



The Center on
Parenting and Opioids

Substance Use and Recovery in Pregnancy and Early Parenting

Van Scoyoc, Lowell, Bosk, Chaiyachati, Terplan & Cioffi, 2022

cpo.uoregon.edu



Alcohol addiction: We know less about medications for alcohol addiction in pregnancy than we do about medications for opioid addiction. Both acamprosate and naltrexone appear safe. They are safer than untreated alcohol addiction in pregnancy.

Buprenorphine: Medication approved for treating opioid addiction. It's considered one of the most effective medications for opioid addiction in pregnancy.

Doula: Non-medical providers who give physical and emotional support during pregnancy and birthing. They can help pregnant people feel better supported during pregnancy.

Family Medicine Practitioner: A doctor or nurse who provides support to families.

Healthcare Providers: A healthcare provider could be a doctor, nurse practitioner, or nurse midwife. This term can also refer to other kinds of healthcare workers.

Medicaid: Medicaid is health insurance paid by state and federal funding. Some states have different names for Medicaid, such as Oregon Health Plan, or Medi-Cal.

Nurse Midwife: A nurse who also provides care during pregnancy and soon after the baby is born

Peer Support Specialist: People who are in recovery from substance use disorders. They provide resources and support to help you in your recovery. They often have shared experience with parenting while in recovery.

Substances: Substances refers to alcohol and/or drugs. Substance use becomes an issue when it starts to have harmful effects on someone's life. This could mean difficulties at home, school, or work.



OB/GYN: A type of doctor who provides care during pregnancy and soon after the baby is born.

Opioid addiction: Medications approved for treating opioid addiction include methadone, buprenorphine, and naltrexone. Both methadone and buprenorphine are considered the safest and most effective medications for opioid addiction in pregnancy. Doctors have been prescribing methadone for over 50 years and buprenorphine for over 20 years to treat pregnant people. A lot less is known about naltrexone, but what is known is reassuring.

Nicotine addiction: Nicotine replacement therapy products can be very helpful for easing withdrawal symptoms when lowering or stopping nicotine use. These products include patches, chewing gum, lozenges, inhalers, and nasal sprays. You can discuss nicotine replacement therapy with your healthcare provider.

Tips For A Healthy Pregnancy When You Have An Addiction



People feel all different emotions when they learn that they are pregnant. It is common to feel happy, excited, nervous, upset, worried, or even nothing at all. It is also common to have multiple feelings. Some people decide they do not want to continue the pregnancy. Others decide they will continue the pregnancy but place their child for adoption.

Some people are not sure which steps to take next. This is the case for all pregnant people, including people using substances and those in recovery. But some things about pregnancy and parenting are different for people using substances or in recovery. For example, some people find that once they learn that they are pregnant, they want to try to stop using substances.

Substances refer to alcohol and/or drugs. Substance use becomes an issue when it starts to have harmful effects on someone's life. This could mean difficulties at home, school, or work.

Here you will find information about:

- finding support during pregnancy
- reducing your substance use if that is your goal
- reducing harm to yourself and the developing baby if you continue using substances
- how to prepare for safe and successful parenting

1 Finding Support

You don't have to go through pregnancy alone. There are healthcare providers who can support you. These include doctors, nurse midwives, nurses, doulas, and home visitors. It might feel like it's hard to find people who understand your needs. However, there are professionals who are trained to provide support without judgement.

A healthcare provider could be a doctor, nurse practitioner, or nurse midwife. This term can also refer to other kinds of healthcare workers.

Prenatal Care

If you think you might be pregnant or know you are pregnant, it's important to start working with someone who provides prenatal care. They can monitor your health and the health of the baby while providing information about how to have a healthy pregnancy.

A person providing prenatal care could be:

- **OB/GYN:** A type of doctor who provides care during pregnancy and soon after the baby is born.
- **Nurse Midwife:** A nurse who also provides care during pregnancy and soon after the baby is born.
- **Family Medicine Practitioner:** A doctor or nurse who provides support to families.

Attending regular prenatal care visits is one of the most important things that you can do to have a healthy baby. During prenatal visits, your healthcare provider will give you advice about things that you can do to stay healthy and feel well. They will also recommend that you regularly take a prenatal vitamin and eat nutrient dense foods to promote healthy development.



Important vitamins to get during pregnancy include the following:

- ✓ Folic acid
- ✓ Iron
- ✓ Calcium
- ✓ Vitamin D
- ✓ Choline
- ✓ Omega-3 fatty acids
- ✓ B vitamins
- ✓ Vitamin C

Your healthcare provider will see the baby through ultrasounds and listen to the baby's heartbeat. They will also watch your health. That way they can help you both stay healthy if either you or your baby have a medical concern. Prenatal care also includes testing for infections such as HIV and Hepatitis C. It is very important to know about such infections for your health during and after pregnancy. Knowing about infections also helps your healthcare provider to support you to prevent passing an infection on to your baby.



Overall, prenatal visits are often very reassuring. You can watch the baby grow and learn about the baby and what to expect after the baby is born.

There are healthcare providers that specialize in helping pregnant people with addiction and in recovery. You can ask your regular doctor, peer support specialist, doula, or a substance use treatment center for a referral. Ask if they can refer you to a sensitive and compassionate OB/GYN or nurse midwife who has experience providing care for pregnant people with who are currently using substances or who are in recovery. Some specialist shave training to provide medication like buprenorphine to help you star two continue recovery while in pregnancy.

