THE MESSAGE

Drinking alcohol during pregnancy is gambling with a child’s life. When a mother takes a drink, so does her unborn baby or her nursing infant. Even one drink can cause developmental disorders in a young child.

Most women know that drinking alcohol during their pregnancy can hurt their unborn child. However, pregnant women may continue to drink alcohol for many reasons: because they don’t realize they are pregnant yet, because they don’t understand that a developing child’s liver has trouble metabolizing even a small amount of alcohol or because they are having trouble giving up alcohol.

Life-limiting Fetal Alcohol Spectrum Disorders are still a problem around the world, despite the fact that they are 100 percent preventable.

THE DIAGNOSIS

Fetal Alcohol Spectrum Disorders (FASD) are associated with the consumption of alcohol. As the average daily consumption of alcohol increases, so will the possible defects. Therefore symptoms will range widely and will commonly go unnoticed and undiagnosed at birth, but have lifelong implications.

Here are the varying diagnoses that fall under the umbrella of FASD.

Fetal Alcohol Syndrome (FAS): means the child is born at a low birth weight, reduced length, an abnormally small head and brain, central nervous system damage, behavioral problems and possible malformation of organs and physical features. Mentally, the child has an extremely low intelligence.

Fetal Alcohol Effects (FAE): means that some symptoms of FAS are present but not all.

Alcohol Related Birth Defects (ARBD): describes the physical defects linked to prenatal alcohol exposure, including heart, skeletal, kidney, ear and eye malformations.

Alcohol Related Neurodevelopment Disorders (ARND): indicates that the child has cognitive or functional impairments, including small head and brain size, structural brain abnormalities and a pattern of behavior and mental
THE CHALLENGE

The challenge for Kiwanis clubs is threefold:

- To ensure that community efforts to combat fetal damage due to alcohol are well coordinated
- To build public awareness
- To support women who want to stop drinking

Coordinating efforts

The first step in an alcohol awareness campaign is a meeting with the agencies that are already involved—or would like to get involved—with this issue. This may include the health department, social service providers, organizations that address alcoholism and alcohol support programs, Alcoholics Anonymous, rehabilitation centers, the nearest March of Dimes chapter, parents of FAS children, school counselors and owners of local bars and liquor stores.

The first step for this coalition may be to study the frequency of FASD among infants and other age groups in the community. This will indicate the severity of the problem and establish a basis for evaluating the impact of education and intervention efforts. This study should result in a sustained effort to identify newborns with possible FASD.

With this new information, the group should be able to define the target audience of the awareness campaign—the women who are drinking during pregnancy. The group may also want to explore the potential for setting up a screening program to identify pregnant women with alcohol problems who should be encouraged to seek help to stop drinking.

Building public awareness

Events

Alcohol Awareness Month. In the United States, April is designated Alcohol Awareness Month. Keep this in mind as your club schedules events and campaigns.

International FASD Awareness Day. September 9th at 9:09 a.m., the ninth minute of the ninth hour of the ninth day of the ninth month of the year, around the world bells are rung, lullabies are sung and stories are shared, all in an effort to remind pregnant women of the dangers of drinking alcohol. Your club can plan an event on this day using resources available at fasday.com.

Free milk for pregnant women. Encourage local bars and restaurants that serve alcohol to offer free milk (or fruit juice) to women who are pregnant. Create a poster or table card for bars to use in educating their clientele. Distribute a flier that lists the participating establishments. Communicate the message that they are proud to help pregnant women have healthy babies.

Companies care program. Arrange for local experts to talk at employee meetings of companies about the importance of avoiding alcohol during pregnancy. Use representatives from the public health department, March of Dimes and family and child services departments.

Print materials

The sample materials in the back of this bulletin and the list of materials available from various organizations provide a range of print, audio and video materials that your club can use. Here’s how to integrate these materials into your campaign.

