

### *Time constraints*

Time is almost always a big issue because if ABI is required, it is not just a simple case of she no longer drinks alcohol and we are happy with the plan so no intervention is required. If intervention is required that could eat into your time or the rest of the care for that booking appointment (M7).

### *Low priority*

We've got to do domestic violence, alcohol use, smoking, you know and all the stuff. If somebody says I smoke then we have to give them all the literature, the DVD, arrange for referrals. So you can imagine, alcohol is only one of the aspects and sadly it is not the most important one because there is not a lot of evidence there that we have a lot of children who have fetal alcohol syndrome (M9).

### *Alcohol 'unit' conversion*

Asking people in terms of units per week is quite difficult because first of all you've got to work out what the units are and whether it's a big glass of wine, small glass of wine, strong wine, weak wine, it's a real nightmare and then just work it out per week rather (M19, FG).

### *Overload of information at booking appointments*

I guess the other thing is the amount of information that women can take on board. You know if you are thinking that you have got another twenty areas of information to give women you know, you wonder well can they take all that in (M2).

### *Social expectations*

People know that it is not good to drink in pregnancy and therefore they don't always tell you the truth because they know that maybe you disapprove or it will make them feel guilty if they knew that they are honest and told you (M3).