

## KNOW THE FACTS!

- *National and local surveys indicate that approximately 10% of pregnant women will use illicit drugs during their pregnancy. Almost twice as many will use alcohol, and at least a quarter of Kentucky women smoke cigarettes while they are pregnant.*
- *Research indicates that substance use during pregnancy occurs at nearly equal rates across races and income levels.*
- *While illicit substance use is a concern, alcohol use during pregnancy often causes more serious and irreversible harm to a developing baby than drug use. Smoking cigarettes during pregnancy can be just as harmful as drug use.*
- *Fetal Alcohol Syndrome is the leading known cause for mental retardation. It occurs more frequently than other known causes, such as Down Syndrome, and is 100% preventable.*
- *Routine screening for alcohol and drug use during prenatal care can greatly increase the identification rate of women at risk. Screening should occur at least three times during the course of prenatal care, including the initial visit.*
- *Even if a woman uses alcohol, tobacco or drugs throughout her pregnancy, regular prenatal care can greatly increase her chances of having a healthy baby. If a woman stops using at any time during her pregnancy, she increases her chances of having a healthy baby.*

## TIPS FOR TALKING TO MOM

### TIP #1: EXPLORE YOUR OWN FEELINGS

Pregnant, substance using women need nonjudgmental help. Women who have this problem often care deeply for their babies, and yet find themselves unable to stop using due to their addiction. This conflict can cause women to appear uncaring or ambivalent toward their pregnancy because they are scared and in denial. By putting aside natural feelings such as anger, and treating a woman with genuine care and concern, health care professionals open the door for women to admit to their use and get the help they need.

### TIP #2: ASK EVERY WOMAN AT EVERY VISIT

The stigma surrounding perinatal substance abuse is reduced when questions about drug and alcohol use are a standard part of prenatal care. By asking such questions, health care professionals send the message, "We care about you and your baby!" The more you ask, the more comfortable you and the mother will be in talking about her possible use of alcohol and other drugs.

### TIP #3: PROVIDE INFORMATION

Rather than feeling insulted by information on alcohol and drug use during pregnancy, research and experience shows that women WANT this information and are grateful to have it. Provide simple brochures and handouts that explain the harmful effects of substances to the fetus. Ask if they have questions about it. And provide information on places to contact for help. To reduce defensiveness, tell women, "Even if you don't need the information yourself, you can give it to someone you know who might need it."



