Pregnancy & Substance Use: What Works

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NC Division of MH/DD/SAS

NC Child Fatality Task Force
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Perinatal Substance Use: A Public Health Issue

- American Academy of Family Physicians
- American Academy of Pediatrics
- American College of Nurse Midwives
- American Congress of Obstetricians and Gynecologists
- American Medical Association
- American Public Health Association
- American Society of Addiction Medicine
- March of Dimes
Terms: What Works

- Substance Use Disorder
- Addiction - psychological aspects of substance use
- Dependence - physiological aspects of drug use
- Avoiding abbreviations (example: Methamphetamine (meth) vs. methadone vs. methylphenidate (Ritalin))
- Consider ‘person first’ language (example: ‘Newborns diagnosed with NAS’ or ‘pregnant woman with a substance use disorder’)
- Language of Recovery
<table>
<thead>
<tr>
<th>Current Terminology</th>
<th>Alternative Terminology</th>
</tr>
</thead>
<tbody>
<tr>
<td>Treatment is the goal; Treatment is the only way into Recovery</td>
<td>Treatment is an opportunity for initiation into recovery (one of multiple pathways into recovery)</td>
</tr>
<tr>
<td>Substance Abuse / Addiction</td>
<td>Substance Use Disorder</td>
</tr>
<tr>
<td>Drug of Choice / Abuse</td>
<td>Drug of Use</td>
</tr>
<tr>
<td>Denial</td>
<td>Ambivalence</td>
</tr>
<tr>
<td>Relapse Prevention</td>
<td>Recovery Management</td>
</tr>
<tr>
<td>Pathology Based Assessment</td>
<td>Strength / Asset Based Assessment</td>
</tr>
<tr>
<td>Focus is on total abstinence from all illicit and non-prescribed substances the CLINICIAN identifies</td>
<td>Focus on the drug CLIENT feels is creating the problems</td>
</tr>
<tr>
<td>A Drug is a Drug is a Drug</td>
<td>Each illicit substance has unique interactions with the brain; medication if available is appropriate.</td>
</tr>
<tr>
<td>Relapse</td>
<td>Recurrence</td>
</tr>
<tr>
<td>Relapse is part of Recovery</td>
<td>Recurrence may occur as part of the Disease</td>
</tr>
<tr>
<td>Clean / Sober</td>
<td>Drug Free / Free from illicit and non-prescribed medications</td>
</tr>
<tr>
<td>Self Help Group</td>
<td>Mutual Aid Group</td>
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</tbody>
</table>
Percentage of Women Who Use Substances (Past 30 Days) (NSDUH 2013)

- Alcohol: 47.5%
- Marijuana: 5.6%
- Prescription pain relievers: 1.5%
- Cocaine: 0.4%
- Hallucinogens: 0.3%
Women & Substance Use Disorders
(Past Year) (NSDUH 2013)

Substance Use Disorder, Alcohol or Any Illicit Drug:

- 5.8 % of women 18 and older
- 5.2 % of young women ages 12-17
Pregnant Women & Substance Use  
(Past 30 Days) (NSDUH 2013)

- 5.4% of women ages 15-44 are using illicit substances during pregnancy
- 9.4% of women ages 15-44 are using alcohol during pregnancy
NC: SFY 15 Women Entering SUD Treatment

(DMHDDSAS Consumer Data Warehouse, 2015)

<table>
<thead>
<tr>
<th>Primary Drug of Use</th>
<th>All Women</th>
<th>Women Age 15-45</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marijuana</td>
<td>4,654</td>
<td>4,336</td>
</tr>
<tr>
<td>Opiates &amp; Synthetic Opiates</td>
<td>4,708</td>
<td>4,062</td>
</tr>
<tr>
<td>Alcohol</td>
<td>6,005</td>
<td>3,700</td>
</tr>
<tr>
<td>Cocaine</td>
<td>2,946</td>
<td>1,942</td>
</tr>
<tr>
<td>Heroin</td>
<td>1,859</td>
<td>1,661</td>
</tr>
</tbody>
</table>
### American Congress of OB-GYNS

Pregnant Women & Prescription Drug Abuse, Dependence and Addiction: Toolkit on State Legislation