Many pregnant people are worried about telling their healthcare provider that they are pregnant and currently using substances. It is understandable to worry about what will happen if a doctor knows that you are pregnant and using drugs or alcohol. Doctors are mandatory reporters which means they must make a report if there are safety concerns for children of any age after birth.

The laws in your state determine whether a doctor has to make a report to child welfare during a pregnancy. For example, in Oregon and most states, it is not reportable to use substances during pregnancy. Child welfare only becomes involved if the baby is affected by substances when they are born. If child welfare becomes involved during pregnancy and you think their involvement may not be lawful, you can also file a complaint against child welfare.



[Find child welfare laws in each state](#)

If child welfare becomes involved, they will probably see your participation in prenatal care as a positive step that you are taking. If you are connected to child welfare, it doesn't necessarily mean that you will have your child/children removed from your care. Child welfare's goal is usually to support children in staying with their parents. If you are following plans to provide your child with a safe home environment, it is more likely child welfare will support the children staying.

Ending a Pregnancy

Ending a pregnancy is commonly called pregnancy termination or abortion. Making the decision to end a pregnancy is a very personal decision that should be made by the person who is pregnant after talking with their healthcare providers. People who decide to end a pregnancy feel many different emotions. It is common to feel sadness, grief, relief, or guilt. It can be helpful to work with a mental health professional like a therapist, counselor, or social worker if you experience strong emotions after ending a pregnancy.

Pregnancy Support Resources

Prenatal care is not the only source of support to have a healthy pregnancy. Many areas have home visiting programs available that can help you, your home, and your family prepare for parenting – even before baby arrives. One program that is available in many places is the Nurse Family Partnership. This program provides a personal nurse who will offer support, advice, and information during pregnancy and after your baby is born. To enroll or begin services with Nurse Family Partnership, you must be a first-time parent in your first six months of pregnancy.

This means the first or second trimester, less than 28 weeks pregnant. Your nurse can help you have a healthy pregnancy in many ways. They may help you find prenatal care, prepare to become a parent, and, generally, find answers to your questions.



Enroll with Nurse Family Partnership

There may be other home visiting resources available in your area. You can find these types of programs online by searching for the name of your state, county, or city plus the term “home visiting program.” For example, “Washington home visiting program.” If you are interested in a home visiting program but having a hard time finding one, you can also ask your healthcare provider or other community organizations you’re connected to for ideas.

Doula Services

Doulas are non-medical providers who give physical and emotional support during pregnancy and birthing. They can help pregnant people feel better supported during pregnancy. During labor, doulas provide continuous support. They can help with pain management, emotional support, and coping during labor. Pregnant people who receive doula care have been shown to be less likely to have birth complications.

It typically costs about \$600-\$2,000 to hire a doula on your own. You can check your health insurance provider to see if doula services will be paid for. Currently, Medicaid covers doulas for families in New Jersey, Minnesota, and Oregon.



Medicaid is health insurance paid by state and federal funding. Some states have different names for Medicaid, such as Oregon Health Plan, or Medi-Cal. See what your state calls Medicaid.

If you are interested in a doula and live somewhere else, there are many programs that offer free or reduced cost services. For example, some areas, like Philadelphia, have free doula programs specialized for supporting pregnant people who are experiencing substance use and recovery.

Doulas in training often provide services for families at no cost or at a very low cost. A way to find a low-cost doula is to contact an established doula in your area and ask if they know of any student doulas who are looking to attend more births (you can google “Doula” and your city).

Support for Eating Well

Your nutritional needs change during pregnancy. It is important to drink lots of water and eat healthy foods. The WIC program provides food vouchers to pregnant and parenting people with low to medium incomes. It pays for healthy food like fruits, vegetables, milk, cheese, peanut butter, and more. WIC is also called the Special Supplemental Nutrition Program for Women, Infants, and Children.



Addiction Treatment

Accessing addiction treatment services can be essential for people who are ready to stop using substances. Many people can reduce substance use on their own. However, addiction is a disease that is difficult to recover from without treatment and support. Not everyone who uses substances has an addiction. If your substance use is negatively impacting everyday life and you can't stop using (even if you want to), those are signs of having an addiction.



It can be dangerous for you and for your baby to stop using substances suddenly.

It is important to get medical help if you are trying to stop. Your prenatal care provider or regular doctor can help you find supports that will help you stop or decrease your substance use while keeping the baby safe.

There are many options for safe treatment for substance use disorders. Substance use treatment typically involves a combination of therapy and medication. Therapy can help you to learn to understand triggers for using and ways to manage cravings. During pregnancy, treatment programs will help to monitor your health and the baby's health during the process of stopping using substances. You can receive many kinds of support for stopping using substances.

You can receive many kinds of support for stopping using substances. Most addiction treatment happens through outpatient care, where patients come to a clinic for part of the day to receive support.

If you would like to talk to someone who can help you locate a treatment center, you can call to the National Drug Help Hotline (1-800-662-4357) and the National Alcohol and Drug Dependence Hopeline (1-800-622-2255)

Outpatient

One of the most common forms of treatment is outpatient, meaning people do not live in the treatment center. There are services that are specially designed to help pregnant and parenting people with addictions. Outpatient clinics often offer groups to support people in recovery. There are different kinds of outpatient services, from intensive daily treatment programs to receiving services once a week.

Medication for Addiction Treatment

Medications can be an essential part of addiction treatment. Medications exist for opioid, alcohol, and nicotine addiction. Some medications have been extensively studied in pregnancy, but others have not been studied as much.