***Kentucky's  
KIDS NOW  
Substance  
Abuse and  
Pregnancy  
Initiative:  
Helping  
Moms Have  
Healthy Babies***



Kentucky Invests in Developing Success

Cabinet for Health and Family Services

Department for Mental Health and Mental Retardation Services

Division of Mental Health and Substance Abuse

100 Fair Oaks Lane 4E-D  
Frankfort, KY 40601

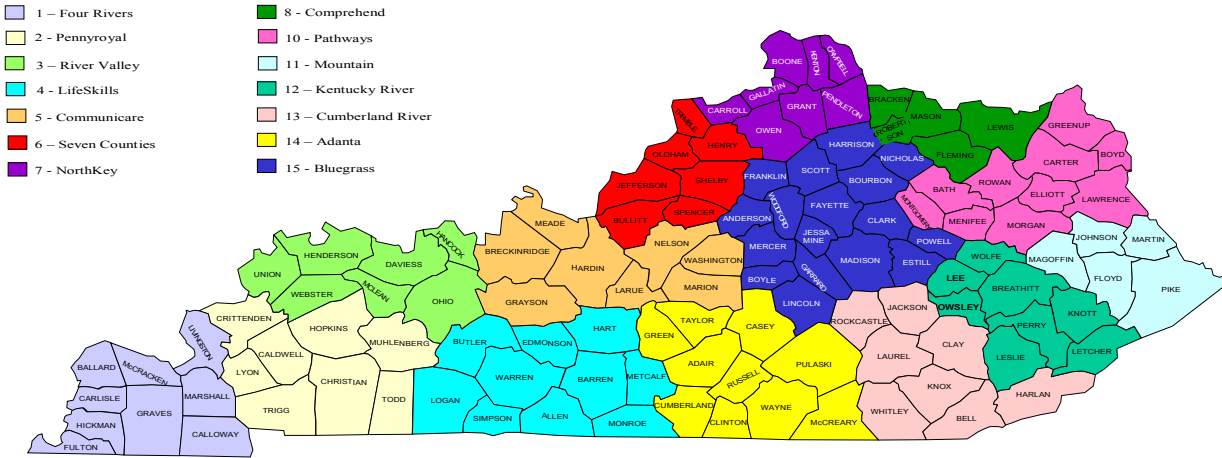
(502) 564-2880, 3487 or 9208

***Let mom know that you care about  
her and her baby!***

# Who do I call when Mom needs help?

Below is a list of people in each region you can call to refer a pregnant woman for substance abuse prevention or treatment services.

## Kentucky – Mental Health, Substance Abuse & Mental Retardation Districts



# About Kentucky's Initiative

As part of the KIDS NOW Early Childhood Development Initiative, the Kentucky Division of Substance Abuse is implementing a statewide effort aimed at increasing the health of all Kentucky babies by decreasing the use of alcohol, tobacco, and other drugs during pregnancy.

Some components that comprise this initiative include:

- A Medicaid benefit package providing a full continuum of substance abuse prevention and treatment services to Medicaid-eligible women who are pregnant or postpartum up to 60 days. Women are eligible for services even if they do not have a substance abuse diagnosis.
- Substance abuse prevention and treatment services for non-Medicaid eligible pregnant women and women with dependent children.
- Outreach efforts aimed at better identifying pregnant and postpartum women in need of substance abuse prevention or treatment, and engaging them in those services.
- Collaborative efforts between substance abuse prevention and treatment services to provide a full continuum of care to pregnant women in need of all types of services.

For more information about this Initiative, please contact Suzanne Carrier at the Division of Mental Health and Substance Abuse (502) 564-2880, Fran Belvin at the UK Institute on Women and Substance Abuse (859) 257-6441, or Carol Stange at Prevention Research Institute (859) 296-5039.

District	Prevention Contac		Treatment Contact	
Four Rivers	Alberta Akin	(270) 442-8039	Gloria Young	(270) 442-9131
Pennyroyal	Vickie Tapp	(270) 886-0486	Charlotte Chilcutt	(270) 886-0486
River Valley	Marissa Weyer-Hubert	(270) 852-5520	Marissa Weyer-Hubert	(270) 852-5520
LifeSkills	Carol England	(270) 901-5737	Karen Garrity	(270) 901-5000 x 1066
Communicare	Deborah Shortt	(270) 765-5992	Terry Reams	(270) 769-5301 x 1221
Seven Counties	Jackie Engle	(502) 439-4591	Susan Woolley	(502) 583-3951
NorthKey	Melissa Hollis	(859) 283-0952	Karen Skillman	(859) 431-4450
Comprehend	Lauren Rankin	(606) 759-7799	Patty Rudd	(606) 564-4016
Pathways	Jennifer Ketterman	(606) 329-8588	Todd Trumbore	(606) 329-8588
Mountain	Janice Cornett	(606) 886-8572	Phyllis Coleman	(606) 886-4404
Kentucky River	Valerie McNeil	(606) 436-4124	Judy Cattoi	(606) 436-5761 x 7205
Cumberland River	Jill Owens	(606) 337-2070	Diane Kagin	(606) 523-9386
Adanta	Susan Bernardi	(606) 679-9425	Lisa Palmer	(606) 679-4782
Bluegrass	Laura Nagle	(859) 624-3622	Thelma Page	(859) 425-1210

**Let mom know that you care about her and her baby!**