training for community members, healthcare professionals, and ECD practitioners.

[CLICK HERE TO WATCH THE VIDEO](#)