

Context of caring for persons with Substance Use Disorder in Pregnancy, Postpartum and Beyond

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Partnerships to improve outcomes



<https://nmperinatalcollaborative.com/>



<https://saferbirth.org>



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Maternal Mortality Review Committees

MMRC DATA

- 22 states found that opioid related pregnancy-associated mortality more than doubled from 2007 to 2016
- In NM there were 87 pregnancy-associated deaths between 2016 and 2019
 - 43 (49%) of these deaths were substance use disorder (SUD) related

SUD RELATED DEATHS IN NM

- Most occur 43-365 days after delivery
- Mental health conditions contributed to their death
- Most have social stressors:
 - CPS involvement
 - Unemployment
 - Domestic violence
 - Previous suicide attempt

Fuchs, Schiff, Coronado 2023

AIM Safety Bundles: The 5 “Rs”

“...a structured way of improving the processes of care and outcomes...that, when performed collectively and reliably, have been proven to improve patient outcomes.”



Respectful Care

- Equity
- Harm reduction
- Trauma-informed care
- Strength-based language
- Awareness of stigma and bias
- Cultivating self-compassion

Shift the conversation away from “*what's wrong with you?*” to “*what has happened to you?*”



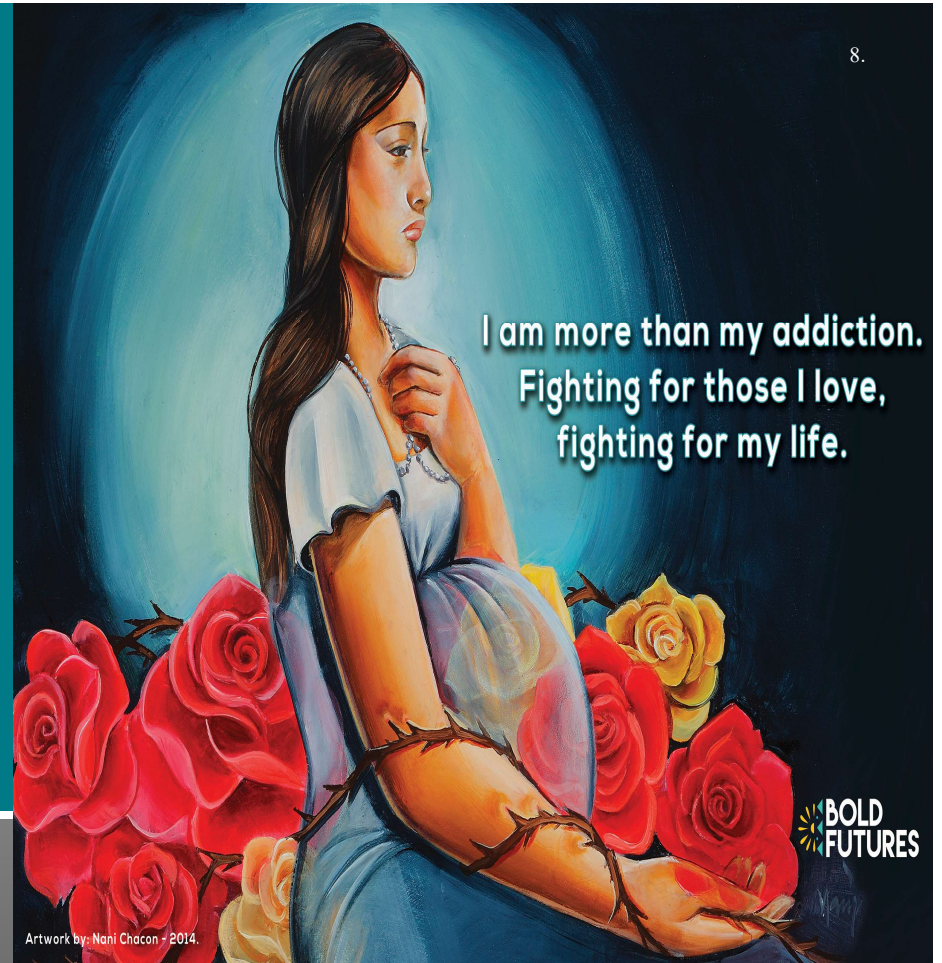
UNM Milagro Perinatal Substance Use Program

