

CHOICES: a Powerful Preconception Intervention that Reduces the Risk of Alcohol-Exposed Pregnancy



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True primary prevention of
FASD
requires preconception
interventions

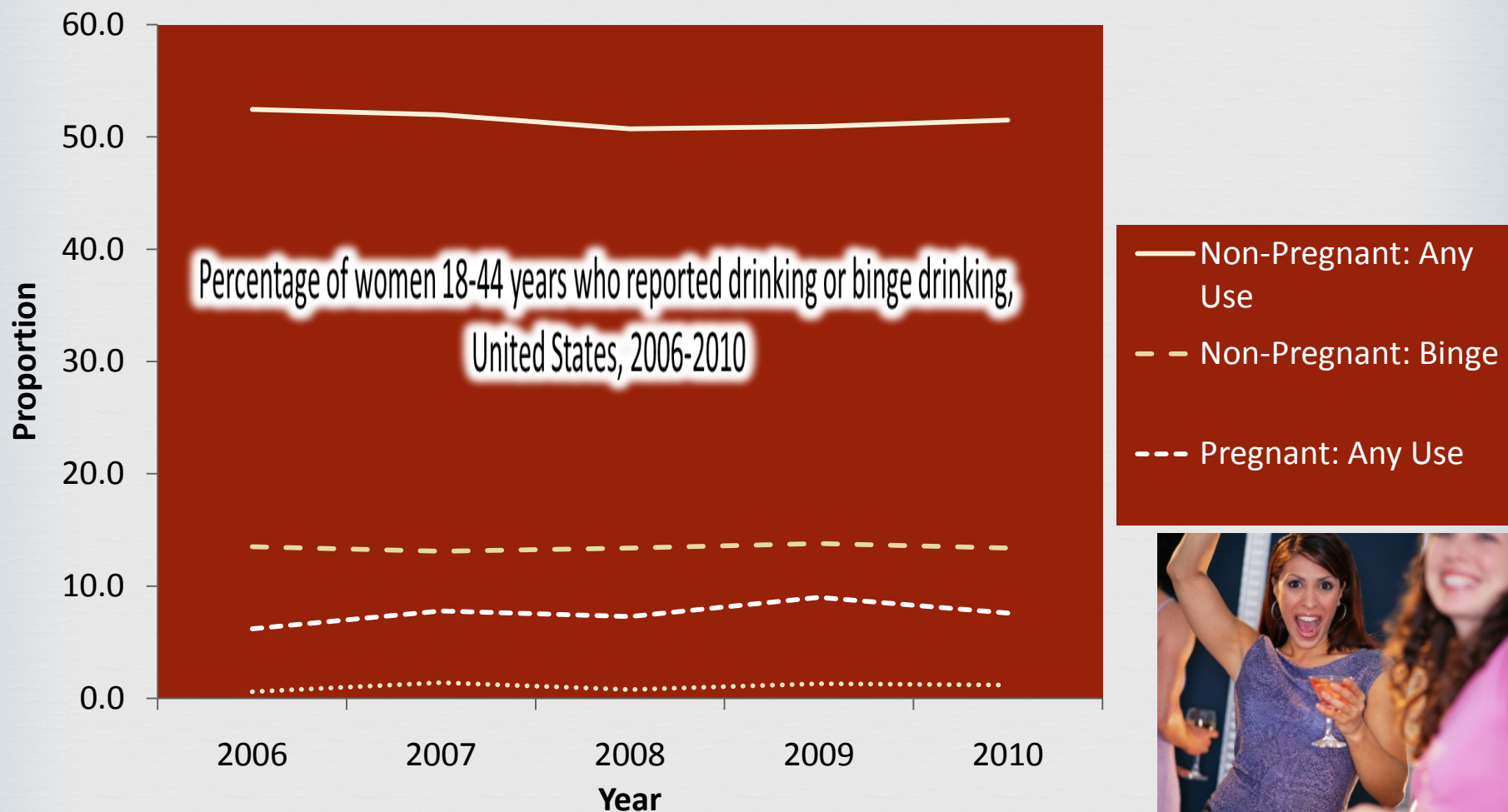
Why Preconception Prevention?



