







PREPARING FOR YOUR BABY: Information for Pregnant People with Substance Use Disorders*



hours a day.







Congratulations on your pregnancy and getting ready for life with a new baby! Being a parent can be filled with great moments and challenges.

If you use alcohol or other drugs—or are in recovery—this is a time to think about how to best care for both of you.

If you are wondering what to expect while you are pregnant and after, this factsheet has information to help you make the best decisions.

You are not alone. Many people with substance use disorders (SUDs) or in recovery feel nervous upon learning they're pregnant. Fortunately, professionals who understand your needs can help! So can people who have lived through some of the same things you are dealing with right now.

Take steps toward treatment and recovery. If you're struggling with alcohol or other drug use—and aren't in treatment—it's important to find a good SUD treatment provider. Some communities have

pregnant or new parents. They understand your needs! If you are in SUD treatment or recovery, it's important to connect with a treatment provider or support group that understands pregnancy and parenting. Someone who has

meetings by calling SAMHSA's National Helpline at 800-662-HELP (4357). This free, confidential service is available 24

SUD treatment providers who focus on working with people who are

lived through some of the same things you are dealing with now, usually called a peer support, can be helpful. You can also seek help through recovery support meetings, such as Alcoholics Anonymous, Narcotics Anonymous, and Self-Management and Recovery Training (SMART Recovery). You can find local SUD treatment and recovery support

How could alcohol and other drugs affect my baby?

- Substance Use While Pregnant and Breastfeeding
- Tobacco, Alcohol, Drugs, and **Pregnancy**
- Your Pregnancy and Substance Use



COMMON SUBSTANCE USE DISORDER TREATMENT QUESTIONS



What does treatment look like and how do I find it?

- Substance Abuse and Mental Health Services Administration (SAMHSA) Treatment Help Line and Treatment Locator Treatment Help Line and Treatment Locator
- SAMHSA Tip Sheet on Quality SUD Treatment



What is medication to treat substance use disorders/medication to treat opioid use disorder (MOUD) and can pregnant people use it?

■ Treating Opioid Use Disorders in Pregnant Women



What if I need to go into residential treatment?

■ SAMHSA Treatment Locator



Is there anyone who has done this before who can help me?

SAMHSA Benefits of Peer Support in SUD Treatment and Recovery



Who will be on my SUD treatment team?

As a pregnant women and pregnant people with a SUD, you may have many people on your care team. They can include a MOUD provider, home visitor, mental health therapist, peer support, clinical SUD counselor, and others who can help you with your mental and physical health needs and the needs of your baby.



How can I get treatment if I do not have transportation?

■ SAMHSA Virtual Recovery Resources Listing

Getting to treatment and staying there isn't easy. You may worry about how alcohol or other drugs use may affect your pregnancy and your baby. These feelings, as well as concerns about how other people may react, can make it feel like you would rather not talk to anyone about it. But as reaching out for help with your alcohol or other drugs use is the first step to becoming a strong advocate for yourself and your baby. Getting treatment and attending all prenatal care visits ensure both of you receive the best possible start.

Pay attention to your feelings. You may feel down or worried during this time. These emotions are normal if they are mild and don't last long. For some people, pregnancy and new parenthood can make your feelings worse and even overwhelming. This may mean you have developed a mental health disorder. How do you know? Risk factors include a family history of depression, anxiety, bipolar, or other mental health disorders; a mental health disorder in a previous pregnancy; a history of trauma including intimate partner violence and abuse; and stressful life situations. Learn more about signs, symptoms, risk factors, and treatment for maternal mental health disorders at *Maternal Mental Health Now*. You can also use the *SAMHSA Treatment Help Line and Treatment Locator* to find mental health treatment available near you.

Many people can help. In addition to the treatment providers, there are many medical professionals who can help during and after your pregnancy. They may include

- An obstetrician/gynecologist (OB/GYN) who may deliver your baby and follow up afterwards to ensure both of you are healthy
- Labor and delivery nurses
- Hospital social workers who help you figure out what you need when you leave the hospital
- Other professionals who can help you and your baby stay safe and healthy

Choosing people for your team that you trust is important so that you feel safe sharing personal information about treatment, services, and needs. Your team is most helpful when they understand the needs of families affected by SUDs. Having a team that can speak up for you is important for all families. It's especially important for families of color who may have experienced bias, discrimination, and racism from the systems that provide them services. Good things can happen when your care team has plenty of information, talks openly, and knows you well!

Learn to care for your baby. If you used alcohol or other drugs during pregnancy, your baby may need some extra medical care after birth. If your baby is born with signs of substance withdrawal or other health-related issues, they may need to stay in the hospital longer. They may stay in a special nursery, a neonatal intensive care unit (NICU), or in the room with you. Time, love, and attention from their caregivers are a crucial part of caring for your new baby. The booklet **Baby Steps** explains how you, your family, and your care team can get off to a healthy start.

