

**Milagro and FOCUS Programs
The UNM HSC Center of Excellence to
Support Maternal and Infant Brain
Development**

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**Milagro: Comprehensive Prenatal Care
and Substance Use Disorder Treatment**

- Women start care anytime in pregnancy
- 80% of current 141 have opioid dependence
- Women referred from all over state
- Emotional connection supported with developing fetus
- Dedicated team on Family Medicine Maternal Child Health
Prenatal care, delivery care, management of baby withdrawing
- Mothers engaged in process of recovery
- Case management provided in pregnancy

Mothers' Brains Change

- Addiction is a brain disease
- Accepting role in creating new life
- Anticipation of a better future
- Recovery is learning to manage stress
- Medication assisted treatment changes brains
- Counseling changes thinking patterns
- Changing dependence leads to better health

Milagro Prenatal Care Outcomes

- Better pregnancy health
 - Earlier identification of associated health problems
 - More likely to deliver at or near 40 weeks
- Infant brain growth better from prenatal care
 - Mother's better health leads to better brains
 - Less prematurity reduces risks of brain injuries
- Strong support for treatment services
- Significant impact of Subutex medication assisted treatment
 - Reduces severity and length of treatment for infant withdrawal
- More chances for breastfeeding, better neonatal health

Angelica, Age 3, Completes FOCUS

- Mother w/ Milagro prenatal care with Subutex at 24 wks
- Hospitalized for Subutex induction at 24 weeks
- Angelica born at term, initial developmental delays
- FOCUS; home based developmental care started
- FOCUS primary care for parents' drug treatment
- Responsive parenting is recovery from addiction
- No need for special education, ready for school

FOCUS Services and Program Costs

- Families identified for FOCUS home visiting:
 - FIT funding, Medicaid Part C, diagnosis and at risk
 - 220 or more referrals of infants per year
 - 340 children 0 to 3 years in early intervention per year
 - 76.5% referred for prenatal drug use, most opioid use
 - 100% with environmental risks; mental illness, violence
- Ideal model involves home visits 2 times per month
- Development closely monitored
 - Occupational and speech therapy involved if delays
 - Home based intervention, provides skills to parents

Trauma Informed Enhancing Resilience

- Need more centers of excellence in NM
 - Focus on changing brains for adults
 - Medication and learning to help remission in addiction
 - Adults had childhood trauma without relief
- Need to identify personal resilience
 - Acknowledge the parents' hopes for their children
 - Hands on floor play for serve and return parenting
- Build on resilient community systems
- Manage costs to build evidence based systems

Thank You

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Center on the Developing Child, developingchild.harvard.edu, Dr. Jack Shonkoff
Scarborough AA, Lloyd EC, Barth RP; J Dev Behav Pediatr 2009
Felitti, Anda, et al., 1998 and <http://www.cdc.gov/ace/prevalence.htm>

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Milagro and FOCUS Programs;

The UNM HSC Center of Excellence to Support Maternal and Infant Brain Development.

Milagro Program; Department of Family Medicine continuity of prenatal care, drug treatment, to delivery

- Women start care at anytime in pregnancy
- 80% of current 141 seen in Milagro currently have opioid dependence
 - 60% on buprenorphine (Subutex), 40% methadone
 - All are helped to attend counseling; access to counseling is very challenging in community
 - 20% have other substance use disorder or no treatment in process
- Women referred from all over state, some rely on Medicaid transportation to come to Albuquerque
- Mothers to be participate in personal recovery

Prenatal care and recovery create changes in mothers' brains

- Addiction is a brain disorder; chronic relapsing life threatening disease with roots in childhood
- Increased connection with developing fetus, planning for life as a family
- Recovery is learning to manage stress
 - Many mothers experienced toxic stress as children and received little or no help
 - Substance use is a strategy to handle toxic stress, a way of numbing feelings of anger and sadness
- Medication assisted treatment with buprenorphine or methadone changes brains
 - Stabilizes brain chemicals derailed by substance use; pleasure and reward systems
 - Reduces cravings to use, reduces symptoms of withdrawal; restores opioid receptor system
 - Counseling changes thinking patterns, handling stressful situations and situational triggers
- Changing dependence leads to better health and reduced risks of violence to self
 - Less risky life from not seeking drugs
 - Better nutrition, more consistent schedule

Angelica, age 3, graduates from FOCUS early intervention program

- Mother started Milagro prenatal care with Subutex at 24 weeks
- Angelica born at term and did not need medication for withdrawal, initial developmental delays
- FOCUS; home based developmental care started, home visits monthly to every 2 weeks for 3 years
- FOCUS primary care for parents' drug treatment and all health problems
 - Mother received Suboxone from FOCUS, aided access to counseling
 - Persuaded father to start Suboxone
- Responsive parenting is recovery from addiction; serve and return emotional interaction with children
 - Parents change their priorities; transfer energy from drugs to meeting their child's real needs
 - Meet the child's needs for emotional and intellectual stimulation and learning
 - Parents become advocate for the child's education; they learn how infants learn from FOCUS
- Angelica demonstrated age appropriate development, did not need for special education, ready for school

FOCUS Services and Program Costs

- Major program effort is to engage reluctant families, continued efforts to find infants and families
 - Covers Sandoval County, Bernalillo, part of Santa Fe, and Valencia
 - Medical services largely covered by Medicaid
- Cost per family \$2334 per year, can have services up to 3 years
- Family focused medical home model, infant or child under 3 as primary client
 - Older kids in family eligible for primary medical care, some case management
 - Parents, grandparents or other family members who influence the development of the child

FOCUS Program organized to prevent further Adverse Childhood Experiences and adversity in family lives

Other home visiting programs in NM

- First Born Program
- Parents as Teachers
- Nurse Family Partnership
 - Start intervention before 28 weeks in pregnancy
 - Average costs per family \$3000-6000 per year, salary dependent

New Mexico needs more Milagro/FOCUS programs; centers of excellence to restore parent and child brains
Trauma informed enhancing resilience systems of care; directed to changing family systems around children