Announcements

Comprehensive FASD Workshop – Anchorage (Including Train the Trainer)

The Arctic FASD Regional Training Center will be holding a Comprehensive FASD Workshop in Anchorage in September. This workshop will incorporate our Train the Trainer workshop.

- Monday, September 26 and Tuesday, September 27
- 8:30 a.m. to 4:30 p.m.
- UAA/APU Library Room 307
- Registration required

Cost: Free!

Continuing education credits available. Please see our website for more details.

Call 907.786.6381 or check our website for more information:

[www.uaa.alaska.edu/arcticfasdrtc/training/ComprehensiveWorkshop/index.cfm](http://www.uaa.alaska.edu/arcticfasdrtc/training/ComprehensiveWorkshop/index.cfm)

Research FAST Facts: Analyses of literature on FASDs

Where possible, we provide a link where the article can be purchased and/or downloaded. Research abstracts are provided for the purposes of discussion; they do not necessarily reflect the views or position of the Arctic FASD RTC.


Abstract: Aims: To examine the predictive utility of psychological correlates of alcohol consumption identified in previous (US-dominated) research for a UK student sample and construct an integrative model predictive of alcohol dependency in a sample of first-year undergraduate students. Methods: A self-report questionnaire completed by 230 students measured stable and modifiable correlates of alcohol dependence. Stable correlates included age when first regularly drinking (age of onset), personality traits and religiosity. Modifiable measures included drinking motives, self-efficacy, alcohol-related expectancies, prototype perceptions and normative beliefs. Results: The final multivariate model highlighted the importance of age of onset, sensation-seeking and a series of social cognitive measures including: social drinking motives, confidence in the ability to drink within government guidelines (self-efficacy) and the perceived quantity and frequency of alcohol consumed by university friends. Beta-coefficients indicated that self-efficacy and social drinking motives were particularly important predictors. A significant interaction was observed between age of onset and self-efficacy. Earlier onset was associated with higher levels of alcohol dependence for low and moderate, but not high levels of self-efficacy. Conclusion: The model presented here could be used to identify students at risk of alcohol dependence and inform the design of campus-based interventions.

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**FASD Foundations (FASD101) and FASD201 Workshops**

Our next FASD Foundations workshop will be held:

- Friday, July 15, 1 p.m. to 5 p.m.

Our next FASD Foundations workshop will be held:

- Friday, July 29, 1 p.m. to 5 p.m.

The location for both workshops will be the University Center Room 145.

Cost: Free!

Registration is recommended. Call 907.786.6381 or check our website for more information:

www.uaa.alaska.edu/arcticfasdrtc/training/fasdfoundations.cfm

or

www.uaa.alaska.edu/arcticfasdrtc/training/fasd201.cfm

Participants will be eligible to receive continuing education (CE) credits for completion of these workshops ($25.00 processing fee).

**Helpful Resources**

- CDC: What you should know about alcohol and pregnancy
- CDC: Lo que debe saber sobre el embarazo

...alcohol consumption, depression and dysfunctional attitudes among females treated for alcohol addiction. *Alcohol and Alcoholism* 46(3):292-300. (Open access)

Abstract: Aims: To examine whether individual changes in alcohol consumption among female alcoholics under treatment are predicted by level of and changes in depression and dysfunctional attitudes. Method: A total of 120 women who were treated for alcohol addiction at the Karolinska Hospital in Stockholm (Sweden) were assessed twice over a 2-year period using the Depression scale from the Symptom Checklist-90, the Alcohol Use Inventory and the Dysfunctional Attitude Scale (DAS). Latent growth curve analysis was used. Results: Decrease in alcohol consumption, depression and dysfunctional attitude variables were found at group level. The results also showed significant individual variation in change. Changes in alcohol consumption were predicted by baseline alcohol drinking, as well as by level and changes in depression. Stronger reduction in depression was related to higher level of depression at baseline, and with reduction in dysfunctional attitudes. Different DAS sub-scales resulted in different magnitude of the model relations. Good treatment compliance was related to lower baseline level in depression, but also with higher baseline level in dysfunctional attitudes, and predicted stronger reduction in alcohol consumption. Conclusion: This paper shows the importance of incorporating both individual level and change in depression as predictors of change in alcohol consumption among subjects treated for alcohol addiction. Also, dysfunctional attitudes are both indirectly and directly related to treatment outcome. By incorporating alcohol consumption, depression and dysfunctional attitudes as targets of intervention, treatment compliance and outcome may be enhanced.

