**C4 -Arctic Fetal Alcohol Spectrum Disorder Regional Training Center**

**FASD 201 Workshop Pre-Test**

For each item, please choose the response that best completes the sentence or answers the question.

1. The best public health message related to alcohol consumption by women of childbearing age is...
	1. Women who know they are pregnant should not consume alcohol.
	2. Women who are pregnant or could become pregnant should not consume alcohol.
	3. All sexually active women should not consume alcohol.
	4. Women of childbearing age should not consume alcohol.
	5. Alcohol use, in moderation, is safe for all women.

2. A variety of strategies have been found to be effective when working with individuals with an FASD. Which one of the following may not be as effective?

 a. Concise, explicit instructions

 b. Stable routines

 c. Social cues

 d. Visual aids

 e. Repetition

3. Which organ system is primarily susceptible to damage or alteration caused by prenatal alcohol exposure?

1. The circulatory system
2. The skeletal system
3. The central nervous system
4. The reproductive system
5. The digestive system

4. Which of the following is a safe amount of alcohol for a pregnant woman to consume?

* 1. A standard drink twice a week
	2. A drink that is less than a standard amount twice a week
	3. After the first trimester, it is safe to have an occasional standard drink
	4. It is safe to drink alcohol during the third trimester
	5. No known amount of alcohol is safe during pregnancy

5. When caring for an individual with a known FASD, it helpful to consider \_\_\_\_ rather than \_\_\_\_ in order to better understand ability and behavior.

1. Developmental age; chronological age
2. Strengths; weaknesses
3. Protective factors; risk factors
4. Environment; mood
5. Chronological; adaptive

6. Which one of the following is NOT correct?

 Persons with an FASD …

1. May experience problems in school and getting along with other children.
2. Do not typically need support and services to live and work independently.
3. Can benefit from obtaining an early diagnosis.
4. May need support and services throughout their lives.
5. May be at an increased risk for victimization and high risk behaviors.

7. Which of the following are considered protective factors against secondary disabilities associated with FASDs?

* 1. Living in stable and nurturing home environments
	2. Early diagnosis (before 6 years of age)
	3. Consistency in caregivers
	4. Eligibility for social and educational services
	5. All of the above

8. Which of the following is NOT reported as an outcome of research-based interventions for children with FASDs?

1. Improved social functioning
2. Improved child behavior
3. Development of executive functioning and self-regulation
4. Increased parental distress
5. Improved parenting attitudes

Please respond to the following questions about your professional experiences.

1. In your current position, do you…

provide services to women of childbearing age? YES NO

provide services to individuals who may be at risk of an FASD? YES NO

On a scale from 0 to 10 where 0 means “Not confident in my skills” and 10 means “Totally confident in my skills,” how confident are you in your skills to do the following? (circle one number per row)

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Not confident in my skills |  |  |  |  |  |  |  |  |  | Totally confident in my skills |
| Screen women for risky or hazardous drinking | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| Educate pregnant women about the effects of alcohol on their babies | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| Conduct brief interventions for reducing alcohol consumption | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| Utilize resources to refer patients who need formal treatment for alcohol abuse | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| Identify persons with possible FAS or other prenatal alcohol-related disorders | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| Diagnose persons with possible FAS or other prenatal alcohol-related disorders | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| Utilize resources to refer patients for diagnosis and/or treatment services | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| Manage/coordinate the treatment of persons with FASDs | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |

|  |
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| **Please take a moment to tell us about yourself:** |
| **Are you (Circle one):** **Male** **Female** **Transgender****Are you Hispanic or Latino(a)?** **Yes** **No****How do you describe your race?**(Select all that apply)  **American Indian/Alaska Native** **Asian** **Black or African American** **Native Hawaiian/Pacific Islander** **White****❒ I am the parent/caregiver** **of a child with FAS/FASD** | **If you are a PROFESSIONAL, please circle the one that best represents your current position:****ALLIED HEALTH PROFESSIONAL** **Counselor** **OT/PT/SLP** **Psychologist** **Social Worker** **Other Allied Health Professional:**Specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**DENTAL PROFESSIONAL** **Dental Assistant** **Dental Hygienist** **Dentist****MEDICAL PROFESSIONAL** **Family Physician**  **Internal Medicine Physician** **Nurse (NP, RN, LPN)** **OB/GYN** **Pediatrician** **Physician Assistant** **Psychiatrist** **Other Medical Professional**Specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**OTHER** **Administrator** **Corrections** **Educator, PreK-12** **Educator, PreK-12 SpED** **Educator, Other**Specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Lawyer/Judge** **Public Health** **Scientist** **Other Professional:** Specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **If you are a STUDENT OR RESIDENT, please circle all that apply:****ALLIED HEALTH STUDENT** **Human Services****OT/PT/SLP** **Psychology** **Social Work** **Other Allied Health Student:**Specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**HEALTH STUDENT** **Dental Student** **Medical Student** **Nursing Student****MEDICAL RESIDENT** **Family Physician**  **Internist** **OB/GYN** **Pediatrician** **Psychiatrist** **Other Resident**Specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**OTHER STUDENT** **Counseling Education** **Education** **Other Student**Specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |