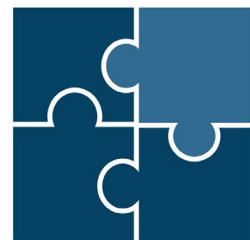


**Special Topic:
Care Coordination Considerations
for Children and Families Affected
by Prenatal Substance Exposure**

Child Welfare Training Toolkit



National Center on
Substance Abuse
and Child Welfare

Acknowledgement

This content is supported by contract number 75S20422C00001 from the Children's Bureau (CB), Administration for Children and Families (ACF), co-funded by the Substance Abuse and Mental Health Services Administration (SAMHSA). The views, opinions, and content of this presentation are those of the presenters and do not necessarily reflect the views, opinions, or policies of ACF, SAMHSA or the U.S. Department of Health and Human Services (HHS).



National Center on
Substance Abuse
and Child Welfare

Learning Objectives

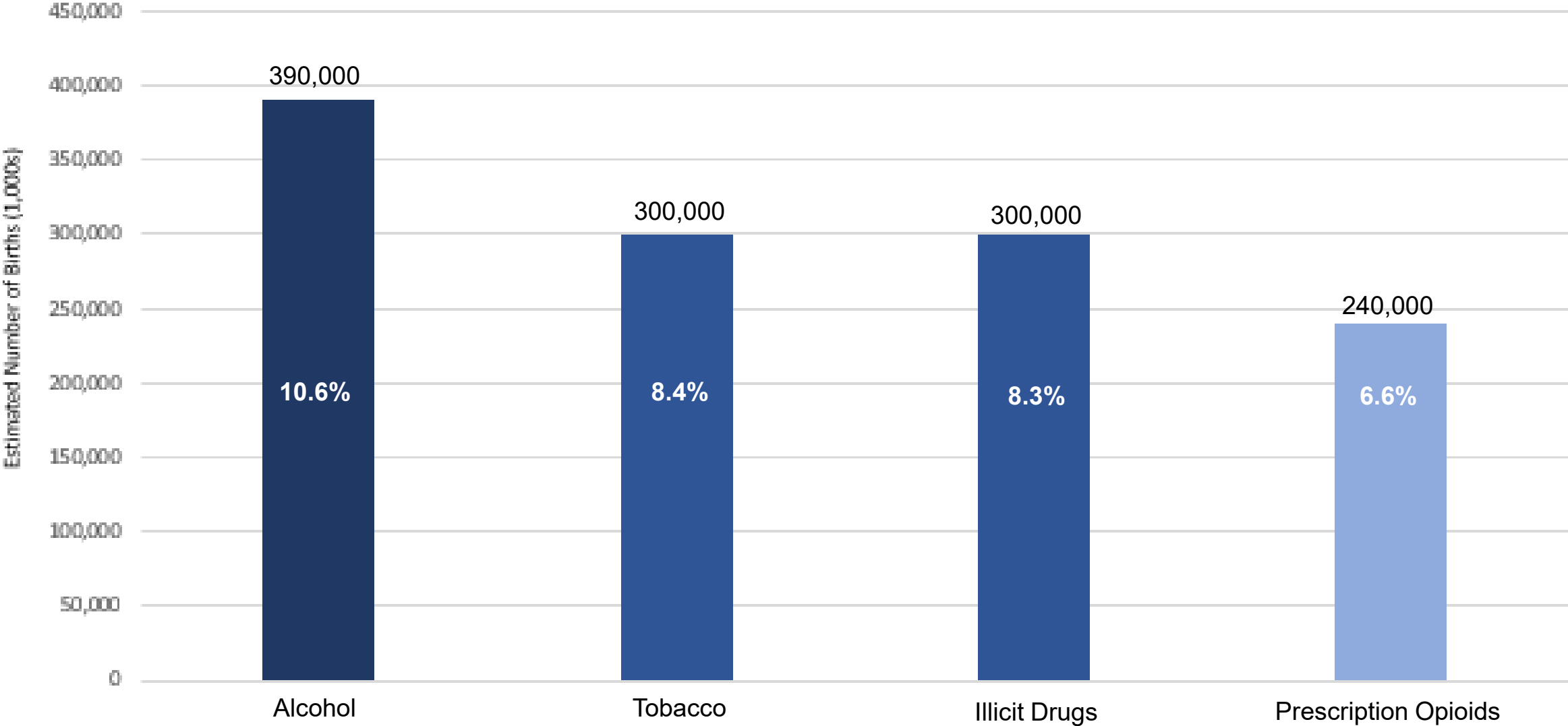
After completing this training,
child welfare workers will:

- Understand the consequences of prenatal and postnatal substance exposure and the associated risks and neurodevelopmental effects
- Identify the prevalence and effects of maternal morbidity and mortality including information on racial and ethnic disparities
- Describe how stigma and bias perpetuates disparate outcomes for pregnant and parenting persons with substance use disorders
- Identify the prevalence and leading causes of infant mortality including information on racial and ethnic disparities
- Recognize the benefits of home visiting models for children and families affected by prenatal substance exposure
- Understand the policy and practice components of Plans of Safe Care and how these promote the safety, well-being, and recovery outcomes for infants, parents, and their families

What the Data Tells Us About Infant Prenatal Substance Exposure



Estimated Number of Births with *Prenatal Substance Exposure*, Based on Substance Use Reported During Pregnancy



(Substance Abuse and Mental Health Services Administration, 2023)

Important Prenatal & Postnatal Substance Exposure Considerations



Alcohol & Other Substances In-Utero

Patterns of Use Following Birthing Event

Lactation/Breastfeeding

Additional Perinatal & Postpartum Considerations

Medication for Opioid Use Disorder (MOUD) Adjustments

- Methadone
- Buprenorphine

Management of Maternal Co-Morbidities

- Health
- Mental Health
- Trauma

NAS & Other Prenatal Exposure Effects on The Parent-Infant Dyad

- Difficult to Soothe Infants
- Discernment of Infant Cues
- Heightened Stress & Lower Confidence
- Altered Trajectories of Development

Understanding the Complex Needs of Pregnant and Parenting Persons with SUDs

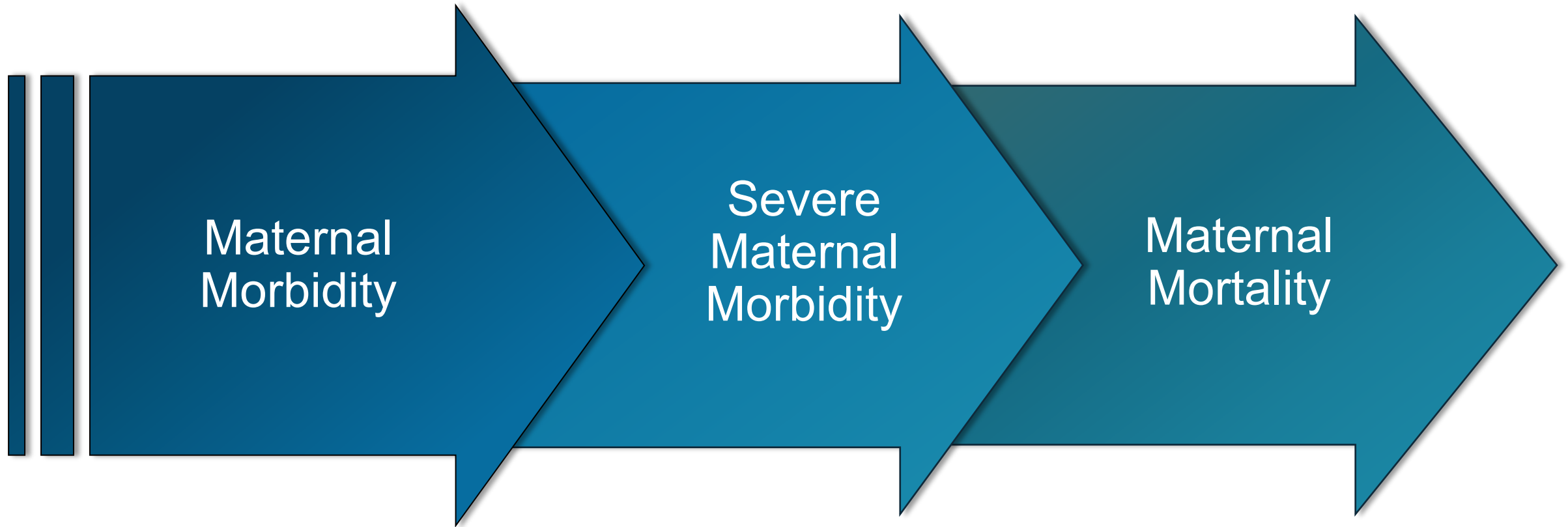
[Dr. Jansson, Director of Pediatrics at John Hopkins Center for Addiction and Pregnancy](#)

[Video Credit & Permission to Use by UMBC MIECHV Program](#)

Maternal Morbidity & Mortality



What Do We Need to Know About Maternal Morbidity & Mortality?



Risk Factors Influencing Maternal Morbidity & Mortality



- Access to Quality Prenatal Care
- Pre-Existing Health Conditions
- Perinatal & Postpartum Depression
- Substance Use Including Overdose or Death