What's a "Plan of Safe Care"? Your care team may help you put together a Plan of Safe Care, or POSC, to organize information about the services you and your infant need, the people with whom you work, and what happens next. Some teams start this plan while you are pregnant while others wait until birth. Working on a POSC is a chance for you to gather input about what you both can expect next.

The POSC organizes information about available services and resources. It also helps you keep track of your team and enables them to share information to support you. Many plans also have checklists to remind you of important things to know before your baby goes home with you, such as where the baby will sleep, how to soothe infants when they are upset, how to properly install a car seat, where to reach out for help when experiencing challenges to your mental health, and how to access basic support like childcare, housing and food.

Why is this tool called a Plan of Safe Care?



The federal government wants professionals who take care of pregnant women and pregnant people, their babies, and their families to make sure that infants with parents who used alcohol or other drugs have the necessary supports to be healthy. To that end, each state has to create "Plans of Safe Care" for families with babies who were born affected by a parent's use of alcohol or other drugs. While these plans may look a little different from state to state (and even town to town), they are supposed to include information about: 1) the services you need to be healthy, 2) the services your baby needs to be healthy, and 3) the things your family needs to thrive.

POSC also include information about which people and organizations are going to help you with each of those needs, and how they will make sure that you're getting what your family needs. You can find out more about the rules in your state <u>here</u>.











CHILD WELFARE AND CHILD PROTECTIVE SERVICES

How the Child Welfare System Works provides detailed information about the child welfare system, processes, and functions.

<u>Contact With Child Welfare and Common Child Welfare Questions</u> also includes information on child welfare cases specific to native families.

What are the laws about a parent using alcohol or other drugs in my state?

 Parents Substance Use as Child Abuse provides laws about a parent using alcohol or other drugs by state.

I'm not sure my child welfare case is going like it's supposed to. Can anyone help me?

■ Help with a Personal Issue Related to Child Welfare answers common child welfare question.

Learn how to work with child welfare. Many new parents wonder if child protective services, or CPS, will visit once their baby is born. When a newborn is born with alcohol or other drugs in their system, or a parent is identified as using substances, hospital staff contact CPS. CPS workers want to learn if the baby will be safe at home with their parent(s) and what might help your family stay healthy and safe. Sharing information with a CPS worker—including what you did to keep you and your infant healthy during your pregnancy and your participation in SUD treatment and prenatal care—helps them understand your situation. CPS workers will ask about these things to help them make recommendations for your infant's safety and well-being.

If a CPS worker determines you're not ready to fully care for your baby alone, they may recommend that: 1) both of you either live with someone who can support you in their care, or 2) your baby lives with someone else until you're ready. Continuing to participate in SUD treatment and other support services after your baby is born can help you stay focused on your POSC. Keeping that focus, even during this challenging time, remains important so that you can stay connected to your baby and reunify with him or her as quickly as possible.

Recovery is a lifelong process. When your baby is born—and during their first year—it's important to: 1) stay connected with your care team regularly, and 2) possibly include new people on that team. A peer support group (or person) could provide ongoing support. A <u>recovery-friendly pediatric practice</u>, which understands your unique needs as a parent in recovery and the special needs of your baby, could be a great asset to your care team.

A family support professional, such as an early intervention specialist, public health nurse, or home visitor can help you keep improving as a parent and understand if your baby is growing well. A mental health professional, such as a therapist or counselor, can check your mental health and watch for signs of postpartum depression (PPD). PPD can increase your risk of returning to substance use. It's important to talk with your care team about how you are feeling.

Your family can THRIVE! Pregnant women and pregnant and postpartum people along with their infants and families can—and do—successfully overcome these challenges.



Find Help with a Personal Situation

Substance Use and Mental Health Treatment Locator

To find treatment facilities confidentially, 24/7 please call 1-800-4357 (HELP) or visit SAMHSHA's *Treatment Services Locator*.

National Child Abuse Hotline

If you suspect a child has been harmed by abuse or neglect, please call 1-800-422-4453.

National Suicide Prevention Line

For free and confidential support for people in distress, 24/7, please call or text 988, chat *988Lifeline.org*, or call 1-800-273-8255.







CONTACT US



This document is used as a supplement to Substance Abuse and Mental Health Services Administration's (SAMHSA) <u>Clinical Guidance for Treatment</u> <u>and Parenting Women with Opioid Use Disorder and Their Infants</u>.



To learn more about the information in this fact sheet from National Center on Substance Abuse and Child Welfare (NCSACW) email us at NCSACW@cffutures.org or call toll-free at 1-866-493-2758.

Acknowledgement: This resource 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 brief are those of the authors and do not necessarily reflect the views, opinions, or policies of ACF, SAMHSA or the U.S. Department of Health and Human Services (HHS).





