

Black and Latinx Perinatal PTSD: Addressing Stigma Related to SUD/ODU Among Black and Latinx Mothers

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July 24, 2024



Acknowledgment

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At the time of this publication, Miriam E. Delphin-Rittmon, Ph.D., served as Assistant Secretary for Mental Health and Substance Use in the U.S. Department of Health and Human Services and the Administrator of the Substance Abuse and Mental Health Services Administration.

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This work is supported by grant SM081785 from the Department of Health and Human Services, Substance Abuse and Mental Health Services Administration.

Presented 2024



MHTTC

Mental Health Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration

The purpose of the MHTTC Network is technology transfer—disseminating and implementing evidence-based practices for mental disorders into the field.

Funded by the Substance Abuse and Mental Health Services Administration (SAMHSA), the MHTTC Network includes 10 Regional Centers and a Network Coordinating Office.

Our collaborative network supports resource development and dissemination, training and technical assistance, and workforce development for the mental health field. We work with systems, organizations, and treatment practitioners involved in the delivery of mental health services to strengthen their capacity to deliver effective evidence-based practices to individuals. Our services cover the full continuum spanning mental illness prevention, treatment, and recovery support.

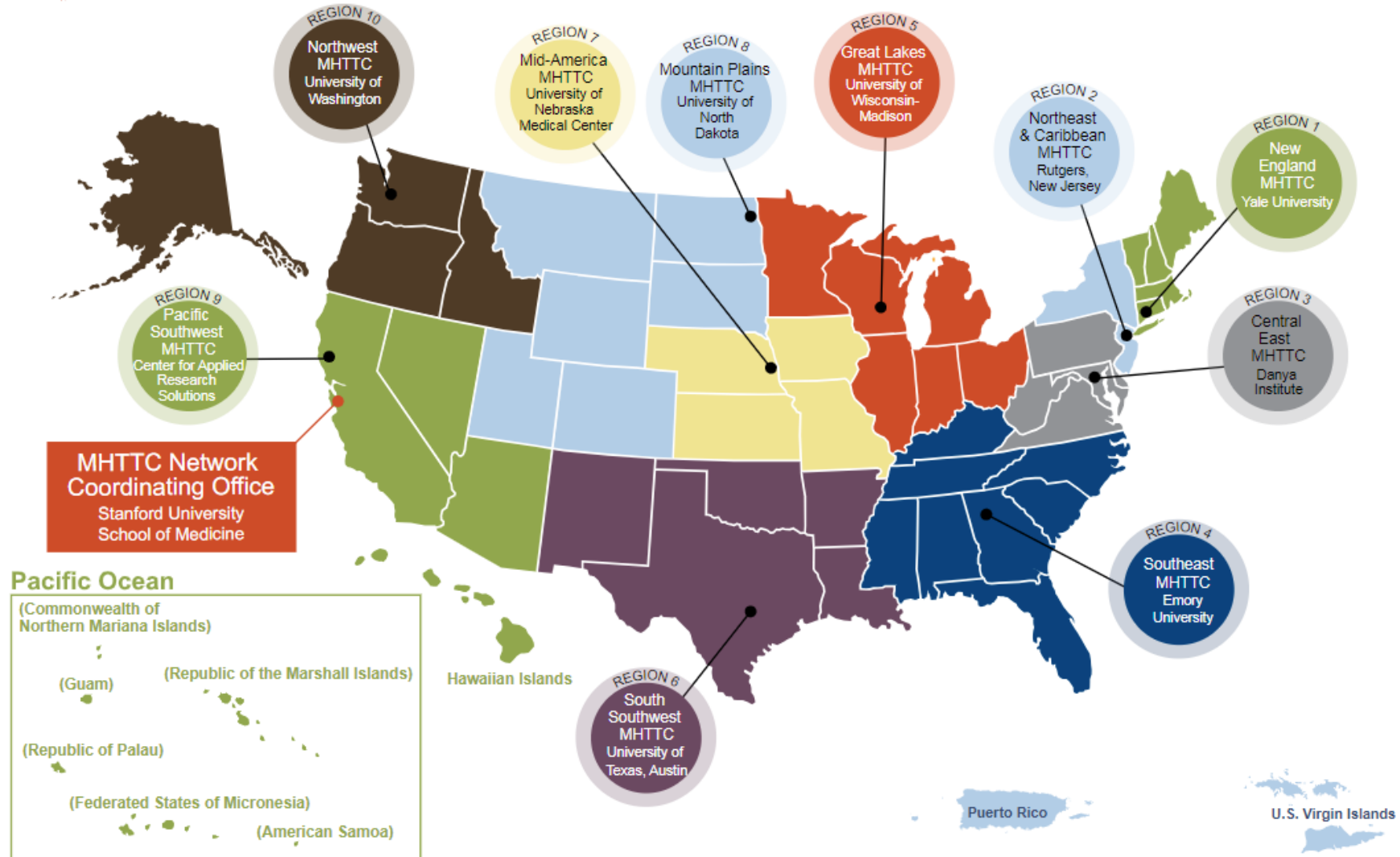


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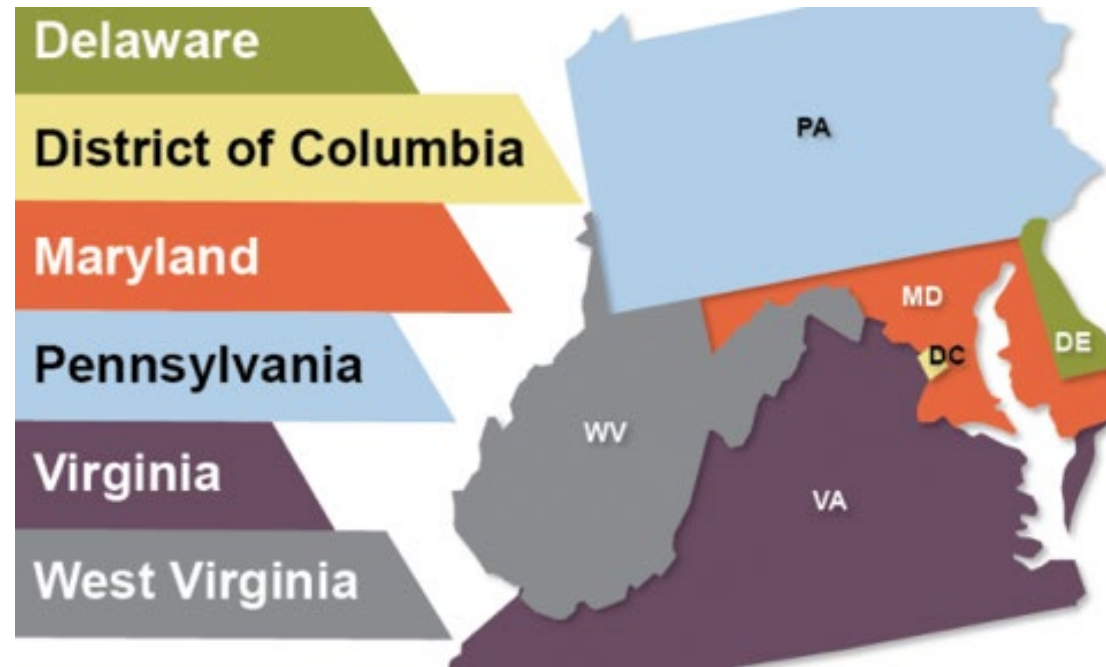
Mental Health Technology Transfer Center Network

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MHTTC Network



Central East Region 3



Central East (HHS Region 3)

MHTTC

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The MHTTC Network uses affirming, respectful and recovery-oriented language in all activities. That language is:

STRENGTHS-BASED
AND HOPEFUL

INCLUSIVE AND
ACCEPTING OF
DIVERSE CULTURES,
GENDERS,
PERSPECTIVES,
AND EXPERIENCES

HEALING-CENTERED AND
TRAUMA-RESPONSIVE

INVITING TO INDIVIDUALS
PARTICIPATING IN THEIR
OWN JOURNEYS

PERSON-FIRST AND
FREE OF LABELS

NON-JUDGMENTAL AND
AVOIDING ASSUMPTIONS

RESPECTFUL, CLEAR
AND UNDERSTANDABLE

CONSISTENT WITH
OUR ACTIONS,
POLICIES, AND PRODUCTS



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Objectives

- 1 Examine the stigmatization of substance use disorders (SUDs), particularly in the context of Black and Latinx communities.
- 2 Understand the unique challenges faced by Black and Latinx mothers with SUD/opioid use disorder (OUD) during the perinatal period.
- 3 Develop strategies to reduce stigma and provide nonjudgmental care for Black and Latinx mothers with SUD/OUD



①

Examine the stigmatization of SUDs, particularly in the context of Black and Latinx Communities

The stigmatization of SUDs is a significant public health issue that disproportionately impacts Black and Latinx communities. Understanding this stigma involves examining social, historical, and systemic factors that contribute to the marginalization and negative perceptions of individuals with SUDs in these communities.

Historical Context and Criminalization

War on Drugs

- The War on Drugs, initiated in the 1970s and 1980s, **disproportionately targeted Black and Latinx individuals**, leading to mass incarceration and **reinforced negative stereotypes** about drug use in these communities. (Khan et al., 2023; Butler Center, 2022)
- Media portrayals often **depicted Black and Latinx individuals as the primary perpetrators of drug-related crimes**. (Khan et al., 2023; Butler Center, 2022)

Criminalization vs. Public Health Approach

- Historically, **drug use in Black and Latinx communities has been framed as a criminal issue** rather than a public health concern.
- This approach contrasts sharply with the more recent opioid crisis, which has affected predominantly white communities and **has been framed more sympathetically**. (Khan et al., 2023; Butler Center, 2022)

Social and Cultural Factors

Stereotypes and Racism:

Black and Latinx individuals with SUDs are often perceived as morally deficient or criminal, rather than as individuals in need of medical treatment.

Structural racism within healthcare systems can **lead to biased treatment decisions**, where Black and Latinx patients might receive less empathy and fewer resources for recovery.

Cultural Attitudes and Mistrust:

There can be **cultural attitudes within Black and Latinx communities** that view substance use as a moral failing, further stigmatizing those with SUDs.

Historical and **ongoing experiences of discrimination and mistreatment by healthcare and legal systems contribute to mistrust**, which can deter individuals from seeking help for SUDs.

Systemic Issues



Black and Latinx individuals face significant barriers to accessing SUD treatment, **including lack of insurance, geographic limitations, and fewer culturally competent care providers.**



Treatment facilities in predominantly Black and Latinx neighborhoods are often under-resourced, and the **quality of care may be lower than in predominantly white areas.**



Economic disparities, **including higher rates of unemployment, lack of educational opportunities, and poverty,** contribute to higher rates of SUDs in these communities.

Effects of Stigmatization

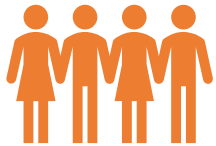
Health Outcomes and Recovery Challenges

- Poorer health outcomes due to discouragement from seeking treatment
- Stress and social isolation, exacerbating substance use and hindering recovery

Impact on Community Structures

- Perpetuation of cycles of poverty and incarceration
- Impact on families and community structures
- Increased trauma and instability for children, leading to higher risk of substance use

Strategies to Counter Stigma



Public Health Campaigns and Education

Framing SUDs as medical issues requiring treatment and support

Highlighting recovery stories within Black and Latinx communities



Policy Reforms and Community Investments

Decriminalization and focus on harm reduction and treatment

Investment in community-based, culturally competent treatment programs



Training and Cultural Competence

Educating healthcare providers, law enforcement, and the public

Training providers in culturally competent care to address biases

② **Understand the unique challenges faced by Black and Latinx mothers with SUD/ODD during the perinatal period.**

Black and Latinx mothers often face significant socioeconomic challenges that can exacerbate SUD/ODD. Poverty limits access to quality health care, healthy food, and stable housing, all of which are essential during the perinatal period.

