

Psychologists Survey on Fetal Alcohol Syndrome

This survey asks for information on your knowledge, attitudes and practices about diagnosis, treatment and prevention of Fetal Alcohol Syndrome (FAS) and other prenatal alcohol-related disorders. Please answer the questions by circling the number of the appropriate response or by filling in the blanks.

1. During a typical work week, what proportion of your time do you spend in the following professional activities? *If you do not spend any time in a particular activity, please indicate this by entering zero (0) hours in the appropriate space.*

Activity:	%Hours:
Direct patient care (self-employed).....	_____
Direct patient care (other than self-employed).....	_____
Administration.....	_____
Academic medicine.....	_____
Research.....	_____
Fellowship training.....	_____
Other.....	_____
TOTAL	<u>100%</u>

The following questions are for psychologists who provide some **DIRECT PATIENT CARE**.
If you do **NOT** provide direct patient care, please check this box and go to Q# 22

GENERAL KNOWLEDGE

2. What would you estimate the overall prevalence of Fetal Alcohol Syndrome in the United States to be?

- 1 in 10 1 in 100 1 in 1,000 1 in 10,000 1 in 100,000

3. Please check which of the two statements below corresponds most closely with your personal viewpoint. Please pick only ONE box.

- Pregnant women or women planning to become pregnant should completely abstain from consuming alcohol.
- Occasional consumption of alcohol (one drink per day or less) during pregnancy is not harmful to the mother or fetus

I believe that occasional alcohol consumption (one drink per day or less) is safe during the following trimesters of pregnancy, (check all that apply):

- 1st trimester 2nd trimester 3rd trimester

4. In your opinion, how many drinks per week can a pregnant woman consume without adverse pregnancy outcomes? (Fill in your answer)

- (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) (12) (13) (14+)

5. In your opinion, how many drinks per occasion can a pregnant woman consume without adverse pregnancy outcomes? (Fill in your answer)

- (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) (12) (13) (14+)

6. Please indicate whether you agree or disagree with the following statements:

	Agree	Disagree	Don't Know
FAS occurs at similar rates in all socioeconomic groups of society	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FAS occurs at similar rates among all cultures and ethnic groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. Please indicate whether you agree or disagree with the following statements:

	Agree	Disagree	Don't Know
Alcohol's effect on fetal development remains unclear	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prenatal alcohol exposure is a significant risk factor for permanent brain damage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alcohol withdrawal in a baby at birth is the worst outcome of prenatal alcohol exposure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Young adults with FAS usually achieve successful independence at the expected time (18 to 21 years)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Early diagnosis and ongoing surveillance of FAS may lead to implementation of secondary prevention of disabilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. Do you consider any of the following problems to be associated with Fetal Alcohol Syndrome?

	Yes	No	Don't Know
Infantile withdrawal symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Delayed development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Birth defects/malformations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Psychiatric (DSM IV) disorders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lowered IQ/retardation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Behavioral problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Low birth weight	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Long term emotional disorders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Addictions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attention deficit hyperactivity disorder	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. Which of the following are included in the facial dysmorphism associated with Fetal Alcohol Syndrome? (Check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Large inner canthal distance | <input type="checkbox"/> Short palpebral fissures |
| <input type="checkbox"/> Full lips | <input type="checkbox"/> Smooth philtrum |
| <input type="checkbox"/> Thin upper lip | <input type="checkbox"/> Flaring nares |
| <input type="checkbox"/> Don't Know/Unsure | |

10. It is easiest to diagnose FAS at what age?

- | | |
|--|--|
| <input type="checkbox"/> Newborn | <input type="checkbox"/> Early Childhood |
| <input type="checkbox"/> Adolescence | <input type="checkbox"/> Adulthood |
| <input type="checkbox"/> Don't Know/Unsure | |

11. Please indicate whether you agree or disagree with the following statement.

Making a diagnosis of FAS stigmatizes the child and family

Strongly Agree	Agree	Disagree	Strongly Disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please consider your own practice over the past 5 years when answering the following questions.

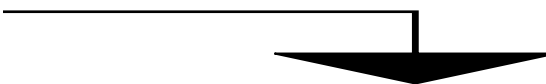
DIAGNOSIS & TREATMENT

12. Do you provide advice and education on the consequences of alcohol use during pregnancy to your adolescent female patients? (Check ONE box)

- Always/almost always
- Sometimes
- Rarely/never

13. During the past 12 months, how many patients have you... (if none, enter "000")

14. Do you make use of a diagnostic schema for FAS in your practice?

- Yes
 - No
- 

If yes, which one of the following do you use?

