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A Window of Opportunity: Describing Participants Engaged in a Comprehensive Perinatal Care Model to Treat Substance Use Disorder During Pregnancy

Christina Jäderholm

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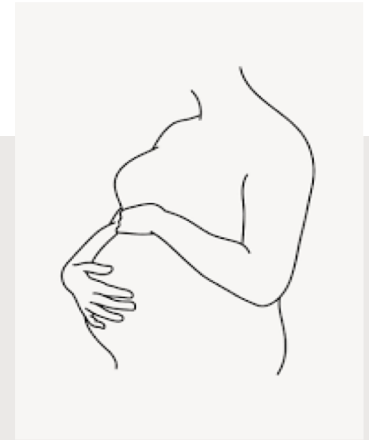
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A window of opportunity: Describing participant engagement in a comprehensive perinatal care model to treat substance use disorder during pregnancy

(AKA aim 1 of Christina's dissertation)



Presenter:

Christina Jäderholm, MS, DC

*Community Health PhD
candidate*

Committee:

*Brad Wipfli, PhD (Chair),
Teshanee Williams, PhD,
Lynne Messer, PhD & Liana
Winett, PhD*

Motivation & Research Orientation



Reproductive Justice

“The right to have children, the right not to have children, and the right to parent with dignity”

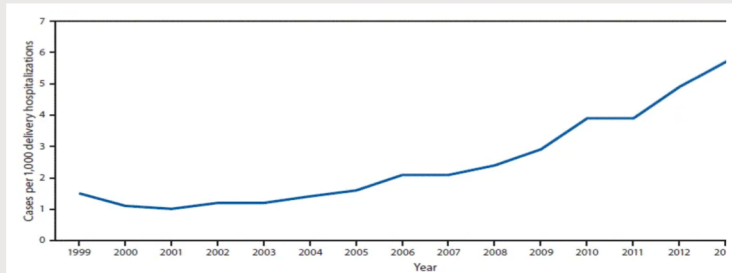
-Loretta Ross

Background: **Impact and effects**



18.5% of pregnant people in the US are estimated to use potentially addictive psychoactive substances¹

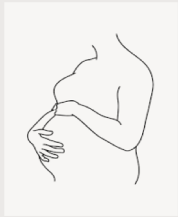
- Opioid use **increased 500%** from 2000 to 2014²



Substance use during pregnancy threatens **safety** and **social stability** and increase the risk of:

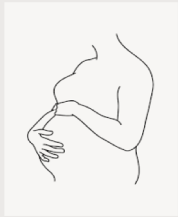
- **Overdose deaths**³
- **Adverse birth outcomes:**
 - 2-4 times as likely to deliver preterm⁴

Background: Definition



- **Substance Use Disorder (SUD)** is a clinical diagnosis
 - Chronic relapsing health condition
- SUD is one of the most **stigmatized** health conditions⁵
 - Affects **access** and **quality** of care⁶
 - Increased barriers to treatment for pregnant people – particularly Black and Indigenous women^{7,8}

Background: Treatment



- National Institute of Drug Abuse (NIDA): Sustainable health systems and public health approach through a **chronic disease model**
- Substance Abuse and Mental Health Service Administration (SAMHSA) have created guideline for **collaborative and comprehensive care**

Research Gap

Descriptions of collaborative and comprehensive interventions



- Limited descriptions on engagement and participant experiences in collaborative and comprehensive care model
 - No study on community-based model
 - Important to inform systems of care

Research partnership



Substance Use Network (SUN) is located in Cabarrus County in North Carolina (NC)

- **Comprehensive clinical care and collaborative care coordination model for pregnant people with SUD**
- SUN opened in 2019
- I visited the SUN intervention in September 2023 to build a community-research partnership and to collect data