Integrated Approach to Serving Pregnant Women and Families Affected by Substance Abuse



Larry Leeman MD MPH
Milagro Medical Director
August 28, 2023

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Link between trauma and addiction

Not all addictions are rooted in abuse or trauma, but I do believe they can all be traced to painful experience.....As we'll see, the effects of early stress or adverse experiences directly shape both the psychology and the neurobiology of addiction in the brain. Gabor Mate MD Canadian Family Physician

A male child with an ACE Score of 6, when compared to a male child with an ACE Score of 0, has a 46-fold (4,600%) increase in the likelihood of becoming an injection drug user sometime later in life.

9.

ADVERSE CHILDHOOD EXPERIENCES - ACES

What are Adverse Childhood Experiences (ACEs)?
ACEs are potentially traumatic events that occur in a child's life:

 Physical Abuse	 Emotional Abuse	 Sexual Abuse	 Domestic Violence
 Parental Substance Abuse	 Mental Illness	 Suicide or Death	 Crime or Imprisoned Family

Causing lifelong medical, mental & social suffering

 American SPCC
American Society for the Prevention of Child Abuse

americanspcc.org
The Nation's Voice for Children
*Center for Disease Control

Effects of Opioid Use Disorder in Pregnancy

10.

Medical Effects

- Fetal growth restriction (FGR)
- Preterm delivery
- Sudden Infant Death Syndrome
- Infants of opioid-dependent women experience neonatal opioid withdrawal syndrome (NOWS), however this is less common and less severe with use of buprenorphine, “rooming in” and breastfeeding

Social Risks

- Incarceration
- Housing and food insecurity
- Disruption of maternal infant bonding due to lack of facilities to support rooming in
- Lack of prenatal care and initiation of MOUD (medications for opioid use disorder-buprenorphine and methadone)
- Loss of custody is yet another trauma experienced-CARA safety plan
- Cycles of ACEs/Maternal Trauma leads to intergenerational trauma

Features of Milagro Perinatal Substance Abuse Program at the University of New Mexico

- Integrated, multidisciplinary care
 - Prenatal visits at 3 different Family Medicine clinic locations
 - Involvement of Family Medicine, Ob/Gyn and Nurse Midwifery faculty
 - Maternal Fetal Medicine consultation
 - Substance abuse counseling – referrals and on-site
 - Reproductive Psychiatry
 - Buprenorphine management
 - Postpartum services, including contraception management, with emphasis on LARCs
- Continuity of care for prenatal care, delivery, postpartum
- Residential treatment available via Mariposa Program
 - Group apartments at county-run substance abuse program
 - Women and infants can stay up to 6 months postpartum



Milagro /FOCUS Wrap Around Care

- Patient centered medical home with trauma informed approach
- Prenatal care provided by providers who offer MAT, attend births and care for infants to establish development of trusting relationships
- Address issues of breastfeeding, rooming in, NOWS throughout prenatal care
- FOCUS staff attend Milagro clinics to introduce program
- Families case managed from prenatal care to 6 weeks postpartum in Milagro and then FOCUS until child's 3rd year, including home visits
- Office based substance abuse counseling in both Milagro and FOCUS
- Buprenorphine MAT continues in FOCUS

Two unmet needs for pregnant women using opioids and their babies

- Resident treatment for pregnant/postpartum people that includes children and partners
- Ability to maintain “dyadic care” in hospitals for postpartum women and their babies



FOCUS:

An Integrated Two-Generation Model Providing Comprehensive Care for Families of Young Children Impacted by Substance Use and Complex Trauma

