

MODULE NINE



Prevention of FASD

Levels of Prevention

Four-Part Model of FASD Prevention

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Prevention of FASD

LEVELS OF PREVENTION

Levels of prevention are defined and understood differently by various disciplines. It is valuable to have an understanding of the levels of prevention as they are understood for disability and substance use, as well as the World Health Organization's measures of health as it refers to disability.

PREVENTION OF DISABILITY

- **Primary Prevention** refers to preventing a disability before it occurs. Several examples illustrate this. Taking folic acid prior to and during pregnancy has proven effective in reducing the risk of neural tube defects such as spina bifida. Using properly installed and fitted car seats can prevent injury to a child in the case of a car crash. Avoiding alcohol during pregnancy results in the birth of a baby without FASD.
- **Secondary Prevention** refers to the correction of an existing condition and/or preventing a condition from manifesting itself. For example, all newborns in Saskatchewan are tested for the presence of phenylketonuria (PKU). If the condition is detected, the individual is placed on a special diet in order to avoid long-term disability. A child born with cleft lip and/or palate can have surgery resulting in a very positive outcome.
- **Tertiary Prevention** refers to efforts taken to lessen the impact of the disability. These measures, when the disability occurs in infancy, are habilitative in nature and occur in medical, educational and social settings. If the disability occurs in an older child or adult, the services are referred to as rehabilitative. The goal is to provide the individual and family with treatments and service to improve the quality of life both medically and socially. Examples include the provision of a wheelchair for mobility, a speech machine for communication and a number of therapies, such as speech and language, physical and occupational. Individuals with FASD, may benefit from tertiary prevention measures to help prevent secondary disabilities.

FOUR-PART MODEL OF FASD PREVENTION

FASD Prevention is a complicated process. It is clear that providing prevention messages that tell women not to drink when they are pregnant is not a successful strategy for all women. Other prevention measures are necessary to meet the needs of women who may be vulnerable to drink alcohol and use other substances during pregnancy.

In *Fetal Alcohol Spectrum Disorder (FASD) Prevention: Canadian Perspectives* (Poole, 2008) a four-part model of FASD prevention is described. These four levels are mutually reinforcing prevention approaches and are considered to be effective in delivering comprehensive FASD prevention.

- **Level One** involves raising awareness about FASD and the risks of drinking alcohol during pregnancy. This information is usually shared through primary prevention campaigns or through education in the school system or in the community. The campaigns aim to provide accurate information in a manner that resonates with the intended audience, usually a very general and broad audience. The campaigns may also provide alternatives to drinking alcohol and may also refer to available services and supports where individuals can go for help with substance abuse issues or for more information to help them make informed decisions.
- **Level Two** involves talking to all women of childbearing age about their alcohol use and the risks of using alcohol during pregnancy. Evidence shows that service providers who use motivational interviewing approaches with all women have success in reducing women's use of alcohol during pregnancy. It is important that all health care providers have knowledge and confidence in providing the information needed by women in a non-judgmental and effective manner.
- **Level Three** involves providing intervention, treatment and other assistance to pregnant women who are using alcohol during pregnancy and are seeking support. Connecting women to services that will provide a safe and supportive environment to assist them in meeting their immediate needs is important.
- **Level Four** involves continued support for the woman who has moved to healthier behaviour choices during pregnancy, after the baby is born. It is important to provide support for the woman in the areas of: continual improvement of her own health, including help with substance use issues, breastfeeding, and parenting.

References

Poole, N.A. (2008). Fetal alcohol spectrum disorder (FASD): Canadian perspectives. Retrieved February 10, 2009, from <http://www.phac-aspc.gc.ca/fasd-etcaf/pdf/cp-pc-eng.pdf>.