

National Council of Women Coalition Tasmania Inc.



The Secretary of the Committee House of Representatives Inquiry into Foetal Alcohol Spectrum Disorder <u>spla.reps@aph.gov.au</u>

Please find enclosed submission on behalf of NCW CTI on FASD. Members appreciate the opportunity to present a submission on the above topic and being granted extra time to prepare it.

NCW CTI is the state body which incorporates NCWT (Hobart) and NCWL (Launceston) which was formed in 2001. NCWT was formed in 1899 and NCWL several years later. We are affiliated nationally with the National Council of Women Australia and the International Council of Women.

Yours faithfully

Dorothy Kelly (Mrs) Hon. Secretary 20th February 2012



National Council of Women Coalition Tasmania Inc.



SUBMISSION TO HOUSE OF REPRESENTATIVES INQUIRY INTO FOETAL ALCOHOL SPECTRUM DISORDER

This submission will concentrate on – **<u>Prevention Strategies</u>**.

NCW CTI Tasmania has been very concerned with FASD for a number of years.

NCWT held a seminar last year titled "Our Children – Our Future" and a guest speaker Vicki Russel from DEN (Drug Education Network) explained the realities of this Disorder. We have also put motions to the National Conference of NCWA suggesting rasing the drinking age. Notices on the adverse side effects of alcohol should also be placed on alcohol containers. It is pleasing that legislation will be adopted where these warning will be placed on drink containers in the future. NCW CTI would also like to see changes to hotel/clubs hours of operation, to generally reduce the amount of alcohol consumption and its adverse effects.

FASD is particularly insidious in that the condition once contracted is permanent although in varying levels thus preventing that person leading the life he/she would have expected to lead. It is not curable, however early diagnosis and appropriate interventions can make an enormous difference to the life of the person with the disability.

It is also a drain on community resources which is ongoing during the recipient's entire life. The drain is on the medical services and also because such a large proportion of the prison population suffers from FASD the prison services and it is also a drain on mental health services.

If the numbers who suffer with this condition were reduced it would be a huge financial saving to the community.

It is imperative that education begins in schools to inform students, particularly girls of the pitfalls when alcohol is consumed in the early stages of pregnancy. Emphases should be on the consumption of alcohol should a pregnancy be being planned and in particular if there is a chance of an unplanned pregnancy. Education should include the full range of symptoms and side effects of FASD and with emphasis on the permanent effect on the victim's future.

There appears to be conjecture on the amount of alcohol that can be consumed without harming the foetus but to be on the safe side no alcohol should be consumed.

Many women who think that because statements such as "lack of clear evidence of the risks associated with drinking alcohol when pregnant" think it is safe to drink alcohol.

Well researched evidence is clear "Alcohol stays in the amniotic fluid for a long time" Even moderate maternal drinking can cause molecular changes in the foetal brain that affect its ability to learn and remember as an adult.

It was in 1899 a Liverpool physician William Sullivan who gave the first scientific study into the effects of alcohol on foetal and infant development.

Then in 1973 Dr. Sterling K Clarren and his colleagues at the Paediatric Department of the University of Washington School of Medicine in Seattle studied the effects of alcohol intake by the mother on the new born baby and called this pattern "foetal alcohol syndrome".

Scientists know that alcohol wreaks its damage on the foetus by crossing the placenta and entering the foetal circulation. Because the foetus lacks an enzyme known as alcohol dehydrogenase, which is responsible for metabolizing alcohol, the level of alcohol builds up in the foetus particularly in the brain and causes havoc.

At the National Conference on Foetal Alcohol Spectrum Disorder held in Launceston in 2007, Dr. John Whitehall Director of Neonatology, Townsville Hospital. Queensland spoke of the damage alcohol causes to the neurons in the brain immediately it goes through the placenta and the interference it causes as it migrates to the developing baby. "We are sacrificing children to a life of anger, maladjustment, to potential violence, to potential criminal conduct, when in fact the World Health Organization stresses foetal alcohol syndrome is completely preventable and yet is the leading cause of intellectual disability".

The Australian Medical Association said "There is enough evidence to support avoiding alcohol altogether during pregnancy". Parents suffer despair and heartbreak because they were not informed of the consequences of drinking alcohol. Dr. Edith Collins, Children's Medical Research Foundation stated "If you are thinking of having a baby, you should regard yourself as pregnant and not drink alcohol".

Public education campaigns warning about the impact of alcohol on the unborn child should be available. These campaigns should target young/teenage girls in schools and also young women perhaps through leaflets available extensively including doctor's surgeries, libraries. Television is also a medium that could be utilised.

Dr. Maita Aronson of Sweden carried out a successful public Information Campaign in Gotenborg over several years and the number of alcohol effected babies dropped dramatically.

Recommendations

1. The Federal Government to make adequate monies available to fund a comprehensive education program on FASD. One benefit would be a reduction in costs for medical care in the long term.

2. An appropriate educational campaign targeted at girls/teenagers in high schools to warn of the dangers of alcohol in pregnancy.

3. A Television campaign also targeting girls/teenagers. Advertisements also can be screened at theatres.

4. Leaflets to be widely distributed and available in public places including schools, Medical surgeries, Hospitals, Medicare offices, Libraries, Neighbourhood houses, churches, sporting complexes etc. on the dangers of FASD.

5. Particular assistance needs to be continued to Aboriginal communities due to their special circumstances with alcohol consumption.

6. It is also imperative that this condition is initially diagnosed correctly by the medical profession so steps should be taken to ensure the correct diagnosis has been made. Specialist Clinics may need to be established.

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