

Harm Reduction Approaches:

- De-identified public health reporting
- Coach OB providers on MI
- Family Check Up adapted for perinatal OUD, to enhance parenting skills via telehealth
- Recovery coaches associated with increase in SUD care and decreased racial disparities in reunification
- Sobriety Treatment and Recovery Teams programs decreased out-of-home placements and increased reunifications
- Maternal Opioid Medical Support program enhanced odds of MOUD and mental health treatment engagement
- Home visiting associated with reduced subsequent pregnancy exposures and increased treatment engagement
- Family-centered programs (e.g., START) improve family preservation and maternal–infant health outcomes.

*'Hope' is the thing with feathers -
That perches in the soul -
And sings the tune
without the words -
And never stops - at all -
- Emily Dickinson*



<https://www.birdsandblooms.com/birding/attracting-birds/bird-nesting/safely-observing-nesting-birds/>

Affiliations: (1) University of Colorado School of Medicine, (2) Children's Hospital Colorado, (3) University of Hawai'i William S. Richardson School of Law, (4) Massachusetts General Hospital/Harvard Medical School

Disclosures: Thermo Fisher Scientific (AKO). Grant funding: NIDA/AACAP K12 DA000357 (PI Gray, AKO subawardee); American Heart Association (AKO consultant); HRSA (AKO Consultant – PROSPER program), NIA, NIDA, NIAAA (AKO - study psychiatrist). Grant funding: K23DA048169. AACAP DEI Fellowship (CB).

Mandated Reporting Policies for Perinatal Substance Use: A Systematic Review

Sandra A. Appiah¹, Christina C. Bodison^{1,2}, Leah Peloff¹, Keinada Andreas¹, Tariq A Salem¹, Amir Abdullah³, Davida Schiff⁴, and Aviva K.Olsavsky^{1,2}



