

Pre-Training Survey

You are invited to take part in a survey for health professionals. The purpose of this survey is to understand the opinions and practices of health professionals around their patients'/clients' alcohol use and on the prevention, identification, and treatment of fetal alcohol spectrum disorders. Your feedback is important as it will help assess the efficacy of trainings and identify the needs of health professionals to better address the services they provide to patients'/clients around alcohol consumption and/or the effects of alcohol use during pregnancy.

This survey will take approximately 9 minutes to complete and your responses will be kept secure. You will be asked to create a unique identity code which will be used to invite you to take a similar survey after six months to assess how useful this training has been in your practice with your patients'/clients regarding their alcohol use.

Your participation is voluntary; you may decline to answer any question and you have the right to stop the survey at any time. Any information you provide will be presented in aggregate in a report and no individual identifying information will be included. There will be no costs for participating, nor will you benefit from participating.

CDC estimates the average public reporting burden for this collection of information as 9 minutes per response, including the time for reviewing instructions, searching existing data/information sources, gathering and maintaining the data/information needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Information Collection Review Office, 1600 Clifton Road NE, MSD-74, Atlanta, Georgia 30333; ATTN: PRA (0920-1129).

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The **anonymous linkage code** below will be used to match data from different evaluation forms without using your name or information that can identify you.

Please complete the following items for your anonymous code:

First letter in mother's first name:

First letter in father's first name:

First digit in your social security number:

Last digit in your social security number:



What type of training are you attending?

Webinar series

FASD or SBI training

I found out about this training from: (Select all that apply.)

A professional organization

A recognized leader in my field

A colleague at my practice setting

Other, please specify:

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Please provide name of the professional organization from which you found out about this training:

How did you find out about this training from the professional organization? (Select all that apply.)

Website

Email

At a conference

Other, please specify:

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Fetal alcohol spectrum disorders are:

Disorders a pregnant woman experiences when she drinks alcohol.

Disorders that effect the ability of a pregnant woman who drinks alcohol to go full term.

Physical disorders that affect a fetus when a pregnant woman drinks alcohol.

The range of effects that can occur in an individual who was exposed prenatally to alcohol.

Which of the following could indicate that a child may have been exposed to alcohol prenatally?

(Select all that apply.)

Growth deficiencies

Problems with self-regulation/self-soothing

Clinically significant abnormalities in neuro-imaging and/or a history of seizures

Delayed adaptive skills

Cognitive/developmental deficiencies or discrepancies

Confirmed history of alcohol exposure in utero

Executive function deficits

Don't know/Unsure

Delays in gross/fine motor function

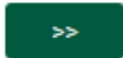
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Risky drinking for non-pregnant women ages 21 and older is defined as more than _____ standard drinks in a day, or more than _____ standard drinks per week on average:

2, 6	3, 8
3, 7	4, 7

Which of the following are the primary facial dysmorphic features associated with Fetal Alcohol Syndrome? (Select all that apply.)

Wide inner canthal distance	Thin upper lip
Short palpebral fissures	Flaring nares
Full lips	Don't know/Unsure
Smooth philtrum	



What advice would you give your patient/client about how much alcohol is safe to drink during pregnancy?

One glass of wine per day.

One light beer per day.

One shot of hard alcohol per day.

There is no known safe amount of alcohol consumption during pregnancy.

When is it safe to drink alcohol during pregnancy?

During the first three months

During the last three months

Once in a while

Never

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What is the most effective strategy to reduce fetal alcohol spectrum disorders (FASDs)?

Enact laws and other policy strategies that punish pregnant women for drinking alcohol.

Screen all women of child bearing age for alcohol use and provide intervention as appropriate.

Tell women who you think may have a drinking problem to get help.

Conduct health fairs and other educational events for new mothers that focus on binge drinking.

Rate the importance of providing counseling to your patients/clients on risky alcohol use in women of childbearing age:

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Are you a student?

Yes

No

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When do you (or someone in your practice) ask your patients/clients or their parents/caregivers about their alcohol use?

Never

Annually

At each visit

When indicated, please describe:

Other, please specify:

My practice has a consistent process to screen or obtain information from all patients/clients about their alcohol use.

Yes

No

Don't know

Not applicable to the patients/clients in my practice setting

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What does initial patient/client screening for alcohol use consist of in your practice setting?

Informal questions (e.g., "Do you drink?" "How often/much do you drink?")

Formal screening tool or evidence-based/ validated screening instrument (AUDIT, AUDIT-C, DAST, CAGE, CRAFFT, NIAAA Youth Alcohol Screen, etc.)

Don't know

Who generally conducts the initial screening for alcohol? (Select all that apply.)

Nurse (including nurse practitioner)

Physician

Social worker

Physician's assistant

Behavioral health specialist (coach)

Medical assistant

Psychologist

Other, please specify:

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Is screening for alcohol use followed by some type of intervention in your practice setting? (Select all that apply.)

