

ABBREVIATED CONSENT CALENDAR FORMAT

W. b. a.

Memorandum Date: July 27, 2010
Order Date: September 1, 2010

TO: Board of County Commissioners

DEPARTMENT: Health & Human Services

PRESENTED BY: Rob Rockstroh

AGENDA ITEM TITLE: ORDER _____ / IN THE MATTER OF PROCLAIMING SEPTEMBER 2010 AS NATIONAL ALCOHOL AND DRUG ADDICTION RECOVERY MONTH AND SEPTEMBER 9 AS NATIONAL FETAL ALCOHOL SPECTRUM DISORDER AWARENESS DAY.

I. MOTION

In the Matter of Proclaiming September 2010 as National Alcohol and Drug Addiction Recovery Month and September 9 as National Fetal Alcohol Spectrum Disorder Awareness Day.

II. DISCUSSION

A. Background / Analysis

The 21st annual National Alcohol and Drug Addiction Recovery Month will be observed during September 2010. Lane County has joined with the state and national celebrations of Recovery Month in past years. Each year we have chosen to focus on an emerging issue or program in Lane County that connects with the national theme. The national theme is "Join the Voices for Recovery; Now More Than Ever" and the national focus this year is raising awareness about the increasing level of stress in society and the impact it has on addiction. Stress and other external circumstances can lead to the onset or relapse of addiction. In Lane County this year we have chosen to focus upon women and the possible impacts of alcohol and other drug use to relieve stress. Specifically, we are highlighting Fetal Alcohol Spectrum Disorder (FASD).

While both men and women are vulnerable to stress, their use of alcohol and other drugs to relieve the stress does not impact them equally. A woman's body has more fat and less water than a man's. When a woman drinks, the alcohol is less diluted and becomes more highly concentrated in her blood. Women who drink heavily face greater health risks than men who drink heavily. They are more prone to liver disease, heart damage and brain damage. Studies show that women with alcoholism are up to twice as likely as men to die from alcohol-related causes such as suicide, accidents and illnesses.

A recent study found that the effects of parental alcohol-dependence on a child's psychopathology can be different, depending on both the gender of the alcohol-dependent parent and the gender of their child. Peter Nathan of the University of Iowa said, "The parent-child influence appears strongest in the female parent-female child pairing, where it is most influential in yielding heightened risk for mania, nicotine dependence, alcohol abuse and schizoid personality disorder. Peter Morgan of Yale University pointed out that "...these findings indicate that in a family with an alcoholic mother, daughters may be at greater relative risk for developing psychiatric problems. Such information could be used to identify patients at potentially greater risk for certain disorders and could be used to encourage reduction of substance use in parents."

However, for women, the impact of alcohol use can have lifelong effects at any degree of use if the woman is pregnant. Alcohol is a substance that can harm the development of a fetus. When a pregnant woman drinks alcohol, the alcohol crosses the placental barrier and enters the bloodstream of the fetus. **There is no known safe level of alcohol use during pregnancy**, so pregnant women or women who may become pregnant should not drink any alcohol from conception to birth.

There is no known time during pregnancy when alcohol use is safe. The most critical time during the development of the fetus may be the third week post conception when the central nervous system and heart are developing. Most women are unaware at this stage that they are pregnant. This is especially true given that half of all pregnancies in the United States are unplanned. Pregnant women and women planning to get pregnant should not drink alcohol.

September 9, 2004 was the day that Congress established Fetal Alcohol Spectrum Disorder (FASD) Day. FASD is an umbrella term that describes a range of physical and mental birth defects that can occur in a fetus when a pregnant woman drinks alcohol. The goal of FASD day is to decrease the incidence of FASD and improve the quality of life among individuals and families who have been affected by FASD. FASD is a leading cause of mental retardation in America. **It is also 100 percent preventable.**

The Scope of the Issue -

FASD lasts a lifetime and while some characteristics may appear as physical changes (hearing or visual impairments and other physical abnormalities), there may be no visible indicators of a disability. Disabilities may include attachment disorder, impaired motor skills, learning disabilities, problems with reasoning and judgment, inability to discern consequences of actions, memory problems, Attention Deficit Hyperactivity Disorder (ADHD), delayed development. Consequently, FASD may be incorrectly labeled as a behavior disorder. Children with FASD may have problems in school and an inability to achieve independence.