- **Opioid addiction:** Medications approved for treating opioid addiction include methadone, buprenorphine, and naltrexone. Both methadone and buprenorphine are considered the safest and most effective medications for opioid addiction in pregnancy. Doctors have been prescribing methadone for over 50 years and buprenorphine for over 20 years to treat pregnant people. A lot less is known about naltrexone, but what is known is reassuring.
- **Alcohol addiction:** We know less about medications for alcohol addiction in pregnancy than we do about medications for opioid addiction. Both acamprosate and naltrexone appear safe. They are safer than untreated alcohol addiction in pregnancy.
- **Nicotine addiction:** Nicotine replacement therapy products can be very helpful for easing withdrawal symptoms when lowering or stopping

nicotine use. These products include patches, chewing gum, lozenges, inhalers, and nasal sprays. You can discuss nicotine replacement therapy with your healthcare provider.

If you begin medication assisted outpatient treatment, the appointments may be more frequent at first. Your healthcare providers may want you to start by coming every day for group treatment and/or medication. This is especially true for opioid use. You are often able to start coming into the clinic less often as you move through the program and become more stable in recovery. If methadone is part of your treatment, you may receive take-home bottles so you don't have to come to the clinic every day. Methadone and all other prescription medications should be kept away from children and locked in a secure container.

In-Home Services

In-home services for parents in recovery are available in some states. These services provide both addiction recovery support as well as parenting support. In-home services involve people who come to your home, so you don't need to travel or find transportation in order to get support. These services vary from state to state. If they are available where you live, they are a great option for many families.

Inpatient/Residential

There are inpatient (live-in) services that are specially designed to help pregnant and parenting people with addictions. For example, there are some inpatient programs where pregnant people can live at the treatment center with their young children or live there during pregnancy and bring their baby after birth. These treatment centers often provide individual therapy and groups for stress management, relapse prevention, and parenting. They often have nursing staff on site as well.

Treatment centers provide a safe place for parents to focus on their recovery while also providing daycare and parenting support. This makes them a great option for some families. If you are being hurt in your relationship, entering inpatient or residential treatment can be a good choice so that you are not harmed while you are pregnant. Services can be short-term or longer-term (for example, three months).

These services sometimes have waitlists. You may need to call around to ask about openings and wait to be admitted.



[Residential substance use disorder treatment directory](#)

Peer Support

It is becoming more common to have peer support services connected to treatment programs and stand-alone peer support programs in the community. Peer support specialists are usually people in recovery from substance use disorders. They provide resources and support to help you in your recovery. They often have shared experience with parenting while in recovery. They are a valuable resource because they are familiar with what you might be experiencing. They know how to help you get access to the resources you need.

Peer support specialists are paid for by Medicaid in most states.

Twelve-Step Programs

There are many different types of twelve-step programs to support recovery. Alcoholics Anonymous and Narcotics Anonymous are the most well-known and well-studied. If you do an Internet search of meetings near you, you will probably find at least one meeting per week in more rural areas. There are sometimes more than 20 meetings a day in bigger cities. If you decide these programs are not for you, other programs exist that might feel more culturally appropriate for you.

Some examples include:

- Refuge Recovery
- Smart Recovery
- Celebrate Recovery

There are also groups for other challenges people with substance use disorders sometimes experience. Examples include:

- Eating Disorders Anonymous
- Overeaters Anonymous

- Sex Addiction Anonymous
- Co-Dependents Anonymous
- groups for specific substances such as cocaine, heroin, and cannabis/marijuana

These types of groups offer supportive networks of people who have had similar lived experiences.



[Information on harm reduction strategies](#)

Harm Reduction

Harm reduction is a set of strategies to reduce the risk of negative effects associated with substance use. Harm reduction principles can help at any time. This is true for people who are pregnant as well as those who aren't.

One example of harm reduction is syringe exchange programs that offer unused syringes. These programs typically exchange unused syringes for used ones. Syringe exchange programs also often offer safer sex supplies and free and quick testing for HIV, Hepatitis C, and sexually transmitted infections. If you have HIV or Hepatitis C, they can also help you find a provider to help reduce the likelihood of transmitting these to your baby. Routine prenatal care also includes testing for HIV, Hepatitis C, and other infections like syphilis, gonorrhea and chlamydia.

Fentanyl testing strips are another strategy to reduce harm. These strips test for whether fentanyl is present in a substance. Fentanyl is more powerful than other opioids and more likely to cause harm, so it can be helpful to know if fentanyl is in the substance you are using. These strips are easy to use and cost about \$1 each. Some syringe exchange programs offer them for free. You can also check with your local pharmacy to see if they have any available.

Having medication on hand can save your life if you overdose. Medications like naloxone can help stop an opioid overdose. Syringe exchange programs often provide free access to naloxone. Pharmacies in different states may also be able to provide naloxone without a prescription.



2

Learning About How Substance Use During Pregnancy Impacts the Baby

Many pregnant people want to learn about the impact of drugs, alcohol, and cigarette use on their baby. It is normal to worry about the baby and how it is developing. Many people look online to try to find this information, but it can be difficult to find accurate information this way. It's important to focus on information from trustworthy sources.

The CDC has more information on substance use during pregnancy. You can always ask your doctor about how your drug use may have impacted your baby.



Substance Use
During
Pregnancy

Pregnancy Loss

In the first trimester, miscarriages are common among all pregnant people. About 1 in 4 pregnant people experience miscarriage.

