# **Promoting Healthy Beginnings** Winter 2016 Volume XVII Issue 2

A newsletter for health and human service providers published by:

If you would like to contribute to our newsletter as a writer or with

suggestions for future articles, please call, fax or e-mail the office.

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#### AAP: No Amount of Alcohol Should be Considered Safe During Pregnancy

A new clinical report from the American Academy of Pediatrics (AAP) identifies prenatal exposure to alcohol as the leading preventable cause of birth defects and intellectual and neurodevelopmental disabilities in children. The report, "Fetal Alcohol Spectrum Disorders," in the November 2015 issue of Pediatrics (published online October 19, 2015) stresses that no amount of alcohol should be considered safe to drink during any trimester of pregnancy.

Fetal alcohol spectrum disorders (FASDs) is an all-encompassing term for the range of effects that can occur in someone whose mother drank alcohol during pregnancy. Neurocognitive and behavioral problems from prenatal alcohol exposure are lifelong, but early recognition, diagnosis and therapy for any FASD condition can improve a child's health.

Unfortunately, a lack of uniformly accepted diagnostic criteria for fetal alcohol-related disorders has critically limited efforts that could lessen the impact of FASDs, says Janet F. Williams, MD, FAAP, one of the report's lead authors. "Even though fetal alcohol spectrum disorders are the most commonly identifiable causes of developmental delays and intellectual disabilities, they remain significantly under-recognized," said Dr. Williams.

Prenatal alcohol exposure is a frequent cause of structural or functional effects on the brain, heart, bones and spine, kidneys, vision and hearing. It's associated with a higher incidence of attention-deficit/hyperactivity disorder and specific learning disabilities such as difficulties with mathematics and language, visual-spatial functioning, impaired impulse control, information processing, memory skills, problem solving, abstract reasoning and auditory comprehension.

In surveys, about half of all childbearing age women in the United States report consuming alcohol within the past month, and nearly 8% of women said they continued to consume alcohol during pregnancy. A recent study found increased risk of infant growth retardation even when a pregnant woman's consumption was limited to 1 alcoholic drink per day (a 1.5-ounce shot of distilled spirits, 5 ounces of wine, or 12 ounces of beer).

First-trimester drinking, compared to no drinking, results in 12 times the odds of giving birth to a child with FASDs. First- and second-trimester drinking increased FASDs odds 61 times, and women who drink during all trimesters increased the likelihood of FASD odds by a factor of 65. "The research suggests that the smartest choice for women who are pregnant is to just abstain from alcohol completely," said Dr. Williams.

For more information, visit:

https://www.aap.org/en-us/about-the-aap/aappress-room/pages/AAP-Says-No-Amount-of-Alcohol-Should-be-Considered-Safe-During-Pregnancy.aspx#sthash.uNflqFuD.dpuf

The AAP offers several resources on prenatal alcohol exposure, including an FASD Toolkit for physicians and a set of frequently asked questions for parents on Fetal Alcohol Syndrome Disorders.



#### Madison • Oneida • Herkimer

In Madison, Oneida and Herkimer Counties there is now a new way to connect with up-to-date information about health and human services programs called 2-1-1 Mid-York. The service is free, confidential and multi-lingual. 2-1-1 Mid-York provides a staffed contact center where trained call specialists are available to speak with callers 24 hours a day, seven days a week, and 365 days a year. Callers can learn about many different resources, a small sample of which are listed here: food, housing, health services, managing finances, job assistance, care for a child or elderly person, mental health or substance abuse issues, tax help, transportation, education and volunteer opportunities. 2 - 1 - 1Mid-York call specialists use a database that has been developed by surveying local agencies, government offices and healthcare organizations. On a call, call specialists locate the best service matches to the needs that are identified in the course of the phone call and give that contact information to the caller. 2-1-1 Mid-York's contact center started answering calls on January 1, 2015. Later this year a website will provide internet access to the 2-1-1 Mid-York database.

2-1-1 provides significant benefits to a community. By streamlining access and referral inquiries, 2-1-1 reduces the time it takes for individuals to find the information and assistance they are seeking. Consequently, needs are met more quickly. 2-1-1 also reduces the costs incurred in staff time that agencies and government offices spend redirecting inappropriate referrals. It takes the burden of non-emergency calls from 9-1-1 call centers. 2-1-1 Mid-York also has a specialty database of resources for individuals with intellectual and developmental disabilities.

As of January 1, 2015, 100% of New York State has 2-1-1 coverage. Even before 100% of NYS had 2-1-1 services calls to 2-1-1 from NYS residents exceeded 2.1 million calls in 2014, making it clear that callers find 2-1-1 a valuable resource. Questions about the 2 -1-1 Mid-York program can be directed to info@211midyork.org, or call 315-733-4691 x 225.

