

Nevada Title V Maternal Child Health Program Perinatal Substance Use

Location: Nevada

Date Submitted: 6/2017

Category: **Cutting Edge Practice**

BACKGROUND

Perinatal substance use (licit and illicit) is a growing major public health problem. It has been linked to preterm birth, very low birth weight, infant mortality, and babies being born with a range of birth defects. Women who use substances (pregnant and not pregnant) are found in all socioeconomic groups and place a serious burden on health care systems. However, estimating the full extent of the consequences of maternal substance use is difficult for many reasons, but consequences of maternal substance use are preventable.

It is critical pregnant women receive professional help to overcome substance use. The best approach to reducing the tremendous toll substance use exacts on individuals, families, and communities is to prevent the damage before it occurs.

PROGRAM OBJECTIVES

The Sober Moms Healthy Babies (SMHB) website (www.SoberMomsHealthyBabies.org) and its associated media campaign were launched by Nevada's Title V Maternal and Child Health (MCH) Program and continues through a partnership with the Substance Abuse Prevention and Treatment Agency (SAPTA). The focus is to prevent substance use (including alcohol, tobacco, and legal and illegal substance use) during pregnancy, in response to the increasing impact of substance use in pregnancy and increased incidence of neonatal abstinence syndrome. One of the goals is to provide women, their families, and health care providers information on resources and treatment options. Another aim is to inform individuals of the priority treatment status of pregnant women for Substance Abuse Prevention and Treatment Block Grant funded treatment centers.

TITLE V/MCH BLOCK GRANT MEASURES ADDRESSED
SPM #03: Reduce the percent of women who use substances during pregnancy.
NOM # 11: Reduce the rate of infants born with neonatal abstinence syndrome per 1,000 delivery hospitalizations.
NPM #14. A) Percent of women who smoke during pregnancy and B) Percent of children who live in households where someone smokes

TARGET POPULATION SERVED

The SMHB website focuses efforts on preventing substance use during pregnancy and providing women, their families, and health care providers information on resources and treatment options.

PROGRAM ACTIVITIES

The public awareness campaign promoting the SMHB website and distribution of referral cards ensures substance use in pregnancy materials and resources reach the targeted audience. During fiscal year 2016, the media campaign had 13,076 radio advertisements and 9,372 television advertisements, for a total of 22,448 total spots aired promoting the SMHB website and the importance of pregnant women receiving treatment and preventing substance use in women of childbearing age. All local health authorities and Title V MCH funded partners promote the website and share SMHB referral cards.

Improvements were made to make the website responsive, interactive, and more user friendly. With the recreational use of marijuana now legal in the state, marijuana fact sheets were added to the website to raise awareness of risks.

PROGRAM OUTCOMES/EVALUATION DATA

The SMHB website and media campaign are evaluated by the Title V MCH Program. Monthly, staff review Google Analytics metrics as well as performance reports from the media campaign (television and radio ads in Spanish and English). The number of unique visitors are collected, along with demographic and geolocation data to connect to the nearest treatment center. Utilization rate by county helps

inform areas where expanded interventions may be needed, in addition to neonatal abstinence syndrome rate data by county. The most frequently visited pages help identify the information most commonly sought by users and assists in guiding new content.

Since the launch of the SMHB website in January 2015, 17,321 unique sessions occurred. 14,745 users visited the website with 27,133 page views. 14.8% of site users were returning visitors and 85.2% were new visitors.

Participant feedback is gathered through focus groups and website links (via Survey Monkey) allowing consumers to provide comments and questions. Input is taken under careful consideration to improve not only the website, but programs and interventions offered by the Title V MCH Program and partners.

Performance reports from the broadcasting firm continue to show a higher return on investment per month than estimated in the contract.

PROGRAM COST

The Title V MCH Program contracted with a local marketing firm to produce materials for the SMHB website and media campaign. Initial development costs were \$42,710.00, with an additional \$16,357 awarded for website redesign to become responsive, interactive, and more user friendly. The Title V MCH Program awards a broadcasting firm \$5,000.00 monthly to air the statewide media campaign on at least 60 radio and 10 television stations. The firm guarantees a minimum return on investment ratio of 3:1. SAPTA recently committed funds to expand the reach of SMHB messaging.

ASSETS & CHALLENGES

Assets

Utilization of the website shows the importance of having resources and materials available for pregnant women to access help for substance use. A high emphasis has been placed on the value of the website for professionals, pregnant women, and concerned family members and friends, requests for SMHB information cards have grown, and partner feedback continues to be positive. The broadcasting firm performance reports continuously demonstrate a high return on investment per month.

Challenges

Measuring direct behavioral impact based on the efforts described is challenging. Funding has not permitted a direct evaluation activity such as asking pregnant women seeking treatment whether they heard about their priority status through the media campaign.

Overcoming Challenges

Opportunities to partner with Nevada 2-1-1 to identify whether pregnant women asked about substance use resources and called due to television or radio media were recently implemented. Focus-groups with current or former women who use or have used substances in pregnancy are being considered for the next Five Year MCH Needs Assessment to learn what works and what could be done better to reach this population.

LESSONS LEARNED

Feedback from Title V MCH partners, Maternal and Child, Health Advisory Board (MCHAB), consumers, and health care providers led to website revisions. A *Call Now* button for immediate assistance, along with website revisions were added resulting in a more responsive, interactive (location of nearest treatment center), and user-friendly experience. Google Analytics reveal the redesigned version continually demonstrates increased time spent on the website.

FUTURE STEPS

The Substance Use During Pregnancy Provider Toolkit will be made available on the website and distributed in hard copy to obstetricians across the state. SMHB window clings will be placed in businesses and agencies serving women of childbearing age and pregnant women, as well as signage on pregnancy and marijuana use in marijuana dispensaries.

Information shared will help providers and pregnant women understand pregnant women have top priority at state funded treatment centers and cannot be denied treatment. Women who use substances are more likely to have better birth outcomes after receiving assistance and treatment for their substance use.

COLLABORATIONS

Substance Abuse Prevention and Treatment Agency, Substance Use Helpline, Nevada 2-1-1, Crisis Call Center, and Nevada Tobacco Quitline are all collaborating programs.

PEER REVIEW & REPLICATION

Technical assistance support will be provided to any state wanting to replicate this project. Intra and interagency peer review and a workgroup of state agency, private and public providers review SMHB and substance use efforts.



RESOURCES PROVIDED

www.SoberMomsHealthyBabies.org

Key words:

Birth defect prevention, birth outcomes, fetal alcohol exposure, infant mortality, inform and educate the public, neonatal abstinence syndrome, perinatal substance use, tobacco use

****For more information about this program please contact: Christina Turner christinaturner@health.nv.gov 775-684-4200**

