

Bill would reduce birth of FAS babies

OPINION

by Sen. John Binkley
for the Tundra Times

JUNEAU — We can take an important step to reduce the number of Fetal Alcohol Syndrome babies born in Alaska if my bill providing for involuntary commitment of pregnant alcoholic women passes the Legislature. But one thing we won't be doing is putting drinking moms in jail.

It's understandable that people unfamiliar with this legislation might think the police will be prowling the bars, looking for pregnant women to haul off to jail if this bill passes. That's not true.

And even if an alcoholic woman did find herself in court under this law, she wouldn't be sent to jail. The judge would be able to order her to check into a residential alcohol treatment program.

Here's exactly what the bill — Senate Bill 414 — would do as it is currently written:

If a pregnant woman is showing signs of serious alcoholism, the bill allows the court to be petitioned to determine whether she needs professional help to avoid harming the baby she is carrying. And, while there is plenty of evidence to show that even a couple of drinks a day during pregnancy can cause some damage to the baby's health, this bill is aimed only at the hard core alcoholic, not the casual drinker.

The only people who could make a complaint in court against the woman would be her spouse, guardian, relative, a doctor or the administrator of a treatment facility. Because the bill also requires a doctor to file a certificate supporting the court petition, we've tried to protect against a situa-

tion where an angry husband or relative files an unjustified complaint.

The doctor must have examined the woman sometime within the two days prior to the petition being submitted to the court, or must have at least given her the opportunity to reject a physical examination.

If, after reviewing the evidence and the physician's certificate, the court decides that only intervention can prevent damage to the baby, the judge can then order the woman committed to a private or public facility for treatment of alcoholism.

The commitment period would be 30 days, with provisions for extension until the baby is born if the court is convinced during a second hearing that there is a need for continuing treatment.

As the treatment goes on, the patient would be provided reasonable opportunities to see the doctor of her choice.

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probably is true, but medical research has documented the fact that the brain is developing through the whole term of the pregnancy.

So even if the mother didn't stop drinking until the latter stages of her pregnancy, the child would still have a chance of having fewer defects than if the alcohol abuse were allowed to continue right up until birth.



And, at any point during the treatment period, if the woman either is determined to be no longer alcoholic or she is no longer pregnant, she would be released.

Most mothers obviously want to take good care of their babies from the moment they find out they're pregnant, and they don't need or deserve anybody from the state telling them how to do it. But alcohol and drug addiction can override that natural protective instinct, and helping those mothers addicted to alcohol protect their babies is the aim of this bill.

Some would say we have no right to intervene in a pregnant woman's life. I'd point out that we already have laws on the books making it illegal to provide alcohol or drugs to children from the moment they are born. Shouldn't we provide that same protection — if only in the most serious cases of alcohol abuse by the mother — in the months before the child is born?

Others might argue that by the time a woman is obviously pregnant and her alcohol abuse is documented well enough to go to court, the fetus has already been damaged. That some damage already would have occurred

Finally, some opponents of this bill would argue that it would discourage women from seeking medical care during pregnancy, out of fear that the doctor might file a complaint to get her committed to an alcohol program. But again, this bill is aimed only at the most serious abusers, and we've found that many pregnant women who are seriously alcoholics don't get proper medical care during their pregnancy anyway.

Fetal Alcohol Syndrome saddles a child with lifelong defects that are directly attributable to the mother's behavior. And since most these mothers have no financial resources, they create expensive financial problems we end up paying for. It costs an average of \$1140,000 just to get a newborn FAS child through the period of intensive care it requires at birth and \$1.4 million to care for it over a lifetime.

When I filed this bill, I thought a lot about a woman in Southcentral Alaska who has had seven FAS babies. All of those children are in foster families now, and the last we heard, this woman is pregnant again.

If we had had this law on the books, we might have been able to save not only her first FAS baby from some degree of damage, but the other six as well. Being committed to a treatment program might have brought an end to her alcohol abuse for good, and those other six babies could have been born healthy.

I don't claim to have written the perfect bill in this or any other case, but it will be debated and people surely will offer changes as it makes its way through the Legislature's committee process. An important part of that process is public input, and if you've got ideas on this subject, I encourage you to contact us.

Right now there are about 30 FAS babies being born every year in Alaska. This bill won't save them all, but it would at least give us the hope of saving some of them.