



NATIONAL CONFERENCE *of* STATE LEGISLATURES

The Forum for America's Ideas

Joe Hackney
Speaker
North Carolina House of Representatives
President, NCSL

To: Representative Homan
Florida House of Representatives
813-966-1958
ed@edhoman.com

Gary VanLandingham
Director, OPPAGA
Florida Legislature
Staff Chair, NCSL

William Pound
Executive Director

From: Jennifer Saunders
Health Program
(303) 856-1440
jennifer.saunders@ncsl.org

Date: March 23, 2009

Subject: Fetal Alcohol Syndrome

Representative Homan,

In response to your questions about the impacts of raising awareness about the association between alcohol and fetal alcohol syndrome (FAS) and other disorders, I contacted several organizations.

I contacted the Fetal Alcohol Spectrum Disorders Center for Excellence within the Substance Abuse and Mental Health Services Administration of the U.S. Department of Health and Human Services. I have forwarded you the email response I received from them along with this document. For more information, please contact them at 1-866-STOPFAS (786-7327) or fasdcenter@samhsa.hhs.gov.

In addition, the Center for Excellence webpage has some information about the financial impact of FAS.

Fetal Alcohol Spectrum Disorders: Center for Excellence
The Financial Impact of Fetal Alcohol Syndrome, 2003
<http://www.fascenter.samhsa.gov/publications/cost.cfm>

I also contacted the National Center on Birth Defects and Developmental Disabilities at the Centers for Disease Control and Prevention (CDC). I am waiting for them to send me any relevant information they have. The CDC's website includes general information on FAS:

<http://www.cdc.gov/ncbddd/fas/>

Fact sheets on FAS:

<http://www.cdc.gov/ncbddd/fas/factsheets.htm>

Information about the National Task Force on Fetal Alcohol Syndrome and Fetal Alcohol Effect (The Task Force expired on October 25, 2007):

<http://www.cdc.gov/ncbddd/fas/taskforce.htm>

State-Specific Weighted Prevalence Estimates of Alcohol Use Among Women Aged 18–44 Years—

March 23, 2009
p. 2

BRFSS, 2006

http://www.cdc.gov/NCBDDD/fas/monitor_table2006.htm

I also contacted the National Organization on Fetal Alcohol Syndrome (NOFAS). I am waiting for a response from them, and will send you any information they provide as soon as I receive it.

I was able to find the following information on the NOFAS website: <http://www.nofas.org/>

FASD: What Policy Makers Should Know

<http://www.nofas.org/MediaFiles/PDFs/factsheets/policymakers.pdf>

Other Fact Sheets:

<http://www.nofas.org/resource/factsheet.aspx>

I also contacted the FAS Prevention Program in Oregon. We expect to receive information about their program and any additional information they have by the end of the day today. I will forward you this information as soon as I receive it.

In general, more information about their program can be found online at:

<http://oregon.gov/DHS/ph/wh/fas.shtml> and

<http://oregon.gov/DHS/ph/wh/aboutFAS.shtml>

On March 11th, I sent you examples of current legislation related to warning signs about fetal alcohol syndrome in liquor establishments. I searched these bills for related fiscal notes. Colorado's House Bill 1139 has a fiscal note that can be found online at:

http://www.leg.state.co.us/clics/clics2009a/csl.nsf/fsbillcont3/658BAD40CC7EB7A787257537001A2D8A?Open&file=HB1139_r1.pdf

The Hawaii and New York bills did not have a fiscal note.

Additional Resources

National Institute on Alcohol Abuse and Alcoholism of the National Institutes of Health

<http://www.niaaa.nih.gov/>

Fetal Alcohol Syndrome Prevention Research, August 2002

<http://pubs.niaaa.nih.gov/publications/arh26-1/58-65.htm>

Warning Posters

Warning posters to be placed where alcohol is sold have been required in some States as

early as 1983. **As of 1993, 18 States, 14 cities, and 2 counties required the display of such posters.**

Prugh (1986) examined the impact of posters warning about drinking during pregnancy in New York City. Prior to the posters, 54 percent of respondents mentioned birth defects as a result of drinking while pregnant. A year after the posters were introduced, 68 percent mentioned birth defects as a consequence of drinking.

Using a national sample of 4,000 adults in 1990–1991, Kaskutas and Graves (1994) found that 31 percent of respondents saw a sign or poster warning about health effects of alcohol. Among those seeing a sign or poster, 56 percent recalled a warning about alcohol and birth defects. The investigators also reported that the level of knowledge of the risks associated with drinking during pregnancy increased with an increasing number of different message sources (e.g., posters, warning label, and advertisements). Among the 142 women in the

March 23, 2009

p. 3

survey who had been pregnant in the past year, 86 percent saw 1 or more messages about drinking while pregnant. Eighty-seven percent of women who had been pregnant versus 58 percent of women of childbearing age who had not been pregnant had a discussion about alcohol and the risk of birth defects ($p < .05$). Thirty-six percent of the women who had been pregnant and were drinkers reported limiting their drinking for "health reasons" compared with 25 percent of the nonpregnant women ($p < .05$). Finally, 70 percent of the women who had been pregnant reported that they did not drink alcohol while pregnant (Kaskutas and Graves 1994).

