

Colorado Committee Convenes Stakeholders to Address Prenatal Substance Exposure

The Colorado Substance Exposed Newborns Steering Committee brought together key stakeholders to improve identification and treatment of substance use during pregnancy and the postnatal period.

Neonatal Abstinence Syndrome (NAS) is the postnatal drug withdrawal caused by the misuse and abuse of opioid analgesics, medications, and/or illicit drugs during pregnancy. In 2010, an estimated 6 percent of the babies born in Colorado, or 3,958 out of 65,962 births, were exposed to the non-medical use of prescription medications. The Colorado Substance Exposed Newborns Steering Committee (SEN) was established in 2008 through the Colorado attorney general and State Methamphetamine Task Force to foster collaboration across disciplines within the state. In 2013, this task force was renamed the Substance Abuse Trend and Response Task Force in legislation. The Colorado Department of Public Health and Environment (CDPHE) is an active SEN member, contributing to reports, assisting with resource dissemination, and seeking opportunities for the committee's activities and CDPHE to align. The committee, chaired by the nonprofit Colorado Alliance for Drug Endangered Children, hosted a series of regional convenings in the spring of 2013 to encourage cross-discipline networking, disseminate research updates, and develop regional action plans regarding substance use during pregnancy. SEN is now engaged in strategic planning to determine the best method to support these regional action plans and act on the needs identified during the convenings.

Steps Taken

- Recognizing that disparities existed in local hospitals in terms of their screening/testing policies and a lack of understanding and implementation of those policies in practice, the State Methamphetamine Task Force (now the Substance Abuse Trend and Response Task Force) formed SEN in 2008 to provide a more focused approach to addressing substance use during pregnancy.
- SEN hosted a multi-disciplinary work session in September 2009 with representatives from law enforcement and criminal justice, substance abuse treatment, mental health, child protection, and the medical community. The committee found that, although there was great interest in addressing the problem in Colorado, understanding of the issue was fragmented and the groups lacked common goals and a vision for how to move forward.
- As a result of the work session, SEN published "[Serving Families Impacted by Prenatal Substance Use: Recommendations for Policy and Practice](#)" in 2012, outlining concrete, actionable recommendations to address substance use during pregnancy and the postnatal period. Prior to publication, SEN worked extensively with stakeholders throughout the state to build consensus, including a member of the state House of Representatives, county sheriffs, mental health treatment providers, and the medical director of a major health facility.
- A CDPHE staff member attended the work session and helped review the final report.
- Other SEN activities included the development of legislation ([HB12-1100](#)) to protect pregnant women who test positive for drugs or admit to substance use during prenatal care from having that the information used against them in criminal proceedings. SEN also developed educational

- Colorado ranks second in the nation for prescription drug abuse among 18-24 year olds.
- In 2010, an estimated 6 percent of the babies born in Colorado, or 3,958 out of 65,962 births, were exposed to the non-medical use of prescription medications.
- It's estimated that only 25 percent of Colorado women using substances during pregnancy seek treatment.

materials for practitioners and a 1-800 referral line for supporting women using substances during pregnancy in accessing treatment and support services.

- In early 2013, SEN used a grant to host eight convenings in communities across Colorado. The convenings served as a first step in establishing coordinated services among providers by providing opportunities for education, networking, and action planning within each community.

Results

- More than 300 people attended the regional convenings. Attendees included representatives from the behavioral health, child abuse prevention, child welfare, community and human services, and law enforcement and judicial, medical, and public health professions.
- Attendees surveyed after the convenings reported that the meeting changed their understanding of issues around substance exposed newborns, increased their awareness, and improved their willingness to take action. Many attendees (n = 68) signed on to continue to work with SEN and develop local task forces to carry their action plans forward.
- The majority of Colorado counties (73%) were represented at the convenings.
- Although each regional convening generated its own action plan, a number of themes were common to them all, including a need for more education and training for both the public and practitioners; mobilizing community partnerships and collaboration; establishing policies and protocols locally or across the state to address substance exposure in newborns; and linking families to appropriate medical and behavioral health services for prevention and treatment of substance use.
- A number of new relationships with statewide systems were developed through the convenings, including increased awareness of a statewide pregnancy substance abuse treatment resource.
- CDPHE incorporates SEN's work and the general topic of substance use during pregnancy during presentations and services, such as the 1-800 referral line.

- The committee hosted eight convenings over three months in the spring of 2013, drawing 308 attendees statewide.
- The convenings increased attendees' awareness, understanding, and willingness to take action by 89 percent, 74 percent, and 74 percent respectively.
- The greatest needs and next actions identified during the convenings were for more training, and standardized policies for screening, testing, and treatment.

Lessons Learned

- Before HB12-1100 was passed, progress addressing substance use during pregnancy was slow because women and practitioners feared prosecution. Plans are underway to evaluate HB-1100's impact on treatment rates.
- Strong relationships between the legal community, health department, educators, child welfare, mental health services, and medical providers are essential. Having a diverse group of partners enables everyone to better understand how their work supports another service providers' work. Additionally, patient care is managed better when providers communicate and understand the processes and protocols that are in place. Building these relationships is a slow process, but using a

variety of community organizations and networks can assist in reaching stakeholders and generating buy in.

- Focus should be centered on increasing screening, referral services, and access to care, as well as providing mental health support for expectant mothers battling substance abuse. Mental health and substance use issues are often co-occurring, and work in these two areas could be enhanced through collaboration.
- The medical community was under-represented at the regional convenings, specifically physicians who see patients. A different structure is required to reach those medical providers. SEN plans to continue to engage this community through webinars, professional organization outreach, and additional meetings.
- SEN has benefited from a few dedicated leaders who have continued to move its work forward. Because it takes time to make progress and build the necessary stakeholder relationships, having an organized leader to coordinate activities is essential. It is also important to include the right groups and leaders from around the state who have the ability and influence to move these efforts forward.

SEN is in the process of planning its next steps following the convenings. In addition to supporting communities in implementing their regional action plans, SEN will support individuals who expressed interest in remaining involved and creating change at the local level. SEN will also continue to focus on developing policies, practices, and protocols that will build community networks and address the issues associated with substance use in pregnancy.

CDPHE will continue to partner with SEN and use the outcomes of the regional convenings to direct future program development. CDPHE has noted the increasing focus on substance abuse among women of reproductive age among providers and those stakeholders focused on serving pregnant and postpartum women, including public health programs, and says that the next state maternal and child health needs assessment (to be conducted in 2015) will explore this issue further when developing the state's priorities.

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