If this happens, you should know that there are many reasons why a pregnancy loss occurs. While the use and misuse of substances may increase the risk of loss, there are many other potential reasons. It is rare that any single cause of pregnancy loss is determined. Loss may have happened because of a genetic abnormality or other biological factors that were out of your control.

If you have had a previous pregnancy loss or are worried about loss in this pregnancy, talk to your healthcare provider. If a loss does occur, be sure to get the supports you need.



Postpartum
Support
International

Tobacco

Smoking and vaping during pregnancy can increase the risk of pregnancy loss, preterm birth, stillbirth, and Sudden Infant Death Syndrome (SIDS). It can also increase the risk that your baby might have attention challenges or respiratory health complications as they grow up.

Using tobacco during pregnancy can also be harmful to you. Quitting or cutting back smoking at any point during your pregnancy benefits you and your baby. The greatest benefit occurs when you stop smoking before your pregnancy reaches 15 weeks. However, any time that you can stop smoking during your pregnancy is helpful to the baby's health and your health.

If you have stopped smoking, it is also better if you can avoid being around people who are smoking because secondhand smoke can also affect you and your baby's development. Exposure to secondhand smoke is also harmful to babies and children after birth, so this is an important change to try to make whenever you are able. Even after the baby is born, second and thirdhand smoke can be a health risk to your baby. Thirdhand smoke is smoke that is on your clothes, your couch, or your floor.

Cannabis (Marijuana)

There is still a lot that is unknown about the effects of cannabis on your baby's development and long-term outcomes. Some research suggests it might be associated with increased risk for premature birth, low birth weight, and some birth defects. Experts recommend avoiding even medical cannabis during pregnancy because the effects are unknown. If you have been taking cannabis for nausea, a doctor can prescribe alternative medications that have been studied and have been found to be safe during pregnancy.

Alcohol

Alcohol passes to the baby through the umbilical cord. There is a difference between having occasional alcohol during your pregnancy and constant use. The more alcohol that the baby is exposed to, the greater the risk for the baby. If you have an alcohol addiction, there can be many risks to your baby.

Alcohol addiction means you use alcohol frequently, can't stop using even when you want to, and your use of alcohol has a negative impact on your life.

Sometimes when pregnant people with an alcohol addiction drink, the baby is born with Fetal Alcohol Syndrome. This refers to babies having mild to severe challenges as they grow through childhood. Challenges can include low birth weight and minor facial changes like having a smooth area between their nose and upper lip. Some children born with Fetal Alcohol Syndrome may also have challenges with thinking, language, and attention.

Some babies with parents who drink alcohol are born without these challenges. This condition is preventable if you do not drink alcohol during pregnancy and can sometimes be prevented if you stop drinking.

Another condition is Fetal Alcohol Spectrum Disorder. This occurs when the baby is exposed to alcohol during pregnancy that leads to challenges that do not fit with the diagnosis Fetal Alcohol Syndrome. Some children born with Fetal Alcohol Spectrum Disorder can have challenges with thinking and learning. They can also have difficulties controlling their behavior. It can be very hard to tell if a newborn is affected by alcohol exposure and you should tell your baby's pediatrician if this is a concern for you. There usually aren't ways to know how alcohol consumption is affecting the baby while you are pregnant.



[Learn more about Alcohol Use and Pregnancy](#)

If you struggle with alcohol use disorder, the best thing that you can do is work with your medical care provider and/or a treatment center to reduce/stop drinking as soon as possible. It is never too late to decrease your use of alcohol or stop drinking. Quitting during pregnancy has been shown to improve outcomes for your baby.

If you experience withdrawal from alcohol, it is important to detox in a medically supervised environment. Unsupervised withdrawal from alcohol can kill you.

Other Substances

Other substances can also impact your safety and health during pregnancy and the safety of your developing baby. This includes methamphetamine, opiates (including heroin and fentanyl), benzos, and cocaine. Many prescription medications can also impact pregnancies. Different substances impact the baby in different ways. If you decide to stop using substances during pregnancy, it is important to have medical assistance. In some cases it can be risky for you and your baby to not have medical support during pregnancy. This is one of the reasons that it is so helpful to work with your doctor to come up with a plan to have a healthy pregnancy.



[Learn more about the effects of specific substances while pregnant](#)

Impacts at Delivery

It can be very hard to predict if substance use is impacting a pregnancy before a baby is born. Some babies will have symptoms of withdrawal when they are born. This is sometimes called Neonatal Opioid Withdrawal Symptoms (NOWS), or Neonatal Abstinence Syndrome (NAS). Withdrawal symptoms may happen because some substances pass to the baby during pregnancy. Babies can have withdrawal symptoms when they are born because they aren't being exposed to those substances anymore. Withdrawal symptoms can happen from a collection of substances, including prescription and non-prescription drugs.

Withdrawal symptoms in babies can look like trembling/shaking, difficulty eating, difficulty sleeping, crying more, and being stiff. Overall, one of the biggest risks is that these differences can make it hard for a baby to gain weight. This can become dangerous if it's not addressed. When babies are at risk for withdrawal at birth, they may need to stay in the hospital for several extra days to be closely monitored for signs and symptoms of withdrawal.

At the hospital, the medical staff know how to help babies going through withdrawal feel as comfortable as possible. Medical staff will monitor babies to help them be safe while going through these reactions.

The medical team will often try to use methods that don't require medications to help babies first. For example, medical staff may encourage you to:

- ✓ hold your baby
- ✓ comfort your baby
- ✓ soothe your baby
- ✓ nurse or feed your baby

Providing your own milk (breastmilk or chestmilk), may reduce withdrawal symptoms for your baby in some situations. You and your care team should work together to decide if providing milk from your body is safe for your baby. This decision is often based on your own health and when and which substances you may have exposure to.

