

MAKING FASD HISTORY: A MULTI-SITE PREVENTION PROGRAM

SUMMARY: Alcohol and Other Drug (AOD) research in Newcastle, NSW

In Australia, several initiatives are underway at national, state, and local levels to reduce the occurrence and impact of prenatal alcohol exposure (PAE) and Fetal Alcohol Spectrum Disorder (FASD). These initiatives are supported by the National FASD Strategic Action Plan 2018-2028. Workforce initiatives are crucial to this plan as health professionals are in the unique position of having frequent contact with pregnant women. Also, specialist alcohol and other drug (AOD) services are an important workforce to support women who struggle to cease alcohol drinking throughout their pregnancy. However, there has been no Australian research investigating support needs of this workforce to reduce harms to pregnant women.

As part of the “Making FASD history: A Multi-Site Prevention Program”, a desktop review, community consultations and an environmental scan were conducted. These were completed to identify programs and services that support women who use alcohol and who are (or might become) pregnant. Additionally, interviews were held with AOD stakeholders involved in treatment and support for women with (or at high risk of) PAE in the Greater Newcastle region. This was done to identify strengths and needs in this workforce.

Results from the interviews indicated:

- a) The AOD sector has significant appreciation of the psychosocial complexities related to substance misuse in pregnancy. Because of these complexities, the workload of the workforce is high.
- b) The AOD sector has a highly skilled treatment approach to harm reduction. It focuses on developing good working relationships with clients. It asks questions about alcohol use in a non-stigmatizing way. It encourages open communication.
- c) The AOD sector is going to extraordinary lengths to provide support. They are doing as much as they can as soon as they can, with whatever resources they have to support the women.
- d) The AOD sector experiences challenges. These include under resourcing, high demand, and public stigma towards help-seekers.

In response to the AOD sectors needs recognised in this research, capacity building opportunities were facilitated. These included FASD training sessions and community awareness events. Their goal was to strengthen intersectoral approaches to FASD prevention, and to reduce stigma associated with PAE.

References available on request.

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