Severe Maternal Morbidity Indicators in the United States



Aneurysm

Blood Transfusions

Acute Renal Failure

Cardiac Arrest, Heart Attack, or Heart Failure

Acute Respiratory Distress Syndrome

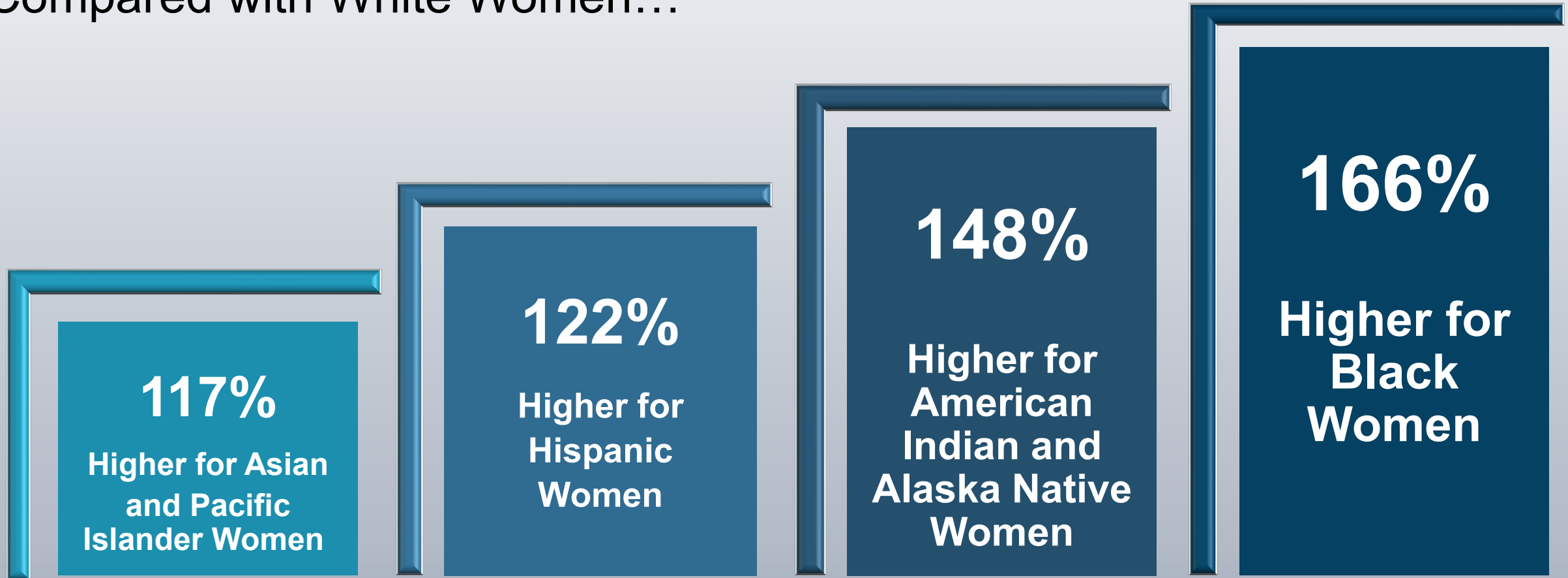
**Eclampsia
(including Preeclampsia)**

Amniotic Fluid Embolism

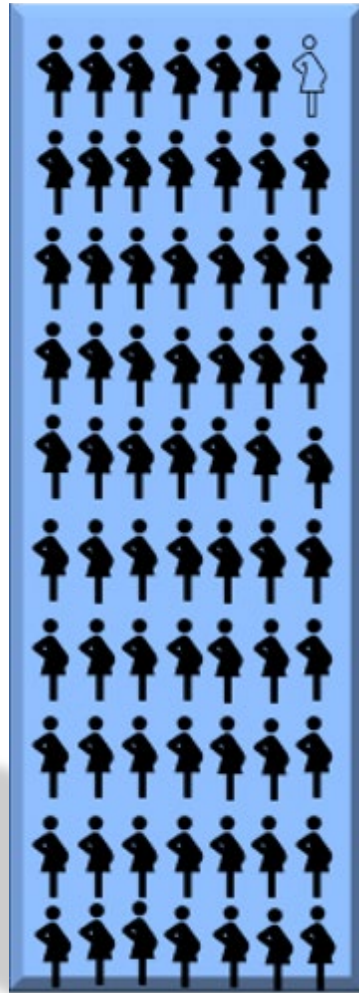
Sepsis or Shock

Who is Most Affected by Severe Maternal Morbidity?

Rates of Incidence When
Compared with White Women...

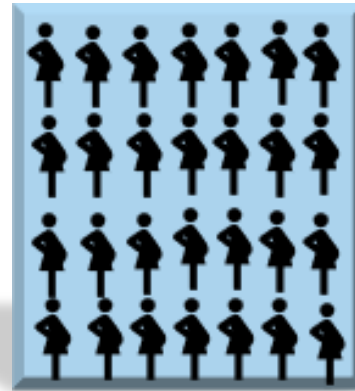


Maternal Mortality in the United States: Understanding the Full Scope of Racial & Ethnic Disparities

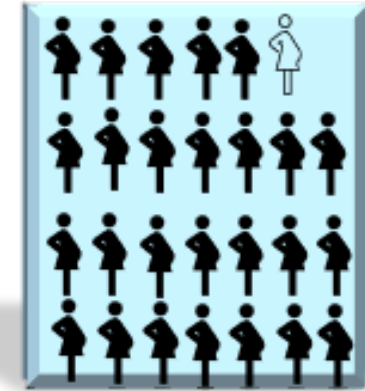


Black 69.9

Maternal Deaths, 2021
(deaths per 100,000 live births)

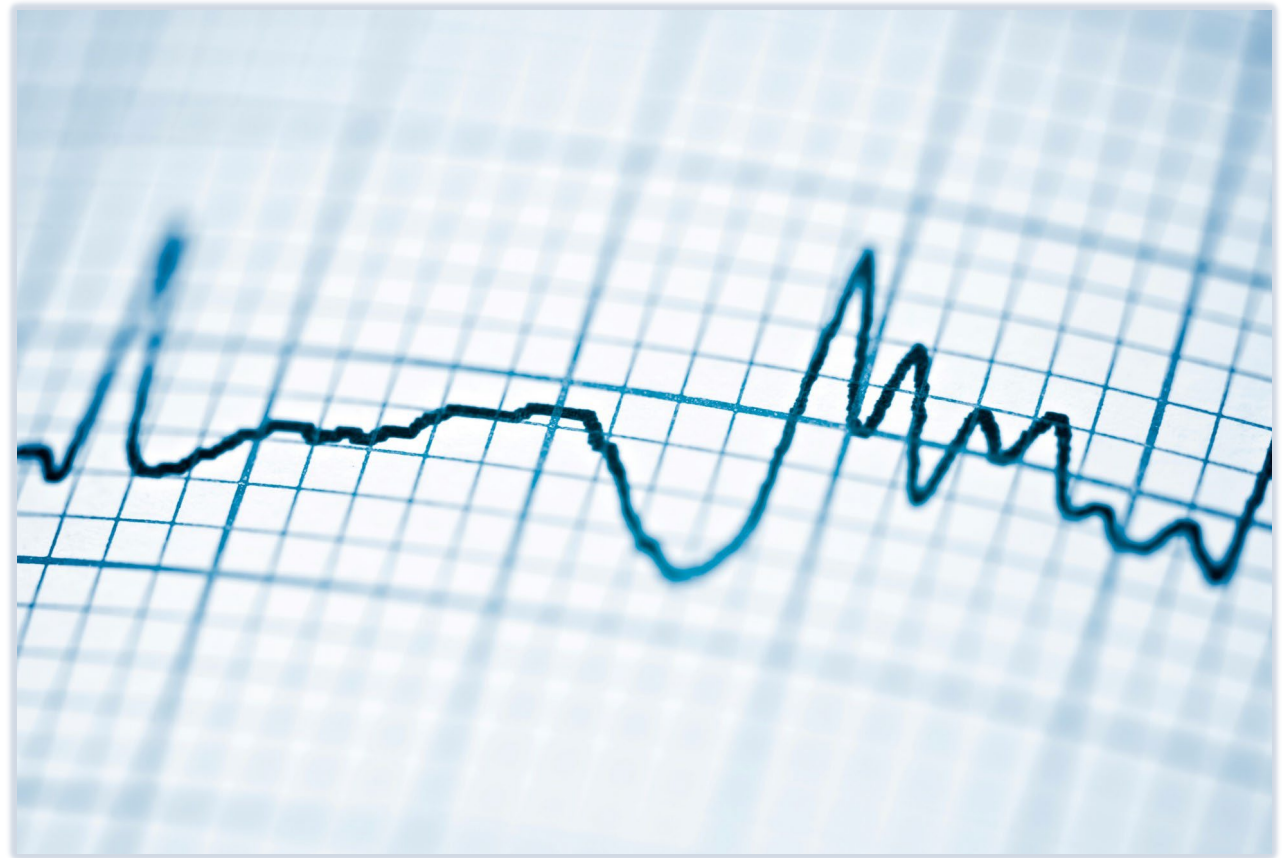


Hispanic 28.0



White 26.6

Understanding the Root Causes of Racial and Ethnic Disparities in Maternal Health Outcomes