If your baby can eat, sleep, and be comforted with your help, they may not need medication. Some ways that you can comfort your baby are by placing your baby without clothes on your bare skin, keeping your baby with you in your hospital room, and using a baby carrier to wear your baby for one hour a day. The more you hold your baby, often the more comforted they feel. If your child still has trouble eating, sleeping, or being comforted, they may require medications such as morphine to help them manage the effects of withdrawal. Be sure to ask questions to your care team in the hospital if you have them. But overall, the best medicine for your baby is you.

It can be helpful to understand what will happen at the hospital when you prepare for those first few days after the baby is born. You should talk to your healthcare provider who is providing your prenatal care about what to expect. They may be able to connect you with the teams who will provide care in the hospital where you plan to give birth. You can also discuss any worries or concerns ahead of time.

If the baby is born affected by substances, your care team may be required by federal and state law to notify child welfare. These laws are different in each state. This does not necessarily mean that your baby will be removed from your care. The best thing that you can do is to work on your recovery journey with your doctor and to help your baby thrive, even if child welfare is involved.

The good news is that babies whose parents used drugs during pregnancy usually grow up to be healthy, happy children, even if they initially go through withdrawal. Often the most important thing that you can do is continue to focus on your own recovery, physical health, and mental health. It's important that your child grow up with the healthiest you possible.

After delivery, you will continue to need care from your prenatal providers. Postpartum care, or care after your delivery, is best thought of as an ongoing process rather than a single encounter. This care will address questions and concerns you may have about your delivery or your body after delivery. It is a very important relationship to support your health as your body undergoes yet another set of rapid changes.

This is also a care team who can discuss your future plans such as future pregnancies and/or their prevention. You should partner with your prenatal provider to plan for connection to other health providers. For example, some people do not see their “regular” or primary care doctor during pregnancy. Your pregnancy care provider can help to identify and connect you to ongoing medical care. This continuation of care is also very important for people who are receiving medication support for recovery through their prenatal care.



3

Things to do on your own to have a Healthy Pregnancy

There are lots of things that you can do on your own to reduce the possibility of harm to your baby and to have a healthy pregnancy. One of the very best things that you can do is reach out to an OB/ GYN to begin prenatal care. However, there are things that you can do to have a healthier pregnancy even before you begin to work with medical professionals.

Social Support

If you are using alcohol, cigarettes or other drugs and do not feel comfortable talking to a prenatal care provider, you can begin by telling the people that you do trust that you are pregnant and using drugs and alcohol. This could include friends or family members. They can support you, and you can share this website with them so that they know the resources that are available to you.

If you are worried about whether child welfare will become involved, you can talk with family members and friends. They can help provide stability for you and your baby while you get treatment. This will help child welfare identify how your children will continue to be cared for while you receive support to have a healthy pregnancy. Planning ahead about how you will keep the baby safe and take care of yourself is often a sign to child welfare that you will be able to keep caring for your child safely.

If you are planning to raise the baby, taking time to talk to your baby, read to your baby, and dream about the future can feel good during your pregnancy. These activities can help you enjoy this time, even when its stressful or uncertain.

If you are not planning to raise the baby, it can be helpful to talk with the people who care about you about your plans and get the support you need after the birth. Pregnant people can feel relieved, sad, happy, angry, worried or more than one feeling about deciding not to parent.

Deciding not to parent can mean ending a pregnancy or planning to place the child for adoption. There is no one way to feel about your decision, whatever it is.



[Access resources for birth mothers](#)

Taking Care of Your Body

There are also lots of good things that you can do to support a healthy pregnancy.



eat well



take a prenatal vitamin every day



drink plenty of water



limit caffeine to one cup of coffee a day



keep up dental hygiene and check-ups



get some physical activity

Even if you are struggling to stop using drugs or alcohol, you can still do these other things to support a healthy pregnancy.



[Stay healthy during your pregnancy](#)

Learning About Your Growing Baby

Some people find it interesting to read about how your baby is developing from week to week. This information can be exciting and interesting, since your body is going through so many changes. For other people, it can feel overwhelming.



[Online pregnancy calculator](#)

If you do not know how far along you are, you can take a guess as to when you had your last period, and then use an online calculator to learn about how far along you might be.



[See how your baby is developing per week](#)



Tips for Healthy Parenting When You Are Currently Using Substances or Trying to Stop Using Substances



We know you are here because you want to do everything you can to help your baby thrive and grow up to be healthy and happy. You are the most important person in the whole world for your child, and one of the most important things that you can do is keep yourself healthy.

Here we describe some ways that you can best take care of yourself and your baby. This section is written for people who plan to raise their baby, but anyone is welcome to read it.



1

Supporting your Baby's Health and Development

Most babies who have parents with addictions will be healthy. But if you have worries or notice something that seems different than what you expect, you can ask your pediatrician for an assessment of their development. Your pediatrician may do this assessment themselves, or they may want someone like a psychologist, occupational therapist, physical therapist, or speech-language therapist to do this assessment.

If your child does have some delays, this may or may not be related to being exposed to substances in utero. Developmental delays can be caused by many factors. They may not be because of anything that you did. The earlier a delay is noticed and assessed, the sooner your child can be helped.

