

Massachusetts FASD Prevention Initiatives

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Institute for Health and Recovery

- Statewide service, research, policy, program development agency.
- Mission to develop a comprehensive continuum of care for individuals, youth, families affected by alcohol, tobacco, other drug use, mental health problems, violence/trauma, based on principals of:
 - Establishing collaborative models of service delivery
 - Integrating gender-specific, trauma-informed relational/cultural models of prevention intervention, treatment
 - Fostering family-centered, strength-based approaches
 - Advancing multicultural competency within the service delivery system

Massachusetts Department of Public Health/ Bureau of Substance Abuse Services

 IHR collaborates with MDPH on wide range of programs, policies, and services.







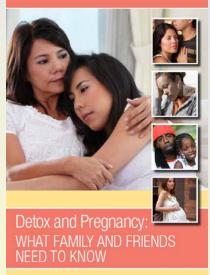
BSAS Pregnant Women's Task Force

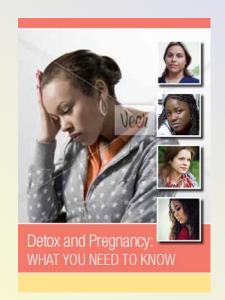
- Priority population
- To make regulatory, contract, standards, language as consistent as possible to remove barriers to accessing treatment





Detox and Pregnancy







Pregnant women and detox: the first 24 hours

I just found out I'm pregnant. Many women find out they are pregnant when they come to detox. This is because all women take a pregnancy lest when they start detox.

If you don't have a doctor for your pregnancy (called an obstetrician or OB), the detox staff may be able to help you find one.

You may not be sare if you want to continue with the pregnancy. This is a difficult choice branks. If you want to discuss your choices about the pregnancy, you can talk with a doctor or call Planned Parenthood at 1-800-258-4449.

Detox staff is here to help you.

Talk to them about how you are feeling and ask them questions. It is especially important to talk to them if you:

- . Have children at home that need someone to take care of them
- Are being abused by a partner
- Are depressed or thinking about suicide #diling yourself)

Before you leave, detox staff will help you plan what to do next.





MA FASD State Coordinator

- DPH funds State FASD Coordinator
 - Provide SBIRT training/technical assistance
 - Provide FASD prevention, identification, and intervention training & resources
 - Collaborate with medical settings for FASD diagnoses
 - Member of SAMHSA National Association of FASD State Coordinators
 - Coordinate FASD State Task Force



Massachusetts FASD Task Force

- Family members
- State Agencies:
 - Public Health: BSAS, Division of Early Childhood and Special Health Needs
 - Child Welfare, Juvenile Justice, Corrections, Mental Health
- Developmental Pediatrician, Psychologist & OB/GYN
- Assorted Stakeholder Agencies



MA FASD Task Force

- Strategic Plan
 - Overarching goals are:
 - Advocacy for families & development of resources
 - FASD Prevention: to be developed, in conjunction with MDPH Bureau of Substance Abuse Services Prevention staff, State Coordinator, and Task Force volunteers
 - FASD Education: Identify/develop and share resources with stakeholders and families



FASD Screening as Prevention

MA Dept of Youth Services FASD Screening

- To screen adolescents during month-long assessment period
 - To refer adolescents with positive screens for medical assessment
 - To provide FASD-Informed care to adolescents to reduce recidivism and improve individual outcomes

MDPH/BSAS Family Residential Treatment FASD Screening

- To pilot a new draft FASD Screening Tool to identify parents with a possible FASD
 - Adapt substance use disorder treatment strategies/approaches to better serve adults with an FASD
 - Grant, TM; Brown, NN; Dubovsky, D; Sparrow, J; & Ries, R. (2013) The Impact of Prenatal Alcohol Exposure on Addiction Treatment, J Addict Med. 7: 87–95.



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The Feasibility of Screening for Fetal Alcohol Spectrum Disorders Risk in Early Intervention Settings
A Pilot Study of Systems Change

Enid Watson, MDiv; Norma Finkelstein, PhD, LISCW; Deborah Gurewich, PhD; Barbara Morse, PhD

SBIRT Projects in MA: Goals

- 1) Prevent risky alcohol/drug use from becoming problem/dependent use, and reduce the risk of substance-related health problems and accidents
- 2) Prevent alcohol-exposed pregnancies and Fetal Alcohol Spectrum Disorders
- 3) Address the stigma of addiction to ensure that patients/participants feel comfortable discussing their substance use with screening staff.



Trauma-Informed Approaches

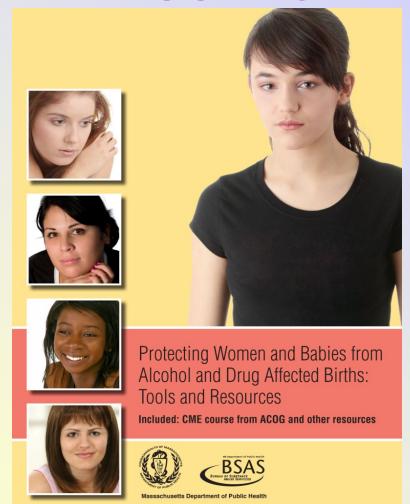
- Approach each woman in a manner that would be safe and engaging to a trauma survivor
- Give woman as much information and as many choices as possible to contribute to her feeling safe to reveal sensitive info
- Ask questions as if positive responses are usual and normal

Special Treatment Issues for Pregnant and Postpartum Women

- Labor & Delivery may remind women of prior loss of children to Child Welfare +/or sexual trauma
- Preoccupation with pregnancy & newborn not avoidance of recovery issues
- Natural to focus inward; not necessarily sign of lack of commitment to recovery
- Recovery process may be longer for pregnant women / new mothers



MDPH Women's SBIRT Toolkit



MDPH/BSAS/IHR



FASD Prevention: SBIRT

- Current SBIRTs
 - Primary Care (Depression & Sub Use)
 - School-Based Health Centers
 - -School Nurses
 - Home Visiting (Maternal & Child Health)
 - Batterer Intervention
 - Clergy/Pastoral Care

Linkage Development



New FASD Prevention Campaign

- FASD Prevention = Sub-C0mmittee of MA FASD State Task Force
- Goals:
 - To increase awareness of FASD amongst OB/GYNs
 - To increase SBIRT utilization
- Method:
 - Electronic "049" Campaign to MA O