American College of Obstetricians and Gynecologists
Drinking and Reproductive Health
A Fetal Alcohol Spectrum Disorders Prevention Took Kit (for providers)
<http://www.acog.org/departments/healthIssues/FASDToolkit.pdf>

Brief Interventions Are Effective

There is strong evidence that brief behavioral counseling interventions for risky drinking by both pregnant and nonpregnant reproductive-age women reduce the risk of alcohol-exposed pregnancy. In one multicenter project, nearly 70% of women who were drinking at risky levels and not using effective contraception reduced their risk of an alcohol-exposed pregnancy 6 months after a brief intervention because they stopped or reduced their drinking below risky levels, or they started using effective contraception.¹⁵ For women who are already pregnant, randomized studies reported significant reductions in alcohol use and improved newborn outcomes after intervention.^{14,16}

Minnesota
Fetal Alcohol Education Rule
<http://www.state.mn.us/portal/mn/jsp/content.do?programid=536899192&id=-536882729&agency=BMP>
Task force report: <http://www.mnplan.state.mn.us/pdf/fas.pdf>

Surgeon General's Advisory on Alcohol Use in Pregnancy, February 2005
<http://www.surgeongeneral.gov/pressreleases/sg02222005.html>

FASD Support Site
<http://fasd.brighttomorrow.com/index.asp?page=8>

Pregnancy and Alcohol.org
University of Wisconsin-Madison
<http://www.pregnancyandalcohol.org/index.asp?menuID=140&firstlevelmenuID=140&siteID=1>

March of Dimes
Fact Sheet: Drinking Alcohol During Pregnancy
http://www.marchofdimes.com/professionals/14332_1170.asp

Since your questions relate to broader activities that raise awareness about the risks of drinking alcohol during pregnancy, I have summarized additional examples of state laws that require or create awareness activities (other than laws that relate specifically to warning signs about consuming alcohol while pregnant).

Statute Citation	Summary of State Law
<p>Delaware</p> <p>Del. Code Ann. tit. 16, § 190</p> <p>Del. Code Ann. tit. 24 § 1769A</p>	<p>The Director of the Division of Public Health shall require any and all persons under its jurisdiction who treat, advise or counsel pregnant women to post and give written and verbal warnings to said pregnant women as to the possible problems, complications and injuries which may result to themselves and/or to the fetus from their consumption or use of alcohol, cocaine, marijuana, heroin or other narcotics during their pregnancy.</p> <p>http://delcode.delaware.gov/title16/c001/sc08/index.shtml</p> <p>A person certified to practice medicine who treats, advises, or counsels pregnant women for matters relating to the pregnancy shall post warnings and give written and verbal warnings to all pregnant women regarding possible problems, complications, and injuries to themselves and/or to the fetus from the consumption or use of alcohol or cocaine, marijuana, heroin, and other narcotics during pregnancy.</p> <p>http://delcode.delaware.gov/title24/c017/sc05/index.shtml#1769</p>
<p>Kentucky</p> <p>Ky. Rev. Stat. § 311.378</p>	<p>All licensed physicians who maintain a private office shall post in a prominent place in the patient waiting room a printed sign supplied by the Cabinet for Health and Family Services, with gender-neutral language, which shall warn that drinking alcoholic beverages prior to conception or during pregnancy can cause birth defects.</p> <p>http://www.lrc.ky.gov/KRS/311-00/378.PDF</p>
<p>Minnesota</p> <p>Minn. Stat. § 145.9266</p>	<p>The commissioner of health shall design and implement an ongoing statewide campaign to raise public awareness and educate the public about fetal alcohol syndrome and other effects of prenatal alcohol exposure.</p> <p>https://www.revisor.leg.state.mn.us/statutes/?id=145.9266</p>
<p>Missouri</p> <p>Mo. Rev. Stat. § 191.725</p>	<p>Beginning January 1, 1992, every licensed physician who provides obstetrical or gynecological care to a pregnant woman shall counsel all patients as to the perinatal effects of smoking cigarettes, the use of alcohol and the use of any controlled substance for nonmedical purposes. Such physicians shall further have all patients sign a written statement, the form of which will be prepared by</p>

	<p>the director of the department of health and senior services, certifying that such counseling has been received. All such executed statements shall be maintained as part of that patient's medical file. The director of the department of health and senior services, in cooperation with the department of mental health, division of alcohol and drug abuse, shall further provide educational materials and guidance to such physicians for the purpose of assuring accurate and appropriate patient education.</p> <p>http://www.moga.mo.gov/statutes/c100-199/1910000725.htm</p>
<p>Nevada Nev. Rev. Stat. § 442.385</p>	<p>The Health Division shall develop and carry out a program of public education to increase public awareness about the dangers of fetal alcohol syndrome and other adverse effects on a fetus that may result from the consumption of alcohol during pregnancy.</p> <p>http://www.leg.state.nv.us/Nrs/NRS-442.html#NRS442Sec385</p>
<p>Utah Utah Code Ann. § 26-7-5</p>	<p>Beginning on July 1, 2008, and ending on June 30, 2009, the department shall, under the direction of the Utah Substance Abuse and Anti-violence Coordinating Council, and in consultation with the Division of Substance Abuse and Mental Health, within the Department of Human Services, conduct a public education and outreach program to inform pregnant women and women who may become pregnant of the danger of using alcohol, tobacco, or other harmful substances during pregnancy.</p> <p>http://le.utah.gov/~code/TITLE26/htm/26_07_000500.htm</p> <p>Enacted by Chapter 135, 2008 General Session</p>

Sources: National Conference of State Legislatures and LexisNexis