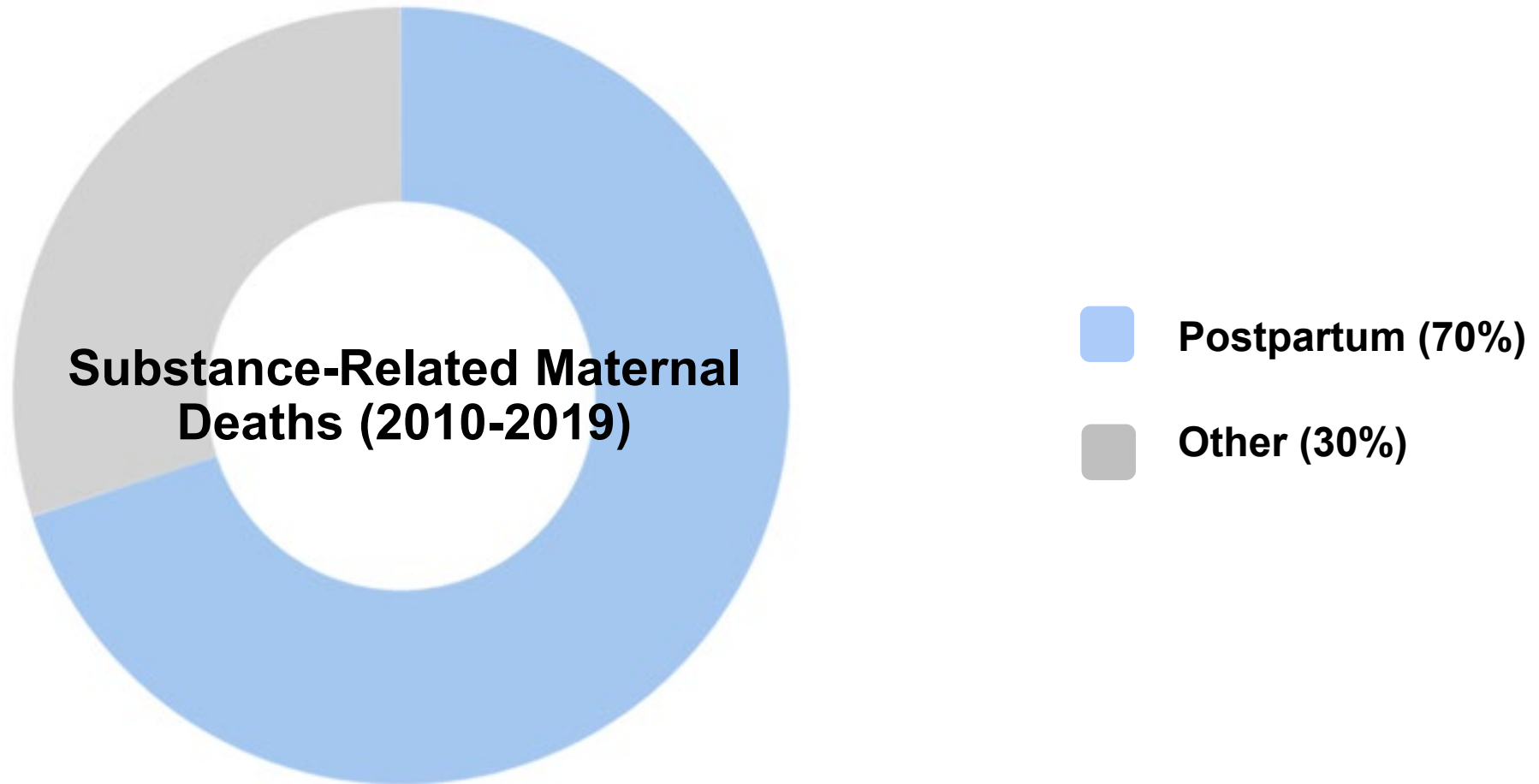


- Social & Economic Determinants of Health
- Access to Quality Healthcare Services
- Systemic Racism & Implicit Bias

