



FY 2022
JULY 1, 2021 - JUNE 30, 2022

**SEPI CT:
DIGITAL
CAMPAIGNS**

**SUBSTANCE EXPOSED
PREGNANCY INITIATIVE OF CT**

IN COLLABORATION WITH WHEELER, CT DCF, AND CT DMHAS



OVERVIEW

The Substance Exposed Pregnancy Initiative of CT (previously known as Substance Exposed Infants/Fetal Alcohol Spectrum Disorders Initiative) aims to strengthen capacity at the community, provider, and systems levels to improve the health and well-being of infants born substance exposed through supporting the recovery of pregnant people and their families. This initiative was conceptualized in 2015, is funded by CT DMHAS and CT DCF, and contracted through Wheeler.

This document is a supplement to the FY 22 Annual Report which can be found [here](#).

As described in the 5 Year Strategic Plan and the FY22 Annual Report, a key component of the Marketing and Training workgroup has been creating and disseminating digital campaigns on topics that intersect with substance exposed pregnancies.

The campaigns were hosted on social media accounts across CT Clearinghouse, United Way 211, CT DMHAS, CT DCF, and CT Women's Consortium. Collectively, "reach" (total number of people who saw content on social media platforms) was 5139 and "impressions" (number of times content is displayed) were 6844. The campaigns are also broadly distributed through the Core Team listserv, the DMHAS Women's Services system of care listserv, the DCF system of care listserv, and the CT Clearinghouse listserv.

The following 11 campaigns (and 5 sub posts) were created and disseminated in FY22.

AUGUST 2021: INTERNATIONAL OVERDOSE AWARENESS DAY 2022



Q
A **About the campaign**

International Overdose Awareness Day is the world's largest annual campaign to end overdose, to remember without stigma those who have died, and to acknowledge the grief of the family friends left behind.

U.S. Statistics

The Center for Disease Control estimates that about 93,000 people died from an overdose in 2020, a nearly 30% increase in deaths compared to 2019.

CT Good Samaritan Law

In 2011, a Good Samaritan Law was passed to protect those who call 911 in response to an overdose. This law prevents the caller from being arrested; however, it does not protect the caller from other charges and/or stop the police from serving a search/arrest warrant if that was already in process.

Responding to an overdose situation

An overdose can occur with many drugs including but not limited to depressants, opioids, alcohol and stimulants. A range of signs and symptoms can occur when a person overdoses. This depends on factors including the drug taken, the amount taken, and the person's state of health. Additionally the risk of overdose is increased after a period of abstinence (i.e. detox, rehab, jail/prison, pregnancy, etc.) due to a decreased tolerance. MOUD/MAT medications reduce drug cravings and can prevent relapse.

If you have any reason to suspect a person is overdosing, call 911 immediately.

Naloxone (Narcan)

Naloxone is a medicine used for the treatment of a known or suspected opioid overdose emergency. Signs of an opioid overdose can include: unconsciousness or an inability to wake up, limp body, extreme drowsiness, breathing that is slow, shallow, irregular or absent, skin that is pale, blue, cold and/or clammy, sounds of choking, snoring, or gurgling, slow/absence of heartbeat, and very small or "pinpoint pupils."

Fentanyl, a powerful opiate, is often found in many street drugs including heroin, cocaine and even marijuana and increases risk of overdose. Due to its strength, it only takes a small amount of this drug to cause an overdose and may require additional doses of Narcan to reverse it.

Naloxone is not a substitute for emergency care. If you suspect an overdose, call 911 immediately and do your best to stay with the person who is overdosing until medical help arrives.

Never Use Alone hotline:
A life saving point of contact for people who use drugs alone
(800) 484-3731 | neverusealone.com

For more information on Opioids, Overdose Prevention, and Naloxone/Narcan, please visit: <https://portal.ct.gov/dph/Health-Education-Management-Surveillance/The-Office-of-Injury-Prevention/Opioids-and-Prescription-Drug-Overdose-Prevention-Program>

Many towns and municipalities host awareness and remembrance events for International Overdose Awareness Day. Check with your local recovery organizations and agencies to find one near you.

CT State Resources

DMHAS Addiction Services Bed Availability | CT 24/7 Treatment Access Line: 1-800-563-4086 | CT Department of Mental Health and Addiction Services

Women's REACH Program | CT Community for Addiction Recovery | **211CT** | **LiveLOUD**

SEPTEMBER 2021: TIPS FOR A HEALTHY PREGNANCY / FASD AWARENESS MONTH

Tips for a **HEALTHY**

PREGNANCY



Nutrition

A pregnant woman needs more of many important vitamins, minerals, and nutrients than she did before pregnancy. This also includes being mindful of certain foods to avoid. Understandably, the "do's and don'ts" can be overwhelming. Talk to your provider or reference reliable resources such as [this one](#) from the U.S. Department of Health and Human Services.

