

**Prevention and Treatment for Pregnant Women Workgroup – MINUTES**  
**Alaska FASD Partnership**  
**June 22, 2011**

**Present:** *Cynthia Johnson-Riley (Alaska Family Services, Roses House, Mat-Su), Ric Iannolino (Juneau FASD Clinic), Diane Casto, Genevieve Casey (Prevention & Treatment/DHSS), Carolee Kukahindin (Southcentral Foundation Dena A Coy), Teri Tibbett (Alaska Mental Health Board/Advisory Board on Alcoholism and Drug Abuse).*

Action items are underlined and in purple.

**Vary “Do Not Drink When You Are Pregnant” signs in public places**

“Do Not Drink When Pregnant” signs in Alaska have not been changed since 1990s. After three years, a sign becomes ineffective because people tend to ignore it; new signs can assist getting our message out and inspire more people to pay attention; ABC Board discussion last year concluded its okay to change the look of the signs, but not the wording; Diane is getting signage samples from about 40 other states; publications person with DHSS will design new signs; Diane will send draft ideas out once they’re developed (probably August); after final review and approval by ABC Board, the board will print and distribute; will likely be ready to hang in the next six months; Carolee suggested new colors would be helpful. Ric suggested contacting Canadian resources.

**FASD-TIP (Treatment Improvement Protocol)**

Federal publication offers tips for improving substance abuse treatment strategies; currently working on a new TIP related to FASD that will have a broader focus than just treatment, focusing on the entire continuum of care, e.g. prevention, treatment and support for pregnant women and women with FASD, and interventions for individuals with FASD; they’re in the process of doing reviews of the recommendations; Diane has recommended Mike Baldwin and Jeanne Gerhardt-Cyrus be on the review process committee.

**Support letter to manufacturers re: FASD messages on pregnancy tests**

There’s a national movement to get home pregnancy tests to include information on alcohol and drinking during pregnancy; the idea has been floated to the 15 manufacturers, but haven’t received much response; Diane thinks they’re not opposed, but maybe it’s not a big priority; Diane will send out draft to Teri who will put it on letterhead and send it out to the 15 manufacturers; final letter to go out to all partnership members with the suggestion to draft their own letters as well.

**Diagnostic Clinic treatment funds update**

The \$300,000 passed in FY11 for Access to Treatment for People Diagnosed with FASD, will hopefully hit the streets by July 15; the provider agreement for this purpose has been finalized after extensive review and revision by the DHSS and Dept. of Law (one of the obstacles was regulatory issues related to case management); case management is the number one service requested by the clinics; community providers can apply to provide this service; after diagnosis individuals are eligible to contact one of the approved providers who can offers case management (which may include: identifying and applying for available treatment services, working with the family to access services and make appointments, help with paperwork, etc. The proposed system will serve DHSS in gathering data showing whether or not the families/clinics getting the services show better outcomes.

### **Other Discussion**

Carolee – Housing is a huge issue. Moms and families need housing assistance after leaving treatment, or after incarceration; AHFC shut down applications because waiting list is too long – won't be able to serve people who sign up now until 2014; 2% vacancy rate on rentals; Cynthia – their group is looking for an Oxford type house for transition services; Teri gave update about Corrections and their initiative to address FASD; Ric suggested the need for “train the trainers”.

Discussion followed about the need to require FASD training for certification of substance abuse providers; need to bring this up to certification board for chemical dependency; Partnership could send a letter requesting that and invite other providers, include research that shows why it's important, [Carolee will research how many women of child bearing age we suspect have an FASD in treatment, Diane will research what is being done outside re: requiring FASD training for certification. Genevieve will talk with Marilee Fletcher who manages grant with certification board.](#)

### **Expand Parent-Child Assistance Programs (PCAP) in Alaska**

Alaska started a pilot PCAP project, but it didn't work out; could look into it again; could ask for support from PCAP founders; need to research funding options because it's expensive; need to be sure it'll work in Alaska; problem in AK was the 3 year commitment, and families didn't want someone in their life that long; difficult to implement; possibly coordinate with Corrections on a Delancey Street/PCAP type model. [Cindy and Teri will lead the effort to investigate, talk to Claire Good \(Head Start\) and Genevieve who worked on it in the past. Ask Ric for his contacts.](#)

### **Other topics for future meetings:**

- Public awareness campaign—how, what might it look like, etc.
- Expand substance abuse screening for females of child bearing age