Regular Pediatric Care

The American Academy of Pediatrics recommends regular visits to the pediatrician for your baby. The first visit is usually within just a day or two after discharge from the hospital. Because the first visit is so soon after birth, it's helpful to find a pediatrician while you are still pregnant. You can ask family, friends, neighbors, and your prenatal care provider for recommendations.

Many pediatricians can meet with a new parent prior to giving birth. This can be a good way to see if the pediatrician is a good fit for you and your family. You can call the office and ask to schedule an appointment as a parent who is 'thinking of joining the practice.' In the first months of life, visits to the pediatrician are pretty frequent and may be even more frequent if there are concerns about weight gain or other issues. During these visits, your baby's pediatrician will check on their physical development, mental development, and social-emotional development. These visits also will include various vaccinations, so your child is protected against common childhood diseases.

Pediatric vaccines are safe and effective and do not cause developmental delays or other conditions like autism. If you have concerns about vaccines, you can talk to your pediatrician about your questions.

Lastly, your baby's pediatrician may ask you about whether you are experiencing sadness or depression, in a safe living situation or being harmed in your relationship. These questions are not meant to be intrusive, but rather to keep your baby healthy in your care.



[Information about well-child visits](#)

Early Intervention

Most states provide in-home developmental services called Early Intervention free of charge (though each state may have a different name for their programs).

Early Intervention can include things to help your child with:

- language development (like communicating with you and saying their first words)
- physical development (like crawling and walking)
- cognitive development (like playing with toys, problem solving, and mental health)

You can ask to be referred to Early Intervention by hospital staff when you deliver your baby, or by your baby's pediatrician. In many states, you can even fill out a form online yourself to get services started. In many states, babies who were exposed to substances before they are born automatically qualify for free Early Intervention services, whether or not they have any developmental differences.

It can be nice to connect with these services even if your child is not experiencing delays because services can give your child a jump start.

Intervention support specialists may coach you on how to support your child's emotional, physical, cognitive, and speech development. They may even provide emotional support to you in your role as a parent. You may also feel reassured that there are professionals helping your baby reach their full potential and checking on their development at regular intervals. Sometimes they can provide physical resources like toys and books you can use to support your child. Even infants can benefit from reading together and playing with high contrast toys to help their visual development.

The earlier you get connected to these services, the better.



[Learn more about Early
intervention](#)

Bonding With Your Baby

One of the most important things for your baby's development is their relationship with you. Developing a strong, healthy relationship with you is so important. It can support your baby's long-term mental health, friendships, academic achievement, and confidence.

When your baby is first born, skin-to-skin contact can help you and your baby connect. The feeling of warmth and closeness that your baby experiences helps them keep their body at the right temperature, eat better, cry less, and be more attached to you. Babywearing, which means using a baby carrier to hold your baby, is another way to bond with your baby. It helps the baby feel close to you and develops consistent rhythms connecting you and them. Some babies are less fussy when worn by their parents. Babywearing can also help you feel calmer and more connected to your baby.

Many people who have used substances report that they had difficult experiences with their parents growing up. Whether or not this is the case for you, it can be helpful to reflect about your own experiences in close relationships and how you were parented. This can help you figure out the kind of parent you want to be for your children.

While some people had difficult relationships with parents, others had strong relationships that have changed over time. Other people have reliable relationships that represent a continued source of support.

Your relationships can help you to decide what your priorities are in parenting. Maybe you want your baby to feel safe, secure, and comforted by you when they are scared or upset. Maybe you want your baby to develop freedom and confidence to be independent as they grow up. Maybe you want both. Whatever your hopes and dreams are for your baby, they are more likely to be reached when you've taken the time to reflect on what is easy and what is difficult for you in other relationships. This can be hard work, but it gives you the chance to be the parent for your child that you want to be.

You may want to reflect on this on your own. You may also want support from a therapist or parent counselor who can learn about your story as a parent, help you consider your own thoughts and feelings as a parent, and help you think about your child's emotional needs. Some addiction treatment centers offer parent counseling, and many child guidance clinics also have programs for parents. Home visiting programs can also be very helpful for supporting your developing relationship with your child.



Activities to
strengthen your
bond with your
baby.



Tips on Bonding
With Your Baby



How to support your
baby's emotional
development

2 Safety at Home

When parenting a new baby, you are the person who your baby relies on to keep them safe. Below we will describe some things that will help your baby stay safe and healthy. Your baby's pediatrician will also talk to you about general ways to help keep your baby safe and can serve as a source of information and advice.

Exposure to Toxins

Toxins include things like chemicals from smoke and lead, a metal that can be found in water. Even after the baby is born, second and thirdhand smoke can be a health risk to your baby. Thirdhand smoke is smoke that is on your clothes, your couch, or your floor. If you live with people who smoke, it is best to make sure they smoke outside, away from the doors and windows.

Lead exposure can also be damaging to a child's brain and nervous system and can lead to developmental delays. Your child can be exposed to lead through lead-based paint, some older and imported toys, and some pipes. Small practices can really change the risks to your infant, even from birth. For example, if your baby is receiving formula and you live in an older house, it is important to only get cold water from the tap and then heat the water on stove or in the microwave. Hot water is more likely to carry lead from pipes.

The CDC has more information about lead exposure. Talk to your child's pediatrician if you think your child's home or other care environments, such as daycare, may have risks for lead.