- Half of U.S. pregnancies are unintended
- In 2002, about 8% of U.S. women were sexually active, fertile, using no birth control, and at risk for becoming pregnant
- Finer, 2006
- Tsai, 2004



Ideal Time to Prevent an AEP



Binge drinking was defined as having four or more standard drinks on an occasion in the past 30 days

Source: Behavioral Risk Factor Surveillance System (BRFSS), 2006-2010



Preventing AEPs



- Avoid high-risk drinking, or abstain **and/or**
- Use birth control effectively
- U.S. Surgeon General's Warning 2005: If a woman of childbearing age is sexually active and drinks alcohol at risk levels, she should practice effective contraception



Why Reduce Drinking and Improve Contraception among Women?

- Many women continue to drink alcohol before they realize they are pregnant
- Alcohol can damage an unborn child at any time during pregnancy

Purpose



- ❧ Provide an overview of the CHOICES epi study, followed by the intervention study and its primary outcomes
- ❧ Present a summary of dissemination efforts underway in the U.S. and Canada

Locations of CHOICES Studies



Two settings in each of 3 cities:

1. Primary Care and Media Recruitment in Broward County/Ft. Lauderdale, Florida
2. Urban OB/GYN clinic and community clinic in Richmond, Virginia
3. Drug treatment and jail in Houston, Texas

CHOICES Epi Findings



- Of 2672 women surveyed, 68% were fertile and 86% of fertile women were sexually active
- About half of the fertile, sexually active group used ineffective contraception
- 35% were risky drinkers
- 12% of women were at risk for an alcohol-exposed pregnancy (16% of women who were currently pregnant)

Why a Motivational Intervention?



- ❧ To target preconception women NOT planning pregnancy, we assumed:
 - ❧ Women would not be seeking treatment and would show low readiness to change
 - ❧ Those in earlier stages of change (precontemplation, contemplation) require motivation, not skills building
 - ❧ Strong existing evidence that MI could reduce drinking