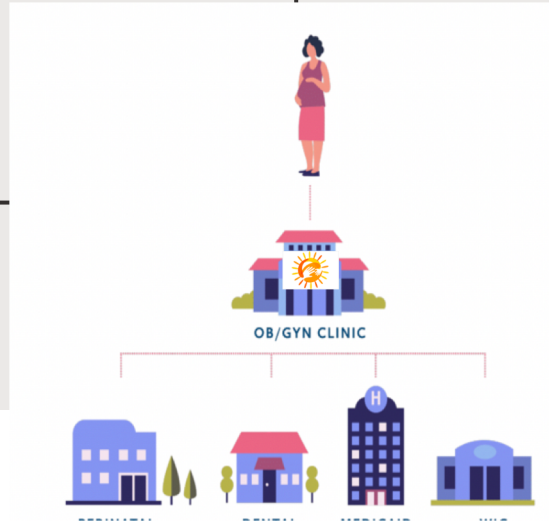
The model: **SUN**

Participants

History and SUD-related
treatment and social
needs

SUN clinic

- OB Provider
 - Obstetrics care
 - Opioid agonist treatment
- Licensed Clinical Social Workers
 - behavioral intervention
- Peer support specialist



Collaboration

Housing, hospital-based
services, parenting
support, partner SUD
treatment, health
insurance, food

Research Aim



SUN and Public Health goals:

Support health and recovery for pregnant people through systems of care **and research**



Aim 1:

Describe the SUN participants, their engagement, outcomes and experiences in a sample of pregnant people with SUD enrolled in a NC intervention between 2019-2023

Data from consented SUN participants from 2019 to 2023 (n=29)

Medical records

- 29 records
- Consented participants 2019 to Oct. 2023
- Quantitative and qualitative data

Surveys

- 1st wave: n=15 (2021)
- 2nd wave: n=14 (2023)
- Participant experience
- Quantitative and qualitative data

Focus groups

- 1st wave: n=3 (2021)
- 2nd wave: n=4 (2023)
- Participant experience
- Qualitative data

Analysis: Descriptive and thematic

Medical records

Descriptive:

- Demographics
- History
- Engagement
- Birth outcomes

Surveys

Descriptive and thematic:

- Satisfaction
- Needs met
- Motivation
- Barriers

Focus group

Thematic:

- Facilitators
- Barriers
- Interpersonal
- Recovery

Analysis: **Triangulating**

Records

Entry to SUN

- Demographics
- Medical and social history

Participant experience

Surveys

- Satisfaction
- Needs met
- Motivation
- Barriers

Focus group

- Facilitators
- Barriers
- Interpersonal
- Sustainability
- Recovery

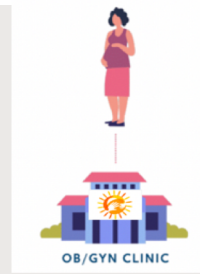
Records

Outcomes

- Engagement
- Birth outcomes

Findings: Entry into SUN

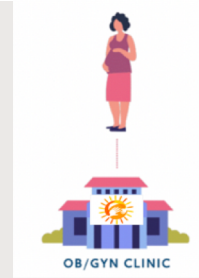
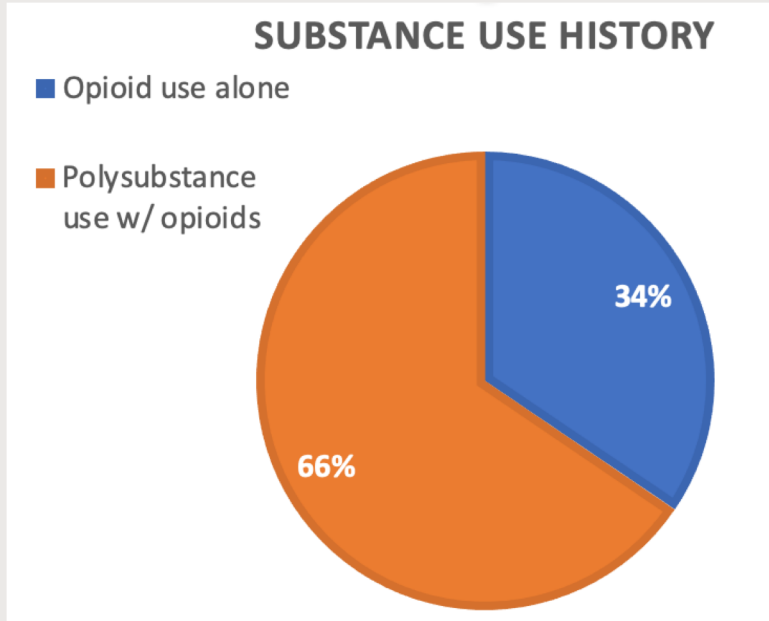
Age at care initiation (n=29)	% (count)
20-30	62% (18)
30-40	38% (11)
Race	
<i>Black, non-Hispanic</i>	14% (4)
<i>White, non-Hispanic</i>	86% (25)