Pamphlets. Produce or purchase in quantity educational pamphlets to leave at clinics, doctors’ offices, high schools, college campuses, the health department, drug stores and liquor stores. To print enough to really cover the community, offer to give credit on the pamphlet to a printer who will donate the printing. Make color copies of the FASD brochure available at www.KiwanisOne.org/ycpo.
Public service ads. Send or e-mail prepared ads to local newspapers and ask them to print them as a public service. Better yet, ask the companies that are major advertisers in the paper to sponsor your ad.

Press releases. Send out press releases to every news source in the community to tell what your needs survey discovered—and include information on FASD.

Op-ed pieces. Opposite the editorial page is a page where opinion pieces are printed. Have one of the medical experts in your coalition write an op-ed piece and deliver it to the person in charge of the editorial and opinion pages.

Posters. Sponsor a local poster contest (or get the local newspaper or printer to sponsor the contest) for the best poster on not drinking while pregnant. Put up the winning posters at clinics, doctors’ offices and everywhere liquor is sold.

Radio

Public service announcements (PSAs). Write short announcements that explain why pregnant women shouldn’t drink. Design them to be read in 10, 15, 20 and 30 seconds. Send copies to local radio stations and ask that they be read. Or, you can purchase taped PSAs and send these to local stations. Ask that the station commit to playing the tape at specific times.

Interviews. Persuade the most articulate members of the coalition (a doctor, an expert on mental retardation and alcoholism, an adoptive parent of an FAS child) to agree to be interviewed. Then, contact the news departments or talk show hosts about doing a series of interviews to increase awareness of the dangers of drinking while pregnant.

Call-in shows. Urge a station with a call-in show aimed at women to use one of the medical experts from your coalition or the caregiver of an FAS child as a featured guest.

Video/DVD

Donate videotapes. Purchase educational videos and donate them to clinics (where they can be played in the waiting room), child birth educators, schools and libraries.

Cable broadcasts. Urge the local television franchise to run a video about Fetal Alcohol Syndrome and Fetal Alcohol Effects on the local access channel.

Public service announcements (PSAs). Visit local stations with a PSA on avoiding alcohol while pregnant. Urge them to dub their own copy from your master and play the PSA regularly.

Interviews. Urge the local news station’s medical reporter or the host of the local video magazine show to interview one of the spokespeople for your coalition.

BY THE NUMBERS

FASDs are 100% preventable.
The safe number of alcoholic drinks a pregnant woman can consume: 0

Prenatal alcohol exposure has been linked to more than 60 disease conditions, birth defects and disabilities.

Each year in the United States as many as 40,000 babies are born with an FASD.

Approximately 20% of Canadian school age children are receiving special education services, most for conditions of types known to be caused by prenatal alcohol exposure.

Sources:
FASLink Fetal Alcohol Disorders Society
www.acbr.com/fas/ and
www.fasdcenter.samhsa.gov/
Supporting pregnant women

Awareness is not enough.

Women need support. Every pregnant woman needs to have prenatal care. Those who are alcohol dependent need support to avoid drinking, and the families of pregnant women who won’t face their drinking problem may need intervention.

Free prenatal care

The first step to a healthy pregnancy is to get prenatal care—regular visits to a doctor. Doctors give advice on how to have healthy pregnancies (no alcohol is one piece of advice) and address health problems that may develop. Women who cannot afford these visits must have access to free prenatal care.

If a free clinic for prenatal care does not exist in the community, a coalition can develop one, using contributed resources. Several doctors will need to volunteer a few hours each week. A hospital or social service agency can contribute material and space. Recordkeeping can be done by volunteers and your Kiwanis club can provide lights, waiting room furniture and educational materials.

If a free clinic already is in operation, the club may need to publicize its location and service hours and/or offer transportation to it.

Telephone help line

A telephone help line for pregnant women can answer all kinds of questions while promoting healthy pregnancies. Besides offering advice on proper nutrition and the dangers of alcohol, cigarettes and drugs, the help line can provide moral support while women avoid alcohol. Volunteers will need training to give standard advice and referrals to counselors who can help in a crisis. The help line can also connect women to other needed resources.

Resource sheet

Create a resource sheet of counseling and therapy programs available for those who need assistance to stop drinking. The list should also include help for family needs and how to assist a woman who denies she has a problem.

