
A BILL FOR AN ACT

RELATING TO HEALTH.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

1 SECTION 1. The legislature finds that, while fetal alcohol
2 exposure is one of the leading known causes of mental
3 retardation in industrialized nations, the majority of those so
4 exposed are not mentally retarded. Individuals with diagnosed
5 or undiagnosed fetal alcohol exposure suffer substantially from
6 secondary disabilities, such as child abuse and neglect,
7 separation from families, multiple foster placements, school
8 failure, juvenile detention, job instability, depression,
9 aggression, and other serious mental disorders. These secondary
10 disabilities come at a high cost to the individuals, their
11 families, and society. The legislature finds that these
12 problems can be reduced substantially by early diagnosis and
13 receipt of appropriate, effective intervention.

14 Fetal alcohol spectrum disorders is an umbrella term
15 describing the range of effects that can occur in an individual
16 whose mother drank alcohol during pregnancy. These effects may
17 include physical, mental, behavioral, and learning disabilities
18 with possible lifelong implications.



1 Nationwide, the incidence of fetal alcohol spectrum
2 disorder is estimated to be ten per one thousand live births.
3 Nationally, more children are born each year with fetal alcohol
4 spectrum disorder than those born with spina bifida, multiple
5 sclerosis, Down Syndrome, and HIV combined. There are an
6 estimated one hundred seventy-five children born each year in
7 Hawaii with a fetal alcohol spectrum disorder. Human costs of
8 prenatal alcohol exposure are great, as are the economic costs.
9 Caring for someone with a fetal alcohol spectrum disorder may
10 cost as much as \$5,000,000. Nationally, as many as 40,000
11 babies are born each year with a fetal alcohol spectrum
12 disorder, costing the United States about \$4,000,000,000.

13 Fetal alcohol spectrum disorders are the most
14 underdiagnosed developmental disabilities, both in Hawaii and
15 across the United States. The effect of prenatal alcohol
16 exposure lasts a lifetime, yet fetal alcohol spectrum disorder
17 is totally preventable. The effects of the known risk factors
18 may be ameliorated with early intervention and through effective
19 systems of care and services.

20 Most persons with a fetal alcohol spectrum disorder are
21 undiagnosed or misdiagnosed and frequently do not follow
22 treatment plans, even when properly diagnosed. Persons with



1 fetal alcohol spectrum disorder frequently fail in traditional
2 treatment and other service systems and are commonly identified
3 as being noncompliant, uncooperative, and unmotivated in all
4 systems of services and care.

5 There are currently few fetal alcohol spectrum disorder-
6 specific services in Hawaii, and only eighty-nine cases of fetal
7 alcohol spectrum disorder have been documented and reported to
8 Hawaii's birth defects registry from 1966 to 2002. Hawaii
9 department of health data from 2002 indicate that forty per cent
10 of pregnant women surveyed consumed alcohol prior to becoming
11 pregnant, and almost four per cent indicated that they consumed
12 alcohol during pregnancy, which put their infants at risk for
13 fetal alcohol spectrum disorder.

14 Information from a 2003 department of health behavioral
15 risk prevalence survey shows that almost eighty-two per cent of
16 the women surveyed consumed alcohol one month prior to the
17 survey, and almost four per cent indicated that they engage in
18 binge drinking. Because fetal alcohol spectrum disorder can
19 occur in any community where women drink alcohol during
20 pregnancy, it is a statewide public health concern that has
21 service, policy, and economic implications for virtually all
22 state departments.



1 Because fetal alcohol spectrum disorder is underdiagnosed
2 and families as well as providers have significant problems in
3 addressing the multiple challenging needs of persons with this
4 disorder, there are currently fourteen states that already have
5 state fetal alcohol spectrum disorder coordinators. The state
6 fetal alcohol spectrum disorder coordinators serve as a key
7 educational, informational and coordination link between
8 departments and agencies dealing with persons with a fetal
9 alcohol spectrum disorder.

10 Poor coordination hampers prevention, diagnosis, and
11 service delivery. A state fetal alcohol spectrum disorder
12 coordinator would organize all fetal alcohol syndrome activities
13 and would ensure that a comprehensive state strategic plan to
14 address fetal alcohol spectrum disorder is drafted and
15 implemented.

16 The purpose of this Act is to coordinate and develop fetal
17 alcohol spectrum disorder information, education, policies, and
18 support services statewide by authorizing the lieutenant
19 governor to establish a state fetal alcohol spectrum disorder
20 coordinator position within the office of the lieutenant
21 governor.



1 SECTION 2. There is to be established within the office of
2 the lieutenant governor one full-time equivalent permanent
3 professional fetal alcohol spectrum disorder coordinator
4 position. The fetal alcohol spectrum disorder coordinator shall
5 act as a public point of contact for individuals and families
6 affected by fetal alcohol spectrum disorder and shall help to
7 coordinate a statewide system of services for persons with fetal
8 alcohol spectrum disorder by:

- 9 (1) Increasing statewide awareness of fetal alcohol
10 spectrum disorder both in the general public and in
11 at-risk populations;
- 12 (2) Expanding statewide capacity to identify and intervene
13 with at-risk pregnant and parenting women;
- 14 (3) Advocating, mobilizing, and coordinating state and
15 community resources to assist persons and families
16 affected by fetal alcohol spectrum disorder to get the
17 support they need;
- 18 (4) Improving statewide service delivery to individuals
19 and families affected by fetal alcohol spectrum
20 disorder;
- 21 (5) Coordinating a statewide strategic plan to address the
22 full range of cradle-to-grave fetal alcohol spectrum



1 disorder care, treatment, education, and prevention

2 issues;

3 (6) Facilitating and coordinating state fetal alcohol
4 spectrum disorder task force meetings; and

5 (7) Facilitating development and implementation of a
6 comprehensive, statewide system of care for the
7 prevention, identification, surveillance, and
8 treatment of fetal alcohol spectrum disorders.

9 SECTION 3. There is appropriated out of the general
10 revenues of the State of Hawaii the sum of \$, or so
11 much thereof as may be necessary, for fiscal year 2006-2007, to
12 establish a full-time equivalent permanent professional fetal
13 alcohol spectrum disorder coordinator position in the office of
14 the lieutenant governor.

15 SECTION 4. The sums appropriated shall be expended by the
16 office of the lieutenant governor for the purposes of this Act.

17 SECTION 5. This Act shall take effect on July 1, 2006.

18

INTRODUCED BY:

Calvin K. Y. Au
BY REQUEST

JAN 20 2006

HB 2153

Report Title:

Fetal Alcohol Spectrum Disorder; Coordinator

Description:

Establishes fetal alcohol spectrum disorder coordinator position in the office of the lieutenant governor.

