Health care providers are instrumental in influencing prenatal choices.

Many women do not fully understand the risks associated with drinking while pregnant.

- One in five women drink alcohol while pregnant.
- Fifteen percent of women do not know drinking during pregnancy is dangerous.

Unplanned pregnancies pose one of the greatest challenges for Fetal Alcohol Spectrum Disorder (FASD) prevention.

- An estimated 40 percent of the 60 million U.S. women in their childbearing years (15-44) do not practice contraception.
- Half of all pregnancies are in the U.S. are unplanned.
- Many women do not know they are pregnant for several weeks (or even months) during which time they may drink alcohol.

Many women do not seek treatment for alcohol and other drug addictions:

- It is estimated that women make up 30% (4.6 million) of alcohol-dependent individuals in the U.S. but only 24.5% of clients in treatment centers.
- Evidence from health care providers suggests that fear of prosecution and loss of their children to child protective services may deter women from seeking prenatal care and substance abuse treatment.
- Data from CDC’s Behavioral Risk Factor Surveillance System shows that while 70% of smokers had been advised to quit by their healthcare provider, only 23% of binge drinkers had been spoken to about their alcohol use.

“Alcohol and other drug abuse education needs to be an integral part of medical education; and that the AMA supports the development of programs to train medical students in the identification, treatment, and prevention of alcoholism and other chemical dependencies.”

American Medical Association Policy H-295.922

In February 2005, U.S. Surgeon General Richard H. Carmona cautioned pregnant women and women who may become pregnant to avoid alcohol completely throughout their entire pregnancy to keep their fetus free from the harmful effects of prenatal alcohol exposure.

Brief interventions using motivational interviewing can be effective in reducing alcohol-exposed pregnancies (AEP). A study conducted by the CDC found that 68.5% percent of high risk women were no longer at-risk for AEP at 6 month follow-up, due to a reduction in drinking, the use effective contraception or both.

The health care system can prevent FASD by:

- Encouraging and/or providing contraception for sexually active women who drink;
- Screening all women of childbearing age for alcohol use disorders to identify those at risk, and then use appropriate counseling techniques, such as motivational interviewing, to discourage drinking during pregnancy;
- Inquiring about alcohol use among all female patients contemplating pregnancy or who are pregnant using open-ended questions (e.g., How many drinks do you consume per week.). This is particularly important for patients who are clinically depressed, or have a history of substance abuse, domestic violence, or childhood sexual abuse.
- Providing in-service training on FASD for providers and staff; and
- Making FASD materials (brochure, posters and videos) available in office waiting room and clinics.