- Institute of Medicine criteria
- American Academy of Pediatrics criteria
- Seattle 4 digit diagnostic criteria
- Other (please specify)

15. Many providers do not make the diagnosis of FAS in their practice. Please indicate which of the following factors may contribute to this situation. (Please select all that apply)

- Lack of time needed to make diagnosis
- Lack of specific training to make the diagnosis
- Belief that making the diagnosis will not make a difference to the individual
- Other (please specify)

TRAINING/PERCEIVED COMPETENCE/PERCEIVED NEEDS

16. Do you recall receiving any formal training in the following FAS competencies and if so, indicate where you received this training: (Check all that apply)

	NO	YES			
		Graduate School	Internship	CE (received credit)	Other
Ability to recognize the constellation of features associated with FAS and other alcohol-related effects	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Understanding of the basic biomedical mechanisms that result in FAS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to select valid and reliable assessment instruments to screen for/diagnose FAS and other alcohol-related disorders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to identify risk factors and interventions for secondary FAS disabilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to plan and perform clinically relevant treatment and management plans to assist and aid both the patient with FAS and their families	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
When appropriate, be able to make a referral for further workup in a child with FAS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Appreciation and ability to use interdisciplinary team evaluations for individuals with FAS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to assist clients in accessing local FAS-related resources, including family support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Utilization of techniques for effectively communicating information to individuals with FAS, their family members, and care providers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Demonstration of the ability to provide ethical protections to the patient with FAS regarding confidentiality and autonomy

Ability to educate pregnant women about the effects of alcohol on their babies

Ability to screen women for risky or hazardous drinking

Ability to conduct brief interventions for alcohol abstinence

17. If you have received any formal training on FAS in any venue (graduate school, internship, CE), overall, would you say that training was:

- Poor
- Fair
- Good
- Excellent

18. In general, how prepared do you feel to (Check one box in each row):

	Very Prepared	Somewhat Prepared	Somewhat Unprepared	Very Unprepared
Identify children with possible FAS or other alcohol-related disorders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diagnose children with FAS and other alcohol-related disorders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Manage/coordinate the treatment of children with FAS and other alcohol-related disorders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

19. Please rate how helpful the following kinds of materials or supports would be to you in your clinical practice (Check one box in each row).

	Very Helpful	Somewhat Helpful	Not Very Helpful	Not At All Helpful
Concise provider and staff information on prevention, diagnosis, and intervention on FAS and other alcohol-related disorders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Patient education materials on the impact of alcohol use during pregnancy on children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clinical guidelines for best practices for diagnosis of	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FAS and other alcohol-related disorders

Registry of specialists available for consultation about FAS and other alcohol-related disorders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Listing of community-based resources for children with FAS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Materials for office practice including FAS screening and referral checklists and pocket reminders of diagnostic criteria	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

20. How helpful would the following mechanisms be to you for receiving training on FAS prevention, diagnosis, and intervention? (Check one box in each row)

	Very Helpful	Somewhat Helpful	Not Very Helpful	Not At All Helpful
Regional Conferences (CE)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Internet-based learning opportunities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
On-site training for myself and colleagues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-study materials (eg, CD-ROM, videos)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

21. Please indicate whether the following types of FAS-related training and educational materials are available in the community where you practice, and whether these resources are helpful, or would be helpful if they became available. (Check all that apply)

	Available	Not Available	Very Helpful	Somewhat Helpful	Not Very Helpful	Not At All Helpful
Regional Conferences (CME)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Internet-based learning opportunities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
On-site training for myself and colleagues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-study materials (eg, CD-ROM, Videos)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

BACKGROUND INFORMATION

22. What is your gender?

- Male
- Female

23. Are you Hispanic or Latino?

- Yes **➔** If yes, is it:
 No

- Mexican American
 Puerto Rican
 Other Hispanic (please specify) **➔**

24. Are you: (Mark all that apply)

- African-American/Black
 American Indian/Alaskan Native
 Asian
 Native Hawaiian/Pacific Islander
 White

25. What is your age?

0	0
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9



26. Years in practice:

0	0
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9

27. What is your primary employment setting? (Please select only one)

- Solo practice
 Group practice
 Medical School or University
 Hospital or clinic
 Community-based health center
 Other (please specify) **➔**

28. Do you consider your primary employment location to be: Circle ONE response

- Urban inner city
 Urban not inner city
 Rural
 Suburban

29. Your current employment title is: _____

Thank you. Please return in the enclosed envelope to:

Some questions from this survey were taken from:

Clarke M, Tough SC. A National Survey Regarding Knowledge and Attitudes of Health Professionals About Fetal Alcohol Syndrome. Health Canada Final Report, January 2003.

Shane T. Diekman, et al. A Survey of Obstetrician-Gynecologists on Their Patient's Alcohol Use During Pregnancy. ACOG. Vol 95, Number 5, May 2000.