
HOUSE 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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33 WHEREAS, one in ten women in the United States report
34 drinking alcohol during pregnancy; and



1
2 WHEREAS, the diagnostic guideline for fetal alcohol
3 spectrum disorders in Hawai'i differs from the Canadian
4 diagnostic guideline; and
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6 WHEREAS, the existing practice in Hawai'i is to focus on
7 physical features at birth or within the first year when
8 referring children for treatment for fetal alcohol spectrum
9 disorder, rather than the Canadian diagnostic guideline, which
10 recommends referral upon physical or developmental effects
11 whenever there is evidence or suspected prenatal alcohol
12 exposure; and
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14 WHEREAS, the current practice in Hawai'i is also to confirm
15 prenatal alcohol exposure based on maternal confirmation, which
16 is not always possible, rather than the Canadian diagnostic
17 guideline, which suggests a broader range of ways to confirm
18 possible prenatal exposure to alcohol for purposes of
19 determining a fetal alcohol spectrum disorder diagnosis; and
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21 WHEREAS, severe impairment is defined as greater than or
22 equal to two standard deviations below the mean; however, state
23 practice is to require greater than or equal to three standard
24 deviations and require that an individual's intelligence
25 quotient be two standard deviations below the mean for an
26 accompanying intellectual disability to qualify for services;
27 and
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29 WHEREAS, individuals with fetal alcohol spectrum disorder
30 often fall above two standard deviations and therefore cannot
31 qualify for services in Hawai'i based on their intelligence
32 quotient and functional impairment, compared to the Canadian
33 diagnostic guideline, which does not require a mathematical
34 formula for services; and
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36 WHEREAS, adopting the new Canadian diagnostic guideline
37 will improve how clinicians in Hawai'i diagnose fetal alcohol
38 spectrum disorder in infants and children, thereby leading to
39 more widespread early intervention and improved prevention
40 efforts; now, therefore,
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1 BE IT RESOLVED by the House of Representatives of the
 2 Thirtieth Legislature of the State of Hawaii, Regular Session of
 3 2019, that the Departments of Health and Human Services are
 4 urged to adopt the Canadian diagnostic guideline for diagnosis
 5 of fetal alcohol spectrum disorder, as published in the Canadian
 6 Medical Association Journal; and

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 8 BE IT FURTHER RESOLVED that the Departments of Health and
 9 Human Services are urged to consider developmental and physical
 10 defects or impairment when making a referral for suspected
 11 prenatal alcohol exposure; and

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 13 BE IT FURTHER RESOLVED that the Departments of Health and
 14 Human Services are urged to confirm suspected prenatal alcohol
 15 exposure through a variety of ways, as recommended by the
 16 Canadian diagnostic guideline; and

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 18 BE IT FURTHER RESOLVED that the Departments of Health and
 19 Human Services are urged to modify the definition of severe
 20 impairment from three to two standard deviations from the mean
 21 to ensure more infants and children in Hawai'i are able to
 22 receive needed services; and

23
 24 BE IT FURTHER RESOLVED that the Departments of Health and
 25 Human Services are urged to eliminate the standard deviations
 26 requirement related to a child's intelligence quotient to ensure
 27 infants and children are able to receive needed services; and

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 29 BE IT FURTHER RESOLVED that certified copies of this
 30 Resolution be transmitted to the Director of Health and Director
 31 of Human Services.

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H.R. NO. 187

Lyn DeCristo

Brahm

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