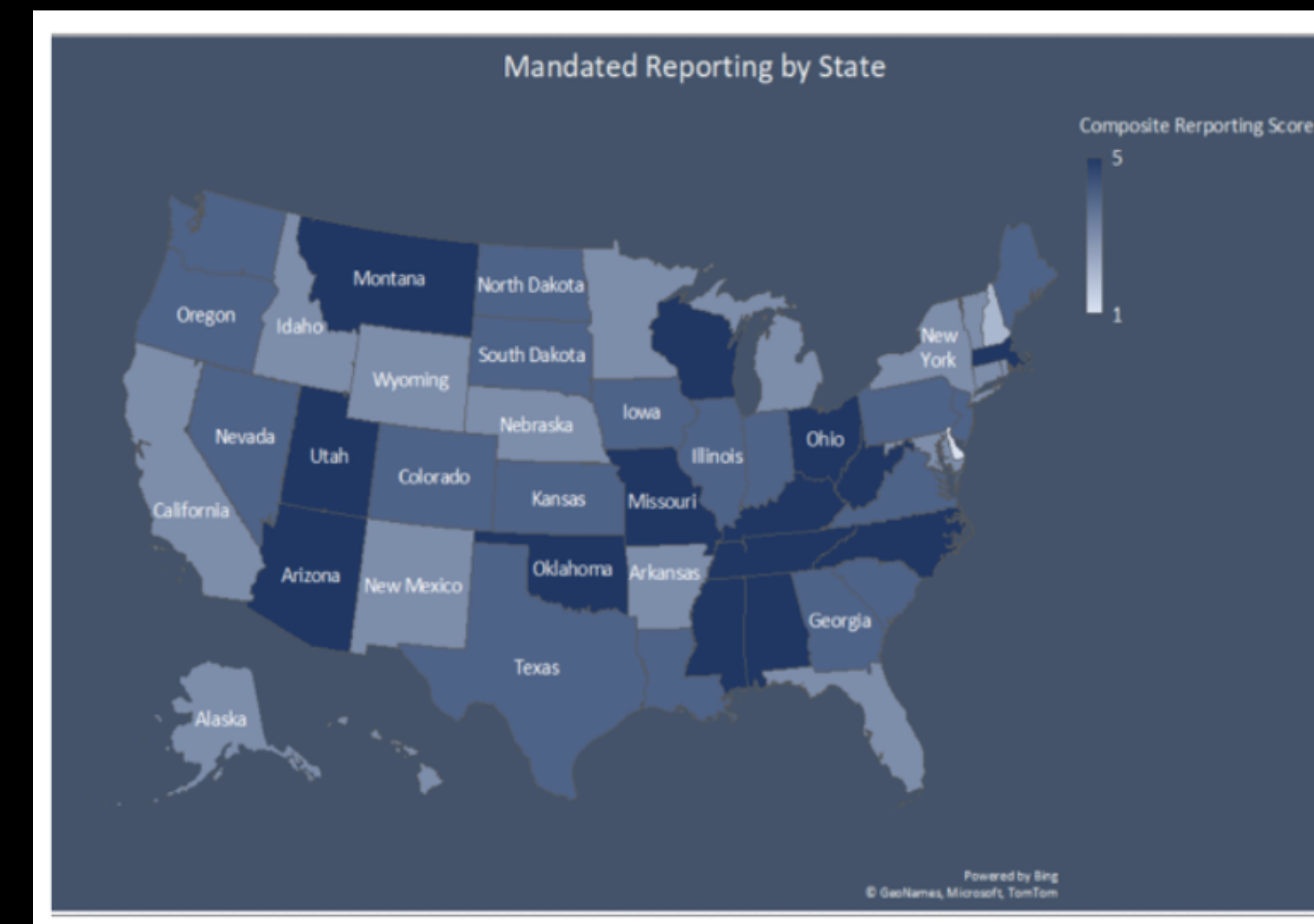
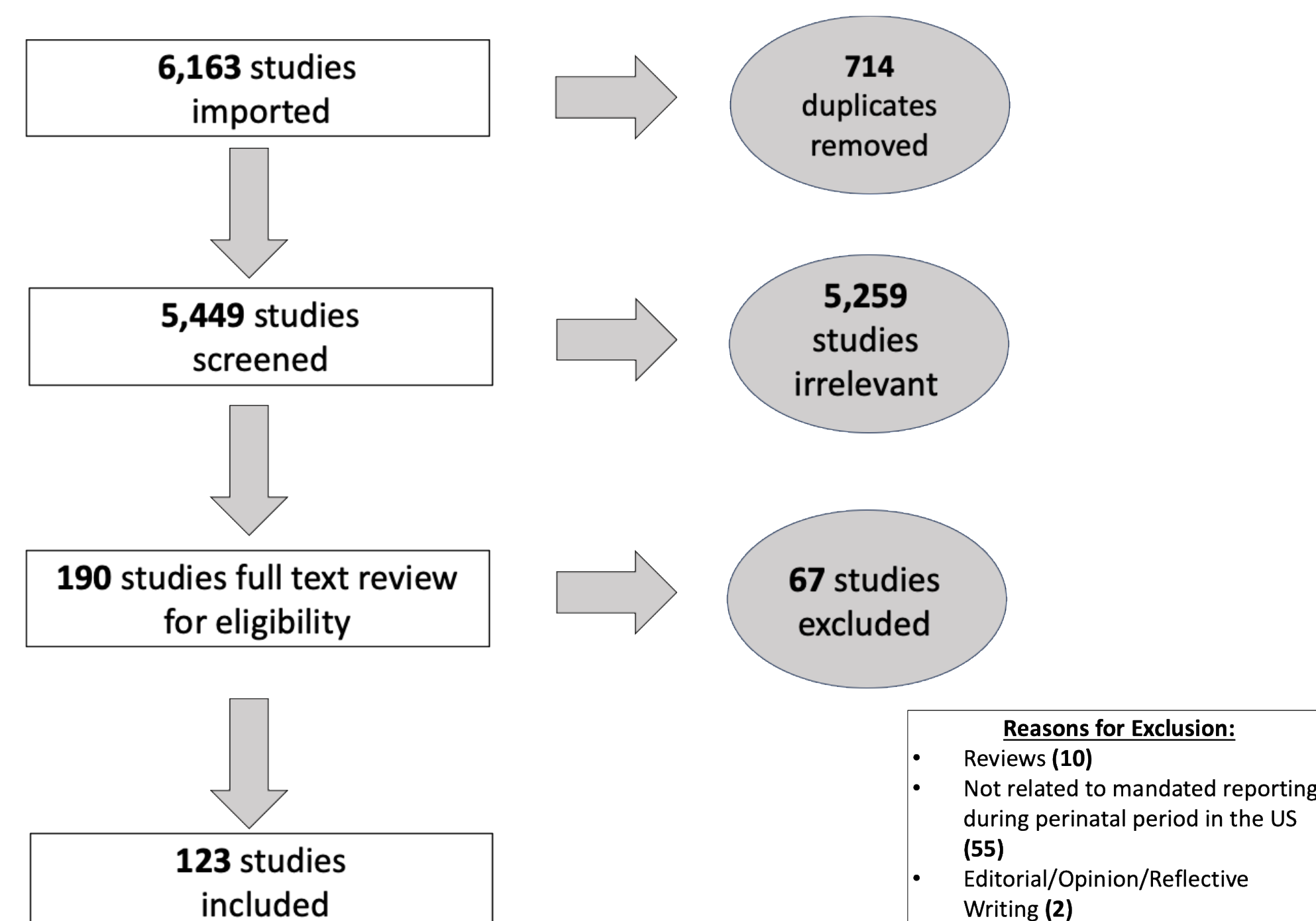
BACKGROUND:

- Punitive policies for reporting perinatal substance exposure increased during the opioid epidemic
- Punitive policies are associated with decreased prenatal care and higher rates of neonatal abstinence syndrome
- Our focus here is on more promising and specific harm reduction interventions

METHODS:

- DBs: PubMed, CINAHL, PsycINFO, Cochrane
- Exclusion criteria: case studies, reviews, editorials
- Title/abstract screening (SAA, AKO), full text review (AKO, SAA), data extraction (LP, AKO, SAA, KA, TS, CB)

RESULTS:

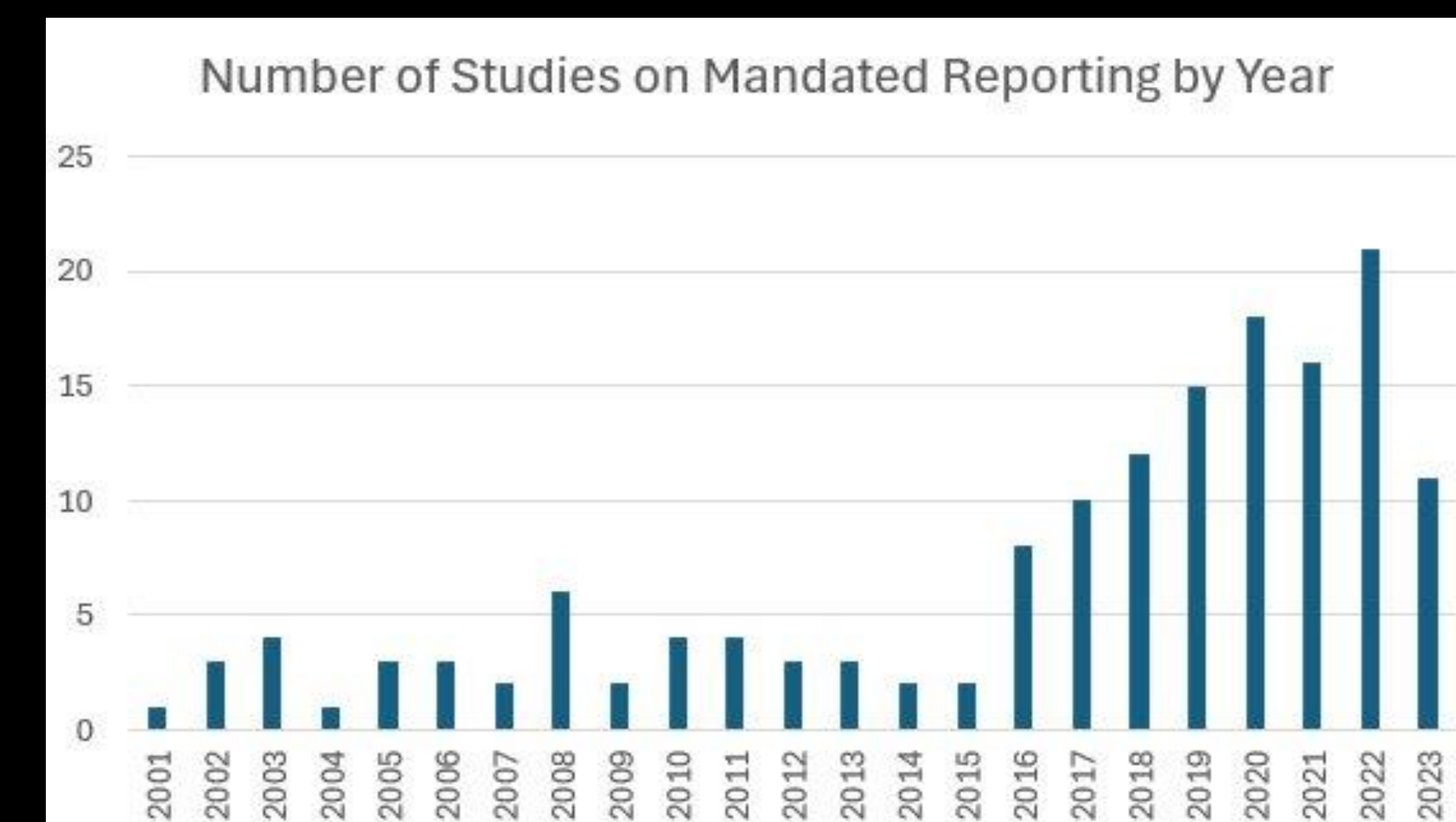


Composite score rationale/methodology:

	Score contribution
FASD	+1
NAS	+1
Testing	+1
MOUD	-1
Context	-1

Scores were calculated and then transformed (higher worse) with minimum=1 and maximum=5 points.

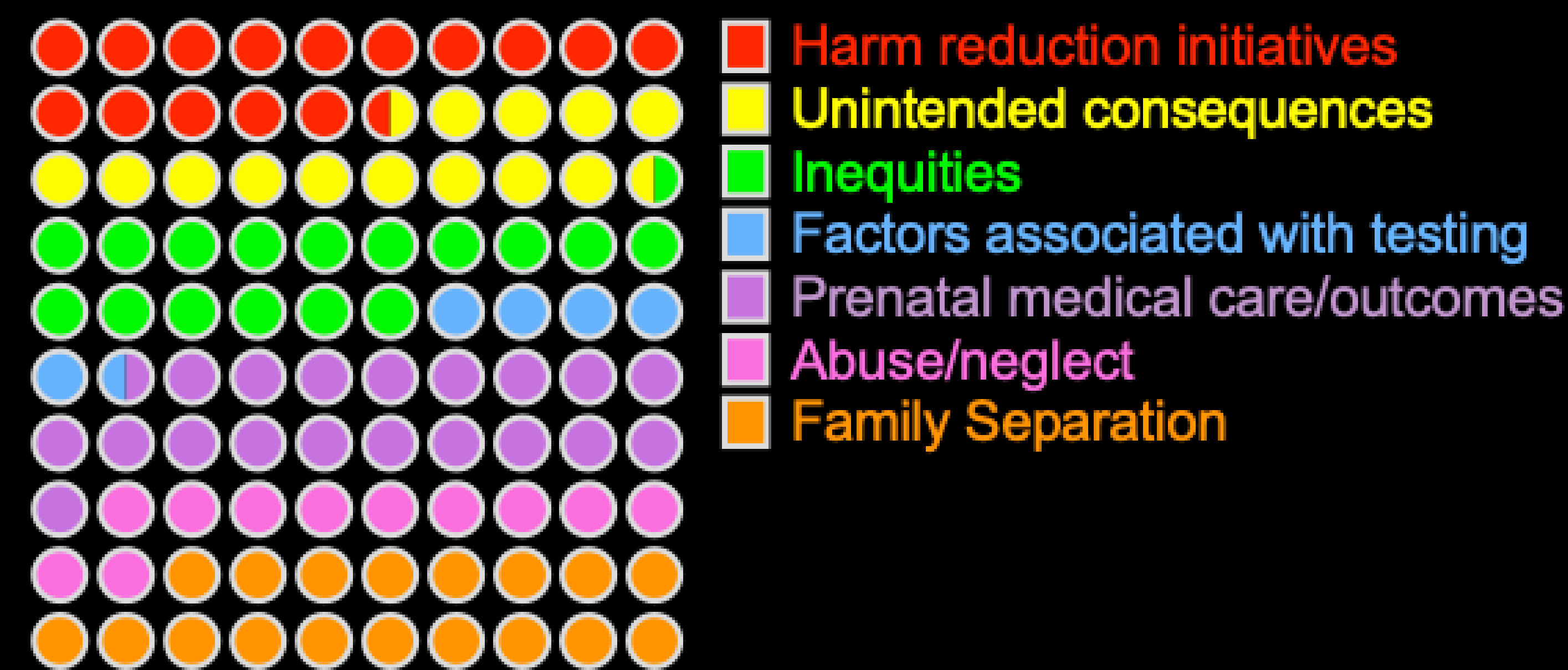
* excluded drug manufacturing due to the distinct nature of this issue



**PERINATAL
SUBSTANCE USE**
≠
**CHILD ABUSE
OR NEGLECT**

**Racial and Ethnic
Inequities in
Reporting**

Review Results - Heat Map by Subtopic



CALL TO ACTION: FIRST DO ~~X~~ HARM REDUCTION ...