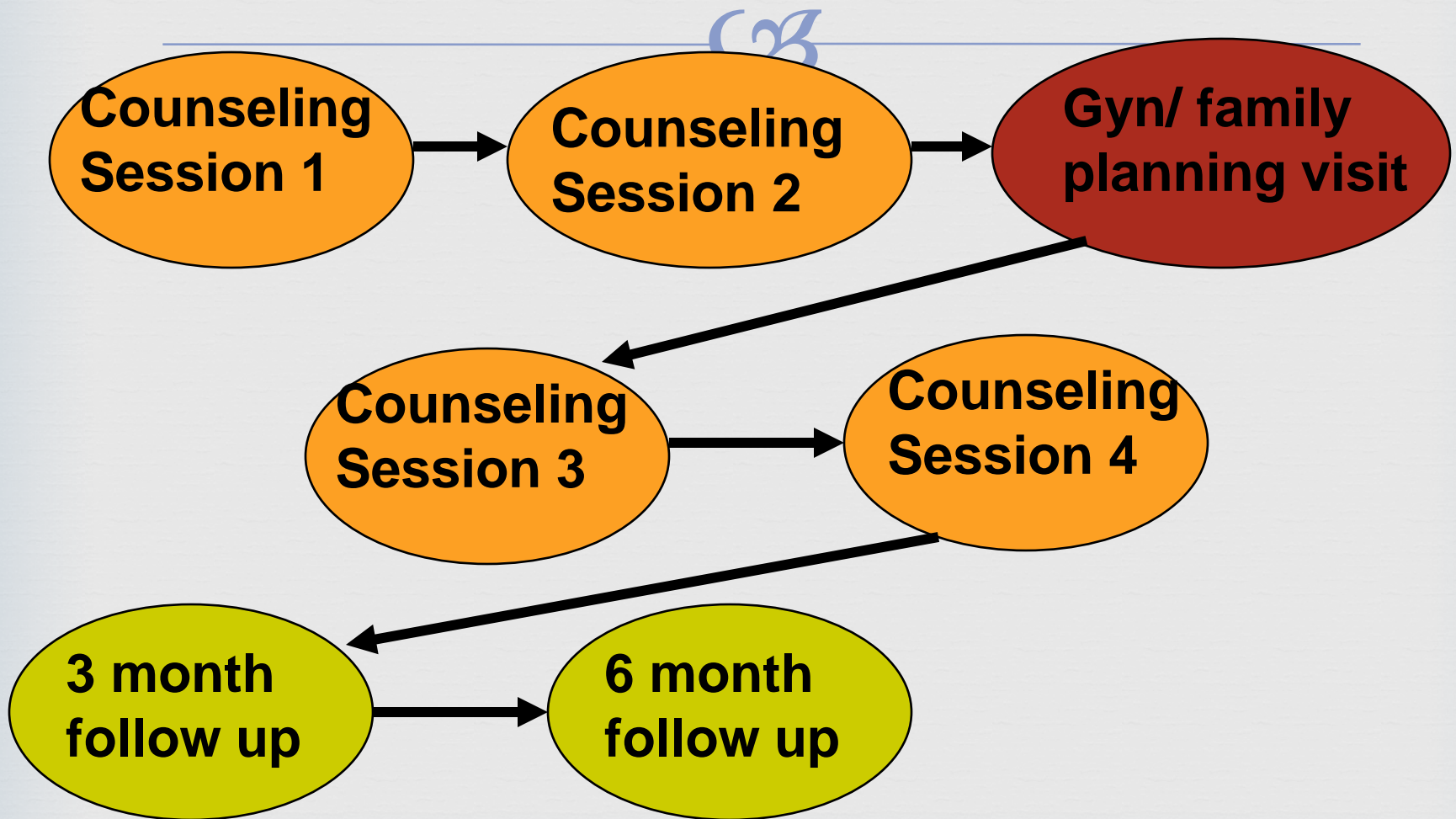
Motivational Interviewing

(Miller & Rollnick, 1991, 2002, 2013)