DID YOU KNOW? Pregnant women can get Women, Infant, and Children (WIC) services for their whole pregnancy. WIC provides an array of nutritional supports and resources for both mom and child. Access the CT WIC homepage [here](#) or at <https://portal.ct.gov/DPH/WIC/WIC>



Sleep

Pregnancy can cause increased fatigue and challenges in sleeping comfortably, especially as the baby grows in size. Lack of sleep can affect your physical and mental health so it is important to identify what best supports your sleeping habits. Some recommendations include:

- establishing routines for yourself and your family
- finding a good sleeping position
- avoiding rigorous exercise or large meals before bed
- take small naps throughout the day
- learn some relaxation or meditation techniques



Safe Relationships

You deserve a safe journey to motherhood. Intimate partner violence (IPV) can place an added vulnerability on any pregnancy. CT Safe Connect advocates are available 24/7. All services are free, confidential, voluntary, and safe. You do not have to say your name if you are not comfortable doing so. You can reach an IPV advocate by calling or texting 888-774-2900 or by email or live chat at www.CTSafeConnect.org



Self Care



Experiencing stress is normal, but sometimes it can feel even more overwhelming during pregnancy. Remember to pause and take care of yourself. It can also be helpful to identify a support person who can be there for you in a time of need. If you are struggling with your wellbeing, know you are not alone and support is available.

If you are in a life threatening situation dial 9-1-1 immediately • If you are in crisis in CT dial 2-1-1 • If you need suicide prevention support dial the National Suicide Prevention Lifeline 1-800-273-8255

Doctor's Visits



Get early and regular prenatal care. Your doctor will check to make sure you and baby are healthy at each visit and if there are any problems, early action is always best. Your doctor is also your best resource for questions or concerns regarding your pregnancy.

Avoid or Reduce Alcohol/Substance Use



DID YOU KNOW? September is Fetal Alcohol Spectrum Disorders (FASD) Awareness Month!

The CDC advises that there is no safe time or amount to drink alcohol during pregnancy. Alcohol, as well as other substances, can cause problems for the developing baby throughout pregnancy.

For some women, drinking alcohol or using substances during pregnancy is not a simple recreational choice, but a chronic health condition beyond willpower alone. It does not mean they do not love their baby. If you are struggling to stop or reduce your use you are not alone.

For Women: [Women's REACH Program](#), [CCAR](#), [Plan of Safe Care](#)
For Children and Families affected by FASD/SEI: [CT Birth to Three](#), [CT Child Development Infoline](#)

OCTOBER 2021: NATIONAL PREGNANCY AND INFANT LOSS AWARENESS MONTH 2022

October is National Pregnancy and Infant Loss Awareness Month

WHY IS RAISING AWARENESS SO IMPORTANT?

Grief & Mental Health Support



1 in 4 women will experience a pregnancy or infant loss in their lifetime. Families can feel isolated in their grief due to the stigma associated with this type of loss. They may also develop depressive symptoms and posttraumatic stress that can affect their day to day life. Speaking about it, connecting to others who have been through similar loss, and sharing resources can continue to normalize the topic and promote healing.

[Postpartum Support International, CT Chapter](#)

[Star Legacy Foundation](#)

[CT 211](#)

Patient Centered Care



Increased awareness and destigmatization improves the ability of health care providers to partner with the family during and after the pregnancy as any issues arise. Although these can be difficult conversations, providers should maintain open and safe lines of communication with parents to minimize the possibility of loss where applicable and to also provide best practice support to grieving families.

[Star Legacy Foundation, Resources for Health Professionals](#)



Prevention



Consistent prenatal care and maintaining a healthy lifestyle are important to reducing risk of pregnancy and infant loss. The CDC advises that there is no safe time or amount of alcohol during pregnancy. Alcohol, as well as other substances, can lead to health complications for the developing baby. For some individuals, drinking alcohol or using substances during pregnancy is not a simple recreational choice, but a chronic health condition beyond willpower alone. It does not mean they do not love their baby. If you are struggling to stop or reduce your use you are not alone.

[DMHAS Women's REACH Program](#)

[CT DMHAS](#)

Research & Health Equity



Stillbirth occurs in families of all races, ethnicities, and income levels, and to women of all ages. However, the CDC reports that stillbirth occurs more often among those who are black. In [CT between 2007-2017](#) the stillbirth rate among black/African American women (8.6 per 1,000 live births) was twice the rate of those compared to white women (3.8 per 1,000 live births). Low socioeconomic status and education level are also a risk factors.

We must continue to address the racial health disparities that disproportionately impact our communities of color.

OCTOBER 2021 CONT: NATIONAL PREGNANCY AND INFANT LOSS AWARENESS MONTH 2022



women experience a pregnancy or infant loss.

In addition to women, men and the LGBTQIA+ community also struggle with pregnancy and infant loss.

If you are personally effected...

What can loss look like?

ectopic pregnancy
miscarriage
molar pregnancy
neonatal death
still birth
sudden infant death syndrome (SIDS)
accidents or tragedies during pregnancy or after birth

Honoring your baby

You can do special things to remember your baby, even if didn't have a chance to see, touch or hold them.

- have a memorial service
- collect items such as blankets, a hospital bracelet, a sonogram, or foot print
- plant a tree or garden
- volunteer for a charity in your child's name

DON'T SAY

At least you know you can get pregnant.
Your baby is in a better place now. / You have an angel now.
Do you know why it happened?
Don't worry, you'll be ok.
At least it was early on.
Be thankful for the kids/things you do have.
Time will make it better.
I do not know how I would handle this if it happened to me.

Say this, not that

It can be hard to know what to say to someone who lost their child. Here are some examples of supportive language.

Where can you go for help?

Loss can come with a variety of feelings, including sadness, anger, and confusion. These can impact both your physical and mental well being, so make sure you reach out for support.

- Your health care provider, partner/loved ones, grief counselor, or faith/spiritual leader
- CT Resources: [Postpartum Support International \(CT Chapter\)](#) or [CT 211](#)
- National Resources: [Star Legacy Foundation](#), [March of Dimes](#)

If you are supporting someone...