[More About Lead Exposure](#)

Taking Care of Yourself

Focusing on your own recovery, physical health, and emotional health is often the most important thing that you can do. It's important that your child grows up with the healthiest you possible. Bringing home a baby is often a wonderful experience, however, babies do bring a new level of stress into the home. It will be important to continue your relationships that support your health and wellness during this time. This could include therapists or other supports in your recovery journey, such as peer support. If you have been able to make positive recovery changes during pregnancy, it will be important to continue those. You can also make transition plans to continue accessing supports if you were accessing pregnancy specific services.

Parenting a fussy baby is very challenging. It is normal to feel big emotions when parenting a new baby. If you ever notice yourself feeling frustrated with your infant or feeling overwhelmed, the best thing that you can do is put your baby on its back in its crib (or another safe place) and take a few minutes for yourself to calm down. A crib is a nice safe space, and your baby will be fine while you take a few minutes away, even if they are crying.

Lactation and Nursing

There are many benefits to providing your milk to your baby. Your child will benefit by having a lower risk of some common infections (like ear infections) and later health benefits as well (like lower risk for asthma). You will benefit by having a lower risk of certain cancers and lower risk for type 2 diabetes. You can provide milk through nursing or pumping. Even if you are separated from your child, it is often possible for you to still pump and provide breastmilk. If you are using substances, you should be open with your doctor in order to discuss the benefits and risks.

Taking medication for opioid use disorder and providing milk is safe for your baby and can reduce the impact of withdrawal for your baby. Make sure to talk to your doctor if you have HIV or Hepatitis C. It is not safe to provide your milk to your baby if you have HIV. You can usually safely give your milk to your baby if you have Hepatitis C, as long as your nipples are not cracked. Find out more lactation, substance use, HIV, and Hep C here.



[Lactation, Substance Use, HIV, and Hep C](#)

Childcare

When deciding who will watch your baby, it is important to choose people that you trust will keep your baby safe. Safe people to watch your baby are

- People who you know will not be under the influence of drugs the whole time they are with your child.
- People who you haven't seen be violent towards you or anyone else.
- People who know about baby safety. For example, using car seats and putting baby to sleep on its back.

As you know, babies often cry a lot, and it can be very frustrating to watch a baby who is fussy. You need to be sure that you trust that they will safely and calmly care for your baby.

Return to Use and Recurrence

It's hard to stop using substances. If you are reading this, you are already working hard to be the best parent you can be. While many people identify that their goal after substance use disorder treatment is to never use drugs or alcohol again, return to use is common. The stress of being a new parent or having your child removed from your care can increase your chances of returning to using substances. This is why it is so very important to keep meeting with people who support you in your recovery.

If you think you will use drugs or alcohol again, or if you do return to use, the most important thing that you can do for your child is to make sure that they are safe. This means to make sure that if you are not sober, your baby is being taken care of by someone that you trust to keep them safe while you are under the influence of drugs and alcohol. Even if you are sure that you will not have a recurrence of use, it is a good idea to have a plan in place for who can help with your kids if you end up using drugs or alcohol.

If you do have a return of use, you may feel like you have failed or feel like you are not a good parent.

These are common feelings but struggling to not use does not make you a failure or a bad person. Recurrence is often a part of recovery. Return to use often occurs as a part of the recovery process where someone stays sober, returns to use, and then gets sober again.

However, when you are parenting a child who depends on you, one worry about returning to use is that your child will not be safe, or child welfare will remove your child from your care. This is why it is so important to have plans in place in case you do relapse so that your child will stay safe, and so that you can work with child welfare to demonstrate that your child was never in harm's way.

Your Baby's Sleep

One very important way that you keep your baby safe is by providing your baby with a safe place to sleep. It is important every time and every place that they sleep.

The safest place for your baby to sleep is on their back on a firm, protected surface. In some homes, that surface is a crib, for others, it is a bassinet or pack-and-play. This space should not be a place for storage for other stuff like blankets, clothes, stuffies/stuffed animals, or diapers. These things could fall onto baby's face and block their breathing. If you do not have a crib, child welfare offices can help you get a safe place for your baby to sleep. Sometimes community organizations can help or offer alternatives, such as "baby boxes" that are fit with a mattress. It is not safe for babies to sleep in car seats or swings because the baby's head is slightly upright which may interfere with the baby's breathing. Babies who sleep in a crib (or other safe sleep space) on their backs are less likely to have sudden infant death syndrome, where babies stop breathing while sleeping.

Safe sleeping practices are important for all babies, but they are particularly important if you are using substances, are worried that you may return to use, or are sharing a bed with another person who is using substances. If you or someone you share a bed with is continuing to use substances while parenting, then it is especially important that your baby sleeps on their back in a crib. You will be less aware of where the baby is and may sleep deeper yourself. This makes sleeping with your baby especially unsafe.



Some strategies to help your baby sleep in their bassinet or crib include:

- ✔ Give baby a pacifier. Pacifiers can prevent SIDS.
- ✔ Keeping the room cool to avoid overheating.
- ✔ Using a snug fitting, light weight, sleeper without any loose strings.
- ✔ Using a swaddle or a sleep sack. Make sure to stop swaddling once your baby has learned how to roll over.
- ✔ Use a sound machine or sound app on your phone to replicate the noises your baby heard in the womb.
- ✔ Keep the space dark and soothing.
- ✔ Sleep with the baby's swaddle, sleeper, or crib sheet before using it with your baby to give it your scent.
- ✔ Make sure you're feeding your newborn baby every 2 to 3 hours, 8 to 12 times a day. They will need to eat less often as they get older.
- ✔ Create a routine that you can follow any time you are getting ready for sleep — not just for bedtime.