Approximately 48,000 babies are born each year in Oregon. Approximately nine out of every 1,000 are diagnosed to have FASD. Many cases go undiagnosed because the effects are not readily apparent.

Sixty percent of individuals with FASD will end up in an institution (mental health facility or prison). It is estimated that almost 70 percent of the children in foster care are affected by prenatal alcohol exposure in varying degrees. The estimated annual cost of FASD in Oregon is \$83.8 million.

FASDs last a lifetime – there is no cure. But if children with an FASD are identified early, they can receive services to help increase their well-being.

Interventions at Many Levels –

While any woman can be at-risk of having a child with FASD, the greatest predictor is if she already has one child with the disorder. Stopping the use of alcohol is difficult for many women to do alone. A study funded by SAMHSA (Substance Abuse and Mental Health Services Administration) found that mental illness treatment and large social support networks can provide help for women identified as at increased or higher risk.

Universally, increased public knowledge about FASD will help; general education, alcohol warning labels, posters, pamphlets, billboards, public service announcements, media attention.

Family and friends can help by sharing information about FASD and the importance of not drinking if pregnancy is possible. They can model safe behavior by not using alcohol and other unsafe intoxicants themselves. They can encourage her to talk about problems and stresses in her life that may lead her to drink. They can help her find treatment if she cannot stop drinking.

Health professionals should inquire routinely about alcohol consumption by women of childbearing age, inform them of the risks of alcohol consumption during pregnancy and advise them not to drink alcoholic beverages during pregnancy. They should also encourage the use of contraception for sexually active clients.

Policy makers can help prevent FASD and support affected families by introducing and supporting legislation that provides for:

- Mandates or initiatives to encourage the cessation of drinking while pregnant;
- Education in primary and secondary schools about the risks of drinking while pregnant;
- Development of the necessary screening, analysis and treatment procedures for those with FASD who enter the foster care, juvenile justice, or adult criminal justice system;
- Intervention training for professionals who work in high risk settings such as clinics, addiction centers, psychiatric wards, orphanages and jails;
- Creation and dissemination of avenues through which individuals with FASD will have access to quality health care;
- Ensuring teacher training and access to special education in and out of school for those with learning disabilities that are associated with FASD; and,
- Creation and implementation of vocational and living support services for individuals with FASD, including psychological and physical care, when needed.

In Lane County, there are multiple agencies working to reduce the incidence of in-utero alcohol exposure.

The Healthy Babies, Healthy Communities initiative has identified alcohol use both before and during pregnancy as one of the issues to address in increasing the health and well-being of both women and children in Lane County and reducing our high rate of fetal-infant mortality.

The University of Oregon's FEAT (Family Early Advocacy and Treatment) project has been active in developing strategies to address the needs of substance-exposed newborns. They have been successful in piloting two key prenatal and postnatal support programs:

- A universal prenatal screening, brief intervention and referral pilot, stressing the need to screen ALL women for alcohol use, supporting them to abstain from drinking during their pregnancy, and facilitating their access to community resources.
- FEAT Family Advocate services, providing intensive home and community-based services to pregnant women and new moms with substance abuse issues, including alcohol dependence. Family Advocates are available for on-call services and can meet with women at times and locations of their choice. Because Family Advocates ideally engage women in treatment services and other support services prior to the birth of their baby, many women who have received these services have been able to reduce their stress, be supported in their recovery and avoided involvement with the Child Welfare system at the time of the birth of their babies. In many cases, women are referred to other community resources such as the Relief Nursery and Willamette Family, Inc. to receive more extensive support.

There are many reasons to celebrate a woman's recovery from addiction. Protecting their children from FASD is one that would be at the top of the list.

B. Recommendation

The Board of County Commissioners declares September 2010 as National Alcohol and Drug Addiction Recovery Month and September 9 as National Fetal Alcohol Spectrum Disorder Awareness Day.