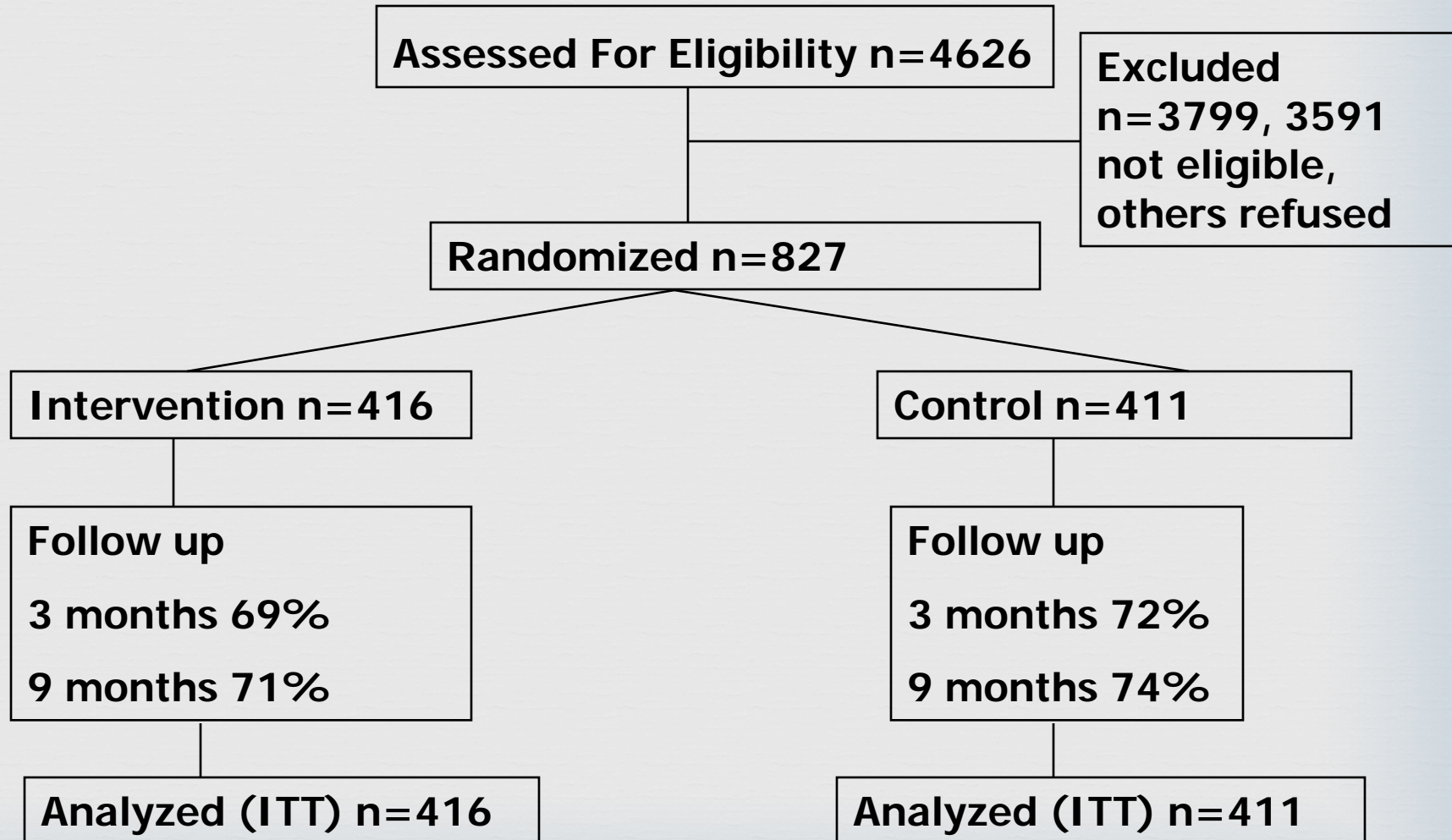


- Motivational Interviewing is a counseling style
- Derived from client-centered, humanistic tradition
- Goal is to explore and resolve ambivalence about changing habitual behaviors
- MI creates and amplifies a discrepancy between personal goals and current behaviors
- Combines Empathy with Direction to build momentum for change

