



STATE OF HAWAII
STATE COUNCIL
ON DEVELOPMENTAL DISABILITIES
919 ALA MOANA BOULEVARD, ROOM 113
HONOLULU, HAWAII 96814
TELEPHONE: (808) 586-8100 FAX: (808) 586-7543
March 2, 2015

The Honorable Jill N. Tokuda, Chair
Senate Committee on Ways and Means
Twenty-Eighth Legislature
State Capitol
State of Hawaii
Honolulu, Hawaii 96813

Dear Senator Tokuda and Members of the Committee:

SUBJECT: SB 925 – RELATING TO HEALTH

The State Council on Developmental Disabilities (DD) **SUPPORTS SB 925**. The purpose of the bill is to establish one permanent full-time equivalent (1.00 FTE) fetal alcohol spectrum disorder (FASD) position in the Family Services Division of the Department of Health (DOH).

It is our understanding that there was a FASD position that provided support and coordination of activities for the FASD Task Force. However, the position was eliminated in 2009 as a result of the State's reduction-in-force. The Task Force continued to be supported through another source of funding until 2013 due to reduction in that funding source. Since then, there has been no dedicated source of funding or staff to support the work of the Task Force.

Section 1 of the bill provides very compelling information about the numbers of children affected by FASD and the exuberant costs associated with care and treatment for a person diagnosed with FASD. It is in the State's best interest to take a proactive approach in addressing this alarming public health issue by taking the first step in establishing a full-time coordinator position to serve as a key educational, informational, and public access point for relevant State departments, agencies, and the public-at-large.

The Council believes that FASD is a very serious condition that affects thousands of children each year in Hawaii, as well as in the United States. FASD is a preventable condition that can cause delays in the development of a child, affect lifelong learning, and result in lifelong disabilities. As a systems advocacy agency responsible for statewide planning, coordination, monitoring, evaluation, and advocacy on behalf of individuals with DD and their families, we support SB 925, and respectfully ask the Legislature to support the passage of the bill.

The Honorable Jill N. Tokuda
Page 2
March 2, 2015

Thank you for the opportunity to submit testimony in **support of SB 925**.

Sincerely,



Waynette K.Y. Cabral, MSW
Executive Administrator



Rosie Rowe
Chair



FAMILY PROGRAMS HAWAII

TO: Senator Jill N. Tokuda, Chair
Senator Ronald D. Kouchi, Vice Chair
Committee on Ways and Means

HEARING: Monday, March 02, 2015
1:00 PM
Conference Room 211

FROM: Judith Wilhoite
Family Advocate
Family Programs Hawai'i

RE: SB925 – Relating to Health

Thank you for the opportunity to testify. I am the Family Advocate for Family Program Hawaii's *It Takes An `Ohana* (ITAO) program and a resource caregiver, formerly referred to as foster parent. I, along with my Advisory Committee, strongly support SB 925.

In my position, I have regular contact with resource caregivers (formerly referred to as foster parents) and adoptive parents who may be living with undiagnosed children & youth affected with Fetal Alcohol Spectrum Disorder (FASD). Their child may appear to be healthy but because FASD affected children have permanent brain damage, learning and controlling behavior can present special problems.

Our children and families need help with many aspects of this condition. An example is in the education of the children, for school can be an ongoing challenge for those affected by FASD. Many schools are poorly informed about this invisible disorder and punish behavior that a child with FASD cannot control. A teacher may think a child affected with FASD is simply lazy when the child has actual difficulties with one or more of the following: mathematics, reasoning, connecting cause and effect, learning from experience, planning and remembering, decision-making and/or social skills.

When raising an FASD affected child, love is important, but not enough. One needs support, training and to understand that a physical brain injury, not choice, dictates some of the child's behaviors. An FASD coordinator with the DOH is a good first step to dealing with this issue that touches us all.

I thank both the Legislature for this opportunity to share strong support for SB 925.