Home visitation program

Women are most likely to learn from and follow the advice of someone like themselves. That is why the home visitation and resource mother programs are so successful. These programs train volunteers from the neighborhood to visit pregnant women and make sure they are doing the right things to ensure a healthy pregnancy. As trust develops, the home visitor can help the expectant negotiate the complexities of the health care system and perhaps secure financial assistance. Check to see if there is a “Mentor Mother” program in your area. Some public health departments have outreach mothers programs. For more information on these programs, read the Kiwanis International service bulletin on “Home visitation” available at www.kiwanis.org/ycpo.
Sample news release

For immediate release

For more information, contact:
(insert name of local club contact)
(insert phone number or e-mail address)

“Alcohol is killing and maiming our babies,” says pediatrician Shirley Handel, spokesperson for the Priority One Committee of Milkwood. Six children born in Milkwood County over the past 12 months have birth defects that were caused by their mothers’ consumption of alcohol during pregnancy, according to Dr. Handel. And alcohol consumption was linked to three pregnancies that did not come to term.

All of these problems were preventable, according to a report written by the Priority One Committee and presented by Dr. Handel. “Alcohol cannot cause birth defects if pregnant women don’t drink it,” says Dr. Handel.

Women in Milkwood County need to be better educated about drinking alcohol during pregnancy, notes the report. That is why it recommends development of an education and outreach campaign to alert all women of childbearing age that alcohol should be avoided during pregnancy.

“Anyone who wants to help in this campaign should come to the committee’s next meeting,” urges Dr. Handel. It will meet at Wales Memorial Hospital on Tuesday, November 8, at 7:00 p.m. The committee includes representatives from the Milkwood Kiwanis Club; March of Dimes; Alcoholics Anonymous; Healthy Mothers, Healthy Babies; Obstetrics and Pediatrics Depts. of Milkwood Hospital; and Milkwood Counseling.

The Kiwanis Club of Milkwood developed this project as part of it Young Children: Priority One efforts that address the needs of young children, prenatal through age 5.
Sample radio public service announcements

10 seconds
Drinking while pregnant can damage your unborn baby. Play it safe. Don’t drink while you’re pregnant.
A message from this station and the Milkwood Kiwanis Club.

10 seconds
If you’re pregnant and you drink alcohol, you’re gambling with the life and health of your unborn child. So, drink milk or juice for your baby.
A message from this station and the Milkwood Kiwanis Club.

15 seconds
You wouldn’t give your newborn baby a beer. But while you’re pregnant, any alcohol you drink reaches your baby a minute after you swallow. So don’t swallow any at all.
A message from this station and the Milkwood Kiwanis Club.

20 seconds
Imagine a 10-year-old child the size of a 6 year old. Imagine that she has an IQ of 65. Imagine that she’s your child. Now, imagine someone asking, “Why did you drink before she was born?”
If you’re pregnant, don’t drink alcohol.
A message from this station and the Milkwood Kiwanis Club.

30 seconds
If you’re pregnant and you drink alcohol, so does your unborn child. But your baby’s body isn’t old enough to cope. A drink or two each day could mean lower birth weight or growth problems for your baby. And enough alcohol to give you a hangover could leave him brain damaged. So, remember, every drink is for both of you. And your baby’s way too young to start.
A message from this station and the Milkwood Kiwanis Club.
Fetal Alcohol Syndrome (FAS) and Fetal Alcohol Spectrum Disorders (FASD) are the terms used to describe a combination of physical and mental birth defects that may develop when expectant mothers drink alcohol during pregnancy. Alcohol is one of the few known causes of birth defects that produce retardation. It is certainly **100 percent preventable**.

Babies born with FAS or FASD are abnormally small at birth and usually do not catch up as they get older. In most cases they have small, widely spaced eyes, a short, upturned nose and small, flat cheeks. They may suffer from a variety of organ malformations, particularly of the heart. Most babies with FAS/FASD have small brains with some degree of mental retardation. Many are poorly coordinated, have short attention spans and exhibit behavioral problems.