CHOICES Study Flow



Project CHOICES RCT



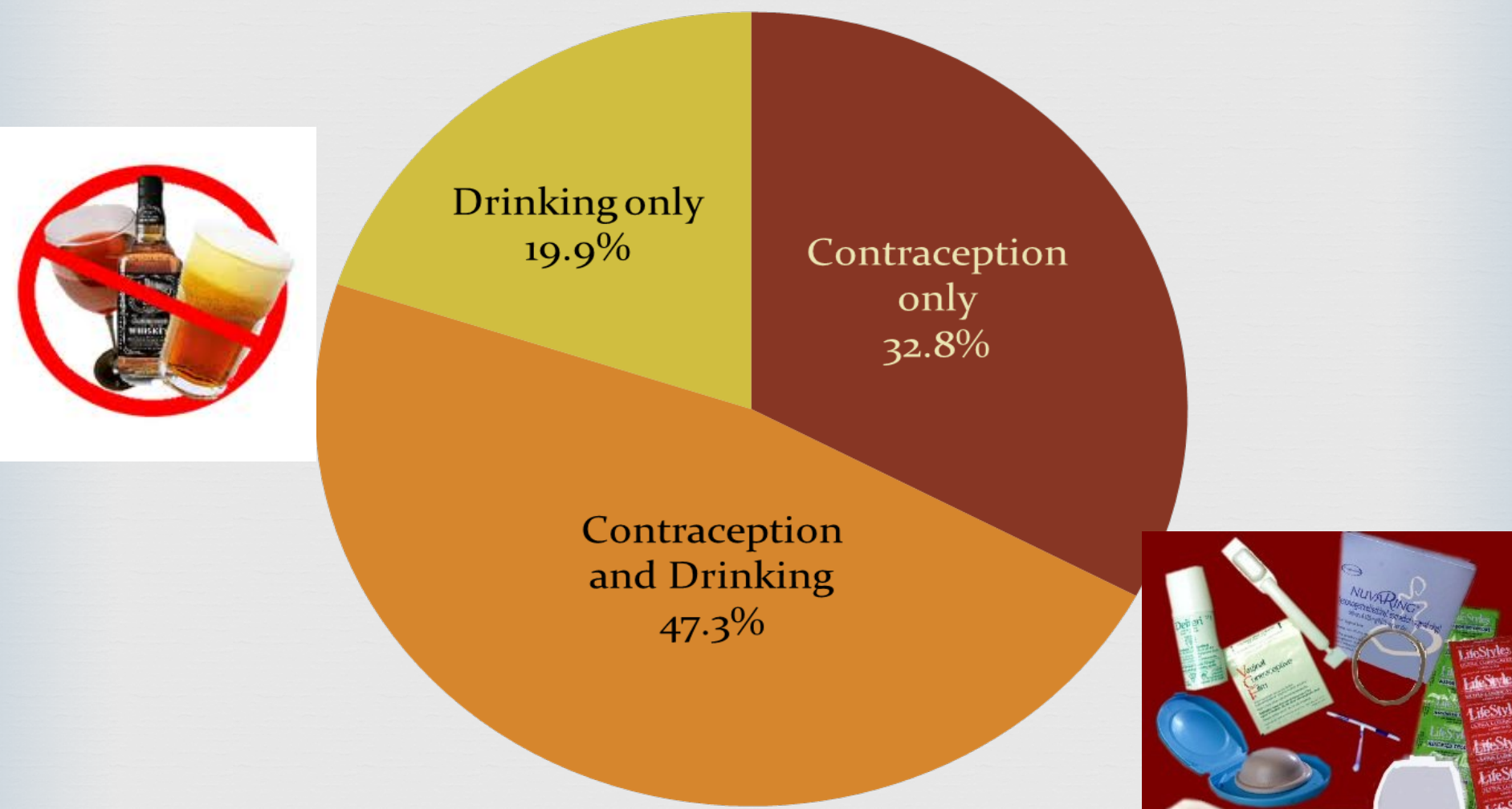
CHOICES Efficacy Study Results

- A randomized clinical trial with 830 women
- At baseline, 100% were at risk for AEP due to risk drinking AND ineffective contraception
- The intervention group was *twice as likely to not* be at risk for an AEP after 3, 6, and 9 months than the control group
- More women in the intervention group changed both drinking and birth control behaviors

At risk (baseline)=100% in both conditions

<u>Not at risk (9M):</u>	Intervention	Control
AEP	69%	54%
Alcohol	49%	40%
BC	56%	39%

How women reduced their AEP risk



Preventing Alcohol-Exposed Pregnancies

A Randomized Controlled Trial

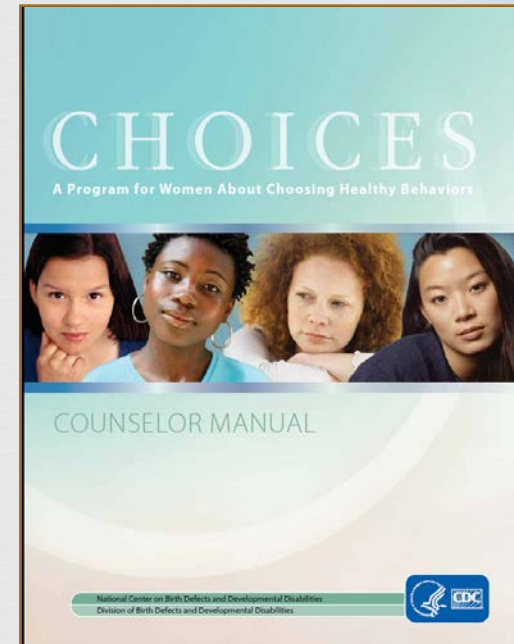
R. Louise Floyd, DSN, RN, Mark Sobell, PhD, ABPP, Mary M. Velasquez, PhD, Karen Ingersoll, PhD, Mary Nettleman, MD, MS, Linda Sobell, PhD, ABPP, Patricia Dolan Mullen, DrPH, Sherry Ceperich, PhD, Kirk von Sternberg, PhD, Burt Bolton, MS, Bradley Skarpness, PhD, Jyothi Nagaraja, MS, on behalf of the Project CHOICES Efficacy Study Group