Kate McCalmont, MD
Medical Director




Collaborative Two-Generation Care

Early
Intervention

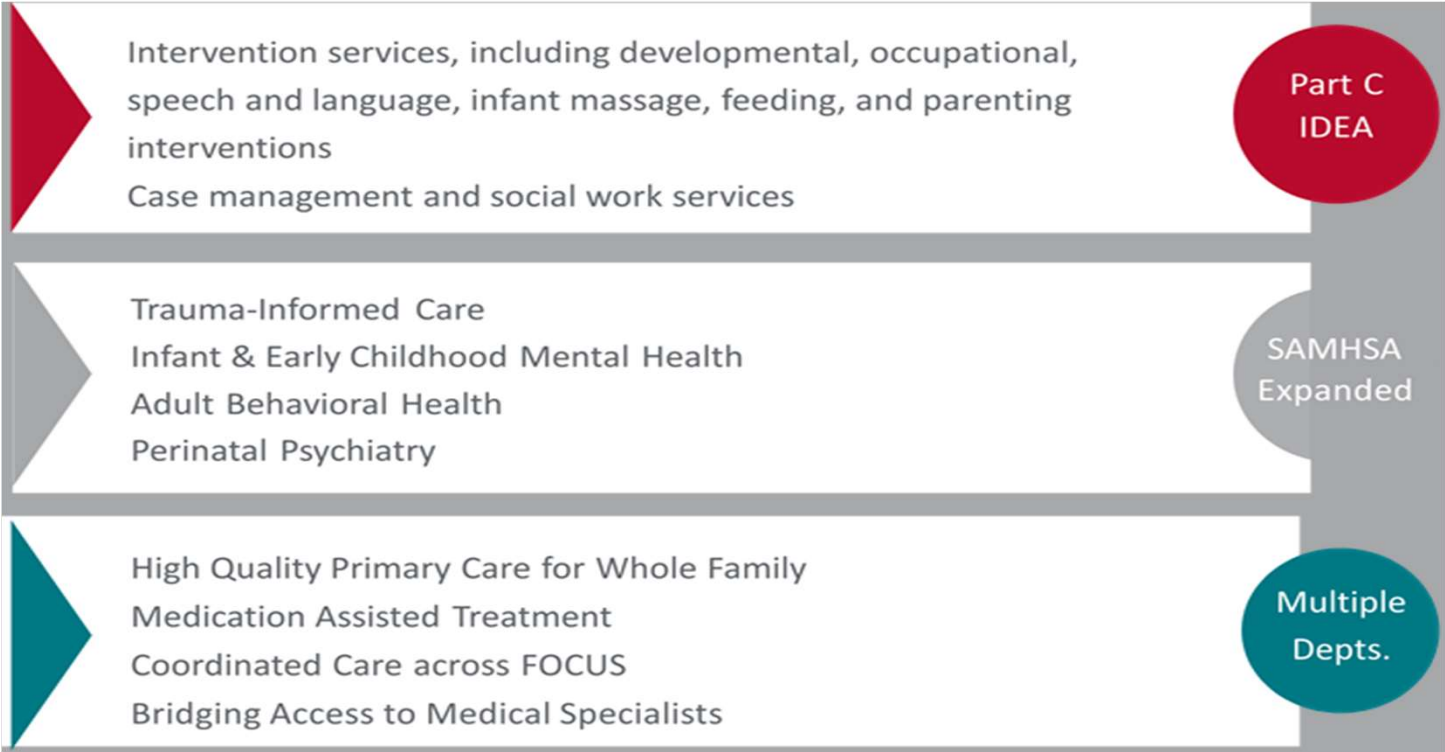
Behavioral
Health
Services

Family
Medical
Home



Multiple touchpoints for care of families supports engagement in services throughout the postpartum period and into early childhood

Providing comprehensive care for mothers, infants, and families impacted by substance use in New Mexico



Program Goals

- Improve health equity and health outcomes for all families served
- Improve developmental outcomes and increase school readiness for children
- Increase family stability by supporting parental mental health and substance use recovery
- Decrease child abuse and foster care placement
- Prevent parental overdose/death
- Increase on-time vaccinations and well-child care
- Reduce stigmatization and marginalization within healthcare for families struggling with substance use

Guiding Principles

High degree of interdisciplinary collaboration

Attachment/relational-based services

Early identification and intervention

Access to high quality care

Harm reduction approach

Trauma-informed services

ADOBE

Averting Disparities in Outcomes by Building Engagement

Strength-based and comprehensive multigenerational care for youth at risk of adverse behavioral, physical, educational, and social outcomes.

