

Reporting on Alcohol Use During Pregnancy and Fetal Alcohol Spectrum Disorder

The purpose of this resource is to answer common questions about alcohol use, alcohol use during pregnancy, and Fetal Alcohol Spectrum Disorder (FASD) to support understanding and reporting by those working in the media.

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Are you interested in learning more? See the Common Messages: Guidelines for Talking and Writing about FASD and Language and Images Matter or Canada FASD Research Network's website for evidence-based information on prevention, diagnosis, and intervention.

For more information visit CanFASD.ca or contact info@canfasd.ca

Common Questions About
Alcohol Use



1

Are there guidelines for alcohol use in Canada?

Yes. [Canada's Guidance on Alcohol and Health](#) was released in 2023 and provide evidence-based information on alcohol use to support Canadians in making informed decisions about their alcohol consumption. These guidelines are based on the latest research regarding alcohol-related harms and replace the Canada's Low-Risk Drinking Guidelines (issued in 2011). The Guidance includes a continuum of risk, showing the benefits of not drinking alcohol, including better health and better sleep, and the additive risk of alcohol on harms to oneself and others. The Guidance suggests that that drinking less is better for everyone's health, and that no alcohol is safest when pregnant.

Takeaway: Canada's Guidance on Alcohol and Health was updated in 2023. The Guidance recommends that drinking less benefits everyone.

2

How common is alcohol use?

Alcohol is the most widely used and socially accepted substance in many cultures around the world. In Canada, three-quarters of the population consume alcohol, and 23% of Canadians 15 years and older exceed Canada's Guidance on Alcohol and Health. The pervasiveness of alcohol is seen in alcohol advertisements, where alcohol is also seen as fun, something to do in social situations, or as a means to relax, complicating the messages that Canadians receive about the short- and long-term health effects of alcohol use. While alcohol use is common, increasingly young people are choosing not to drink or are "sober curious" and 23.5% of Canadian adults do not consume alcohol.

Takeaway: Alcohol use is common in Canada and worldwide. 76% of Canadians drink alcohol, including 23% exceeding chronic effects and 17% exceeding acute effects. For more information, please consult [Canadians Alcohol and Drug Survey here](#).

3

Is alcohol safe if you drink responsibly?

Moderate, occasional, or low levels of alcohol use have often been described as ‘responsible’ and ‘safe’. However, even at low levels, alcohol use is associated with several short- and long-term health outcomes, including motor vehicle collisions, diabetes, cardiovascular disease, chronic illnesses, cancer, familial disruption, loss of employment, workplace incidences, and violence. As of 2023, there are no known protective effects from consuming alcohol, even at low amounts. It is important to recognize that there are risks of alcohol use for everyone, but due to the sex and gender related factors associated with alcohol use.

Takeaway: Alcohol, regardless of the amount, increases the risks of alcohol-related harms.

4

Does alcohol help relieve stress?

Alcohol is commonly viewed as a coping mechanism as it can initially and temporarily reduce stress, anxiety, and depression. Despite the short-term ability for alcohol to mask feelings of stress, anxiety, and depression; long-term it does not address the root causes. Moreover, alcohol can disrupt sleep, affect relationships, and increase risk-taking behaviours, amplifying feelings of stress, anxiety, and depression.

Takeaway: Alcohol may initially have perceived calming or relaxing effects but can exacerbate mental health concerns.

Common Questions About
Alcohol Use in Pregnancy



1

What are the risks of alcohol use during pregnancy?

Prenatal alcohol exposure can lead to miscarriage, premature birth, low birth weight, physical and neurodevelopmental impacts, or result in Fetal Alcohol Spectrum Disorder (FASD), a diagnostic term used to describe the impacts on the brain and body of individuals prenatally exposed to alcohol. Any amount of alcohol during pregnancy can negatively impact fetal development and women's health.

Takeaway: Alcohol use during pregnancy can negatively impact women's and fetal health.

2

Why might alcohol be consumed during pregnancy?

While many people reduce or stop their alcohol use when planning a pregnancy or at pregnancy recognition, some women may find it difficult to stop or reduce their use. There are many reasons why people choose to drink – it can be a fun way to connect with others, help reduce stress, act as a social lubricant, and can be a means to cope with violence, trauma, or unsafe living environments. Alcohol use may continue during pregnancy because they do not know they are pregnant, are unaware or have received inconsistent messaging around the risks of alcohol during pregnancy, have a lack of trusted and equitable support services, or may struggle with dependency.

Takeaway: Many people reduce their alcohol use when they are pregnant or planning a pregnancy; however, this may be more challenging for some. Having access to trusted, equitable, and informed services can help women and pregnant people reduce their alcohol use during pregnancy.

3

How many women report drinking alcohol during pregnancy?

Despite ongoing public health efforts to address alcohol use during pregnancy, it is estimated 10% of women globally consume alcohol during pregnancy, with the highest rates of consumption being reported in Ireland (60.4%), Belarus (46.6%), Denmark (45.8%), and the United Kingdom (41.3%). In Canada, alcohol is a common and widely used substance among women of childbearing age. 10 to 15% of Canadians report consuming alcohol during pregnancy.