SAY

Know how much your baby was loved and will continue to be loved.
Please be gentle with yourself right now and grieve however you need to.
Do you need company while you recover? Maybe I can help you around the house or with running errands.
What can I practically do to support you right now?
I am not sure what to say or do, but I am here for you whenever and however you need me.

NOVEMBER 2021: NAVIGATING HOLIDAYS WHILE IN RECOVERY

WE ASKED PEOPLE IN RECOVERY

their advice for navigating the holidays.

The holidays can be a challenging time for those in recovery. This time may bring up painful memories or trigger feelings of loneliness, financial worries, or social pressures.

But it can also be a time to celebrate recovery and promote strategies for healing.

”

The journey isn't easy, but it's worth it.

”

I am most grateful to be alive. I remember many holidays, birthdays and special occasions being alone and thinking I was better off dead. I am grateful for family, friends, a support network, my sponsor, my children, 12 step meetings, and my ability to be present today.

”

The most important suggestion would be for individuals to not be alone. I would make sure an individual has someone to talk to, a safe place to go and harm reduction measures on hand around these times. Many 12 step meetings will run 24/7 during holidays so an individual is not alone.

”

Advice for parents: don't stress over not being able to afford presents. Kids just want your time and there are programs that can help you get presents. If you don't have your kids, write them a letter if you can. Stay focused on your recovery and share when you're struggling at a meeting or with someone you feel comfortable with.

Are you struggling? You are not alone.

CT Department of Mental Health
and Addiction Services

DMHAS Addiction Services Bed
Availability

CT Community for
Addiction Recovery

CT 24/7 Treatment Access Line:
1-800-563-4086

Women's REACH Program

211 CT

DECEMBER 2021: NAVIGATING HOLIDAYS WHILE IN RECOVERY

WE ASKED PEOPLE IN RECOVERY

their advice for navigating the holidays.

The holidays can be a challenging time for those in recovery. This time may bring up painful memories or trigger feelings of loneliness, financial worries, or social pressures.

But it can also be a time to celebrate recovery and promote strategies for healing.

To parents with children in recovery: Include the person struggling. Give them a day without lecturing them. Holidays are not easy for people in recovery or who are actively using as it is. Enjoy each day as you can because tomorrow is never promised.

Let them know they are loved no matter what.

I am most grateful to be alive. I remember many holidays, birthdays and special occasions being alone and thinking I was better off dead.

I am grateful for family, friends, a support network, my sponsor, my children, 12 step meetings, and my ability to be present today.

The journey isn't easy, but it's worth it.

When I was active in my addiction, I coped by using. Today I cope by having a support team either with me or one phone call away. I plan ahead with my sponsor/network on family gatherings while always having the means to leave if I need to.

Are you struggling? You are not alone.

CT Department of Mental Health and Addiction Services

DMHAS Addiction Services Bed Availability

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Women's REACH Program

211 CT

JANUARY 2022: WHERE ARE YOU IN 2022?

If you are thinking about reducing or stopping your alcohol or drug use, the thought of where to begin or how to ask for help can be challenging.

This can be even more difficult if you are pregnant or thinking about becoming pregnant.

the past does not define me

i am enough

RECOVERY

Ask for help

WHERE ARE YOU IN 2022?

HEALING

Big goals & Small goals

i am loved

Social Supports

i can do this

Parenthood

one day at a time

Look ahead, not behind...

Know you are not alone in achieving your goals. We are here for you when you are ready to reach out.

[CT Department of Mental Health and Addiction Services](#) [DMHAS Addiction Services](#) [CT Community for Addiction Recovery](#) [CT 24/7 Treatment Access Line](#) [1-800-563-4086](#) [PROUD: Parents Recovering from Opioid Use Disorder](#) [Women's REACH Program](#) [211 CT](#)

FEBRUARY 2022: BLACK HISTORY MONTH AND BIRTH JUSTICE

February 2022: Black History Month | Black Health & Wellness

BIRTH JUSTICE

WHAT IS BIRTH JUSTICE?

Birth Justice is a response to reproductive oppression that leads to negative birth experiences. This oppression particularly impacts women and birthing people of color, low-income, survivors of violence, immigrant, and/or the LGBTQIA+ community.

Birth Justice includes:

- The right to choose whether or not to carry a pregnancy
- The right to choose when, where, and how to birth as well as with whom to support a birth, including access to traditional and indigenous birth-workers, such as midwives and doulas
- The right to breastfeeding support

Birth Justice exists when

women and birthing people are empowered during pregnancy, labor, childbirth and postpartum to make healthy decisions for themselves and their babies.

Birth Justice requires

challenging harmful and abusive practices and educating the community and healthcare systems/providers on culturally appropriate and person centered care.



Tips for Black Women and Birthing People

Be bold in asking for support. You don't have to do this alone and it is not weak to need help.

Prepare to be an informed and empowered advocate during your birth process. Create a birth plan, learn about informed consent, and the risks/benefits of possible medical procedures.

Explore your options. Find prenatal care that is supportive and respectful, and persist with it. Explore doula and midwifery care options.

Learn about the signs of postpartum depression and seek professional help and community support if needed.

Join a new parent, lactation, or other support group that meets your needs.

This content was sourced from: www.blackwomenbirthingjustice.com

What Can I Do As a CT Provider to Support Black Moms and Birthing People?

