

# Changing the way we respond to Fetal Alcohol Spectrum Disorders

Australia's response to FASD has reached a tipping posteriary Submission 36A prevention of FASD and the provision of services to Australian families

	Action taken	Achievements made
Research	<ul> <li>Lililwan study in Fitzroy Valley, WA</li> <li>Screening and Diagnostic Instrument for FASD</li> <li>FASD Monograph – to be published</li> <li>Knowledge and training needs of QLD Judiciary</li> </ul>	<ul> <li>✓ Greater understanding of FASD prevalence</li> <li>✓ Moving towards nationally consistent diagnosis</li> <li>✓ Established an evidence base for action</li> <li>✓ Highlighted need for training and awareness</li> </ul>
Programs	<ul> <li>Australia's first diagnostic clinic at Westmead</li> <li>FASD prevention program - Ord Valley, WA</li> <li>FASD education programs – Tiwi and Darwin</li> <li>Tasmanian training program</li> </ul>	<ul> <li>✓ More children will be able to receive diagnoses</li> <li>✓ Reduction in alcohol consumption during pregnancy</li> <li>✓ Increased awareness of FASD locally</li> <li>✓ Increase knowledge of FASD among key group</li> </ul>
Advocacy	<ul> <li>Labelling Logic: review of food labelling laws</li> <li>House of Reps FASD Inquiry established</li> <li>National Organisation on Fetal Alcohol and Alcohol Related Disorders (NOFASARD)</li> </ul>	<ul> <li>✓ Introduction of a pregnancy warning label agreed</li> <li>✓ Focussed political and public attention on FASD</li> <li>✓ Provides a national voice for people affected by FASD</li> </ul>

FASD is a complex issue that requires greater precision and coordination in the way governments and the community respond.

FASD doesn't occur in isolation - it results from a complex interplay of biological, social, psychological, environmental and economic factors



A whole-of-government response is required to bring together support from a range of sectors including health, employment, education, justice, Indigenous, community and housing.

# A National FASD Action Plan is needed that coordinates action across different sectors and across all Australian jurisdictions

# The essential elements of a plan are:



#### Improve diagnostic ability

Diagnosis rates for FASD are low. To improve this the following is needed: a standardised diagnostic tool, services for people to receive a diagnosis and training for health professionals on FASD and use of diagnostic tool.



#### Reduce overall alcohol consumption of Australian women

Fundamental to preventing FASD is reducing the harmful consumption of alcohol in the general population by: funding ongoing public education campaigns, implementing mandatory warning labels and ensuring all health professionals ask women about their alcohol consumption.



#### Empower people with FASD to fully participate in society

Access to disability support services and early intervention programs are crucial in preventing the development of further disability and hardship for people with FASD. Access to early intervention services will result in better outcomes for those affected throughout their lives.



# **Improve data collection to understand true extent of FASD in the Australian community** The prevalence of FASD in Australia is largely unknown and believed to be significantly underreported. Clear actions are required to standardise data on alcohol consumption during pregnancy and on the collection and collation of data once a FASD diagnosis has been made.

# Proposing a National FASD Action Plan should be the main outcome of the Inquiry.

There are opportunities to fund early action in the 2019/14 to the set of the

The Committee should issue an interim report to catch the 2013/14 budget cycle

Funding to finalise diagnostic tool and guidelines	In 2010 the Department of Health and Ageing provided \$450,000 in funding to develop 'Screening and Diagnostic Instrument for FASD'. Guidelines on the use of the tool need finalising.
Fund piloting of diagnostic tool in two clinical settings	The tool needs to be evaluated in two different environments: FASD Clinic, Westmead Children's Hospital , Sydney and the Child Development Service at Princess Margaret Hospital, Perth.
Expand 'Better Start' initiative to include FASD	The 'Better Start for Children with Disability' initiative assists eligible children with early intervention programs and allied health professional services. Adding FASD would not be cost prohibitive (as few children have a FASD diagnosis), but would greatly benefit those assisted.
Public education campaign and mandate warning labels	Fundamental to reducing prenatal exposure to alcohol is the reduction of harmful alcohol consumption in the general population. Public education and pregnancy warning labels would help to reduce overall alcohol consumption and help to prevent future cases of FASD.

Despite public commitments to prevent and address FASD, governments have been dragging their feet in some areas.

The alcohol industry has been successful in delaying the intractuations of evidence-based alcohol warning labels despite repeated recommendations

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(ALAC) mak application health warn amending A	l Advisory New Zealand	• Healthiest Nation by 2020 report Preventive Health Taskforce report is released, recommending introduction of labels or alcohol products.	-	• Government gives Industry two years The Legislative and Governance Forum on Food Regulation allow industry two years to "introduce appropriate labelling on a voluntary basis before regulating for this change".	• DrinkWise labels Industry begins to implement DrinkWise labels on products, stating by Dec 2013 there will be 75-80% of products covered
Industry response	<ul> <li>• Question the evidence</li> <li>Industry submissions to the</li> <li>ALAC application were in favour of keeping the current</li> <li>arrangements and outlined the costs they had incurred from implementing standard drinks labelling.</li> </ul>		• <b>Regulation last resort only</b> Industry opposed mandatory warning labels, citing lack of evidence, restrictions on size and international trade obligations as the reasons for no change being necessary.	• Alcohol industry labels DrinkWise launch their own voluntary labelling scheme, to be supported with point of sale education materials.	• No need for action Industry suggest that their current activities are sufficient and talk down the need for further action on labelling.

To prevent even one more case of FASD, consistent, coordinated action is needed to change the current system.

Supplementary Submission 36A This Inquiry has the opportunity to describe a clear vision and set the path for effective and sustained action