Poverty and Lack of Resources

- **Financial Stress:** High levels of financial stress can lead to increased substance use as a coping mechanism.
- **Healthcare Access:** Lack of insurance and inability to afford out-of-pocket expenses limit access to prenatal and postpartum care.
- **Childcare Costs:** High costs of childcare can force mothers to choose between working and staying home, limiting their economic opportunities.
- **Child Welfare:** “Black mothers are more likely than other mothers to be reported to child welfare authorities by pediatricians and obstetricians suspecting prenatal drug use.”
(Le & Coombs, 2021)

Housing Instability



Homelessness: Homelessness or frequent moves can disrupt prenatal care and lead to inconsistent medical follow-ups.



Overcrowding: Living in overcrowded conditions can increase stress and the likelihood of substance use as a coping strategy.



Unsafe Living Environments: Exposure to violence and unsafe living conditions can exacerbate mental health issues and substance use.

Limited Access to Education and Employment

- **Educational Attainment:** Lower levels of educational attainment limit job opportunities and economic mobility.
- **Employment Barriers:** Discrimination and lack of job opportunities in certain communities can lead to chronic unemployment or underemployment.
- **Workplace Stress:** Low-wage jobs often come with high stress and little flexibility, making it difficult for mothers to balance work and healthcare needs.



Food Insecurity

- **Nutritional Deficiency:** Lack of access to nutritious food can negatively affect both maternal and fetal health, increasing the risk of complications.
- **Stress and Coping:** Food insecurity is a significant source of stress, which can lead to substance use as a coping mechanism.
- **Cycle of Poverty:** Food insecurity can perpetuate the cycle of poverty, making it harder for mothers to improve their economic situation.



Maternal Health Complications

- **Infections:** Increased risk of infections such as HIV and hepatitis C due to unsafe injection practices
- **Preterm Labor:** Higher incidence of preterm labor and delivery
- **Preeclampsia:** Higher risk of preeclampsia
 - a condition characterized by high blood pressure and potential damage to other organ systems
- **Placental Abruption:** Increased risk of placental abruption,
 - where the placenta detaches from the uterus wall before delivery, leading to severe bleeding and risk to both mother and baby

Infant Health Complications

“OUD during pregnancy is associated with preterm birth, small [size] for gestational age (estimated fetal weight), lower birth weight, reduced head circumference, sudden infant death, and [**Neonatal Abstinence Syndrome (NAS)**].” (Le & Coombs, 2021)

- **Withdrawal Symptoms:** Infants born to mothers with SUD/OUD can suffer from NAS, characterized by withdrawal symptoms such as tremors, irritability, poor feeding, and respiratory distress.
- **Extended Hospital Stays:** Infants with NAS often require prolonged hospital stays and specialized care in neonatal intensive care units.
- **Health Monitoring:** These infants require long-term monitoring and follow-up care to manage potential complications.



3 **Develop strategies to reduce stigma and provide nonjudgmental care for Black and Latinx mothers with SUD/OD.**

Providing Nonjudgmental Care

- Principles of nonjudgmental care
- Active listening and empathy
- Building trust and rapport



Developing Effective Strategies



Tailored interventions and support services



Community-based approaches



Collaboration with cultural and community leaders

Tailored Interventions



Personalized Treatment Plans:

Develop individualized treatment plans that consider the unique circumstances and needs of each mother. This includes understanding their specific substance use patterns, mental health status, and social determinants of health.



Holistic Care: Provide comprehensive care that addresses physical, emotional, and social needs. This may include integrating mental health services, prenatal care, and substance use treatment.



Trauma-Informed Care: Implement trauma-informed care practices that recognize and address the effects of trauma on substance use and mental health. This approach helps in creating a safe and supportive environment for recovery.

