

Colorado State Senate
Health and Human Services Committee

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Have done training throughout Colorado and in other states.

Colorado has a serious problem and it's costing us a lot of money. Based upon a national estimate of 1 person in 1000 born with FAS and Colorado's 2006 census, there are 4750 people in Colorado with Fetal Alcohol Syndrome and probably ten times that many with Fetal Alcohol Spectrum Disorders. This is based upon national averages. The National average cost to the public for each of these individuals was **\$1.6 million in 2002.**

These are probably conservative figures for Colorado. Studies have shown that Colorado has one of the highest rates of drinking among women. In 2006 **11.2%** of women polled in Colorado indicated that they drank alcohol during the last 3 months of their pregnancy.

Studies in other states have shown that the most effective way to reduce drinking during pregnancy is a **state-wide awareness and intervention effort.** Federal law requires warnings on all bottles of alcoholic beverages. Follow-up studies showed that these warnings were very effective for the first two years, then the benefits began to diminish. Addition of signs, availability of diagnosis and foster care screening has, at least in Washington state, made a longer lasting impact. In Washington, they were able to reduce maternal drinking significantly between 1993 and 1998. At the same time, the number of children with FAS in their foster-care system reduced from 6.7% in 1995 to less than 3% in 1998.

Washington is the only state with good research in this area. However, 22 states and the District of Columbia have so far passed legislation either requiring or encouraging signage at the points of sale.

Currently in Adams County, juvenile probation officers interview mothers about whether they drank while pregnant with the youth being placed on probation. Over the last couple of years, a consistent 26-30% have acknowledged that they drank at some time in the pregnancy. Attempts have been made to get diagnostic evaluations of the youth in question. 5-6% of all youth placed on probation in the last three years have been diagnosed with an FASD.

No study has been done of the youth in the Division of Youth Corrections, but the likelihood is that the numbers are even greater there. Individuals with FASDs have a great tendency to end up in the criminal justice system. A landmark study at the Univ of Wash found that 35% of their sample of people over 21 diagnosed with FAS or other FASDs had been incarcerated. We all know that incarceration is terribly expensive to the state – and it also tends to be ineffective for this population.

Caseworkers in Adams County have also begun getting diagnoses for children in long term foster placement for whom adoption has not worked and are finding that many of them also have FASDs. Most of these children have had multiple placements in residential centers at a cost of thousands of dollars per month.

This bill is a beginning to create a greater awareness of FASD in Colorado. The numbers of children born with FASDs can be reduced by a state-wide effort at prevention, education, and intervention. This bill will take the first step in this direction in Colorado – without a fiscal note.

We all know that we have to keep costs down today. We want to work with the legislature and the various departments of the state to reduce costs **in the future** – not to mention the toll that this condition takes on human lives. Please join with us in this effort.

Thank you.