

A Study on The Use of Technology to Prevent FASD

Supporting Maternal Health Through Research

Research matters.

Being a parent is the most important job in the world. But it doesn't come with a manual.

Findings from research can help you to make good decisions for you and your baby.

Maternal health matters.

What you choose to eat and drink during pregnancy can help or harm your developing baby.

Fetal Alcohol Spectrum Disorder (FASD) is caused by drinking during pregnancy.

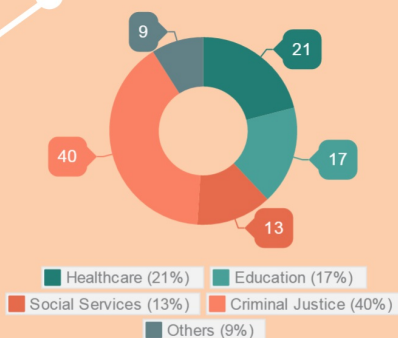


Your health matters for both you and your developing baby.

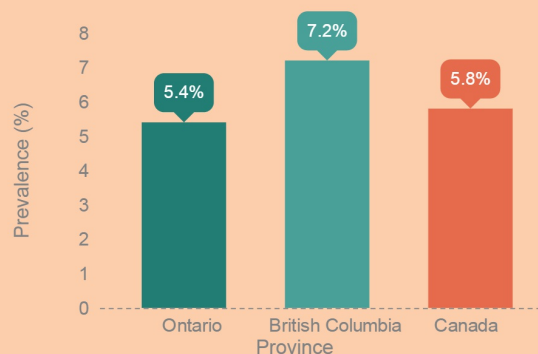
FASD is a lifelong disability that is preventable. In Canada, at least 350,000 people currently live with FASD and approximately 4000 babies are born with FASD in the country each year.

The Institute of Health Economics and the University of Alberta are studying ways to help support maternal health through use of technology.

FASD: SOME FACTS



Breakdown of Costs of FASD according to a recently published study by IHE



Prevalence of Drinking Alcohol While Pregnant

Reasons for Drinking During Pregnancy

- Unaware of being pregnant.
- Unaware of the risk of drinking during pregnancy.
- Using alcohol to cope with difficult life situations.
- Struggle with alcohol addiction.



Alberta has a well developed network of care and services to prevent FASD and support those living with the disorder: provided through family care clinics; outpatient addictions services; 12 Alberta FASD Networks; and, The Parent Child Assistance Program.

Reducing or eliminating alcohol use in pregnancy, particularly among mothers attending primary care and addictions treatment services, remains a significant challenge.



With Knowledge, Comes Brighter Futures

About Our Study

The goal of of this study is to see how a breathalyser, linked to a cloud-based alcohol monitoring system, changes alcohol use during pregnancy in women with dependency issues.

Monitoring alcohol use through this technology will make it possible for participants to also share their achievements with loved ones and counselors, further reinforcing sobriety and reducing the risk of FASD.

This is the first study of its kind.

Study Design

110 Participants

55 Regular Care

55 Regular Care and Technology

Participants are randomly assigned into one of two groups:

- 1) Regular care (control group): Participants are provided with regular care.
- 2) Regular care with technology (experimental group): Participants are provided with regular care, breathalyser device with facial recognition software and secure cloud data storage, and cell phone .

Purpose:

This study will help inform program development in maternal and child health care. In addition to traditional patient self-reporting and care, the study allows for daily self-measurement of alcohol use, **which is only known to participants of the study.**

Some of the features of the technology used include:

- facial recognition software,
- the documentation of sobriety through use of a cloud-based data gathering system; and,
- text and email prompting and reporting.

Status: Ongoing
Completion Date: 2018

For more information about the study, please contact Jasmine Brown, Project Manager and Research Coordinator, Institute of Health Economics at jbrown@ihe.ca.



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