March of Dimes Foundation

Hawaii Chapter
1580 Makaloa Street, Suite 1200
Honolulu, HI 96814
Telephone (808) 973-2155
Inter-island 1-800-272-5240
Fax (808) 973-2160

marchofdimes.com/hawaii

Date: February 28, 2015

To: Senator Jill Tokuda, Chair
Senator Ronald Kouchi, Vice Chair

From: Lin Joseph
Director of Program Services
March of Dimes Hawaii Chapter

Re: In support of
SB925

Hearing: Committee on Ways and Means
March 2, 2015
Conference Room 211, State Capitol

Chair Tokuda, Vice Chair Kouchi, Members of the Committee:

I am writing to express strong support for SB925: *Fetal Alcohol Spectrum Disorder Coordinator*.

For 75 years, the March of Dimes has been a leader in maternal and child health. Our mission is to *improve the health of babies by preventing birth defects, premature birth, and infant mortality*.

In 2006, HB2109 was signed into law as Act 204 to establish within the family health services division of the department of health one full-time equivalent permanent professional fetal alcohol spectrum disorder (FASD) coordinator position. The FASD coordinator was the state's point of contact for individuals and families affected by FASD and helped coordinate a statewide system of service, including public awareness, increasing capacity for screening and intervention for pregnant women, coordinating resources, and facilitating FASD Task Force meetings and activities. The coordinator position was eliminated in 2009 due to budget cuts.

Today, the need for a coordinated public-private system of service to address FASD remains, for prevention efforts as well as identification and treatment. Passage of SB925 would restore the coordinator position and restart Hawaii's effort to develop that statewide system of service for our community.

Mahalo for the opportunity to present testimony in support of SB925.

march  of dimes®

SB925

Submitted on: 3/1/2015

Testimony for WAM on Mar 2, 2015 13:00PM in Conference Room 211

Submitted By	Organization	Testifier Position	Present at Hearing
Kenneth Ordenstein	Olomea Inc.	Support	No

Comments:

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

SB925

Submitted on: 2/28/2015

Testimony for WAM on Mar 2, 2015 13:00PM in Conference Room 211

Submitted By	Organization	Testifier Position	Present at Hearing
Anthony Orozco	Individual	Oppose	No

Comments: Who the hell is that dumb that they think drinking when pregnant is good. This bill is another waste of money.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

March 1, 2015

Senator Jill N. Tokuda, Chair
Senator Ronald D. Kouchi, Vice Chair
Committee on Ways and Means
State of Hawaii Twenty-Eighth Legislature

Written Testimony in Support of SB 925, Coordinator Position for Fetal Alcohol Spectrum Disorder

Decision Making Meeting
Monday, March 2, 2015
1:00 p.m., Hawaii State Capitol 211

Dear Chair Senator Tokuda, Vice Chair Senator Kouchi and Members of the Committee,

I am writing to express my support for SB 925 for a coordinator position for fetal alcohol spectrum disorder in the Department of Health Family Services Division. My name is Eri Nomura and I am a student currently pursuing a master's degree in the Myron B. Thompson School of Social Work at University of Hawaii at Manoa. In the course of my studies and in my previous background in the field of education, I have had the opportunity to work with many individuals diagnosed with behavioral and developmental conditions. The number of individuals referred for diagnosis and treatment for conditions such as ADHD is continuing to increase, however, studies indicate that significant number of individuals with fetal alcohol spectrum disorder (FASD) is misidentified in this population.

Although some behavioral and learning characteristics of FASD are similar to those observed in other conditions, studies support that distinct qualities can be identified for FASD. I believe that this position is necessary to develop accurate understanding of the disorder within our community to better serve individuals with FASD, those who are yet to be identified or are currently diagnosed instead with other conditions.

One position will be able to make a difference in life of many individuals, through improvements in services that would appropriately meet the need for individuals with FASD, from prevention to treatment, and fostering further recognition of the condition.

Thank you for allowing me to share my testimony in support of SB 925.

Eri Nomura