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Assessment of Risk of Foetal Alcohol Syndrome and other Alcohol Related Effects in New Zealand

A thesis presented in fulfilment of the requirements for the degree of

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in
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Abstract

The current research emerged from a definite need in New Zealand and was designed to be a base-line study to provide information on a number of issues relating to alcohol consumption in pregnancy. The results of this study indicate that the prevalence of alcohol consumption in pregnancy among New Zealand women is similar to that seen in a majority of other Western countries. It also indicates that greater proportions of younger women were drinkers in pregnancy, especially in the early stages and that the majority in this age group were drinking heavily. The prevalence of drinking in pregnancy at levels currently perceived to cause foetal harm observed in this study was also similar to that seen in other Western countries, where incidence rates for the prevalence of alcohol related birth defects are well established. The encounter of midwives with outcomes associated with heavy maternal alcohol consumption further confirms the risk for the prevalence of foetal alcohol syndrome and other alcohol related effects in New Zealand, at rates similar to other Western countries.

The results of this study also indicate that regular alcohol consumption exhibited a negative effect on intakes of vital nutrients like dietary folates and calcium among heavy drinking women of childbearing age and this effect is likely to continue in pregnancy. The functional role of these nutrients, pivotal to favourable outcome of pregnancy, raises concern as to what the dual consequences are of alcohol consumption and compromised nutritional status. The risk of foetal alcohol syndrome and other alcohol related effects in New Zealand is high and efforts have to be made to develop effective prevention strategies.

The current research also assessed the knowledge and attitudes of midwives on the issue of alcohol consumption in pregnancy. A high proportion of midwives perceived abstinence to be the best option in pregnancy. However, this perception of the midwives is not reflected in the behaviour of clients in their practice, as the prevalence of drinking among their clients was fairly high. However, the good response to this study by midwives and their keenness for further education on the issue of alcohol consumption in pregnancy indicates that midwives are keen to play an active role in reducing the prevalence of alcohol related birth defects in New Zealand.

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