

Title:

Pregnancy and Alcohol: The Need for Alcohol-Screening and Brief Intervention in Women of Childbearing Age

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Session Title:

Rising Stars of Research and Scholarship Invited Student Poster Session 1

Keywords:

Alcohol, Motivational Interviewing and Pregnancy

References:

1. Bingham, R.J. (2015). Latest evidence on alcohol and pregnancy. *Nursing for Women's Health*, 19(4), 338-344. 2. Montag, A., Clapp, J.D., Calac, D., Gorman, J., & Chambers, C. (2012). A review of evidence-based approaches for reduction of alcohol consumption in native women who are pregnant or of reproductive age. *The American Journal of Drug and Alcohol Abuse: Encompassing All Addictive Disorders*, 38(5), 436-443. 3. Zoorob, R., Snell, H., Kihlberg, C., & Senturias, Y. (2014). Screening and brief intervention for risky alcohol use. *Current Problems in Pediatric and Adolescent Healthcare*, 44(4), 82-87.

Abstract Summary:

This educational activity focuses on alcohol Screening and Brief Intervention, specifically amongst women of childbearing age who may be at risk for an alcohol-exposed pregnancy. Participants will be exposed to validated screening tools and will also learn brief intervention techniques, such as motivational interviewing.

Learning Activity:

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE
Participants will be able to verbalize symptoms of Fetal Alcohol Spectrum Disorders (FASD), including physical, developmental, and cognitive defects/dysfunctions.	Fetal Alcohol Spectrum Disorders (FASD) result in a wide variety of symptoms including: facial dysmorphism, low birth weight, intellectual and learning disabilities, as well as behavioral issues. These symptoms will be discussed; additionally, this presentation will highlight the barriers to accurate diagnosis.
Participants will be able to administer and accurately evaluate screening tools.	Alcohol screening tools, such as the Alcohol Use Disorders Identification Test (AUDIT) or CAGE questionnaire are utilized in order to identify high-risk individuals as well as

	individuals suffering from a substance use disorder.
3. Participants will be able to demonstrate brief intervention techniques.	Patients who are screening as high-risk may benefit from a brief intervention in order to educate them about the negative consequences of substance use. Motivational Interviewing is often utilized and works under the premise of harm-reduction and empathy. Motivational Interviewing techniques will be discussed at this session.

Abstract Text:

Background:

Fetal Alcohol Spectrum Disorders (FASD) consists of a wide variety of physical, behavioral, and cognitive dysfunctions resulting from prenatal alcohol exposure. Developmental and cognitive defects affect approximately 3 in every 1,000 live births; this not only creates turmoil for individuals and families involved, but also results in an economic burden to the U.S., evidenced by the fact that FASD-related healthcare costs are approximately \$5.4 billion annually. Because prenatal alcohol consumption is the leading preventable cause of birth defects and disabilities, it is crucial that nurses who frequently encounter women of childbearing age are adequately educated on the evidence-based practice of alcohol Screening and Brief Intervention (alcohol-SBI.)

Methods/Results:

The University of Pittsburgh, University of Alaska Anchorage, and University of California San Diego collaborated with the Centers for Disease Control and Prevention in order to promote the utilization of evidence-based strategies, specifically alcohol-SBI, amongst nurses who encounter women of childbearing age. A literature search was conducted in order to evaluate current resources, identify gaps and opportunities, and develop strategies in order to prepare nurses to be able to effectively address alcohol use in women of childbearing age.

92 journal articles met inclusion criteria and summarized nursing knowledge and attitudes; barriers for addressing alcohol misuse; intervention effectiveness; and practice implications. To summarize, the current literature highlights the need for alcohol-SBI training specifically geared toward women of childbearing age. In order to address this gap in current practice, this workgroup plans to encourage the adoption of practice guidelines, provide training materials regarding alcohol-SBI, develop patient education materials, and work with national nursing organizations in order to expand position statements regarding alcohol-SBI and FASD.

Conclusions:

In order to reduce the individual and economic burden associated with FASD, it is imperative that information/education and training materials are disseminated to nurses who frequently encounter women of childbearing age. Nurses should be comfortable utilizing alcohol-SBI in order to provide care for this population, thereby identifying at-risk women and subsequently providing appropriate intervention in order to minimize the risk of FASD, a disorder that is 100% preventable.