

Side 1: As a health professional, you are uniquely positioned to influence positive behavior change.



A history of sexual or physical abuse increases risk for alcohol or drug use disorders.

SERVICES FOR WOMEN

- Database of Colorado treatment, prevention and recovery support programs: LinkingCare.org
- Care for mothers experiencing addiction: MothersConnection.com
- Colorado Crisis and Support Line: **1-844-493-TALK (8255)**

MARIJUANA RESOURCES

- GoodToKnowColorado.com
- Colorado.gov/marijuana
- ImprovingHealthColorado.org/resources

Lower Risk Drink Limits*

	PER DAY no more than	PER WEEK no more than
WOMEN	3	7
MEN	4	14

LESS IS BETTER

*NIAAA (www.RethinkingDrinking.NIAAA.NIH.gov)



Women experience alcohol-related problems at lower levels of drinking than men.

Why?

- Less body water to dilute alcohol
- More fatty tissue to retain alcohol
- Lower levels of enzymes that metabolize alcohol

Alcohol remains at higher concentrations for longer periods of time in a woman's body.

Key points for alcohol brief interventions:

- Breast, liver, throat cancers
- Falls
- Liver disease
- Alcohol-induced brain damage
- Experiencing violence
- Unintended or unwanted sexual activity, STIs and unintended pregnancy
- Low bone density

See the Adult SBIRT pocket card for other alcohol-related consequences.

Women and Substance Use

Side 2: Preventing Substance-Exposed Pregnancy

FASD Fetal Alcohol Spectrum Disorders:

There is no known safe amount of alcohol use during pregnancy or when trying to get pregnant. There is also no safe time to drink during pregnancy (CDC).

- Key Points:**
- FASD is irreversible and 100% preventable
 - All forms of alcohol pose a similar risk
 - Heavier use increases risk

Alcohol consumption during pregnancy may lead to:

- Miscarriage or stillbirth
- Prematurity
- Low birth weight
- A range of neurocognitive and behavioral problems. Some may not appear until early childhood/school-age
- Developmental disability
- Serious physical malformations including major organ damage



Ask all women of child-bearing age:

“Are you hoping to become pregnant in the next year?”

Listen for:

Motivation to change - Fears regarding change

Alcohol Brief Screening: *“How many times in the past year have you had 4 or more drinks in one day?”*

Step 1

Ask, are you...

- Able to become pregnant?
- Sexually active with a male or planning pregnancy using another method?
- Using effective form(s) of contraception consistently?

Step 2

Discuss

- Approaches to prevent pregnancy
- Interest in using contraception

Step 3

Use validated screening questions

AUDIT-C/AUDIT
TWEAK
T-ACE

ImprovingHealthColorado.org/resources

Step 4

Explore and negotiate

- Options to avoid pregnancy and/or reduce alcohol or drug use
- Consider that partner substance use may influence motivation

EFFECTIVENESS OF FAMILY PLANNING ~50% of all U.S. pregnancies are unplanned

Most Effective



Least Effective

Implant • Intrauterine Device • Male Sterilization • Female Sterilization

Injectables • Pill • Patch • Ring • Diaphragm

Male Condom • Female Condom • Withdrawal • Sponge

Fertility-Awareness Methods • Spermicide



MARIJUANA USE DURING PREGNANCY AND BREASTFEEDING

The American College of Obstetricians and Gynecologists recommends abstinence from medical and recreational marijuana during pregnancy and breastfeeding.

- THC crosses the placenta and is present in breast milk.
- Use during pregnancy can affect the child later in life and has been associated with lower scores on tests of attention, coordination and behavior.