Fetal Alcohol Syndrome was first identified in 1973. Cases of FAS have now been reported in most countries and among all social-economic groups. In the United States, as many as 40,000 babies are born with an FASD.

Researchers don’t know how alcohol causes damage to the fetus. They do know that alcohol passes directly through the placenta to a fetus soon after being consumed by the mother. A baby gets as much alcohol as a mother drinks. However, because an unborn baby’s liver is immature, it cannot break down the alcohol. It remains in the child’s system until it can move back into the mother’s bloodstream to be oxidized. As a result, the alcohol level in the fetus’s blood can be higher than in the mother’s blood.

Drinking alcohol can also increase the risk of other problems. Heavy drinkers are two to four times more likely to have a miscarriage between the fourth and sixth months of pregnancy. Heavy drinkers are two to three times more likely to lose their babies during the perinatal period.

Fetal Alcohol Syndrome is completely preventable if a pregnant woman does not drink. Women planning a pregnancy should stop consuming alcohol before attempting to conceive and should abstain throughout pregnancy and nursing. Women who drink and have unplanned pregnancies should abstain as soon as they suspect they are pregnant. Heavy drinkers should avoid pregnancy until they are certain that they can abstain from alcohol for the entire term from conception to birth and through nursing.
The following organizations have educational materials on Fetal Alcohol Spectrum Disorders. Please contact one or all of these organizations for additional information.

**The Arc of the United States**
1660 L Street, NW
Suite 301
Washington, DC 20036
202-534-3700
800-433-5255
Fax: 202-534-3731
www.thearc.org

*Brochures, printed materials, FAS kits, videos*

**Center on Alcoholism, Substance Abuse and Addictions (CASAA)**
2650 Yale, SE
MSC11-6280
Albuquerque, NM 87106
505-925-2300
Fax: 505-925-2301
E-mail: fas@casaa.unm.edu
cassa.unm.edu

**March of Dimes Foundation**
National office
1275 Mamaroneck Ave.
White Plains, NY 10605
914-997-4488
www.marchofdimes.com

**Milner–Fenwick, Inc.**
119 Lakefront Dr.
Hunt Valley, MD 21030-2216
800-432-8466
Fax: 410-252-6316
patiented@milner-fenwick.com
www.milner-fenwick.com

*Videos*

**National Health Information Center**
PO Box 1133
Washington, DC 20013-1133
301-565-4167
800-336-4797
Fax: 301-984-4256
E-mail: healthfinder@nhic.org
www.health.gov/nhic
www.healthfinder.gov

*Videos, posters, T-shirts, books, bumper stickers, brochures*

**National Organization on Fetal Alcohol Syndrome (NOFAS)**
1200 Eton Court, NW
Third floor
Washington, DC 20007
202-785-4585
800-66NOFAS
Fax: 202-466-6456
www.nofas.org

*Books, brochures, videos*

**Substance Abuse and Mental Health Services Administration’s Health Information Network**
PO Box 2345
Rockville, MD 20847
877-726-4727
Fax: 240-221-4292
E-mail: SHIN@samhsa.hhs.gov
www.samhsa.gov/shin

*Pamphlets, fact sheets, videos, posters*

**Wisconsin Clearinghouse for Prevention Resources**
University Health Services,
UW-Madison
333 East Campus Mall
Suite 8104
Madison, WI 53715-1381
608-262-9157
800-248-9244
Fax: 608-262-6346
wch.uhs.wisc.edu

*Brochures, pamphlets, fact sheets*

**Other Web sites to consult**

**American Academy of Pediatrics**
www.aap.org

**Centers for Disease Control and Prevention**
www.cdc.gov

**Fetal Alcohol Disorders Society**
www.faslink.org

**FAS World**
www.fasworld.com
(international search)

**NECF Child Abuse Prevention Services**
www.preventchildabuse.com

**Public Health Agency of Canada**
www.ndss-snsd.gc.ca

**UNICEF**
www.unicef.org

**U.S. Department of Health and Human Services**
www.hhs.gov