21% was employed, and 10% was seeking employment

65% had 1 or more past live births (18% missing data)

Findings: Entry into SUN



100% opioid use disorder, with 66% polysubstance use

17% had past overdose episodes

Findings: Treatment facilitators

- **Access** to the program and scheduling **flexibility**
- **Services and resources** offered: Behavioral health, parenting support, WIC, etc.
- Ease of accessing **opioid agonist treatment**
- Supportive care – **people care**

97% were able to access treatment **timely**

93% felt they **received the help and support** they needed

93% had help accessing **parenting and relationship/family support**

“I was in the next day after calling and making an appointment”

Findings: **Treatment barriers**

- **Transportation** to and from appointments
- **Time** spend on appointment
- Feeling **overwhelmed**
- **Mental health** barriers such as anxiety

35% indicated **transportation limited** their access to treatment

83% **received help** from SUN accessing **transportation** to and from appointments

36% indicated that '**people in their life**' limited their ability to access treatment

“And with pregnancy you don’t really feel like being there all day...I was already tired then after having to drive there and now it’s like I have to answer a thousand questions”

Findings: Recovery

- **Mutual trust** with providers
- Feeling **safe** and **respected**
- **Peer support**
- Motivation: **Baby's health** and **parenting**
- **Harm reduction** before starting in SUN

93% feels **safe** in the SUN clinic, say they can **trust** the SUN providers and that they get **treated with respect**

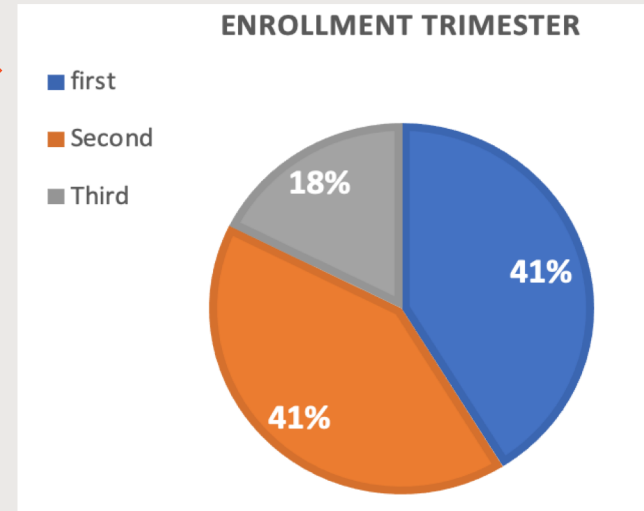
“The sun clinic is the only clinic I've ever been able to express myself and feel trusted.”

“I need to be the best mom I can be for them so my sobriety is one of the most important”

“I found out I was pregnant [and] had been buying Subutex off of the street”

Findings: Engagement outcomes

Enrollment trimester (n=29)	% (count)
<i>first</i>	41% (14)
<i>Second</i>	41% (14)
<i>Third</i>	18% (6)
Treatment adherence*	
Yes	94% (32)
No	6% (2)



Findings: Birth outcomes

Preterm (<37 weeks)	% (count)
Yes	13% (4)
No	87% (26)
Missing	0% (0)
Low Birth weight (<5.5 lbs.)	
Yes	10% (3)
No	80% (24)
Missing	10% (3)

Observed trend: Infants born to SUN clients who received prenatal care in the SUN clinic from their first trimester were all born at term (≥ 37 weeks gestation), and not low birth weight ($> 5\text{lb } 8\text{oz.}$).

Strengths and limitations

strengths

The mixed methods study allow triangulation between descriptive statistics and qualitative findings.