- Listen and believe them when they say something does not feel right. The CDC [Hear Her](#) campaign aims to prevent pregnancy-related deaths by sharing potentially life-saving messages about urgent warning signs.
- Make a conscious effort to acknowledge and learn about topics such as [systemic racism](#), stigma, and [trauma informed care](#) that impact healthcare delivery. Ask your local state agencies, the [CT Clearinghouse](#), or the [CT Women's Consortium](#) for information on upcoming trainings.
- Connect your patients/clients to peer and family supports such as [Birth, Support Education and Beyond](#) and the [CT Fatherhood Initiative](#).



Are you struggling to reduce or stop your substance use while pregnant or parenting? You are not alone.

[CT Department of Mental Health and Addiction Services](#)

[CT Community for Addiction Recovery](#)

[Women's REACH Program](#)

[DMHAS Addiction Services Bed Availability](#)

[CT 24/7 Treatment Access Line: 1-800-563-4086](#)

[CT PROUD Program](#)

[211 CT](#)

MARCH 2022: INTERNATIONAL WOMEN'S DAY AND LGBTQ+ HEALTH AWARENESS WEEK

MARCH 8TH 2022



Women comprise half of the global population and have a significant influence on the well-being of their families, communities, and economy.

Imagine a gender equal world that's free of bias, stereotypes, and discrimination.

Together we can forge women's equality, celebrate women's achievements, and break the gender bias.

To learn more about IWD 2022 and #BreakTheBias visit:
www.internationalwomensday.com

#BreakTheBias: What Can We Do

- Celebrate women forging change
- Forge women's empowerment worldwide
- Empower women's choices in health
- Build workplaces where women can thrive
- Uplift and support women in pregnancy, birth, and motherhood

#BreakTheBias for Women Struggling with Substance Use

- **The Women and Harm Reduction International Network (WHRIN)** highlights the lack of balance surrounding the sexual, reproductive health, and parenting rights experienced by women who use substances.
- A significant proportion (ranging from at least 15% up to nearly half depending on country/region) of all people who use substances in the world are women.
- Many women report that they feel excluded from existing harm reduction activities, especially those who are pregnant or who have children, trans and/or non-binary women, sex workers and incarcerated women.
- Being able to seek health services, support and information without fear of reprisal is key to realizing sexual and reproductive health and parenting rights for women who use substances.
- To learn more visit: <https://whrin.site/>



#BreakTheBias: Be Inclusive

- **March** also celebrates **LGBTQ+ Health Awareness Week (3/21-3/25)**!
- Transgender women are women and should always be included in any conversation about women without needing to justify their presence or fulfill requirements.
- HRC.org defines "trans" as an umbrella term for people whose gender identity is different from the sex assigned to them at birth
- The trans experience also includes those who are non-binary, genderqueer, or gender fluid, or any number of other expansive ways people who aren't exclusively female or male claim or reclaim their gender/s.



Are you struggling to reduce or stop your substance use while pregnant or parenting? You are not alone.

CT Department of Mental Health and Addiction Services

DMHAS Addiction Services Bed Availability

Women's REACH Program

CT Community for Addiction Recovery

CT 24/7 Treatment Access Line: 1-800-563-4086

CT PROUD Program 211 CT

APRIL 2022: YOUTH IN TRANSITION TO ADULTHOOD (COMMUNITY SIDE)

ARE YOU:



TRANSITIONING INTO ADULTHOOD CAN FEEL SCARY AND OVERWHELMING AT TIMES.

Everyone has a different transition to adulthood. You may know what direction you want your life to take or you may be unsure as to what the future holds for you.

Transitioning to adulthood may be even more challenging if you are pregnant or parenting, have a substance use disorder, and/or are a youth in DCF care.

You are not alone. There are resources designed to help support you in a successful launch into adulthood!

WHO ARE YOUR SOCIAL SUPPORTS?

Everyone needs a network of trusted people who support them in their goals. **Who can you turn to for emotional or practical support?**

Trusted supports in your life may be a **parent/guardian/family member, friend, teacher, faith leader, coach, school nurse, doctor or therapist.**

Do you have healthcare?



Transitioning to adult health care is a big step! Like going to college or getting a job, **health care transition takes preparation and self-advocacy.**

To help guide your transition:
<https://www.gottransition.org/youth-and-young-adults/>

Are you a youth in the CT welfare system?



If you are currently in DCF Care or were in DCF care, talk to your DCF worker about their supports they have for youth transitioning out of care. These supports include **employment, housing, and life skill services.**

You can find more information here:
<https://portal.ct.gov/DCF/Adolescent-Services/Home>

If you are between 18-25, have a history of DCF involvement and are in need of mental health support, you may qualify for the **DMHAS Young Adult Services (YAS) Program.** They have several resources including a Perinatal Support Program for pregnant and parenting young adults.

More information here:
<https://portal.ct.gov/DMHAS/Divisions/Divisions/Young-Adult-Services>

ARE YOU STRUGGLING WITH SUBSTANCE USE?

If you are struggling with addiction or substance use, **Youth Recovery CT offers peer support, recovery assistance and hope!** Connect with people who have been in your shoes through participation in a Peer Group or at free social events.