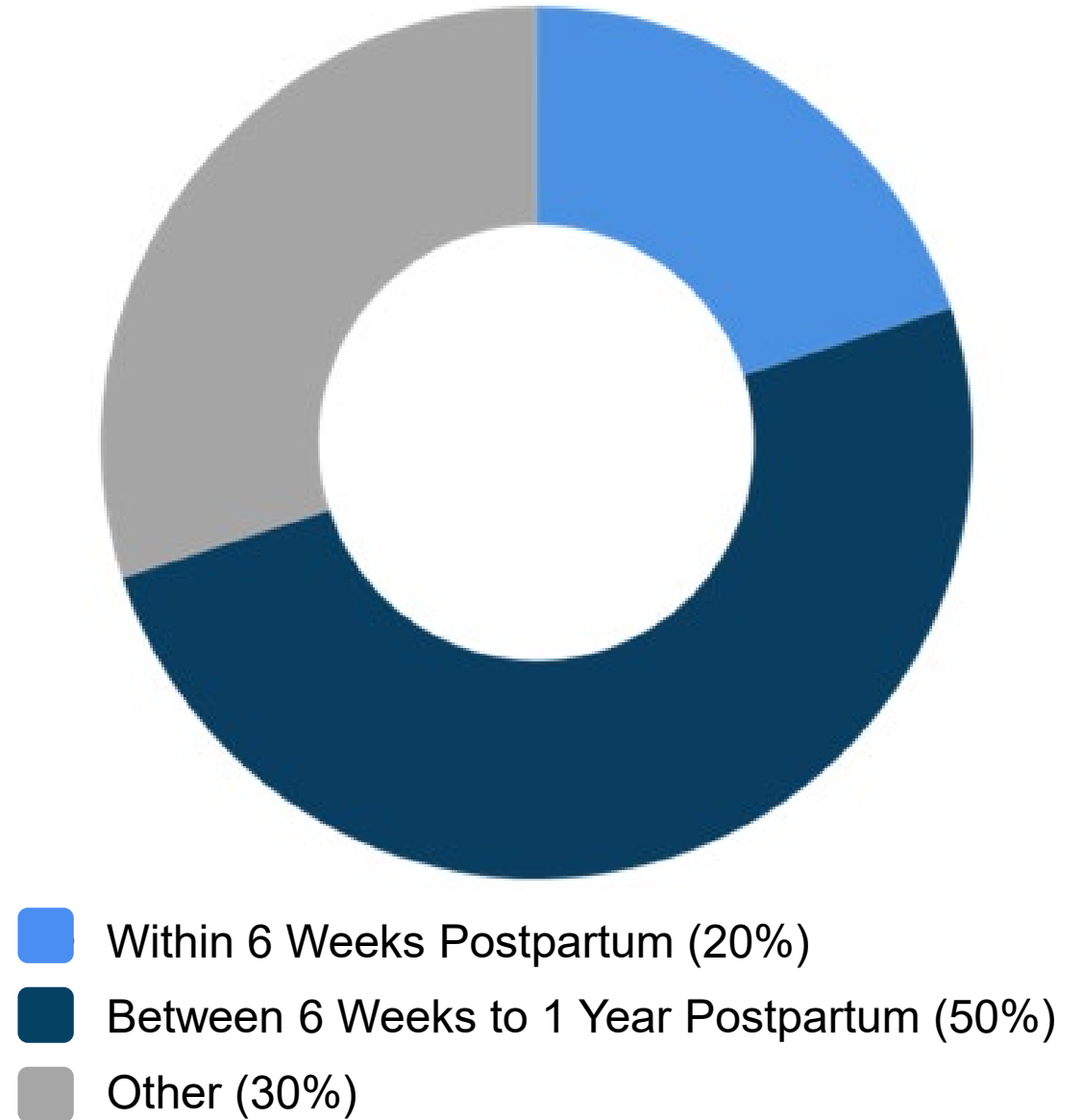
How Stigma & Bias Further Perpetuates Health Disparities for Pregnant and Parenting Persons with SUDs

Small Group Discussion

Why the Postpartum Period is Critical for Pregnant and Parenting Persons with Substance Use Disorders



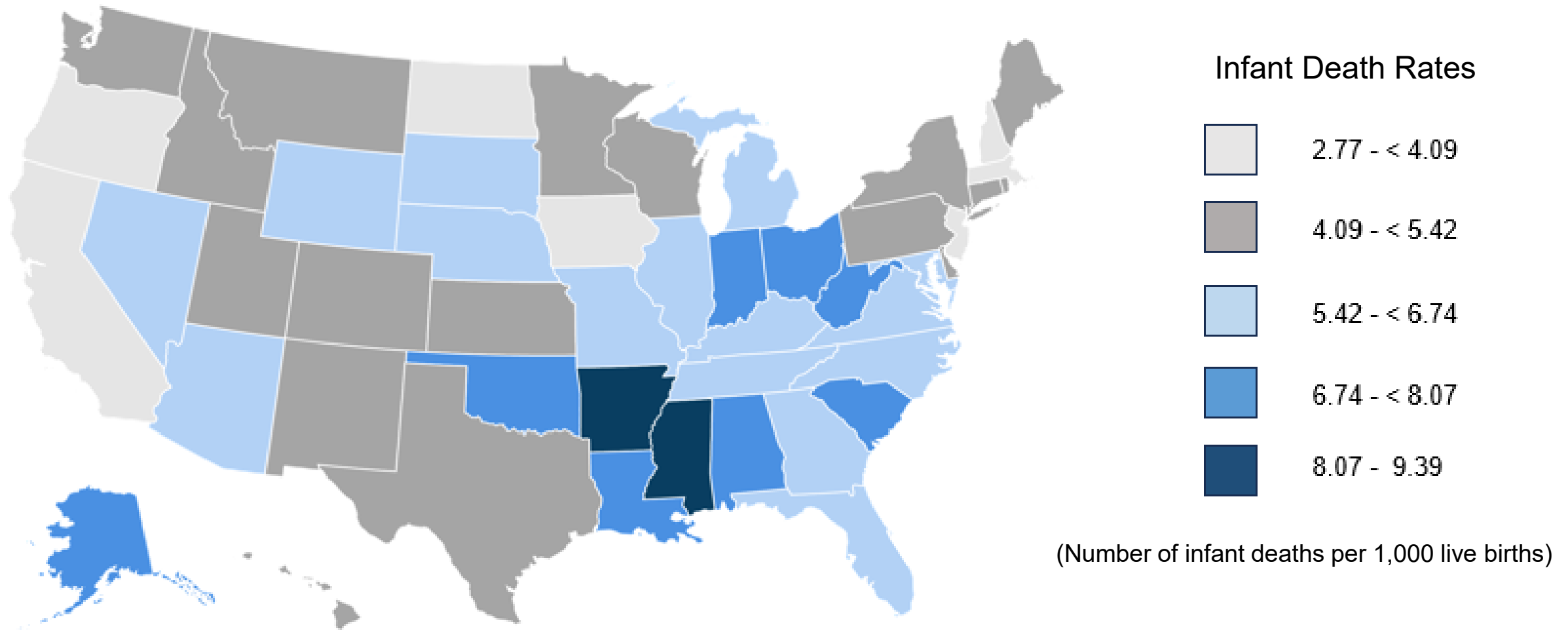
Substance-Related Maternal Deaths: Critical Periods of Postpartum Intervention