Bathing Your Baby

There are lots of safe ways to bathe your baby. You can buy a small bathtub that is made just for a baby, or even put an insert into a sink. After your baby is born, the nurse at the hospital will often show you how to give your baby their very first bath.



One thing to keep in mind is that your baby should never be around water when you are under the influence of alcohol or any substance. This is because your baby is at risk for drowning in even a very tiny amount of water. If you do need to clean your baby and aren't completely sober, it is best to use a washcloth or baby wipes, as that prevents your baby from being near water so there is no risk for drowning.



3

Navigating Relationships with Child Welfare

It is completely normal to worry about becoming involved with child welfare. This is especially true if you know other parents struggling with addiction who have had a difficult time with these systems. It can be a stressful experience, especially if you feel like you have gotten in trouble and like you need to ‘jump through hoops’ to satisfy any case plan requirements.

Although children are not always removed from their parent’s care when their parent is struggling with addiction, it can feel traumatic and extremely upsetting if your child is removed from your care and placed with a family member or foster caregiver. Being separated from your child can be extremely difficult and can lead to very strong emotions. This could potentially put you at risk for relapse as big changes and emotions make it more difficult to be abstinent. Therefore, if you find yourself in the position of being involved with child welfare, the most important thing you can do is lean on your social supports that help you when you are upset and angry and focus on maintaining your recovery.

When you are interacting with people who work in the child welfare system, it can be difficult to keep your cool. It is often helpful to focus on:

- being polite
- being responsive
- coming to appointments
- returning texts and phone calls

Each of these actions can help support you in your goal to no longer be involved with the child welfare system.

Even with all of these very strong, understandable emotions, being involved with child welfare can be an opportunity to receive help and support. Whether or not your child is removed from your care, child welfare workers will often come up with a case plan that includes things for you to do. This could include:

- attending addiction treatment
- attending individual therapy
- attending parent counseling
- obtaining employment
- living somewhere safe

It is important to learn the exact steps you need to take to satisfy these requirements. You can talk about this with your case worker. It can be helpful to ask for a copy of this plan and these requirements in writing so that you can keep track of your progress. You can also ask your case worker if they have suggestions or connections to help you attain the case goals included, such as access to parent counseling.

Again, it can feel overwhelming and upsetting to be required to do things by a system that you did not want to be involved with. However, the best thing you can do is complete all of your case plan steps so that you don't have to be involved any longer. Developing a strong relationship with your lawyer or public defender is also a good idea so that they can help advocate for you and prove you are doing what you need to do.

Plan of Safe Care/Family Care Plan

Although details vary state by state, Plan of Safe Care (POSC) development is now required in every state for newborns identified as being affected by prenatal substance exposure or withdrawal symptoms. This includes when pregnant people are using illegal substances.

However, some infants may experience withdrawal symptoms if their pregnant parent is taking prescribed medication as part of their recovery. This could include medications like methadone, buprenorphine, benzodiazepines, or opioids for pain management.

Even if you are working your recovery and are on medication for opioid use disorder, it is a good idea to be familiar with the POSC process. One of the best and easiest ways to avoid involvement with the child welfare system is to come to the hospital at the time of delivery with a POSC already written out.

A POSC is meant to ensure the safety and well-being of newborns following discharge from the hospital. Many states require written plans. Some states have forms available online that you can fill out. Either way, it is a good idea to come up with this plan with a trusted healthcare provider, like your addiction treatment counselor or your prenatal care provider team. Generally, the plan should include information about your baby. The plan may include:

- plans for babysitting or support if you're not available
- sleeping arrangements
- arrangements to participate in Early Intervention services

Plans should also include information about yourself. For example, it could include information about your:

- participation in addiction treatment
- participation in mental health treatment
- living arrangements

Regulations vary by state. Healthcare providers are often required to notify child welfare when an infant tests positive for substances at birth or shows signs of withdrawal symptoms.

Some states require notification even if the infant's withdrawal symptoms were related to prescription medication (like methadone). Some states do not require notification in these instances and only require notification to child welfare if the child was exposed to substances.

Notification is not necessarily the same as a report of child abuse or neglect. For example, notification to child welfare is required in approximately 42 states. This includes 14 states where a notification is not the same as a report of child abuse or neglect, unless there is evidence of maltreatment or risk of harm to the infant (California, Connecticut, Delaware, Georgia, Iowa, Louisiana, Maine, Michigan, New Mexico, New York, North Carolina, Pennsylvania, Vermont, & Virginia).

Not knowing whether your addiction will be considered a form of child abuse or neglect can be confusing and even scary. The best thing you can do is familiarize yourself with your state's laws and policies. You can also talk to your prenatal provider about the hospital's policy so you can be prepared for what to expect.



If your child is placed with a family member or foster caregiver:

Sometimes, it may be necessary for you and your child to be separated from one another. This can happen if

- You need to enter inpatient treatment where they do not allow children. However, there are many programs that allow infants and young children to live with their birth parents.
- The child welfare system determines that your child may be safer with another caregiver. This could be one of your relatives or family members, or this could be with a foster family.

If there is a separation, there are many ways you can ensure that your baby feels as safe and comforted as possible.

- you can give the baby a shirt that you have worn that has your smell
- you can find different ways to connect with your baby like reading to your baby over the phone
- you can also consider coordinating with your child's caregivers if you decide you wish to pump and provide your baby with breast milk, even if you are not able to breastfeed directly.
- you can ask for frequent visitation with the baby

The goal of child welfare is often to reunite you and your baby when its safe for them to return home.