Chloe Stoffel DO FAAP
Medical Director



Why ADOBE Exists TRAUMA AND DEVELOPMENT



ADOBE arose out of a need to bridge services for youth in detention and has since evolved to serve youth outside of the juvenile justice system

Multigenerational model serves entire family



"People with childhood histories of trauma, abuse and neglect make up almost the entire criminal justice system" **Bessel Van Der Kolk MD**

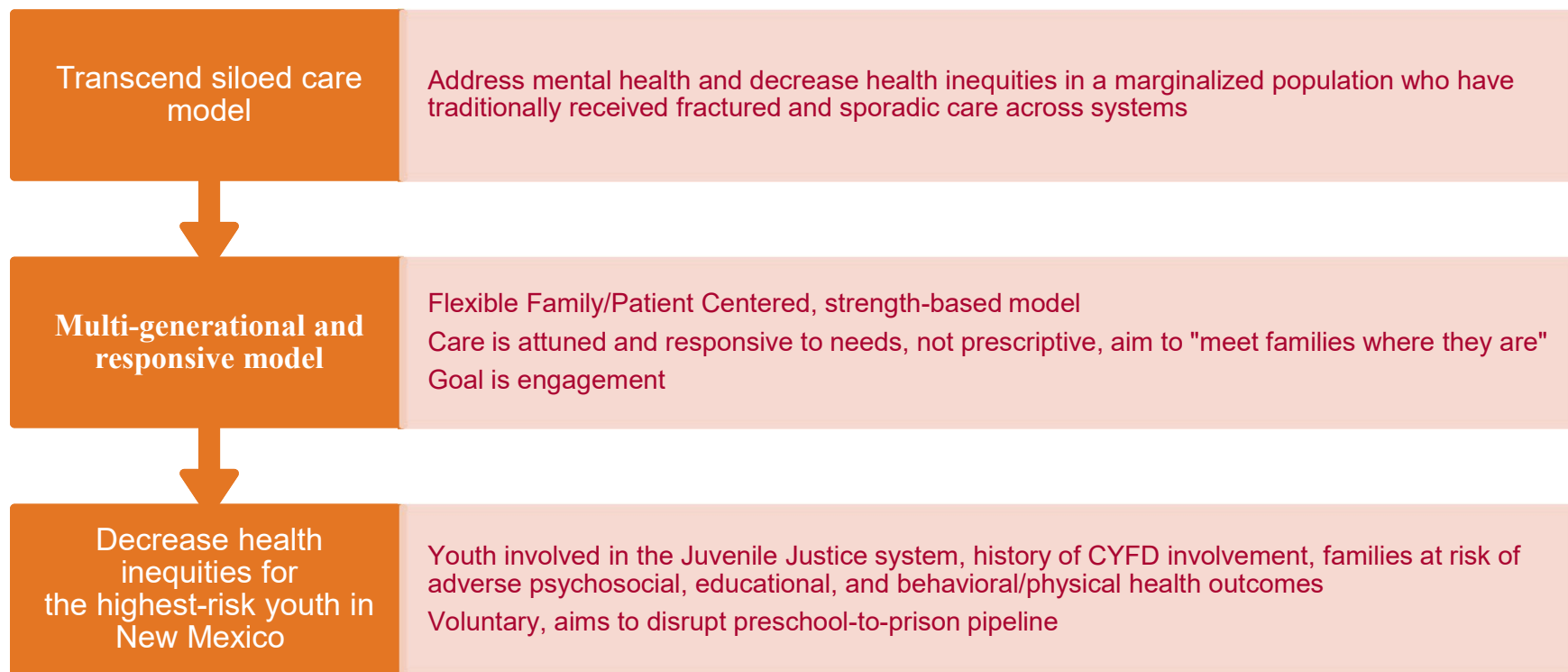
2011 Study of youth in NM youth prison (YDDC) Findings: Youth in New Mexico have significantly higher than average ACE scores
86% of incarcerated youth in New Mexico have four or more ACEs, including emotional neglect (76%), physical neglect (94%), parental separation/divorce (86%), substance use in the household (80%)



Growing recognition of an invisible and marginalized cohort of youth with identical risk factors receiving minimal or no integrated support services

Youth with housing instability, substance use disorder, multiple behavioral health diagnoses, educational interruption, CYFD custody
Services available for both the youth AND their family/primary support