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Abstract: Aims: To analyse the effects of age, period and cohort (APC) on light and binge drinking in the general population of Finland over the past 40 years. Methods: All analyses were based on six Drinking Habits Surveys between 1968 and 2008 of representative samples of the Finnish population aged between 15 and 69 (n = 16,400). The number of drinking occasions per year involving 1–2 drinks (light) and 4+ or 6+ drinks (binges) was used as a dependent variable in APC modelling. Descriptive cohort profiles and negative binomial models were used to assess the effects of APC. Results: Descriptive cohort profiles differed for light and binge drinking. No substantial differences were found across cohort profiles for light drinking, while APC modelling predicted declining cohort and increasing period effects. Differences between cohorts were found for binge drinking, with predictions of slightly declining or increasing period and increasing cohort effects. Conclusions: Light drinking has increased over time for each cohort, with no substantial differences between cohort profiles. Binge drinking has increased with more recent cohorts and there are distinct differences between cohort profiles, especially among women.
Adolescents Involved with the Criminal Justice System

Unfortunately, it is common for adolescents to come into contact with the criminal justice system. Although the criminal justice system is making strides in FASD awareness and training, it is, like most systems, designed for dealing with the “average” or “typical” person, not with the unique being who is your child.

- As soon as possible, tell police, courts, and correctional staff that your child is affected with FASD. This information can ensure more appropriate treatment at all levels. It is important that you avoid conditions on a probation order that would be very difficult for the youth to follow and therefore set them up for failure.
- Case planning at all levels must include the important adults in the life of a youth with FASD.
- Keep interviews with the young person as short as possible. An interview that requires obtaining a lot of information ideally should be done over a couple of interviews.
- Routine probation interviews or counseling sessions should consistently be held the same time and day (for example, every second Tuesday at 4:00 p.m.).
- Try to limits tasks or expectations and give limited choices where possible. For example, “You must attend counseling. Do you want to attend AADAC or see a psychologist?”
- Set limits and follow through. Avoid debating or


Abstract: Neurobiological research in alcohol dependence has led to a new understanding of this addictive disease. While some important mechanisms like alterations in the mesolimbic reward system or changes in the hypothalamus–pituitary–adrenocortical axis have been well studied, other possible neurobiological mechanisms are still unrevealed. This applies for the role of specific neuroendocrinological pathways like the appetite-regulating system and the modification of gene expression, particularly the influence of genetic variants of transcription factors or epigenetic mechanism like DNA methylation or histone acetylation. This review describes the current knowledge regarding these factors, focusing particularly on the role of appetite- and volume-regulating hormones, the role of genetic variants of specific transcription factors and the function of epigenetic alterations in the genomic sequence of candidate genes for alcohol dependence. A further understanding of the influence of transcription factors and epigenetic regulation may help to elucidate the pathophysiological mechanisms in the neurobiology of alcohol dependence.


Abstract: Aims: To investigate differences and similarities in college students’ drinking motives in Spain and in Hungary. Methods: A total of 550 Spanish (mean age 22.7, SD = 3.2) and 997 Hungarian (mean age 22.4, SD = 2.7) college students completed the Drinking Motive Questionnaire Revised Short Form (DMQ-R SF) and answered other alcohol-related questions. Data were analyzed by confirmatory factor analysis, t-test and structural equation modeling. Results: The DMQ-R SF demonstrated good psychometric properties in both countries. The rank order of the motives (social>enhancement>coping>conformity) was identical in the two countries. However, Hungarian students scored higher on enhancement, social and coping motives than Spanish students. In both the Hungarian and the Spanish population, enhancement motives were associated with drinking frequency and drunkenness, while coping motives were associated with alcohol-related problems. Among Spanish students, a significant relationship was found between alcohol-related problems and enhancement motives as well. Conclusion: Despite the substantial differences in the drinking culture of both countries, drinking motives showed overwhelming similarities (e.g. rank order of motives and the particular relationships between motives and alcohol outcomes). Only few differences (e.g. Hungarian college students indicated a higher level of motives) were found in cross-national comparison. Our results imply that programs targeting risky drinking motives are likely to be successfully adapted to different drinking cultures
arguing over rules. Make consequences immediate and consistent and remind the youth of the reason for the consequence. Know that he/she will continue to experience difficulty learning from consequences.

- Use language that is familiar. Avoid open-ended or “why” questions. Using cuing and prompting techniques, you can assist the youth when he/she is having trouble remembering something. You can also teach strategies for remembering such as using notepads, lists, etc.