Community-Based Approaches

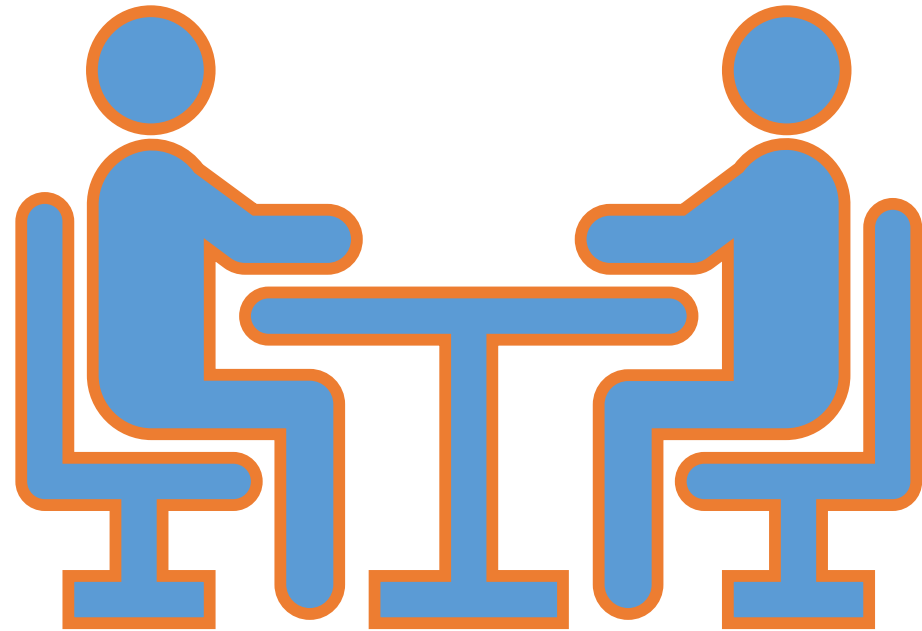
Local Support Networks: Establish support networks within the community, such as peer support groups, to provide emotional and practical assistance. These networks can help mothers navigate treatment, childcare, and other challenges.

Accessible Services: Ensure that services are easily accessible within the community. This includes providing transportation assistance, flexible scheduling, and childcare during appointments.

Outreach Programs: Implement outreach programs to educate and engage the community about the available resources and the importance of seeking treatment.

Something to Think About . . .

- “Congress must pass the Black Maternal Health Momnibus Act, which includes a suite of 12 bills to address the ongoing maternal health crisis. . . .
- “Federal, state, and local governments must enact and enforce legislation that protects pregnant people with SUD from criminal charges and incentivize access to treatment and care without fear of judgment, incarceration, child removal, and other legal repercussions.
- “Policymakers must expand access to [SUD] treatment for pregnant and parenting women.
 - “Policymakers in states that have not yet adopted Medicaid expansion must take up the financial incentives passed in the American Rescue Plan Act to expand Medicaid eligibility. States should also take up this bill’s option to extend postpartum Medicaid coverage for 12 months.
 - “Federal policymakers should make 12-month postpartum coverage a permanent mandated Medicaid benefit.” (Le & Coombs, 2021)



Final Thoughts

Today, we covered:

- Examine the stigmatization of SUDs, particularly in the context of Black and Latinx communities.
- Understand the unique challenges faced by Black and Latinx mothers with SUD/ODD during the perinatal period.
- Develop strategies to reduce stigma and provide nonjudgmental care for Black and Latinx mothers with SUD/ODD.

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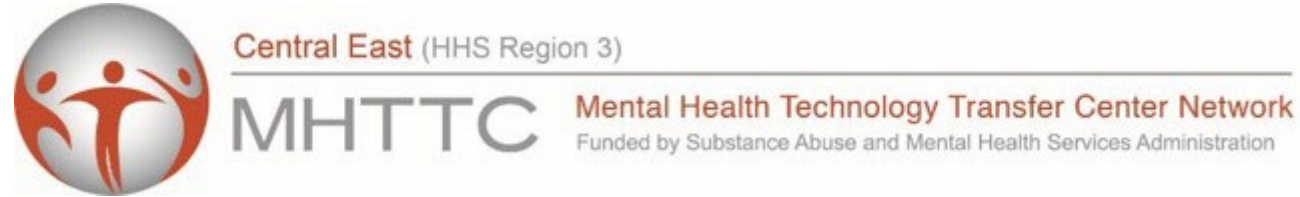
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