Infant Mortality



Infant Mortality Rates in the United States, 2021



Year 2021 Infant Mortality Data Listed by State (A-K)

| State | Death Rate | Number of Deaths | Death Rate Ranking (Out of 49 States)* |
|-------------|------------|------------------|----------------------------------------|
| Alabama | 7.56 | 439 | 47 th |
| Alaska | 7.37 | 69 | 46 th |
| Arizona | 5.47 | 426 | 26 th |
| Arkansas | 8.59 | 309 | 48 th |
| California | 4.07 | 1713 | 7 th |
| Colorado | 4.99 | 314 | 18 th |
| Connecticut | 4.65 | 166 | 12 th |
| Delaware | 4.77 | 50 | 14 th |
| Florida | 5.90 | 1275 | 31 st |
| Georgia | 6.25 | 776 | 38 th |
| Hawaii | 4.67 | 73 | 13 th |
| Idaho | 5.13 | 115 | 20 th |
| Illinois | 5.62 | 743 | 28 th |
| Indiana | 6.75 | 540 | 40 th |
| Iowa | 3.99 | 147 | 6 th |
| Kansas | 5.30 | 184 | 22 nd |
| Kentucky | 6.15 | 321 | 35 th |

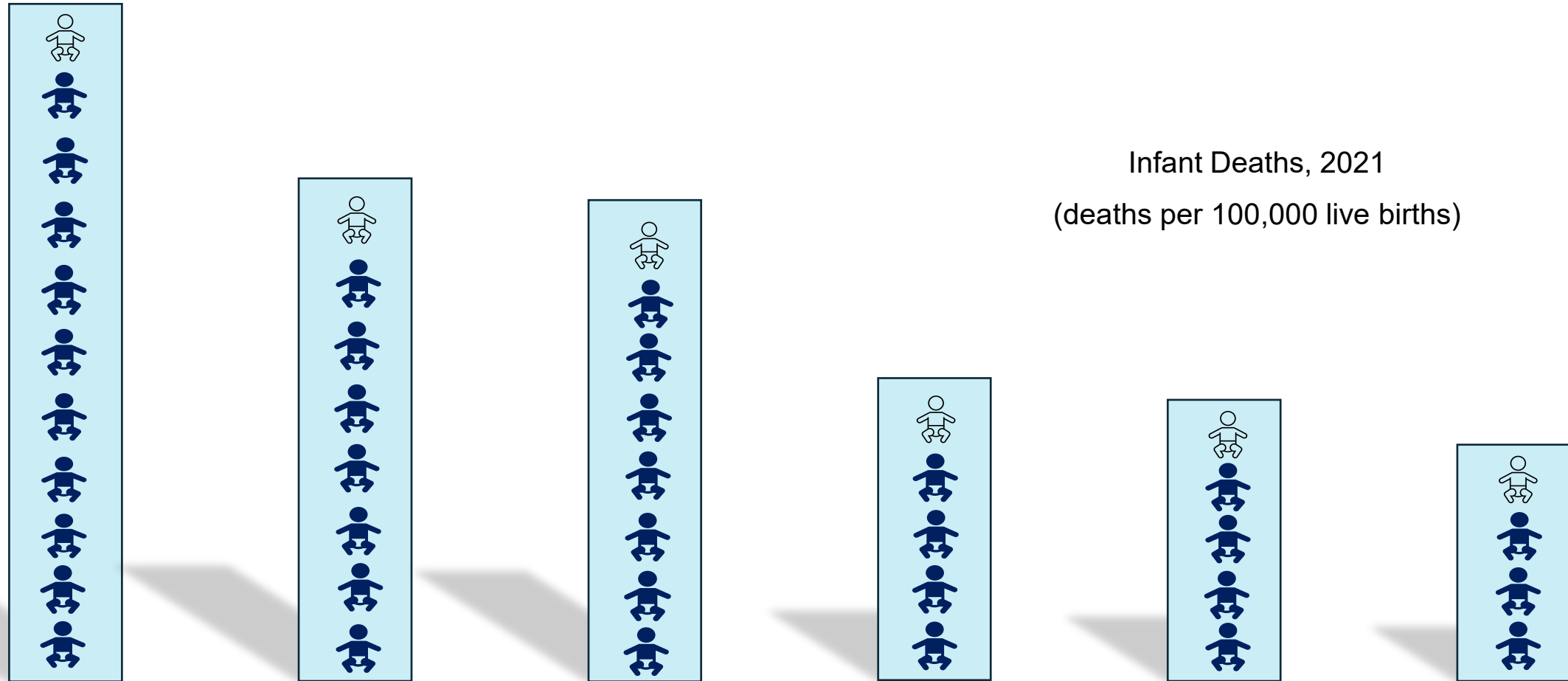
Year 2021 Infant Mortality Data Listed by State (L-N)

| State | Death Rate | Number of Deaths | Death Rate Ranking (Out of 49 States)* |
|----------------|------------|------------------|----------------------------------------|
| Louisiana | 7.24 | 416 | 44 th |
| Maine | 5.00 | 60 | 19 th |
| Maryland | 5.99 | 409 | 33 rd |
| Massachusetts | 3.23 | 223 | 2 nd |
| Michigan | 6.22 | 653 | 37 th |
| Minnesota | 4.83 | 311 | 16 th |
| Mississippi | 9.39 | 330 | 50 th |
| Missouri | 5.85 | 406 | 30 th |
| Montana | 4.90 | 55 | 17 th |
| Nebraska | 5.49 | 135 | 27 th |
| Nevada | 5.76 | 194 | 29 th |
| New Hampshire | 3.96 | 50 | 5 th |
| New Jersey | 3.57 | 362 | 3 rd |
| New Mexico | 4.77 | 102 | 15 th |
| New York | 4.16 | 876 | 8 th |
| North Carolina | 6.72 | 809 | 39 th |
| North Dakota | 2.77 | 28 | 1 st |

Year 2021 Infant Mortality Data Listed by State (O-W)

| State | Death Rate | Number of Deaths | Death Rate Ranking (Out of 49 States)* |
|----------------|------------|------------------|----------------------------------------|
| Ohio | 7.06 | 916 | 42 nd |
| Oklahoma | 7.13 | 345 | 43 rd |
| Oregon | 3.79 | 155 | 4 th |
| Pennsylvania | 5.37 | 712 | 24 th |
| Rhode Island | 4.30 | 45 | 9 th |
| South Carolina | 7.26 | 415 | 45 th |
| South Dakota | 6.07 | 69 | 34 th |
| Tennessee | 6.18 | 505 | 36 th |
| Texas | 5.29 | 1977 | 21 st |
| Utah | 4.58 | 214 | 11 th |
| Vermont | N/A* | 17 | N/A* |
| Virginia | 5.96 | 571 | 32 nd |
| Washington | 4.36 | 366 | 10 th |
| West Virginia | 6.80 | 117 | 41 st |
| Wisconsin | 5.36 | 331 | 23 rd |
| Wyoming | 5.45 | 34 | 25 th |

