## WHAT TO KNOW ABOUT ALCOHOL

BEFORE, DURING, AND AFTER PREGNANCY -



### **NOT PREGNANT?**

It's always helpful to still be in the know!

People who are not pregnant can also reduce the harms of alcohol use.

## STANDARD DRINK AMOUNTS

In the United States, one standard drink is equal to one 12 ounce glass of beer, 5 ounce glass of wine, and 1.5 ounces of distilled liquor.

The USDA defines drinking in moderation as 1 drink or less per day for women.

Be mindful of patterns of binge drinking, defined as 4 or more drinks within 2 hours.

## IS ALCOHOL AFFECTING YOUR LIFE? DO NOT BE AFRAID TO ASK FOR HELP.

Reach out for support if you are having trouble reducing or stopping your use. CT has many resources to support you as you navigate your relationship with alcohol. Remember, there are many paths to recovery. Your journey is unique to your needs and goals.

# HEALTH AND FUNCTIONING. AVOID ALCOHOL IF YOU ARE: • are under 21

**ALCOHOL CAN IMPAIR YOUR** 

- may be pregnant or are trying to get pregnant
- are driving or participating in activities requiring coordination and alertness
- taking medications that may interact with alcohol
- are recovering from an alcohol use disorder

## PREGNANT OR THINKING ABOUT BECOMING PREGNANT?

Get sleep, eat healthy, attend your prenatal appointments....the road to parenthood is a busy time.

It can sometimes feel like information overload. Here's the key things to know about alcohol use:

# THERE IS NO KNOWN SAFE TIME, AMOUNT, OR KIND OF ALCOHOL TO DRINK DURING PREGNANCY

You may have heard varying advice on this, so it's understandable if it can be confusing.

However, we do know that prenatal alcohol exposure can have long term impacts including Fetal Alcohol Spectrum Disorders and other lifelong disabilties.

All of the experts, including The American College of Obstetricians and Gynecologists, The American Pregnancy Association, and The American Academy of Pediatrics agree that alcohol should be avoided during pregnancy.

## **SUBSTANCE USE RESOURCES**

CT DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES

CT COMMUNITY FOR ADDICTION RECOVERY

CT 24/7 TREATMENT ACCESS LINE: 1-800-563-4086

DMHAS ADDICTION SERVICES BED AVAILABILITY

PROUD PROGRAM

SAFE-Family Recovery

WOMEN'S REACH PROGRAM

## HAVING TROUBLE REDUCING OR STOPPING YOUR ALCOHOL USE?

Alcohol Use Disorder is a medical condition and does not mean you are a bad parent or that you do not love your baby.

Reach out to a provider, a trusted person in your life, or community resource who can help you get the support you need.

## **POSTPARTUM**

Congratulations!

Being a new parent is an exciting yet sometimes challenging time. It's normal to feel stress and aniexty, but make sure to take care of yourself when things feel too overwhelming.

## SELF CARE

Being the best parent to your new little one also means prioritizing your health and wellness needs. It is not selfish to make sure you are feeling your best. This can include:

- asking for support with child care
- exercising
- taking naps and alone time to rest
- eating your favorite meal
- watching your favorite tv show or movie
- spending time with loved ones

## **ALCOHOL USE**

Alcohol can pass through breastmilk, so be sure to talk to your provider or local WIC office about safe breastfeeding practices that work best for you.

If possible, try not to alleviate stress with alcohol. Explore other stress relievers such as exercise, meditation, or restful activities.

If you are having difficulties reducing or stopping your alcohol use, do not be afraid to reach out for support. You are not alone.



#### **POSTPARTUM DEPRESSION (PPD)**

While this journey often brings excitement and joy, it also brings challenges.

Although stress and anxiety are normal, some parents may feel overwhelmingly sad or scary

feelings that impact their daily life.

If you are struggling, reach out to your provider for treatment and support options. You are not alone.

## A PROVIDER'S GUIDE TO

## SCREENING PREGNANT PATIENTS FOR SUBSTANCE USE

Universal screening for substance use can be a significant step in effective intervention and can normalize alcohol and substance use questions. Screening all prenatal patients can lead to increased equity among patients receiving treatment and services. It can also reduce stigmatization of those patients who are asked these questions. The purpose of these screenings should be to begin an open dialogue about substance use and help refer patients to treatment.

Adapted from https://tinyurl.com/5997d26h



## 1. FIND AN APPROACH THAT IS **COMFORTABLE FOR YOU**

Choose a screening tool that you can use with all patients. Remember that there is no one perfect way to ask, and that screens can be adapted to fit each person's preferred style.



## 3. MAKE IT A ROUTINE PART OF **PRENATAL CARE**

Screening for substance use should be seen as another low-cost way to provide optimal prenatal care. Asking the same questions of every patient reduces subjectivity in deciding who should and should not be screened.

#### 2. BE NON-JUDGMENTAL

Use nonjudgmental, nonmoralistic, and nonthreatening language when asking patients about substance use.

It is important to recognize personal attitudes that may influence a patient's response. Stress harm reduction and meet the patient where they are at.



#### 4. KNOW HOW TO RESPOND

Prepare yourself for patients' questions about why you are asking. Become familiar with the risks of substance use and the benefits of stopping during pregnancy. Know how to counsel birthing people with both negative and positive screens.

## 5. BE POSITIVE

Emphasize that benefits will begin as soon as the patient reduces or stops use, and that the earlier they are able to stop the better for both themselves and their baby.

Refer to medication assisted treatment if the patient is not already receiving services.

CT Providers: ACCESS Mental Health for Moms offers psychiatric expertise and consultation to medical providers treating perinatal women presenting with mental health and/or substance use concerns. For obstetric, pediatric and adult primary care, and psychiatric providers treating women up to one-year post delivery.

Monday through Friday, 9:00 am – 5:00 pm 833-978-MOMS (6667)



## **4 Ps**

Parents, Partners, Past, and Pregnancy is a screening tool developed to detect drug, alcohol, and tobacco use among pregnant people and birthing people of childbearing age.

**ACCESS TOOL HERE** 

#### **5** Ps

Adapted from the 4 Ps, this tool poses questions related to substance use by their parents, peers, partner, and during pregnancy and in their past.

**ACCESS TOOL HERE** 

### **T-ACE**

This is a four-item screening tool that identifies risk-drinking in pregnant people. T-ACE looks at tolerance, anger, cut-down, and eye-openers.

**ACCESS TOOL HERE** 

## **ASSIST**

The Alcohol, Smoking and Substance <u>Involvement Screening Test</u> aims to detect alcohol, tobacco, and drug use; tools can be used sequentially based on the individual's substance involvement score.

**ACCESS TOOL HERE** 



The Alcohol Use Disorders Identification Test is a 10-item questionnaire that screens for alcohol consumption and alcohol-related problems.

**ACCESS TOOL HERE** 



SEPI CT aims to strengthen capacity at the community, provider, and systems levels to improve the health and well-being of infants born substance exposed through supporting the recovery of pregnant people and their

SEPI CT offers technical assistance and trainings on CAPTA, Family Care Plans, and other related topics for providers and professionals. Please contact Mary Fitzgerald, Family Care Plan Coordinator at <a href="mkfitzgerald@wheelerclinic.org">mkfitzgerald@wheelerclinic.org</a>

for more information.