If you are in need of treatment and/or recovery services in CT, you are not alone. CT DMHAS offers several resources:

- If you are in crisis please dial 911
- For services in your area:
<https://portal.ct.gov/DMHAS/Programs-and-Services/Finding-Services/Finding-Services> OR www.211ct.org
- **CT 24/7 Treatment Access Line:** call 1-800-563-4086
- For pregnant and parenting individuals:
<https://portal.ct.gov/DMHAS/Programs-and-Services/Women/Womens-REACH-Program>

APRIL 2022: SUPPORTING YOUTH IN TRANSITION TO ADULTHOOD (PROVIDER SIDE)

Supporting

the Transition into Adulthood
of youth and young adults 18-24 in CT

In CT, a “transitional youth” is defined as youth in the child welfare system (18–24) who are eligible for independent living services, as well as the young adults who recently left the system. Transitional youth are also individuals with no welfare care history, but are still in this pivotal age range.

Support Systems for Youth

Youth need a network of trusted people who support them in their goals. This means having an environment that consists of supports (people and systems) that not only help with physical needs, but needs as they relate to the emotional and social aspects of an individual. Youth who enter DCF care are eligible to receive supports up through 23 years of age if particular criteria are met.

Youth Struggling with a Substance Use Disorder

Youth Recovery CT offers peer support, recovery assistance, and hope! Youth can connect with people who have been in their shoes through participation in peer groups or at free social events.

For those **in need of treatment and/or recovery services in CT, you are not alone.** CT DMHAS offers several resources.

- **For services in their area:**
<https://portal.ct.gov/DMHAS/Programs-and-Services/Finding-Services/Finding-Services> OR www.211ct.org
- **24/7 Tx Bed Availability:**
<https://www.ctmentalhealthservices.com/>
- **CT 24/7 Treatment Access Line:** call 1-800-563-4086
- **For pregnant and parenting individuals:**
<https://portal.ct.gov/DMHAS/Programs-and-Services/Women/Womens-REACH-Program>

Addressing the Need

Transitioning into adulthood can feel scary and overwhelming for youth and young adults. Transition to adulthood is unique for everyone. Some know what direction they want life to take and some are unsure as to what the future holds for them.

Transitioning to adulthood may be even more challenging if someone is pregnant or parenting, has a substance use disorder, and/or are in DCF care.

Youth in Child Welfare

If an individual is/was in DCF Care, their DCF worker can connect them to supports they have for youth transitioning out of care.

These supports include **employment, housing, and life skill services.**

You can find more information here:
<https://portal.ct.gov/DCF/Adolescent-Services/Home>

If an individual is between 18–25, has a history of DCF involvement and is in need of mental health support, they may qualify for the **DMHAS Young Adult Services (YAS) Program.** They have several resources including a Perinatal Support Program for pregnant and parenting young adults.

More information here:
<https://portal.ct.gov/DMHAS/Divisions/Divisions/Young-Adult-Services>

Pediatric to Adult Healthcare

Transitioning to adult health care can feel complicated and overwhelming. Ensuring youth establish adult medical care and know how to access it in times of need is critical.

More information here:
www.gotttransition.org/youth-and-young-adults/



MAY 2022: MATERNAL MENTAL HEALTH AWARENESS MONTH (COMMUNITY SIDE)

MAY 2022

MATERNAL MENTAL HEALTH AWARENESS MONTH



is about raising public and professional awareness of perinatal mental health problems, advocating for women and birthing people affected by it, changing attitudes and helping families access the information, care and support they need to recover.

PRE/POSTPARTUM STRESS DEPRESSION

- Pregnancy and new motherhood can bring a range of thoughts, emotions and experiences. While this journey often brings excitement and joy, it also brings challenges, anxiety, and stress.
- It is normal to be scared to talk to someone about the way you are feeling for fear of judgement.
- You are not alone in this struggle.

REACH OUT

- If you are feeling badly for more than two weeks, please know that support, treatment and care are available.
- Please do not suffer in silence. You deserve to feel well!
- This is an important time in life for you and your developing baby. **Speak to your provider about your treatment and support options.**



FEEDING

- It's important to consider how the method you feed is supporting your overall health, including mental health. Feeding your baby is not a one size fits all solution. You have the freedom and flexibility to **create an individualized feeding plan to work for your family's unique needs.**
- If you're experiencing challenges or discomfort while breastfeeding, please connect with **professional support as early as you possibly can.**

SLEEP AND SELF-CARE

- From getting up for night feedings to checking the monitor as well as the stress of taking on a new role in life - there are interruptions that keep many parents from returning to a restful sleep schedule.
- To improve your sleep: practice self-care, log off and cool down, cut back on caffeine and alcohol, cut down on naps, **and go easy on yourself!**

ALCOHOL USE

- There is no known safe amount of alcohol use during pregnancy or while trying to get pregnant. There is also no safe time for alcohol use during pregnancy (CDC).
- If you are struggling to stop or reduce your alcohol and drug use while pregnant or parenting, you are not alone. CT DMHAS has resources for parents.
- Not drinking alcohol is also the safest option if you are breastfeeding. However, there are safe methods to breastfeed if you are using alcohol. Talk to your provider or reach out to your local WIC office for breastfeeding resources.

WELLNESS APPOINTMENTS

- Pregnancy can be an exciting but stressful time. Take time to share any concerns or hesitations at your pre-natal appointment to get the help you need and prepare for your little one's arrival.
- Make a postpartum care plan with your provider during pregnancy. A postpartum checkup is a medical checkup you get after having a baby to make sure you're recovering well from labor and birth.
- Postpartum care is important because new moms can be at risk of serious and sometimes life-threatening health complications.