Infant Mortality in the United States: Understanding the Full Scope of Racial & Ethnic Disparities, 2021



Black

10.6

Hawaiian or
Pacific Islander

7.8

American Indian
or Alaska Native

7.5

Hispanic

4.8

White

4.4

Asian

3.7

Birth Defects

Preterm Birth &
Low Birth Weight

Sudden Infant Death
Syndrome

Leading Causes of Infant Mortality in the United States

Suffocation from
Co-Sleeping

Maternal Pregnancy
Complications

Importance of Specialized Care Coordination for Pregnant and Parenting Persons with SUDs



5 Points of Intervention for Families Affected by SUDs



PRE-PREGNANCY

PRENATAL

BIRTH

NEONATAL, INFANCY, & POSTPARTUM

CHILDHOOD & ADOLESCENCE

Focus on **preventing substance use disorders before an individual becomes pregnant** through promoting **public awareness of the effects of substance use** (including alcohol and tobacco) during pregnancy and encouraging **access to appropriate substance use disorder treatment**

Focus on **identifying substance use disorders among pregnant individuals** through screening and assessment, engaging women into **effective treatment services**, and **providing ongoing services to support recovery**

Focus on **identifying and addressing the needs of infants affected by prenatal substance exposure**, withdrawal symptoms, and Fetal Alcohol Spectrum Disorder **including the immediate need for bonding and attachment with a safe, stable, consistent caregiver**

Focus on **ensuring the infant's safety and responding to the needs of the infant, parent, and family** through a comprehensive approach that **ensures consistent access to a safe, stable caregiver** and a supportive early care environment

Focus on **identifying and responding to the unique developmental and service needs** of the toddler, preschooler, child, or adolescent who was exposed and/or affected by parental substance use **through a comprehensive family-centered approach**

Prevention



Early
Intervention



Family-Centered
Treatment



Recovery



Continuum of Specialized Care Coordination for
Pregnant and Parenting Persons with SUDs

Maternal, Infant, Early Childhood Home Visiting Programs

Goals of MIECHV Programs:

- Improve maternal and infant health
- Prevent child abuse and neglect
- Reduce crime and intimate partner violence
- Increase family education level and earning potential
- Promote children's development and school readiness
- Connect families to needed resources and supports

Benefits of MIECHV Models

Services and Supports Targeting:

- Healthy Pregnancy Practices
- Knowledge & Awareness (safe sleep, nutrition, etc.)
- Learning & Language Development
- Positive Parenting
- Family Enrichment Planning
- Referral & Linkage

Home Visiting Models with Evidence of Effectiveness



Early HeadStart/HeadStart

Healthy Families America

Nurse-Family Partnership

Parents as Teachers

Maternal, Infant, Early Childhood Home Visiting Programs

[Health Resources & Services Administration Video](#)

Family-Centered Treatment for Pregnant and Parenting Persons with SUDs



Essential Elements of Family-Centered Treatment for Pregnant and Parenting Persons with SUDs



Collaborative Partnerships



Intensive Coordinated
Case Management

Adequate and Flexible Funding



High-Quality Substance Use
Disorder Treatment



Performance Monitoring



Comprehensive Service Array

Neurodevelopmental Needs of Children and Adolescents with Prenatal Substance Exposure



Neurodevelopmental Effects of Prenatal Substance Exposure Matching Game

Small Group Activity

Improving the Neurodevelopmental Trajectories for Children and Adolescents with Prenatal Substance Exposure

Screening

- Early Identification & Referral

Comprehensive Assessment

- Learning Challenges
- Neurodevelopmental Disorders
- Social-Emotional Difficulties

Service Planning

- Individuals with Disabilities Education Act
- 504 & Individualized Education Plans
- Social-Emotional & Mental Health Support Services

**Policy Shapes
Practice:
Plans of Safe Care
for Infants with
Prenatal Substance
Exposure**



Expert Video Series: Introduction to the Plan of Safe Care

[Dr. Stephen Patrick, Director of the Vanderbilt Center for Child Health Policy](#)

Key Policy Changes
Related to Infants with
Prenatal Substance
Exposure in the U.S.

1974

Child Abuse Prevention Treatment Act (CAPTA)

2003

The Keeping Children & Families Safe Act

2010

The CAPTA Reauthorization Act

2016

Comprehensive Addiction & Recovery Act (CARA)

A photograph of a woman with blonde hair, wearing a white sweater, smiling warmly as she holds a baby. The baby is wearing a white long-sleeved shirt and pink overalls. Another person with brown hair is seen from behind, reaching out to touch the baby's hand. The background is a bright, out-of-focus window.

How Families Benefit from Plans of Safe Care

Reduces crisis at time of birthing event

Ensures the ongoing safety and well-being of families further reducing maternal and infant mortality rates

Promotes a family-centered approach and healthy parent-infant dyad development with referral and access to indicated services

Provides equitable access to coordinated treatment and service planning for the parent, infant, and family

Planning for Families Affected by Substance Use and Co-Occurring Disorders

Prenatal Plans of Safe Care

- Early Identification, Screening & Referral
- Treatment & Service Engagement
- Care Coordination Among Service Providers

Postnatal Plans of Safe Care

- Continuity of Coordinated Treatment & Services
- Continuum of Early Intervention, Family-Centered Treatment & Recovery Services & Supports
- Ongoing Neurodevelopmental Screening & Assessment To Mitigate Effects of Prenatal Substance Exposure

Plan of Safe Care Bingo!

