



House of Representatives Inquiry into Fetal Alcohol Spectrum Disorder:

WA Health Country Health Service- Kimberley Population Health Unit Response

Background

The Standing Committee on Social Policy and Legal Affairs is to inquire into and report on developing a national approach to the prevention, intervention and management of FASD in Australia, with particular reference to:

- o **Prevention strategies** – including education campaigns and consideration of options such as product warnings and other mechanisms to raise awareness of the harmful nature of alcohol consumption during pregnancy,
- o **Intervention needs** – including FASD diagnostic tools for health and other professionals, and the early intervention therapies aimed at minimizing the impact of FASD on affected individuals, and
- o **Management issues** – including access to appropriate community care and support services across education, health, community services, employment and criminal justice sectors for the communities, families and individuals affected by FASD

SUBMISSION

FASD is an umbrella term which describes a range of alcohol related disorders. FASD includes FAS, Alcohol related birth defects and Alcohol related neuro-developmental disorders. It is entirely preventable and children affected by FASD suffer a lifetime of varying disabilities. These children and adults require ongoing support with education, housing, employment and other community services. Early diagnosis is essential for early intervention programs to be commenced and to assist carers in their management of specific behavioral problems. Assessment and referral to appropriate services can assist a child to improve their ability to function independently. Early intervention strategies should be commenced in early childhood in order to reduce the effects of long term disabilities.

PREVENTION IS KEY AND REQUIRES SOCIAL, POLITICAL, AND ECONOMIC CHANGES

Prevention Strategies- Education

- o A national education campaign is required to educate the whole community about the dangers of drinking alcohol in pregnancy. The campaign should address teenage binge drinking issues as many teenage pregnancies result from this behavior- and this is also the crucial time in a fetus's development when alcohol can damage the developing brain. Therefore national media campaigns should target teenagers to warn them of the associated dangers of binge drinking if pregnant.
- o Prevention strategies and education should also target men -as they can often influence their partner's behavior during pregnancy and can support their partner by also abstaining from alcohol during the pregnancy.
- o A whole of community responsibility approach is needed to highlight the role of community in raising awareness around the dangers of alcohol in pregnancy. This is especially relevant in Aboriginal communities where the sense of community and culture is strong.

- o Education to both the general public and all health professionals is required. All doctors and midwives need to be giving the same messages as per the NHMRC guidelines that: **no level of alcohol is safe during pregnancy**. If there are differing messages from the medical and health professionals then women will continue to be confused as to whether or not it is safe to drink alcohol when they are pregnant.
- o All Health professionals need to be asking women at antenatal appointments if they are drinking alcohol and given information on the associated dangers of alcohol on their unborn child.

ALL HEALTH PROFESSIONALS HAVE A MAJOR ROLE IN GIVING WOMEN CONSISTENT AND ACCURATE INFORMATION - NOT TO DRINK ALCOHOL DURING PREGNANCY

- o Messages on harmful affects of alcohol on a fetus should be specific to include that damage to a growing fetus is permanent. This is to dispel any misunderstanding that affects of alcohol on a baby are treatable - which is what some mothers currently believe. Damage to a fetus is totally preventable – this damage is lifelong and permanent and this should be emphasized.
- o Pre pregnancy education for couples planning pregnancy should be encouraged and provided by health services. Pre pregnancy clinics can advise couples about the dangers of alcohol and that often fetal death, stillbirth and prematurity can result if a woman drinks alcohol in pregnancy.
- o School aged children should be taught (before teenage years) the dangers of alcohol to the fetus in pregnancy via the school curriculum and via programs such as 'Core of Life'. Research in Qld (Lorian Hayes - 'Children of the grog') has shown that drinking alcohol begins as young as 7-8yrs in some communities.
- o Education on the dangers of binge drinking is required. Many teenage pregnancies result from binge drinking episodes and often the mother maybe unaware of her pregnancy whilst binge drinking in the first 6-8 weeks, which is a crucial time in pregnancy in relation to damage to neuro developmental pathways.
- o Warnings on the dangers of drinking alcohol in pregnancy should be attached to all alcoholic beverages. All health promotion messages should be developed in relation to differing cultural groups across Australia.
- o Interagency approaches to health education programs should be encouraged across all government and Aboriginal health services and NGO's. This interagency approach leads to more consistency with education and awareness in communities and encourages collaboration in projects and resource sharing.
- o Reasons why women drink should be investigated -especially in Aboriginal communities. Additional alcohol and drug counseling services are required in remote areas. Women may drink because of ; physical or sexual abuse, grief, addiction, low self esteem, fear, rape, shame, loss of culture, and many drink to get drunk and numb their emotions/ feelings. Alcohol use, unplanned pregnancies and binge drinking are common in some Aboriginal communities among women who are vulnerable.
- o Education on the affects of alcohol on a growing fetus needs to be simple and specific so it can be understood by all ages and educational backgrounds and cultures.
- o Kimberley Population Health Unit has recently supported a funding proposal submission from Goolarri media to FARE for a FASD awareness media campaign in the Kimberley via TV and radio