HEAR THE VOICES OF MOMS IN RECOVERY

What was most helpful to your recovery and mental health during and after pregnancy?
 "Having a supportive partner, and other people in my life that I could talk to. Also, taking moments to myself. Especially after pregnancy. Even if it was a 5 minute fresh air break outside, alone. Just to breathe."

What is something most people might not be aware about when it comes to mental health during/after pregnancy for someone who struggles with addiction/is in recovery?
 "It can be easy to put your mental health on the back burner, because preparing for/having a newborn becomes your center of focus. It is ok, and necessary, to put your mental health first."

What advice would you give to someone who is pregnant/postpartum and struggling with addiction and their mental health?
 "If you are struggling, please ask for help. You are not alone, even if it feels that way sometimes."

MAY 2022: MATERNAL MENTAL HEALTH AWARENESS MONTH (PROVIDER SIDE)

RESOURCES

MAY 2022

MATERNAL MENTAL HEALTH AWARENESS MONTH

Prioritizing maternal mental health is an important practice, which can help to support the wellbeing of both mother/birthing person and baby. If someone you know is struggling with a mental health or substance use disorder, offer them your support.

Below are resources for mothers/birthing people struggling with their mental health, including resources for pregnant and parenting people struggling with alcohol and substance use.

POSTPARTUM SUPPORT INTERNATIONAL

PSI offers free resources to mothers such as a Helpline, PSI Coordinators, Online Support Meetings and Specialized Coordinators including a Substance Use and Moms Coordinator.

www.postpartum.net/get-help/help-for-moms/

POSTPARTUM SUPPORT CT CHAPTER

PSI CT offers a safety net of supports and services for pregnant and postpartum mothers and their families through free services from PSI Coordinators and support groups.

www.psictchapter.com

PROUD PROGRAM

The PROUD program (Parents Recovering from Opioid Use Disorders) offers support and family-centered treatment to pregnant women and mothers of infants or young children, in all stages of substance use recovery.

portal.ct.gov/PROUD

WOMEN'S REACH PROGRAM

The Women's REACH program provides female Recovery Navigators for pregnant or parenting individuals with substance use or co-occurring disorders.

<https://portal.ct.gov/DMHAS/Programs-and-Services/Women/Womens-REACH-Program>

MOTHER TO BABY CT

Mother to Baby CT is a free consultation service for providers and families searching for guidance on any substance interference with pregnancy development and breastfeeding. They provide telephone or in person consultation and provide information on psychotropic medications in pregnancy available on line.

www.mothersbabyct.org



CT WIC

WIC supports Connecticut mothers and families in breastfeeding their children. Find information on developing a plan to work and breastfeed, access to WIC nutritionists, and peer counseling services.

<https://portal.ct.gov/DPH/WIC/WIC>

HARTFORD HOSPITAL PERIPARTUM MOOD DISORDERS

Hartford Hospital Peripartum Mood Disorders Program offers evaluation, medication therapy and support group as well as psychotherapy resources.

<https://hartfordhealthcare.org/about-hartford-healthcare/connect-to-healthier/health-essentials/peripartum-mood-disorders>



MARCH OF DIMES POSTPARTUM CHECKUPS

March of Dimes provides information on scheduling postpartum checkups and creating a postpartum care plan. They also provide information on what a postpartum checkup consists of.

<https://www.marchofdimes.org/pregnancy/your-postpartum-checkups.aspx>

Are you struggling to reduce or stop your substance use while pregnant or parenting? You are not alone.

CT DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES
CT COMMUNITY FOR ADDICTION RECOVERY
DMHAS ADDICTION SERVICES BED AVAILABILITY

CT 24/7 TREATMENT ACCESS LINE:
1-800-563-4086
211 CT

MAY 2022: MATERNAL MENTAL HEALTH AWARENESS MONTH (SOCIAL MEDIA SUBPOSTS)

MATERNAL MENTAL HEALTH MONTH MAY 2022


PRE/POSTPARTUM STRESS AND DEPRESSION

Pregnancy and new motherhood can bring a range of thoughts, emotions and experiences. While this journey often brings excitement and joy, it also brings challenges, anxiety, and stress.


Depression and anxiety are medical conditions and are treatable if you seek help. It is normal to be scared to talk to someone about the way you are feeling for fear of judgement. You are not alone. Speak to your provider about your treatment and support options.

In addition to medical support, prioritizing your mental health is an important practice which can help to support the wellbeing of both you and your child. It isn't "selfish" to be concerned with self-care and focusing on your own needs; practicing self-care may be more important now than ever.

Need help? Contact the CT Chapter of Postpartum Support International: www.psicchapter.com




YOU ARE NOT ALONE
1 IN 7 WOMEN/BIRTHING PEOPLE EXPERIENCE PERINATAL MENTAL HEALTH COMPLICATIONS AND 1 IN 8 EXPERIENCE POSTPARTUM DEPRESSIVE SYMPTOMS.




SEEK SUPPORT

- SPEAK WITH YOUR PROVIDER AT YOUR PRENATAL AND POSTPARTUM CHECKUPS
- TALK WITH YOUR LOVED ONES
- JOIN A SUPPORT GROUP



SYMPTOMS VARY

- LASTING SAD, ANXIOUS, OR "EMPTY" MOOD
- HOPELESSNESS, GUILT, OR WORTHLESSNESS
- FEELINGS OF IRRITABILITY OR RESTLESSNESS
- LOSS OF ENERGY
- FEELING DISTANT FROM YOUR BABY
- OVER OR UNDER EATING
- SUICIDAL OR SCARY THOUGHTS



PRIORITIZE SELF CARE

- ASK FOR HELP WITH DAILY TASKS
- HAVE SOME ALONE TIME
- GET ADEQUATE SLEEP
- EXERCISE
- JOURNAL OR MEDITATE

MATERNAL MENTAL HEALTH MONTH MAY 2022

FEEDING YOUR BABY

Feeding is critical to your baby's health, but remember that you are also part of the feeding equation. You have the freedom and flexibility to create an individualized feeding plan to work for your family's unique needs. It's important to consider how the method you feed is supporting your overall health, including your mental health.