Tenets of ADOBE



Components of ADOBE



Clinic

Primary Medical Care

- Well checks, acute care, general health
- Substance use: most Substance Use Disorders start before the age of 18
- Multi-generational: care for the entire family

Psychiatric/ Mental Health Care

- Integrated into the primary care clinic



Community

Home/Community Based Navigation

- Intensive case management to assist families with social determinants of health.
- Maintain low caseloads (around 20 primary youth), very low staff turnover



Unique supports

Educational

- Solid relationships with local schools, help families advocate for solutions, assist with re-enrollment in education (high school, college, GED, charter schools)

Civil Legal Assistance- UNM School of Law

- Landlord/tenant issues, custody, emancipation, immigration, name changes

ADOBE Outcomes

Housing/Stability:

- Navigators have helped families move from motels/housing instability to stable housing
- UNM Law Clinic has assisted families with Landlord/Tenant disputes, name changes, and addressed civil legal needs
- Education team has facilitated re-engagement in formal education

Substance use:

- Medical team has helped to address substance use disorders in youth who have disengaged from systems or don't qualify for other programs due to instability in behavioral health, housing problems, lack of support system, family instability, involvement with juvenile justice system

Justice System

- Interrupt preschool-to-prison pipeline by stabilizing youth and family
- Prior to the COVID Pandemic, youth enrolled in ADOBE had a significant decrease in recidivism

Collaboration:

- Community
 - DA, CYFD, YSC and YDDC, Juvenile Probation Office, Young Adult Court, local youth shelters, CYFD, residential treatment centers
- University of New Mexico:
 - School of Medicine: Family and Community Medicine Department, Pediatrics Department, UNM Medical Group, College of Nursing, Office of Research, School of Law
- Attempts to disseminate across the state, funding been prohibitive

Section on Child Safety and Well-Being

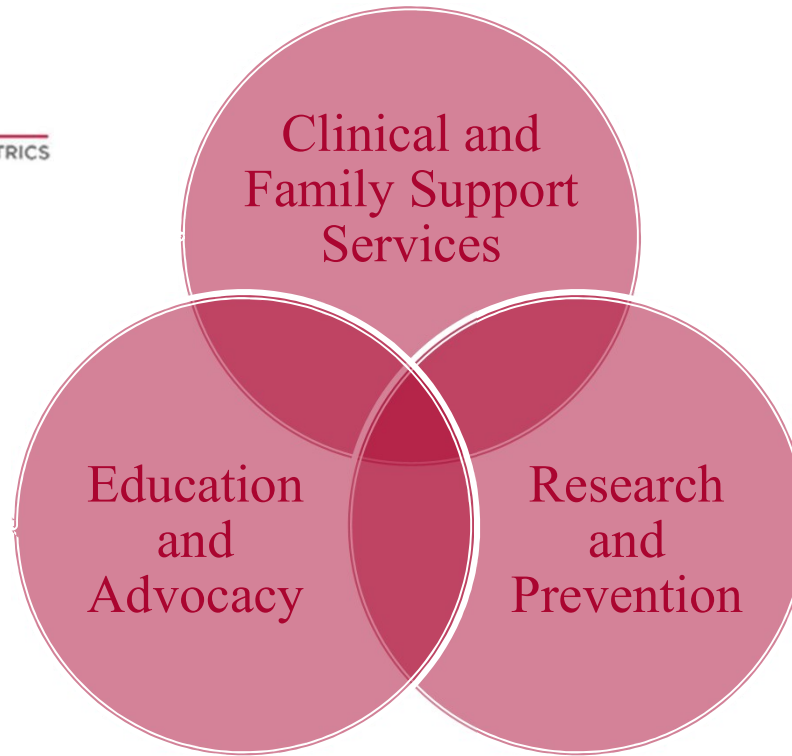
Rebecca Girardet, MD

<https://hsc.unm.edu/medicine/departments/pediatrics/divisions/childsafety/>



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Section on Child Safety and Well-Being



Child Abuse Response Team



Clinical and Family Support Services

- Medical care for physical abuse, sexual abuse, emotional abuse, neglect, and foster care
- Therapy for children with problem sexual behaviors
- Counseling about healthy relationships
- Crisis intervention
- Teen sexual assault support group (Segura Y Fuerte)
- Case management services

