

# Opioid Crisis

## Treatment for Pregnant Women



The 2Gen Academy Opioid Crisis: Treatment Capstone Project Team conducted research to identify strategies that are both effective for mothers and safe and sustainable for infants. This initiative aims to remove barriers to care for pregnant women with Opioid Use Disorder (OUD) who are seeking treatment prior to giving birth, thus, **reducing the number of babies born with Neonatal Opioid Withdrawal Syndrome (NOWS)** and **the number of infants entering DFCS custody** due to maternal opioid use.

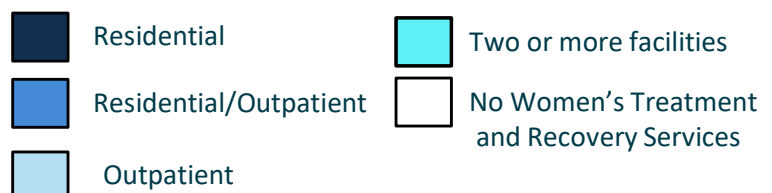
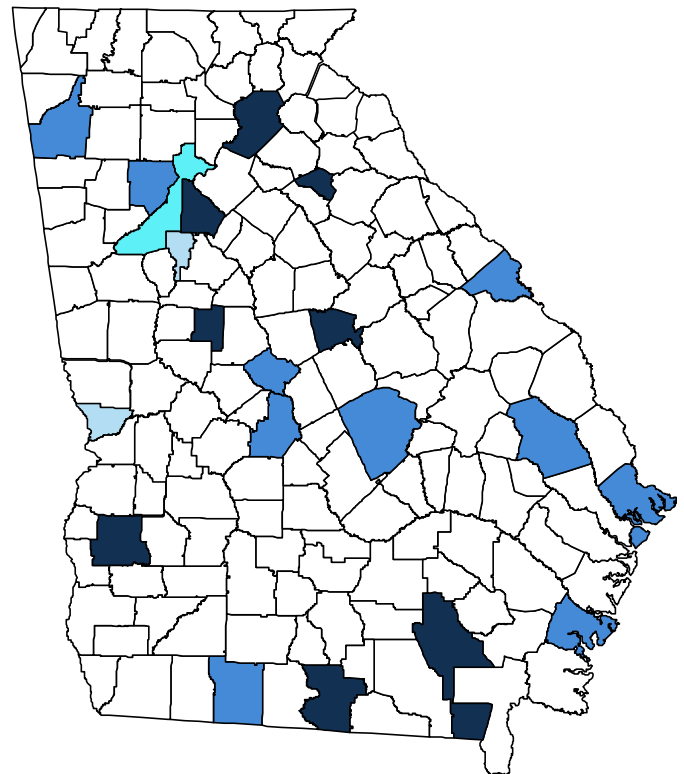
**Historically, treatment for OUD has been developed around men, which creates barriers for women who try to access it.**

### 📍 Research Timeline

- 2018** ● Opioid use for women is more likely to be through medical treatment than for men. Between 1996-2016, **overdose in women** rose by **583%**.
- 2019** ● From 1999-2017, the death rate for drug overdose among **women aged 30-64** increased by **260%**.
- 2020** ● In a cross-sectional study, callers representing pregnant women were less likely than callers representing non-pregnant women to be granted an appointment with an Opioid Use Disorder treatment clinician.
- 2024** ● Opioid overdose is now a leading cause of death associated with pregnancy and the post-partum period. From 2017-2020, pregnancy associated overdose deaths **increased by 81%**.

### Women's Treatment and Recovery Services in Georgia

- 21 specialized treatment facilities
- 486 beds statewide
- 18 dedicated psychiatrists



# Research and recommendations for increasing pregnant women's access to OUD treatment.






## 2022 Statistics

- 10x more opioid-related deaths than 1999
- 1999-2022, 727,000 opioid overdose deaths
- 2022: 82,000 opioid overdose deaths
- 2023 AFCARS Report: 19% of Georgia's children entering the foster care system were < 1-year-old. 55% of the circumstances associated with an infant's removal were due to drug abuse by the parent.
- A cross-sectional data analysis from 2010-2017 found a 131% increase in US Maternal Opioid Use Disorder (MOD).
- GA had a 181% increase for Neonatal Abstinence Syndrome (NAS) and 166% MOD.
- NAS births spent nine more days hospitalized and had an additional cost of \$14,700.
- In a study of 580 US counties, Neonatal Opioid Withdrawal Syndrome (NOWS) and rurality were associated with higher rates of infant foster care entry.

## Voices from Stakeholders

- ✓ There is a fear of losing custody of their child.
- ✓ Improve healthcare provider training and awareness on recognizing and supporting pregnant women with opioid use disorder (OUD).
- ✓ Establish a cross-system communication and data sharing.
- ✓ Increase availability of residential treatment for mother and child(ren).
- ✓ Increase transportation to access services across Georgia.
- ✓ Increase access to transitional resources and support after treatment.

## Capstone Project Team Recommendations

-  Expand the current Women's Treatment and Recovery Services (WTRS) programs for treatment and support.
-  Collect state-level data on substance use among pregnant women.
-  Increase availability of transitional supports.
-  Develop awareness programs to support and educate providers on:
  - Programs and services available to pregnant women.
  - Ways to approach pregnant women about seeking treatment support.
  - Education about impact of substance use during pregnancy.
-  Create a system for compiling data across agencies and programs.