The Impact of State-Level Alcohol and Pregnancy Policies on Birth Outcomes and Prenatal Care Use

Background

- For over 40 years, almost all states have enacted policies addressing alcohol use during pregnancy, yet few studies have measured the impact of these policies on birth outcomes and prenatal care use.
- These policies might not have their intended effects, and may have unintended negative consequences, such as discouraging pregnant women from seeking prenatal care out of fear of being reported to Child Protective Services (CPS) and having their children removed.¹
- Research on the impact of these policies is crucial because states continue to debate and enact statutes year after year,² politicians incorporate these types of policies into national legislation,³ and some of these laws are being challenged in state courts.⁴

Findings

- This is the first study to examine all policies related to alcohol use in pregnancy simultaneously across all 50 states and D.C. using a timeframe long enough to capture the period before any modern laws were enacted.

- Out of eight common policies related to alcohol use during pregnancy, six were significantly related to worse birth outcomes, and two were not significantly related to any outcomes.
- Even policies typically considered supportive, i.e. Mandatory Warning Signs, were associated with increased adverse birth outcomes and decreased prenatal care utilization. Child Abuse/Neglect policies were also associated with increased adverse birth outcomes and decreased prenatal care utilization.
- Alcohol policies that are generally applicable to the entire population that seek to reduce alcohol consumption overall appear to show more promise to improve birth outcomes than policies that single out drinking during pregnancy.

Key Points:

• Most policies targeting alcohol use during pregnancy do not improve birth outcomes.

• Instead, policies targeting alcohol use during pregnancy result in worse birth outcomes and less prenatal care utilization.

• Alcohol policies that are generally applicable to the entire population that seek to reduce alcohol consumption overall appear to show more promise to improve birth outcomes than policies that single out drinking during pregnancy.

For more information about this and other ANSIRH research, please visit www.ansirh.org.
The state-level policies targeting alcohol use during pregnancy that were examined in this study include:

- Mandatory warning signs
- Priority treatment for Pregnant Women
- Priority treatment for Pregnant Women with Children
- Reporting Requirements for Data and Treatment Purposes
- Prohibitions on Criminal Prosecution
- Civil Commitment
- Reporting Requirements for Child Protective Service (CPS) Purposes
- Child Abuse/Child Neglect

Conclusions

- Policies targeting alcohol use during pregnancy are associated with increased adverse birth outcomes and may cause women to avoid prenatal care.

- These policies do not lead to health improvements, but appear to scare women and cause them to avoid seeking medical care.

- Alcohol policies that are generally applicable to the entire population, however, may be a more promising avenue for improving birth outcomes.

References