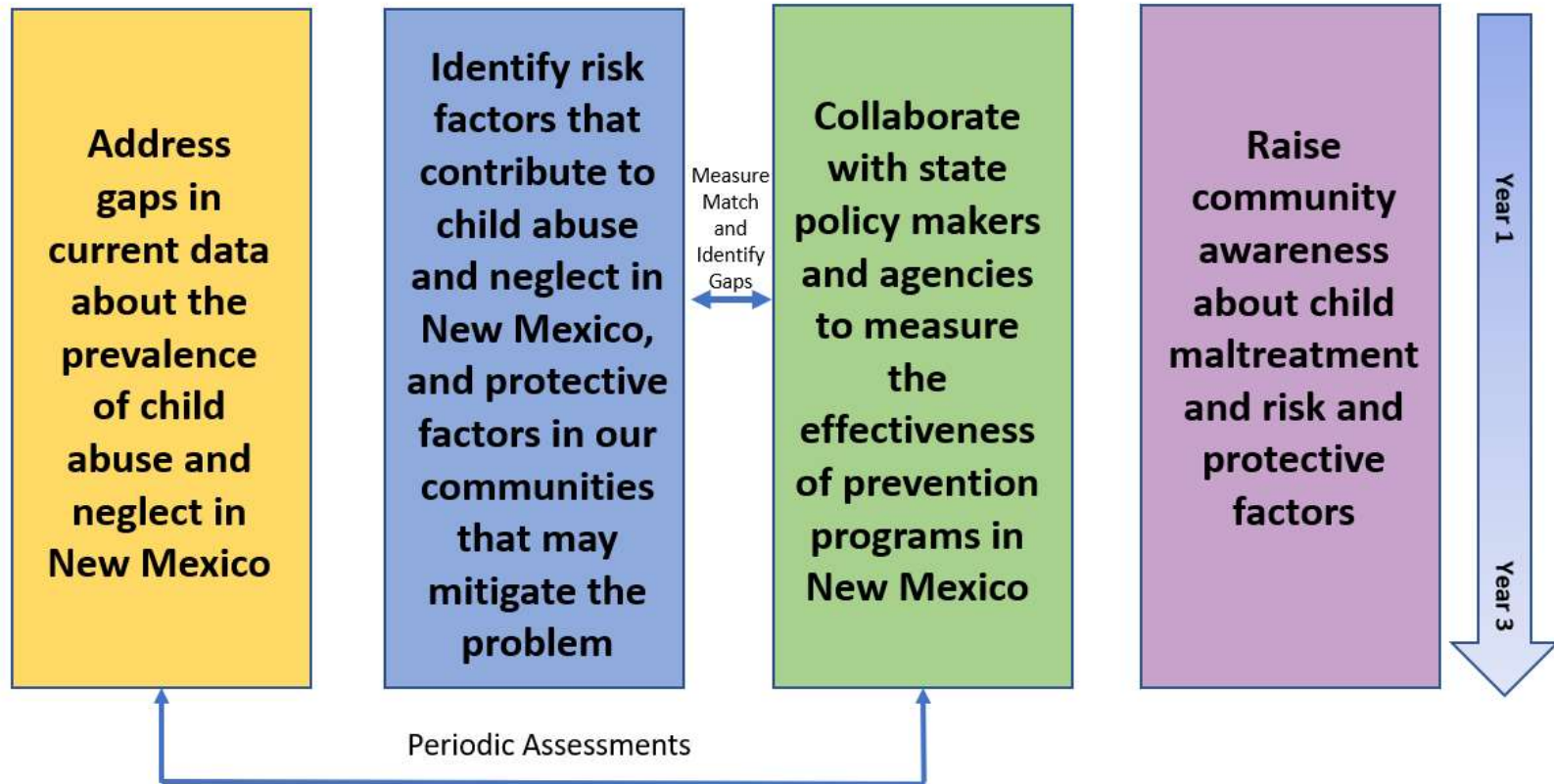


Education and Advocacy

- ACGME-accredited fellowship program
- SafeCare ECHO
- UNM Injury Prevention Coalition
- Child Abuse Awareness and Prevention Month



Research and Prevention





THANK YOU!



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