Feeding your baby is not a one size fits all. You may choose to exclusively breastfeed on demand, offer a combination of breastmilk and formula, provide expressed breastmilk, or use donor milk. No matter what you decide, planning for feeding during pregnancy increases chances of a successful outcome.

Feeding can be even more overwhelming if you have multiples. But, remember this is something you and your partner can do as a team - whether you have 1 baby or multiples. Make a feeding plan and let your partner know how they can support you! If you do not have a partner, let your family and friends know how they can help. Whether you have a partner or are parenting solo, joining a feeding support group can help connect you to parents who are having similar experiences!

Need help? Contact your local CT WIC office: <https://portal.ct.gov/DPH/WIC/WIC>



YOU ARE NOT ALONE
FEEDING YOUR BABY CAN BE CHALLENGING NO MATTER IF YOU CHOOSE TO BREASTFEED OR USE FORMULA. IN THE EARLY DAYS, YOU AND YOUR BABY ARE LEARNING, SO BE PATIENT AND SEEK HELP IF YOU HAVE QUESTIONS OR CONCERNS.



SEEK SUPPORT

CONNECT WITH:

- CERTIFIED LACTATION CONSULTANT
- BREASTFEEDING SUPPORT GROUP
- REGISTERED DIETITIAN/NUTRITIONIST
- PERINATAL HEALTH CARE PROVIDER/PEDIATRICIAN
- THERAPIST



CHALLENGES
CHALLENGES WITH FEEDING CAN ARISE FOR DIFFERENT REASONS AND VARY AMONG INDIVIDUALS:

- INEFFECTIVE OR PAINFUL LATCHING
- INFANT ALLERGIES TO FORMULA/BREASTMILK
- TRAUMATIC BIRTH EXPERIENCE
- LACK OF SUPPORT FROM FAMILY/FRIENDS
- INFANT WITH HEALTH PROBLEMS
- POST-BIRTH COMPLICATIONS
- LOW MATERNAL SELF-CONFIDENCE



PRIORITIZE SELF CARE

- NOURISH YOUR BODY
- PRIORITIZE RESTING
- PRACTICE STRESS MANAGEMENT
- CONNECT WITH NON-JUDGMENTAL SUPPORTS

MAY 2022: MATERNAL MENTAL HEALTH AWARENESS MONTH (SOCIAL MEDIA SUBPOSTS)

MATERNAL MENTAL HEALTH MONTH MAY 2022

SLEEPING AND REST

From getting up for multiple night feedings to checking the monitor as well as the stress of taking on a new role in life - there are interruptions that keep many parents from returning to a restful sleep schedule. But with practice and a little patience, it is possible to make sure you and everyone in the family can sleep through the night. Here are some steps to restful, restorative sleep:

- **Log off and cool down:** Create a cut-off time to unplug your smart devices that tell your body it's time to sleep.
- **Cut back on caffeine:** Cut back on caffeine around 8 hours before bedtime.
- **Cut back on naps:** Naps cut down the natural hunger for sleep. Once your child is sleeping well, skipping that afternoon nap can result in improved sleep.
- **Make your bed feel sleepy:** Make your bed an oasis for rest by only using it for sleep, unwinding, and intimacy.

For more tips and strategies, go to:
<https://www.seleni.org/advice-support/2018/3/15/getting-sleep-when-youre-a-new-parent>



YOU ARE NOT ALONE
MILLIONS OF NEW PARENTS STRUGGLE TO GET GOOD SLEEP, EVEN AFTER THEIR BABIES HAVE STARTED SLEEPING THROUGH THE NIGHT.



SEEK SUPPORT
IF YOU FIND YOURSELF FEELING ANXIOUS OR WORRIED ABOUT BEING A NEW PARENT, CONNECT WITH A THERAPIST TO HELP REDUCE STRESS AND IMPROVE YOUR SLEEP.



SYMPTOMS VARY
SLEEP DEPRIVATION CAN RESULT IN:

- INSOMNIA
- DAYTIME SLEEPINESS
- ANXIETY AND DEPRESSION
- NON-REFRESHING SLEEP
- FATIGUE
- SIGNS OF IRRITABILITY
- INCREASE SIGNS OF POSTPARTUM DEPRESSION



PRIORITIZE SELF CARE

- SPEND TIME WITH YOUR SPOUSE/PARTNER
- PRACTICE MEDITATING BEFORE BED
- READ A BOOK
- TAKE AN EXTRA LONG SHOWER/BATH

MATERNAL MENTAL HEALTH MONTH MAY 2022

ALCOHOL & DRUG USE

There is no known safe amount of alcohol use during pregnancy or while trying to get pregnant. There is also no safe time for alcohol use during pregnancy (CDC).

If you are struggling to stop or reduce your alcohol and drug use while pregnant or parenting, you are not alone. CT DMHAS has resources for pregnant and parenting people.

