

# DATA BRIEF: Drug-Exposed Newborns

The Allegheny County Department of Human Services (DHS) conducted an analysis of child welfare data related to newborns exposed prenatally to drugs and/or alcohol. The following is a summary of the findings.

Prenatal exposure to drugs and/or alcohol can have serious health and developmental consequences for newborns. A review of data suggests that such cases account for less than two percent of the children referred to DHS's Office of Children, Youth and Families (CYF), the office responsible for child welfare in Allegheny County.

The review looked at referrals for newborn exposure to drugs and/or alcohol made to CYF from 2009 through 2011. The majority of referrals resulted from positive drug and/or alcohol tests of the mother; the second most frequent referral reason was a positive toxicology screening of the newborn.

During that three-year period, 48,781 children were referred to CYF. Among them were 859 newborns referred for exposure to drugs and/or alcohol. Some 84 percent of the referrals were made during the child's first three days of life and, of those, most were made when the child was one day old. The highest single-year total of newborns referred for drug and/or alcohol exposure was 330 in 2010. Referrals during pregnancy were extremely low, totaling only 23 over the three-year review period.

The referral details often included information about the substance(s) to which the child was allegedly exposed. Marijuana was listed the most frequently, occurring in 67 percent of referrals. Another 31 percent of referrals mentioned opiates, such as heroin. Cocaine and crack cocaine were identified in 15 percent of referrals.

Approximately 95 percent of referrals for drug-exposed newborns were investigated; 55 percent were accepted for child welfare service. About six percent of the investigated referrals were connected to a CYF case that was already open.

More than one in four newborns referred to CYF for exposure to drugs and/or alcohol in 2009 and 2010 were referred for child welfare service at least one more time before the end of 2011; 14 percent of newborns were the subject of repeat referrals before their first birthday. Reasons for the subsequent referral varied, and it is not uncommon for more than one reason to be cited in a single case. The most common reasons were inadequate physical care, alcohol abuse by the child's caretaker and drug abuse by the child's caretaker.

The data also suggest that early intervention matters when it comes to avoiding a repeat referral for drug and/or alcohol exposure. Twenty-seven percent of the newborns referred in 2009 and 2010 were re-referred by the end of 2011. Newborns whose families were accepted for service at birth were less likely to be referred a second time than those whose families had not been accepted initially.

Local hospitals have established protocols for addressing the newborn's drug and/or alcohol exposure and the mother's substance use. Each hospital has developed criteria for referral to child welfare, medical intervention for exposed newborns and for women who test positive for drugs and/or alcohol at the time of birth, and referral to a behavioral health provider for assessment and treatment recommendations. Prevention programs engage known substance-abusing women prenatally in an effort to prevent in utero exposure and/or manage the pregnancy to achieve the best possible outcome for the newborn.