ads. This campaign will target Aboriginal communities in the Kimberley and Pilbara and raise awareness of the dangers of drinking alcohol in pregnancy. The aim of the campaign is to increase awareness of the issues surrounding Foetal Alcohol Spectrum Disorder (FASD) and to provide a resource (DVD) for health professionals to use.

INTERVENTION

The Aim is to identify and diagnose children/ babies affected as early as possible so appropriate strategies and treatment is started as soon as possible - prior to school entry

- The Development of a national diagnostic tool is required along with education for health professionals in its use. Consideration for a specific Aboriginal diagnostic tool should also be investigated.
- Aim is to identify children/ babies affected as early as possible prior to school entry so appropriate strategies and treatment is started as soon as possible. A team approach to diagnosis and treatment is required to include allied health and child clinical psychologists and pediatricians.
- Babies could be identified during pregnancy by midwives who identify that a mother is drinking alcohol at antenatal visit (this already occurs in the Kimberley via the Kimberley ante natal record and questions on alcohol and smoking are repeated at each ante natal visit). Brief intervention strategies can then be commenced and appropriate referral to alcohol rehabilitation services and/or counseling can be sought. Intervention for dangers to an unborn fetus can be conducted as a joint approach between Department of Child Protection and Health where case conferencing and family meetings occur with service providers and the parents of the unborn baby where support is given/sought to assist the mother and possibly father to stop drinking alcohol for the duration of the pregnancy.
- It is known that often a mother who is drinking alcohol also has a partner who drinks to excess. Rehabilitation centers for alcohol addiction should prioritize pregnant women and allow for family to stay.

MANAGEMENT

Management should take an inter-sectorial approach covering health, education, employment and the justice system.

- Australia requires a specialized diagnostic team/centre for health professionals and public to access information on diagnosing and treatment strategies for this preventable condition. Ideally specialized teams would undertake diagnosis and management of FASD, and a case coordinator would be required.
- FASD should be recognized as a disability in Australia and therefore be included in disability service provision and funding.
- Cognitive behavioral therapies and behavior modification programs, psychotherapy, remedial education often help individuals with FASD. Family therapy, and support for carers is also required as some children with FASD end up in foster care situations.

- Programs that assist FASD individuals to gain employment suited to their behavioral needs are required to work with individuals in helping them maintain employment and assist with finance management and housing etc. Few FASD sufferers can live and work independently.
- Individuals with FASD often go on to abuse alcohol and drugs themselves. Therefore the diagnosis of FASD should be considered when health professionals are treating individuals with alcohol or drug issues.
- Additional Mental health staff are required to assist adults with FASD in relation to depression, self injury and suicide (which is unacceptably high in the Kimberley) as this may be a result of adults living with the effects of FASD but being unaware of this as a reason for their behavioral issues or depression (i.e. they remain undiagnosed).
- Education for police and justice services is required as research in the USA shows that up to 50% of young offenders have FASD. Diagnosis and Intervention and management strategies are required in the justice system so these individuals can be treated and managed appropriately.
- Education aimed at child protection services staff is also required as many children end up in foster care situations – especially if parents continue to drink alcohol and a child's health and safety is at risk.

Some Kimberley communities are remote and isolated and unable to access appropriate treatment and support services for families with children who have FASD.

Extra health funding will be required in the Kimberley for;

- Additional staffing positions due to increased recognition and diagnosis. Extra positions are required in mental health, alcohol and drug counselling services, community midwifery, child health, allied health- OT, physiotherapy, speech pathologists and social work. Also staff trained in child and adolescent psychology.
- Family support staff to assist parents and carers with children suffering affects of FASD.
- Additional community midwives in remote areas of the Kimberley are required to deliver education and provide such clinics in order to run a program (i.e. Core of Life) which educates teenagers about the importance of maternal health and its affect on their babies.
- Housing is in short supply within the Kimberley region. Extra funded positions will require construction of housing in the remote townships
- Construction of additional office space. Currently offices used by health in remote Kimberley are full to capacity
- An integrated patient electronic health system across the region so information can be shared between locations due to high movement of the local population around the Kimberley
- Training current staff in screening and appropriate management
- Development of culturally appropriate health promotion and resource material

Useful links - <http://alcoholpregnancy.childhealthresearch.org.au/>

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