

MOMs Introductory Video Transcript

ERIKA:

My name is Erika. I'm the mother of four beautiful boys. I'm a daughter, a mother, a full-time employee, and a friend. And like many others, I suffer from OUD, or opioid use disorder.

I take buprenorphine, which is effective treatment for my OUD. I've done so for many years, prescribed to me by my doctor, even while I was pregnant. I'm living proof that people with OUD can have a healthy pregnancy and deliver a healthy baby. I want other people to know that this is possible for themselves also.

I remember the day that I found out I was pregnant with my fourth son. I made a promise to him and to myself that I was going to work to be a healthy mother. To do that, I knew I had to stay in OUD treatment with buprenorphine.

NARRATOR:

Moms with untreated OUD may risk:

- Serious infections
- Miscarriage or stillbirth
- Overdose and death

Risks for their babies include:

- Slow growth and development
- Pre-term birth

The good news is that proper treatment reduces these risks. It is critical for people who are expecting to seek treatment from a local buprenorphine provider or a SAMHSA-certified methadone program.

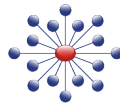
ERIKA:

I'd been taking buprenorphine for my OUD even before my pregnancy. But I just didn't know if it was going to be safe for me or the baby. My partner thought that the baby would possibly be born addicted, but this is simply just not true. I had a lot of questions about taking buprenorphine during my pregnancy, but my doctor explained to me that it was actually safer for me and for my baby's growth and development to take medication for OUD, called medication for opioid use disorder, or MOUD.

NARRATOR:

What is MOUD? MOUD refers to medications that are approved to treat OUD and are safe to use while pregnant.

Is MOUD safe during pregnancy? MOUD is safe during pregnancy. This includes methadone and buprenorphine. Research shows that it's far better to take methadone or buprenorphine during pregnancy than to stop OUD treatment.



Is MOUD going to hurt the baby? MOUD will not hurt the baby. MOUD will not increase the risk of birth defects and your baby will not be born addicted. Baby may develop a condition called neonatal opioid withdrawal syndrome, or NOWS, also called neonatal abstinence syndrome, or NAS. The withdrawal symptoms are treatable and temporary.

Does OUD replace one addiction with another? No. Physical dependence and addiction are not the same thing. People taking methadone and buprenorphine do experience withdrawal if they stop taking it without medical assistance, but this does not mean that they are addicted. Addiction includes behaviors that hamper daily life.

Do I have to be on MOUD forever? Treating your OUD and taking care of yourself may look different in each phase of your life. There is no time limit for taking medication. A lower dose of medicine does not decrease risk for NOWS or NAS. The best methods for treating your OUD are those that work best for you. Talk with your doctor about your questions.

ERIKA:

I was incarcerated during my second pregnancy to where I was told that if I didn't stop taking my MOUD treatment that the state would take away my child.

I wasn't aware at the time that OUD is a disability. MOUD treatment is covered by the Americans with Disabilities Act, or the ADA.

I went into severe withdrawal and ultimately ended up losing my son at 8 months to stillbirth.

Now that I know my rights, it is my mission to tell other women with OUD about their right to continue MOUD treatment. I'm helping them advocate for themselves and for their babies.

NARRATOR:

It is your right to be on MOUD while you are pregnant. Even for:

- Prisons and jails
- Drug court or probation offices
- Family court

Federal rules now require a Plan of Safe Care for babies exposed to opioids or other drugs before birth. Plans of Safe Care are meant to help keep your family together. A report to family services does not necessarily mean your baby will be taken from you.

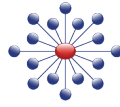
Build your Plan of Safe Care with your treatment provider to set expectations you can meet. Showing consistent care is one way you can help advocate for yourself and your parental rights.

ERIKA:

I'm glad to hear that guidance has changed since I had my sons. Research now shows that it is safe to breastfeed during MOUD treatment.

NARRATOR:

It is safe for women on MOUD to breastfeed. Research shows that breastfeeding can help reduce withdrawal symptoms in your baby. That said, work with your doctor to confirm that breastfeeding is right for you while in treatment for OUD.



ERIKA:

I wanted to do right by my children, and I know that you want to do the same for yours.

I advocated for myself. I asked all the right questions until I got the answers that I needed. I found medical advice that I could trust.

I hope that sharing my experience as a parent with OUD has been helpful as you begin this journey. Please share my story with anyone who needs guidance and hope.

NARRATOR:

Recovery is not one size fits all. Individual and group therapy sessions will also help. For some people, traditional healing and spirituality are an important part of recovery.

If your treatment is not working for you, speak to your treatment provider to make changes together. Asking questions, treating your OUD, and investing in your health care are the best things you can do to protect yourself and to care for your baby.