<table>
<thead>
<tr>
<th>DOES NOT SUPPORT Healthy Outcomes for Mom &amp; Baby</th>
<th>SUPPORTS Healthy Outcomes for Mom &amp; Baby</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overtreatment of NAS in NICUs</td>
<td>Appropriate comfort care in low-stimuli environment and pharmacological therapy where indicated</td>
</tr>
<tr>
<td>Criminal penalties for women and doctors</td>
<td>Public health approaches focused on prevention and treatment</td>
</tr>
<tr>
<td>Mandatory urine testing</td>
<td>Screening dialogue/questionnaire with patient consent</td>
</tr>
<tr>
<td>Mandatory reporting to law enforcement or child protective services (CPS)</td>
<td>Statistical reporting to department of health or direct reporting to CPS only for actual indications of impaired parenting</td>
</tr>
<tr>
<td>Overreliance on fragmented PDMPs</td>
<td>Safe prescribing and initial check of PDMPs</td>
</tr>
<tr>
<td>Punitive drug treatment courts</td>
<td>Family-centered drug treatment programs</td>
</tr>
<tr>
<td>Restrictions on medication access and forced withdrawal</td>
<td>OAT with methadone or buprenorphine for women and protections for treating physicians</td>
</tr>
<tr>
<td>Misleading drug prescribing warnings</td>
<td>Evidence-based labeling of opioid medications</td>
</tr>
<tr>
<td>Anti-family, one-size-fits-all drug treatment programs</td>
<td>Family-centered, community-based, outpatient treatment</td>
</tr>
<tr>
<td>Coercive referrals for fertility control</td>
<td>Counseling on pregnancy planning, prevention and contraception</td>
</tr>
<tr>
<td>Losing sight of the real harms of alcohol and cigarette use during pregnancy</td>
<td>Continued focus on the greatest preventable health threats—alcohol and tobacco use during pregnancy</td>
</tr>
</tbody>
</table>
What Works: Prevention

- Effective and routine alcohol and other drug screening with a reliable and validated standardized tool
  - **4 P’s** (Parents, Partner, Past, Present) (Alcohol & Drugs)
  - **T-ACE** (Tolerance, Annoyed, Cut down, Eye opener) (Alcohol)
  - **TWEAK** – (Alcohol)
  - **AUDIT** – (Alcohol)
  - **DAST-10-** (Drugs)

- Universal substance use screening throughout pregnancy
  - **SBIRT**: Screening, Brief Intervention, Referral & Treatment

- Counseling on reproductive life planning

- Increased focus on alcohol and tobacco use during pregnancy, the greatest preventable threats to a healthy pregnancy
What Works: Intervention & Treatment

Appropriate substance use disorder treatment programs for women:

- Early and affordable access to comprehensive SUD treatment
  - Family-Centered
  - Trauma Informed
  - Co-occurring Treatment
  - Intensive Case Management

- Medication Assisted Treatment (MAT) as part of comprehensive treatment

- Coordination with Primary & Preventative Health Care for women and their children

- Continuing care after pregnancy
NC Perinatal & Maternal Substance Use Initiative

- 20 gender responsive, family-centered substance use disorder programs
- Outpatient & Residential Services for Pregnant and Parenting Women and their Children
- Residential Services are Cross Area Service Programs (CASPs)
- Services include: screening, assessment, case management, substance use disorder and co-occurring services, parenting skills, and referrals & coordination with primary and preventative health care.
- The children also benefit from the services provided by the local health departments (pediatric care), early intervention programs, referrals for behavioral health services, care coordination for children (CC4C), & SA prevention services.
NC CASAWORKS for Families Residential Initiative

- CASAWORKS for Families model was developed by the Center for the Study of Addiction and Substance Abuse (CASA) at Columbia University
- Treatment is Work and Work is Treatment
- 6 Comprehensive residential substance use disorder programs for women and their children
- Cross Area Service Programs
Perinatal Substance Use Project

- Judith Johnson-Hostler, LCAS, Perinatal Substance Use Disorder Specialist, Alcohol & Drug Council of NC

- Provides screening, information & referral for pregnant and parenting women with dependent children

- Provides consultation, training & technical assistance for the public and for professionals regarding perinatal substance use, treatment and resources

- Weekly Bed Availability List (jjones@alcoholdrughelp.org)

- Available Monday through Friday from 8 am to 6 pm

- 1-800-688-4232
NC Fetal Alcohol Prevention Program

If you have questions about alcohol use during pregnancy or to request training on FASD for your agency, please call the NC Fetal Alcohol Prevention Program at:

1-800-532-6302

See more at: http://www.mission-health.org/centers-and-services/programs-service/genetics/community-outreach/fasd-and-genetics-education#sthash.2kARvaUR.dpuf
NC Pregnancy & Opioid Exposure Project

The NC Pregnancy and Opioid Exposure Project is an initiative under which information, resources and technical assistance are disseminated regarding the subject of pregnancy and opioid exposure.

Website: ncpoep.org
Q & A ???

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