2-1-1 Mid-York is a program of the United Way of the Valley and Greater Utica Area, which is proud to bring this critically important service to Madison, Oneida and Herkimer Counties through a partnership with NYS government, 2-1-1 NY, United Way of NYS and the New York State Alliance of Information and Referral Systems.

2-1-1 call specialists can be reached by dialing 2-1-1 or 844-DIAL-211. Both numbers are toll free. If you have a burning building...call 9-1-1, if you have a burning question....call 2-1-1.

### Safe Sleep Coalition Presents: Infant Sleep Conversation Series in 2016

The Mohawk Valley Safe Sleep Coalition was developed in the fall of 2013 to address the tragedy of infant death in sleep environments. Coalition participants, including Mohawk Valley Perinatal Network, Oneida County Child Fatality Review Team, Oneida County Health Department, Sudden Infant and Child Death Resource Center, Head Start, Healthy Families, Mohawk Valley Breastfeeding Network, and other partners, seek to make an impact on this issue, reducing and eventually eliminating these deaths, through provider, consumer and community initiatives.

The Coalition hosted a focus group in April 2015,

bringing community partners together to learn more about what the people who work with families in Oneida and Herkimer Counties believe and value about infant sleep, and what informs those beliefs. The focus group referenced the American Academy of Pediatrics guidelines for a safe infant sleeping environment in the participant activities. What the Coalition found, from the focus group, is that area providers may be lacking detailed information, surrounding infant sleep and the AAP Safe Sleep Recommendations, that could help them have more comprehensive conversations with parents, regarding safe infant sleep. *(Continued on Page 4)* 

## NYS of Health: The Essential Plan

#### FACT SHEET





# FAST FACTS ON The Essential Plan

#### How do I enroll?

O nystateofhealth.ny.gov

() 1-855-355-5777 or TTY: 1-800-662-1220

C Through free help from a certified in-person assistor near your home or work.

# Can you help me in my own language?

Assistance is available in your language by phone and in person.

#### When can I enroll?

NOVEMBER 2015, for coverage beginning in January 2016, or anytime after because enrollment for the Essential Plan is open ALL YEAR LONG.

## What is the Essential Plan?

A new health plan for New Yorkers. It costs much less than other health plans. And it offers the same essential benefits.

## Who can buy it?

Lower-income people who don't qualify for Medicaid or Child Health Plus.

Most you can make
\$23,540
\$31,860
\$40,180
\$48,500

## How much does it cost?

Either \$20 a month per person – less than a dollar a day or NOTHING.

#### How else does it save me money?

It has NO DEDUCTIBLE, so the plan starts paying for your health care right away.

You get FREE PREVENTIVE CARE like routine doctor exams and screenings to keep you healthy.

### What does the Essential Plan cover?

The same services covered by other plans:

- doctor visits, including specialists
- tests ordered by your doctor
- prescription drugs
- inpatient and outpatient care at a hospital



**Our Mission:** To improve birth outcomes and maternal, child and family health, facilitate collaboration among providers and community organizations and advocate for change.

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## Infant Sleep Conversation Series cont.

With the information from the focus group, and after a great amount of planning, the Coalition will launch a series of safe sleep information sessions, throughout 2016, for providers in the Mohawk Valley. The Infant Sleep Conversation Series will be broadcast in a variety of formats such as live and archived webinars and live conference. The series will include topics pertinent to understanding the big picture about infant safe sleep. The following is a tentative list of topics being covered:

- Prevention of health issues before, during, and after pregnancy, and how maternal health issues impact infant sleep safety
- Importance of receiving regular prenatal care, avoiding infant smoke exposure during pregnancy and after birth, avoiding alcohol and illicit drugs during pregnancy and after birth, and the importance of breastfeeding and vaccinations and infant health
- Discerning between Sudden Infant Death Syndrome (SIDS) and Sudden Unexplained Infant Death (SUID)
- Placing babies on their backs to sleep, importance of "Tummy Time", and the way infant rousability ties into SIDS/SUID.
- Quality of the infant's sleep environment
  - ♦ Secondhand smoke and SIDS
  - ♦ What does a safe crib look like?
  - ♦ Overheating and SIDS
  - Avoiding commercial devices designed to reduce the risk of SIDS
- Why infant formula increases SIDS/SUID risk, breastfeeding and its impact on maternal-infant sleep patterns, incorporating safe sleep recommendations, and the benefits of room sharing
- Normal infant sleep patterns, "sleep hurdles" at developmental milestones, and safe sleep
- Special needs babies, premature babies, and safe sleep
- Poverty and social issues surrounding safe sleep
- Effects of parents' reception of mixed messages about safe sleep
- Death scene investigation

If you have any questions about the series, please contact MVPN Executive Director Diana Haldenwang at (315) 732-4657, and be sure to look out for more information about the series.