- Provide the youth with a laminated card with personal identification and the name and contact information of an emergency contact. Instruct them that when they are stopped by the police, they are supposed to show the card to the officer.

- Anticipate and prevent problems by providing close supervision and monitoring. Whenever possible, obtain the support of a youth worker, mentor, curfew surveillance staff, etc. to help supervise.

(Adapted from *FASD Strategies, Not Solutions* edited by the Region 6 Fetal Alcohol Spectrum Disorder Child and Youth Sub-Committee. Published by Region 6 Fetal Alcohol Spectrum Disorder Child and Youth Sub-Committee www.region6fasd.ca)

Do you have an idea for the Intervention Corner? Do you have some tips or suggestions for how to help individuals with an FASD be successful? Email FAS*Facts* at arcticfasdrtc@uaa.alaska.edu and let us know!

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**FASDs in the Media**

The links to news articles and opinion pieces presented below are provided for the purposes of discussion. The Arctic FASD RTC is not responsible for the titles and/or content of the articles, nor do they necessarily reflect the views or position of the Arctic FASD RTC.

**United States**

- ‘Ask, listen, learn’ confronts kids about alcohol use
  Salt Lake Tribune, June 10, 2011

- Fetal alcohol syndrome: dashed hopes, damaged lives
  Bulletin of the World Health Organization, June 2011

- Strollerderby: Drinking during pregnancy – is science or emotion guiding you?
  Babble, May 31, 2011 (Blog)

- An inspiring triumph over fetal alcohol syndrome
  StarTribune, May 26, 2011

**International**

- Central Alberta group launches new project to battle FASD
  Red Deer Advocate, June 13, 2011

- Max & Budster
  Nelson Star, June 7, 2011

- Fetal alcohol study to use video games: Scientists try to figure out if gaming benefits children affected with disorder
  The Vancouver Sun, June 2, 2011

- Alcohol a significant health risk, health unit official says
  The Peterborough Examiner, June 1, 2011

- Rewiring the brains of children with fetal alcohol syndrome
  The Globe and Mail, May 27, 2011

- Unfair Burden: The invisible, pervasive condition caused by prenatal exposure to alcohol
  BCLocalNews, May 26, 2011

- New research into fetal alcohol spectrum disorder offers hope
  OakBayNews, May 25, 2011
Arctic FASD RTC \textit{FASt Facts}

Building on past and current FASD education and awareness efforts in Alaska, the goal of the Arctic FASD RTC is to increase FASD knowledge, awareness, and practice competence among health and allied healthcare professionals and students. Using the Centers for Disease Control and Prevention (CDC)'s \textit{FASD Competency-Based Curriculum Development Guide}, we deliver education and training in the form of workshops, seminars, and other resources to professionals and students. We are also certified State of Alaska FASD101 trainers.

The Arctic FASD RTC is honored to have the assistance of our national consultants, and our advisory board. Assisting us with our training are our affiliate faculty and our speakers’ bureau.

There are four other RTCs in operation around the United States: the Frontier FASD RTC, the Great Lakes FASD RTC, the Midwestern FASD RTC, and the Southeastern FASD RTC. All are funded through the Centers for Disease Control and Prevention.

\textbf{About \textit{FASt Facts}}

\textit{FASt Facts} is a monthly email newsletter with announcements and information about upcoming training opportunities, a sampling of FASD news and research from Alaska, the U.S.A., Canada, and around the world, as well as links to helpful resources. Please feel free to forward the newsletter to anyone you know who has an interest in FASDs.

\textit{FASt Facts} is compiled and edited by the Arctic FASD RTC staff. We make every effort to provide links to original content, and to make sure those links are accurate at the time the newsletter is sent. The Arctic FASD RTC has no control over any links that change after publication of the newsletter. The Arctic FASD RTC is not responsible for the content of external Internet sites. News articles and research abstracts are provided for the purposes of discussion; they do not necessarily reflect the views or position of the Arctic FASD RTC.

We hope you find these newsletters helpful and informative. We welcome your input for content. Please send suggestions to arcticfasdrtc@uaa.alaska.edu.

\textbf{About this message}

You are receiving this email because you requested to receive updates from the Arctic FASD Regional Training Center.

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Previous issues of \textit{FASt Facts} can be found at our website or at the listserv archive. Funding for the Arctic FASD Regional Training Center has been provided by the U.S.
Department of Health and Human Services, Centers for Disease Control and Prevention Cooperative Agreement # CDC1U84DD000439.

No official endorsement by the CDC for the content of this email is intended or should be inferred.