

February 2, 2015 TESTIMONY: Written Only

To: Senator Suzanne Chun Oakland, HSH Chair

To: Senator Josh Green, HTH Chair

and Members of the Senate Committees on Human Services & Housing and Health

From: Hawaii Public Health Association (HPHA)

Subject:SB 925, Relating to Health

Aloha Chairs Chun Oakland and Green and Members of the Senate Committee on Human Services & Housing and Health,

HPHA is an association of over 600 community members, public health professionals and organizations statewide dedicated to improving public health. HPHA also serves as a voice for public professionals and as a repository for information about public health in the Pacific.

The Hawaii Public Health Association (HPHA) is respectfully submitting testimony in **support** of SB 925, which would establish one full-time permanent position to serve as a Fetal Alcohol Spectrum Disorder (FASD) coordinator at the Hawaii State Dept. of Health. Fetal Alcohol is an insidious lifelong neurological impairment of the brain that is 100% preventable, if women of childbearing age are aware of the risks of FASD and abstain from drinking at all during pregnancy. Unfortunately, with a 46% unintended pregnancy rate in Hawaii, many women are unaware that they might be pregnant and that if they drink, the risks for FASD are significant for their fetus.

Epidemiology studies carried out by Hawaii's BRFSS and PRAMS monitoring systems indicate that women of child-bearing age are drinking alcohol, including binge-drinking, and are therefore at risk of having an infant with FASD. The DOH Hawaii Pregnancy Risk Assessment and Monitoring System (PRAMS) reported that 6.9% (approximately 1,300 per year) of women who gave birth in Hawaii in 2009-2011 reported that they drank alcohol in the last trimester of their most recent pregnancy. PRAMS also indicated that 1.2% (approximately 200 per year) of women who gave birth in Hawaii in 2009-2011 reported binge drinking in the last trimester of their most recent pregnancy. Binge drinking for women is defined as drinking 4 or more alcoholic drinks in one sitting. Hawaii has not had strong data collection on the numbers of newly-diagnosed FASD cases in Hawaii, and lacks a comprehensive data collection, screening, diagnosis's and services system. It is difficult to estimate the number of persons affected by FASD in Hawaii. Because there is no dedicated and centralized location for coordination of FASD, it remains highly problematic for children and adults with FASD to receive diagnosis and appropriate services. As a result, the state is paying more for direct and indirect services that these people require. An FASD coordinator, which was present in the Hawaii DOH from 2008-2013 when the position was abolished, would serve as an organizing and information gathering point, as well as assist with efforts to plan and implement a coordinated system of care for persons with FASD.

The HPHA supports this bill, which seeks to reestablish a point of contact and responsibility for FASD in Hawaii, including prevention efforts. Without a dedicate position, it is unlikely that the state can move forward to adequately address this growing public health concern.

Respectfully submitted,

Holly Kessler, Executive Director Hawaii Public Health Association

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