Takeaway: In Canada, 10 to 15% of women report drinking alcohol during pregnancy.

4

Is there any amount or kind of alcohol that is safe to drink during pregnancy?

There have been conflicting messages in the media about how much alcohol can be safely consumed during pregnancy; however, there is no known safe amount, type, or time to consume alcohol during pregnancy. Even low or moderate levels of alcohol use during pregnancy, have been shown to have adverse effects on fetal development. Further, there is insufficient evidence for a safe threshold for low-level drinking during pregnancy and when planning to become pregnant. The risks associated with alcohol use during pregnancy can interact with other social determinants of health, such as nutritional status, use of tobacco and other substances, experiences of violence, and lack of access to prenatal care. Researchers and clinical experts in maternal and fetal health recommend that no alcohol is best when pregnant, when planning to become pregnant, and when breastfeeding.

Takeaway: There is no safe time, amount, or type of alcohol to consume when pregnant, when planning to become pregnant, and when breastfeeding.

5 What supports can benefit people who use alcohol during pregnancy?

Accessing health care and prenatal supportive services is vital to improving maternal and fetal health outcomes. Women and people who use alcohol or other substances during pregnancy often report a range of barriers to accessing safe and non-judgemental supports. These barriers hinder their ability to access prenatal care, nutritional support, withdrawal management, substance use treatment, housing options, and family and parenting supports. Safe, destigmatizing, trauma-informed, and harm reduction-oriented care can help ensure that women and gender diverse people who use alcohol during pregnancy can access the support they need.

Takeaway: Trauma-informed, and harm reduction-oriented services can increase access to safe and non-judgemental prenatal and substance use care.

Common Questions About
***Fetal Alcohol Spectrum
Disorder***



1

What is Fetal Alcohol Spectrum Disorder (FASD)?

FASD is a diagnostic term used to describe the impacts on the brain and body of individuals prenatally exposed to alcohol. FASD is a lifelong disability. Individuals with FASD will experience some degree of challenges in their daily living, and need support with motor skills, physical health, learning, memory, attention, communication, emotional regulation, and social skills to reach their full potential. Each individual with FASD is unique and has areas of both strengths and challenges.

Takeaway: FASD is a lifelong disability that affects the brain and body of individuals prenatally exposed to alcohol. Each person with FASD has strengths and challenges and will need support to help them succeed in many different parts of their daily lives. It affects approximately 4% of Canadians, which is more than Autism Spectrum Disorder (1.52%), Cerebral Palsy (0.21%), Down Syndrome (0.14%), and Tourette's Syndrome (0.10%) combined.

2

What is the prevalence of FASD in Canada?

Researchers estimate that up to 4% of individuals in Canada have FASD, which translates to more than 1.5 million people. FASD is often under-recognized and identified, which makes it challenging to know the true prevalence of FASD in Canada. FASD is prevalent in any population where alcohol is consumed. However, rates of FASD are reported to be higher among equity-deserving groups that have been socially and medically excluded, including those involved in the child welfare and justice systems.

Takeaway: FASD is highly prevalent and is one of the leading developmental disabilities in Canada.

3

Why is FASD described as a "hidden" disability?

FASD is commonly referred to as a "hidden" disability because most people with FASD have no physical signs of impairment. The "hidden" nature of the disability can further contribute to the challenges of accurate identification, diagnosis, and reporting of FASD. Despite the hidden nature of FASD, people with FASD report the whole-body challenges associated with the disability, ranging from motor and sensory problems, memory, difficulty with learning, executive functioning, emotional regulation, ear infections, poorly developed bones, and auditory and vision problems.

Takeaway: Most people with FASD will have no physical signs of impairment. However, individuals with FASD still experience challenges in their everyday lives due to the "hidden" neurological effects alcohol has on the developing brain. No two people with FASD will experience the same challenges.

4

Do all alcohol-exposed pregnancies result in FASD?

Not all alcohol exposed pregnancies result in FASD, but the risk for FASD exists where prenatal alcohol use has occurred. The effect of prenatal alcohol exposure can vary based on many factors such as genetics, frequency and amount of alcohol consumed, nutrition, environmental factors, and the use of other substances. A safe threshold of alcohol use during pregnancy has not been established, and therefore regardless of the amount or type of alcoholic beverage consumed during pregnancy, there is a risk for FASD. Low amounts of alcohol can negatively impact fetal development at any stage during pregnancy – including before pregnancy recognition.

Takeaway: There is no safe time, amount, or type of alcohol to consume when pregnant, when planning to become pregnant, and when breastfeeding.

5

Does men and partner's drinking have a role in the risk for FASD?

Although alcohol consumption by partners does not directly result in FASD, it can result in sperm abnormalities that reduce fertility success rates, change the genetic contributions, and make epigenetic alterations, thus introducing environmental factors that may contribute to FASD. In addition, partner's alcohol use has been shown to influence maternal alcohol use and contribute to intimate partner violence. Through including men in preconception care, it is possible to address the gendered and societal expectations related to pregnancy, promote healthy child development, and improve pregnancy outcomes.

Takeaway: Partner's alcohol use can influence maternal alcohol consumption and healthy child development.

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