No, there is no patient/client education or intervention done following the initial screening

Yes, all patients/clients are given educational materials/information on "safe" levels of alcohol and health risks associated with consuming too much alcohol

Yes, patients/clients who screen positive for risky alcohol use are asked follow-up questions and provided brief counseling.

Yes, patients/clients who screen positive for risky alcohol use are asked follow-up questions and provided with additional resources (e.g., a list of treatment and/or counseling services in the community).

Not sure if there is an intervention following the initial screening.

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Who generally does the intervention in your practice setting? (Select all that apply.)

Nurse (including nurse practitioner)

Social worker

Behavioral health specialist (coach)

Psychologist

Physician

Physician's assistant

Medical assistant

Other, please specify:

Does your practice bill for screening and brief intervention services?

Yes

No

Not sure

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In your current position, do you provide services to individuals who may have fetal alcohol spectrum disorders (FASDs)?

Yes

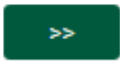
No

Not sure

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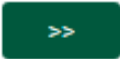
On a scale from 1 to 5 where 1 means you strongly disagree with the statement and 5 means you strongly agree, to what extent do you disagree or agree with the following statements. (Select one answer per row.)

- a. It is important to routinely screen all patients/clients for alcohol use
- b. Screening a person for alcohol use confers a stigma to the person being screened
- c. It is important to screen all pregnant women for alcohol use
- d. It is important to screen all women of reproductive age for alcohol use
- e. It is important to educate women of reproductive age, including those who are pregnant, about the effects of alcohol on a developing fetus
- f. Prenatal alcohol exposure is a potential cause of growth impairment
- g. Prenatal alcohol exposure is a potential cause of physical, cognitive, and behavioral health problems



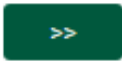
On a scale from 1 to 5 where 1 means you are "Not confident in your skills" and 5 means you are "Totally confident in your skills," how confident are you in your skills to do the following? (Select one answer per row.)

	Not confident in my skills		Moderately confident in my skills		Totally confident in my skills
	1	2	3	4	5
Asking women, including pregnant women, about their alcohol use	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having a conversation with patients/clients who indicate risky alcohol use	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Educating women of childbearing age, including those who are pregnant, about the effects of alcohol on a developing fetus	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Conducting brief interventions for reducing alcohol use	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Utilizing resources to refer patients/clients who need formal treatment for alcohol abuse	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Inquiring about potential prenatal alcohol exposure for my patients/clients	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



The questions in this section are designed to explore the attitudes of staff working with people who drink alcohol. There are no right or wrong answers. On a scale of 1 to 5 where 1 means you are strongly disagree and 5 means you strongly agree, please indicate your response to the following statements. (Select one answer per row.)

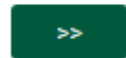
- a. I feel I know enough about causes of drinking problems to carry out my role when working with individuals who drink alcohol
- b. I feel I can appropriately advise my patients about alcohol use and its effects
- c. I feel I do not have much to be proud of when working with individuals who drink alcohol
- d. All in all I am inclined to feel I am a failure with individuals who drink alcohol
- e. I want to work with individuals who drink alcohol
- f. Pessimism is the most realistic attitude to take towards individuals who drink alcohol
- g. I feel I have the right to ask patients questions about their alcohol use when necessary
- h. I feel that my patients believe I have the right to ask them questions about their alcohol use when necessary
- i. In general, it is rewarding to work with individuals who drink alcohol
- j. In general I like individuals who drink alcohol



Please use the drop down menu below to select the field and then the occupation that best represents your current position:

Field:

Occupation:



You selected other for your current position. Please specify below:



In what year did you complete your professional training? (If you are a student, please indicate the year you expect to complete your professional training.)

Are you interested in receiving CEUs/CNEs?

Yes

No

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Are you a member of any of the following nursing organizations? (Select all that apply.)

American Nurses Association (ANA)

American College of Nurse Midwives (ACNM)

American Psychiatric Nurses Association (APNA)

Association of Women's Health, Obstetric, and Neonatal Nurses (AWHONN)

International Nurses Society on Addictions (IntNSA)

Nurse Practitioners in Women's Health (NPWH)

What is your current education level?

DNP

BSN

MSN

RN DIPLOMA

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Demographics

Are you?

Male

Female

Transgender

In which state(s) do you provide services or go to school?

- AL
- AK
- AZ
- AR
- CA
- CO
- CT
- DE
- DC
- FL

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Are you Hispanic/Latino(a)?

Yes

No

How would you describe your race? (Select all that apply.)

American Indian/Alaska Native

Native Hawaiian or other Pacific Islander

Asian

White

Black or African American

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Are you the parent/caregiver of a child with FAS/FASD?

Yes

No

The age group of the patients/clients that you see is: (Select all that apply.)

Newborn to < 1 month

1 month to < 9 years

9 years to < 18 years

18 years to < 65 years

65 years and above

Not applicable

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Thank you for completing the survey.

