

Trial of Fetal Alcohol Syndrome Prevention and Diagnosis Among Indians

Overview: This research has been focused on health disparities in Fetal Alcohol Spectrum Disorder (FASD) for nearly 10 years. The aims of this research are to continue a well-established, multisite/system of comprehensive Institute of Medicine—based Fetal Alcohol Syndrome (FAS) prevention approaches for American Indians; to measure the effectiveness of those prevention approaches through the use of age-specific FAS prevalence rates, formative evaluation of specific prevention components, and secondary (proxy) measures; to monitor adult drinking and associated risk factors in the target communities over time; to determine the effects of comprehensive FAS prevention across sites; to further delineate and define maternal risk factors for FAS; and to advance the diagnostic rigor for FASD.

Results/Outcomes: Important findings have emerged from the first wave of interviews of pregnant women in four Plains Indian communities, conducted in conjunction with a trial case management program for the prevention of FAS. Of the first 131 women enrolled in the study:

- 65 percent reported extensive alcohol abuse in the immediate family;
- 24 percent were binge drinking weekly at the start of the study;
- 31 percent entered alcohol or drug treatment after exposure to the intervention; and
- both quantity and frequency of drinking were reduced among program participants, with 38 percent achieving total abstinence.

Related research addresses alcohol-related problems at a more general level of environment and public policy. The investigator has surveyed the alcohol policies in force over the last 30 years among the 334 Federally registered tribes in the lower 48 States. Results show a disturbing increase in the percentage of tribes that have statutes permitting alcohol use within tribal jurisdictions (29 percent to 64 percent).

Significance: This project continues to provide critical information for improving the health of people from American Indian communities, in which the rates of FAS are elevated compared with non–American Indian populations. The progress of this research has remained steady and consistent for nearly a decade. As a great deal of data is collected and ready for analysis, it is hoped that the present momentum will result in the successful completion of the prevention trial and add significantly to the scientific knowledge of this area of research.

Grant U01-AA-011685 Principal Investigator: Dr. Phillip May NIAAA Program Official: Dr. Mike Hilton, mhilton@mail.nih.gov