Limitations

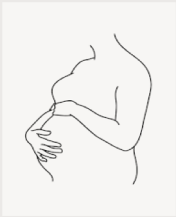
Small sample size

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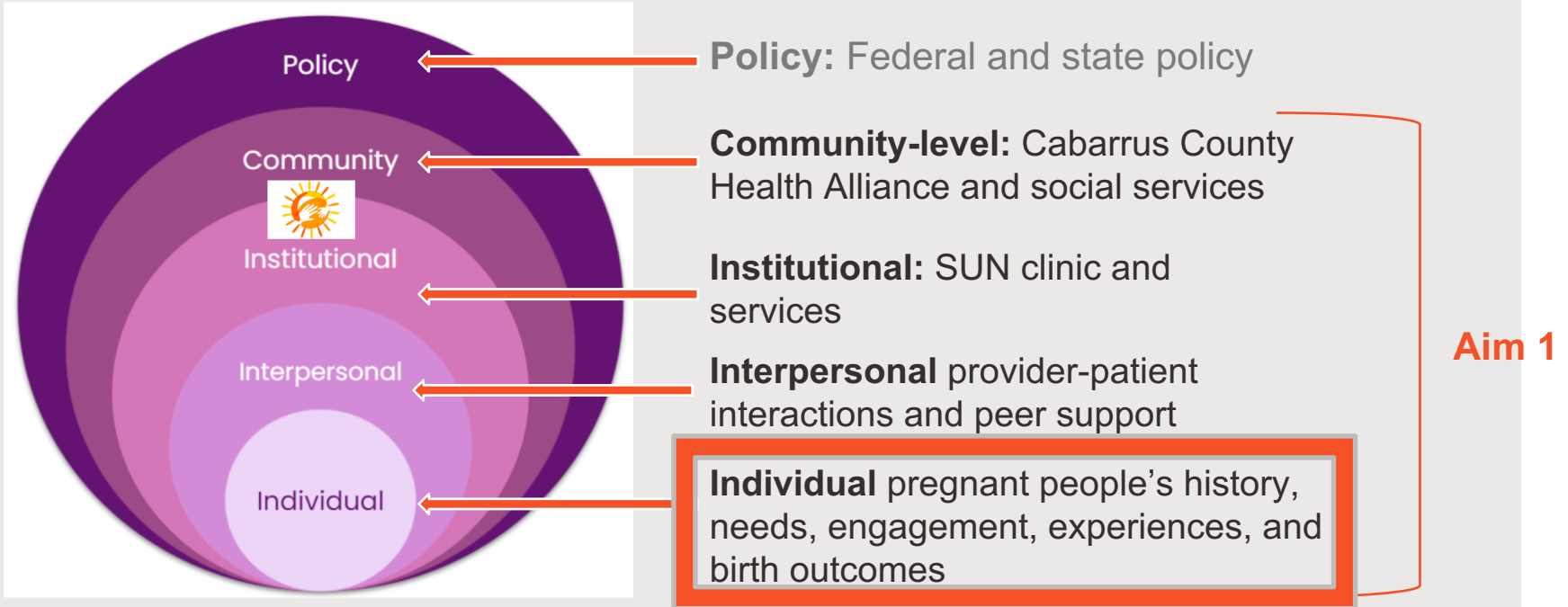
Time for questions?!

Background: Health effects



- **Overdose deaths** among pregnant and postpartum people **increased by 81%** from 2017 to 2020⁷
 - Leading cause of maternal mortality in some regions⁸
- Increases the risk for **adverse birth outcomes:**
 - 2-4 times as likely to deliver preterm⁹

Theoretical framework: **Aim 1**



Socio-ecological Model

Aim 1: Research Questions

To describe the SUN participants, their engagement, outcomes and experiences I ask the following research questions:

RQ1: What are the characteristics of SUN participants (2019-2023) including their demographics, criminal justice involvement, social and substance use history, social needs, overdose episodes?

RQ2: Have trends in participant engagement, such as timing of prenatal care initiation, length in program and adherence to treatment, as well as birth outcomes changed over the study period?

RQ3: What are the experiences of SUN participants, providers, and partners in regards to SUN engagement?

Data from consented SUN participants from 2019 to 2023 (n=30)

	Data source 1: Medical records	Data source 2: Surveys	Data source 3: Focus groups
Setting	Review of consented participants' electronic medical records April 2019 to Oct. 2023	Two waves of participant surveys: 2021 and 2023.	Two focus groups with SUN participants: 2021 and 2023
Data	Quantitative and qualitative data	Quantitative and qualitative data	Qualitative data
N	29 records (representing 34 pregnancies and 31 births)	1 st wave: 15 responses 2 nd wave: 14 responses	1 st group: 3 participants 2 nd group: 4 participants
Foci	Participant demographics; medical, legal, and social history; diagnosis; social/medical needs; treatment history; birth outcomes	Participants' experience in the SUN program	Participants' experiences in the SUN program
Analysis	Descriptive	Descriptive and thematic	Thematic