
HOUSE CONCURRENT RESOLUTION

URGING THE DEPARTMENTS OF HEALTH AND HUMAN SERVICES TO ADOPT THE
CANADIAN DIAGNOSTIC GUIDELINE FOR DIAGNOSIS OF FETAL
ALCOHOL SPECTRUM DISORDER, AS PUBLISHED IN THE CANADIAN
MEDICAL ASSOCIATION JOURNAL.

1 WHEREAS, fetal alcohol spectrum disorder is an umbrella
2 term used to describe a broad spectrum of presentations and
3 disabilities resulting from alcohol exposure in utero; and
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5 WHEREAS, fetal alcohol spectrum disorder may include
6 physical, mental, behavioral, or learning disabilities, with
7 brain damage being the most serious effect; and
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9 WHEREAS, different terms are used to describe fetal alcohol
10 spectrum disorders, depending on the type of symptoms, including
11 fetal alcohol syndrome, alcohol-related neurodevelopmental
12 disorder, and alcohol-related birth defects; and
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14 WHEREAS, diagnosing fetal alcohol spectrum disorder is
15 important to help children and adults, and their families, who
16 have the disorder; and
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18 WHEREAS, a new Canadian diagnostic guideline released in
19 2016, supported by the Canada Fetal Alcohol Spectrum Disorder
20 Research Network and published in the Canadian Medical
21 Association Journal, provides recommendations for diagnosing
22 fetal alcohol spectrum disorder, specifically for
23 multidisciplinary diagnostic teams; and
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25 WHEREAS, key recommendations from the Canadian diagnostic
26 guideline include: counseling women and their partners about
27 abstinence from alcohol during pregnancy or when planning a
28 pregnancy; screening of all pregnant women and new mothers for
29 alcohol use by trained professionals; and referring individuals
30 for possible diagnosis if there is evidence of prenatal exposure
31 to alcohol at levels associated with adverse brain function; and



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WHEREAS, one in ten women in the United States report drinking alcohol during pregnancy; and

WHEREAS, the diagnostic guideline for fetal alcohol spectrum disorders in Hawai'i differs from the Canadian diagnostic guideline; and

WHEREAS, the existing practice in Hawai'i is to focus on physical features at birth or within the first year when referring children for treatment for fetal alcohol spectrum disorder, rather than the Canadian diagnostic guideline, which recommends referral upon physical or developmental effects whenever there is evidence or suspected prenatal alcohol exposure; and

WHEREAS, the current practice in Hawai'i is also to confirm prenatal alcohol exposure based on maternal confirmation, which is not always possible, rather than the Canadian diagnostic guideline, which suggests a broader range of ways to confirm possible prenatal exposure to alcohol for purposes of determining a fetal alcohol spectrum disorder diagnosis; and

WHEREAS, severe impairment is defined as greater than or equal to two standard deviations below the mean; however, state practice is to require greater than or equal to three standard deviations and require that an individual's intelligence quotient be two standard deviations below the mean for an accompanying intellectual disability to qualify for services; and

WHEREAS, individuals with fetal alcohol spectrum disorder often fall above two standard deviations and therefore cannot qualify for services in Hawai'i based on their intelligence quotient and functional impairment, compared to the Canadian diagnostic guideline, which does not require a mathematical formula for services; and

WHEREAS, adopting the new Canadian diagnostic guideline will improve how clinicians in Hawai'i diagnose fetal alcohol spectrum disorder in infants and children, thereby leading to

1 more widespread early intervention and improved prevention
2 efforts; now, therefore,
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4 BE IT RESOLVED by the House of Representatives of the
5 Thirtieth Legislature of the State of Hawaii, Regular Session of
6 2019, the Senate concurring, that the Departments of Health and
7 Human Services are urged to adopt the Canadian diagnostic
8 guideline for diagnosis of fetal alcohol spectrum disorder, as
9 published in the Canadian Medical Association Journal; and
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11 BE IT FURTHER RESOLVED that the Departments of Health and
12 Human Services are urged to consider developmental and physical
13 defects or impairment when making a referral for suspected
14 prenatal alcohol exposure; and
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16 BE IT FURTHER RESOLVED that the Departments of Health and
17 Human Services are urged to confirm suspected prenatal alcohol
18 exposure through a variety of ways, as recommended by the
19 Canadian diagnostic guideline; and
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21 BE IT FURTHER RESOLVED that the Departments of Health and
22 Human Services are urged to modify the definition of severe
23 impairment from three to two standard deviations from the mean
24 to ensure more infants and children in Hawai'i are able to
25 receive needed services; and
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27 BE IT FURTHER RESOLVED that the Departments of Health and
28 Human Services are urged to eliminate the standard deviations
29 requirement related to a child's intelligence quotient to ensure
30 infants and children are able to receive needed services; and
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32 BE IT FURTHER RESOLVED that certified copies of this
33 Concurrent Resolution be transmitted to the Director of Health
34 and Director of Human Services.
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OFFERED BY: *John M. ...*
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H.C.R. NO. 208

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MAR 08 2019