(Am J Prev Med 2007;32(1):1–10) © 2007 American Journal of Preventive Medicine

- The CHOICES intervention is efficacious
- Outcomes are robust across sub-populations and settings
- CHOICES could reduce the rate of AEP and FASDs if broadly disseminated

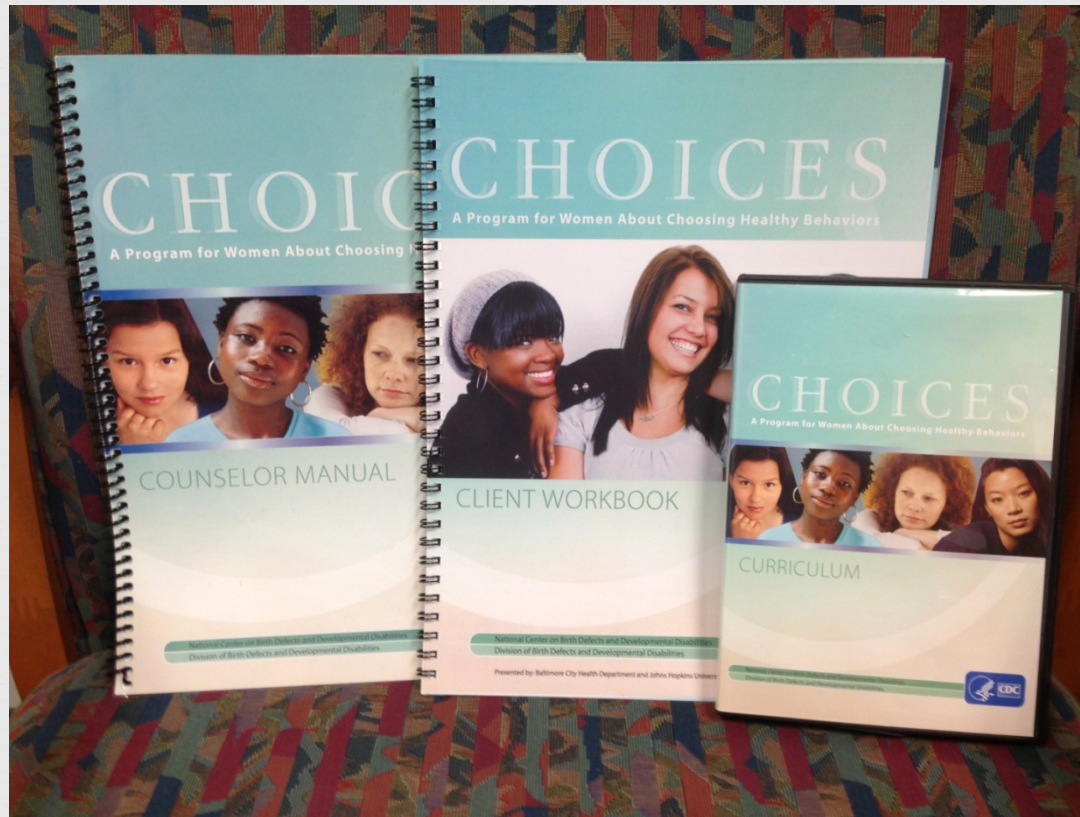
CHOICES Dissemination

- CDC funded 5 state health depts and is funding dissemination projects in Baltimore and Denver STD clinics, LA and NYC large medical systems and in the South Dakota Oglala Sioux
- SAMHSA has funded substance abuse treatment programs to deliver CHOICES
- Healthy Child Manitoba implemented CHOICES in Youth and Family settings
- CDC delivered a Training of CHOICES Trainers in 2012 to disseminate training for counselors
- CHOICES is being considered for the U.S. National Register of Evidence Based Programs and Practices (NREPP)
- Free counselor manuals, client workbooks, and training materials are



Order at:

<http://www.cdc.gov/ncbddd/fasd/freematerials.html>



What's Next? CARRII



Will adapt CHOICES into a highly interactive Internet Intervention and pilot test it against a educational website

In development