Small & Large Group Activity

Effective Implementation of Plans of Safe Care Requires Cross-System Collaboration



Identify who is responsible for completing and monitoring the plan



Identify who is responsible for completing and monitoring the plan

Develop shared definitions and terminology across systems



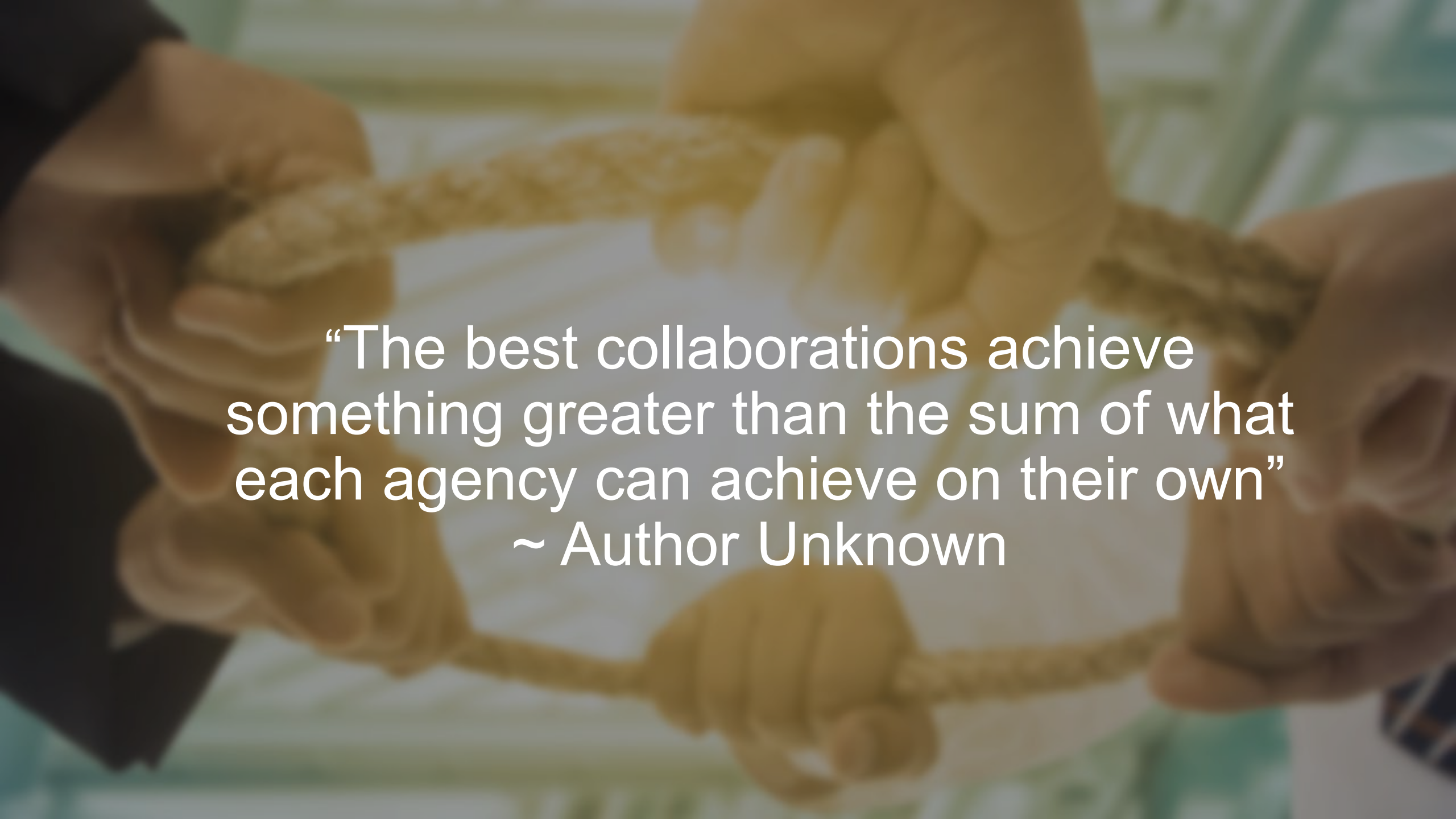
Improve timely access to indicated services and supports



Enhance cross-system communication for information and data sharing



Discuss implementation progress including areas of practice and policy improvements

A photograph showing several hands of different skin tones holding a thick, light-colored rope in a circular arrangement. The background is a blurred green and white pattern. The text is overlaid in the center in white.

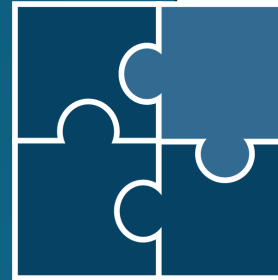
“The best collaborations achieve something greater than the sum of what each agency can achieve on their own”
~ Author Unknown

Contact

Contact the NCSACW Training and Technical Assistance (TTA) Program

Connect with programs that are developing tools and implementing practices and protocols to support their collaborative

Training and technical assistance to support collaboration and systems change



National Center on Substance Abuse and Child Welfare



<https://ncsacw.acf.hhs.gov/>



ncsacw@cffutures.org



Toll-Free @ 1-866-493-2758

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Resources

Resources

- American College of Obstetricians and Gynecology: [*Marijuana and Pregnancy*](#) (2023)
- National Center on Substance Abuse and Child Welfare: [*Fetal Alcohol Spectrum Disorder: Bending the Trajectory Webinar*](#) (2023)
- National Center on Substance Abuse and Child Welfare: [*How States Serve Infants and Their Families Affected by Prenatal Substance Exposure Series*](#) (2021)
- National Center on Substance Abuse and Child Welfare: [*Infants and Families Affected by Prenatal Substance Exposure: Five Points of Family Intervention*](#) (2023)
- National Center on Substance Abuse and Child Welfare: [*Plan of Safe Care Expert Video Series*](#) (2023)
- National Center on Substance Abuse and Child Welfare: [*Plans of Safe Care Learning Modules Series*](#) (2020)
- National Center on Substance Abuse and Child Welfare: [*Supporting Pregnant and Parenting People with Substance Use Disorders Series*](#) (2023)
- National Center on Substance Abuse and Child Welfare: [*Understanding Fetal Alcohol Spectrum Disorders: Child Welfare Practice Tips*](#) (2022)
- National Institutes of Health: [*Maternal Morbidity and Mortality: What Do We Know? How Are We Addressing It?*](#) (n.d.)