III. ATTACHMENTS

Attachment A - Resources

Attachment B – Board Order

ATTACHMENT A

FASD Resources

Websites

Fetal Alcohol Spectrum Disorders Center for Excellence: fascenter.samhsa.gov

National Organization on Fetal Alcohol Syndrome (NOFAS): nofas.org

Centers for Disease Control & Prevention: <http://www.cdc.gov/ncbddd/fas/>

Oregon FAS Prevention Program (Dept. of Human Services):
<http://www.oregon.gov/DHS/ph/wh/fas/fas.shtml>

Lane County Prevention Website: <http://preventionlane.org>

Books/Print Resources

Fetal Alcohol Syndrome—A Guide for Families and Communities --- Ann Streissguth

Damaged Angels --- Bonnie Buxton

The Broken Cord --- Michael Dorris

The Best I Can Be—Living with Fetal Alcohol Syndrome Effects --- Jodee Kulp

Recognizing and Managing Children with Fetal Alcohol Syndrome/Fetal Alcohol Effects: A Guidebook --- Brenda McCreight, Ph.D.

THE BOARD OF COUNTY COMMISSIONERS, LANE COUNTY, OREGON

RESOLUTION:) IN THE MATTER OF PROCLAIMING SEPTEMBER 2010 AS
) NATIONAL ALCOHOL AND DRUG ADDICTION RECOVERY
) MONTH AND SEPTEMBER 9 AS NATIONAL FETAL ALCOHOL
) SPECTRUM DISORDER AWARENESS DAY.

WHEREAS, September 2010 is celebrated across the country as National Alcohol and Drug Addiction Recovery Month; and

WHEREAS, this year Recovery Month is raising awareness that the increasing level of stress in society can lead to drinking alcohol and using other drugs which contribute to the onset or relapse of addiction; and,

WHEREAS, the disease of addiction is disruptive to families and can have long-term effects upon the children especially when the child is exposed to alcohol prior to birth; and,

WHEREAS, alcohol is a substance that harms the development of a fetus and can cause Fetal Alcohol Spectrum Disorder (FASD); and,

WHEREAS, there is no known safe level of alcohol use during pregnancy and there is no known time during pregnancy when alcohol use is safe; and,

WHEREAS, FASD lasts a lifetime and disabilities may include physical impairments, attachment disorder, impaired motor skills, delayed development, learning disabilities; and,

WHEREAS, 60 percent of individuals with FASD will end up in an institution including mental health facilities or prisons and 70 percent of the children in foster care are affected by prenatal alcohol exposure in varying degrees; and,

WHEREAS, FASD is 100 percent preventable and while stopping the use of alcohol is difficult for some women to do alone, help is available; and,

WHEREAS, increased public knowledge about FASD and interventions with potential mothers at multiple levels including family, friends, schools, health professionals and policy makers will help; and,

WHEREAS, it is critical that we educate our community members that substance use disorders are treatable and preventable, and by educating ourselves and providing needed support, we can improve the quality of life for the entire community; and

WHEREAS, to help achieve this goal, the U.S. Department of Health and Human Services, the Substance Abuse and Mental Health Services Administration, the State of Oregon, and Lane County invite all residents of Lane County to participate in National Alcohol and Drug Addiction Recovery Month;

NOW THEREFORE IT IS HEREBY RESOLVED AND ORDERED, that the Lane County Board of County Commissioners proclaim the month of September 2010 as **National Alcohol and Drug Addiction Recovery Month** and September 9 as **National Fetal Alcohol Spectrum Disorder Awareness Day** and call upon all citizens to observe this month by educating ourselves about the disease of addiction, FASD and prevention in accordance with this year's theme, "**Join the Voices for Recovery: Now More Than Ever!**"

Effective this 1st day of September, 2010.

APPROVED AS TO FORM
Date 8/20/10 lane county
[Signature]
OFFICE OF LEGAL COUNSEL

William A. Fleenor, Chair
Board of County Commissioners