If you are breastfeeding or pumping, avoiding alcohol and drugs is the safest option. However, there are methods to ensure your supply is safe for your baby. Talk with your healthcare provider or local WIC office about your options.

If you are pregnant or parenting and struggling with substance use disorder and/or are in recovery, you can also work with your doctor in creating a plan of safe care. A plan of safe care is a document that lists supportive and individualized resources for you and your baby.

If you need help with substance or alcohol use while pregnant or parenting contact Women's REACH Program through CT DMHAS:
<https://portal.ct.gov/DMHAS/Programs-and-Services/Women/Womens-REACH-Program>



YOU ARE NOT ALONE
FOR SOME WOMEN/BIRTHING PEOPLE, DRINKING ALCOHOL OR USING SUBSTANCES DURING PREGNANCY IS NOT A RECREATIONAL CHOICE, BUT A CHRONIC HEALTH CONDITION BEYOND WILLPOWER ALONE. IF YOU ARE STRUGGLING TO STOP OR REDUCE YOUR USE YOU ARE NOT ALONE.



SEEK SUPPORT

- PROUD PROGRAM
- WOMEN'S REACH PROGRAM
- CT COMMUNITY FOR ADDICTION RECOVERY
- CT BIRTH TO THREE



SYMPTOMS OF SUD

- PROBLEMS CONTROLLING ALCOHOL/SUBSTANCE USE
- PROBLEMS CONTROLLING ALCOHOL/SUBSTANCE USE DESPITE DESIRE TO QUIT
- DEVELOPING CRAVINGS/TOLERANCE/WITHDRAWAL SYMPTOMS TO A SUBSTANCE



PRIORITIZE TREATMENT

- MEDICATION ASSISTED TREATMENT
- MEDICATION FOR OPIOID USE DISORDER
- THERAPY
- PEER RECOVERY SUPPORTS

MAY 2022: MATERNAL MENTAL HEALTH AWARENESS MONTH (SOCIAL MEDIA SUBPOSTS)

MATERNAL MENTAL HEALTH MONTH MAY 2022

WELLNESS APPOINTMENTS

A postpartum checkup is a medical checkup you get after having a baby to make sure you're recovering well from labor and birth. Go to your postpartum checkups, even if you're feeling fine. They're an important part of your overall pregnancy care.

The American College of Obstetricians and Gynecologists (also called ACOG) has released new guidelines calling for changes to improve postpartum care for women/birthing people. They recommend that all women/birthing people:

- Have contact with their health care provider within 3 weeks of giving birth
- Get ongoing medical care during the postpartum period, as needed
- Have a complete postpartum checkup no later than 12 weeks after giving birth

For more information on postpartum checkups go to:
<https://www.marchofdimes.org/pregnancy/your-postpartum-checkups.aspx>



YOU ARE NOT ALONE

A POSTPARTUM CARE PLAN IS A PLAN THAT YOU AND YOUR HEALTH CARE PROVIDER MAKE TOGETHER.

SEEK SUPPORT

YOUR POSTPARTUM CARE TEAM CAN CONSIST OF:

- PRENATAL CARE PROVIDER
- PEDIATRICIAN
- PEDIATRIC NURSE PRACTITIONER
- LACTATION CONSULTANT
- CASE MANAGER OR CARE COORDINATOR
- FAMILY AND FRIENDS



SYMPTOMS VARY

CONTACT A HEALTHCARE PROVIDER IMMEDIATELY IF YOU EXPERIENCE POST-BIRTH SYMPTOMS:

- CHEST PAIN
- TROUBLE BREATHING
- HEAVY VAGINAL BLEEDING
- SEVERE HEADACHE
- EXTREME PAIN IN LOWER BELLY
- FEELING SAD OR HOPELESS
- NAUSEA OR HIGH FEVER



PRIORITIZE SELF CARE

- GET PLENTY OF SLEEP
- EAT HEALTHY FOODS
- PRACTICE YOGA OR MEDITATION
- ASK FOR HELP FROM PARTNER/SPOUSE/FAMILY

JUNE 2022: CELEBRATING LGBTQIA+ FAMILIES (COMMUNITY SIDE)

June 1-30, 2022

PRIDE MONTH CELEBRATING LGBTQIA+ PARENTS AND FAMILIES

Planning for Parenthood

The road to parenthood can be stressful. For LGBTQIA+ individuals and families, the journey can be especially long and complicated. Deciding when and how to have a child is a very important conversation to have with yourself, your family, and/or your partner. Selecting the right path for you depends on lots of considerations, including personal preferences, financial resources, life circumstances, and community and family support.



Find Support

It is vital to have a positive support system on the journey to parenthood. Find people who will support your goals, believe in you, and set boundaries with those who don't. Build your support system in the form of family, friends, neighbors, healthcare providers, and others in your community.

Do Your Research

The first step toward parenthood is to do your research. Speak to families that already have been down the road before you and connect with resource groups. With healthy communication, support, and resources, LGBTQIA+ individuals can experience the joys of parenthood.

What options are available to me?

- **Pregnancy:** Traditional pregnancy is possible for many individuals and couples.
- **Surrogacy:** Surrogacy is when a gestational carrier carries a pregnancy for you. This may be the right option if pregnancy is not possible for biological, hormonal, personal or medical reasons.
- **Adoption/Foster:** Within the scope of adoption, there is agency adoption, independent adoption, public agency adoption and international adoption.
- **Donor-Assisted Reproduction:** There are three main methods for artificial insemination: IVF, Intrauterine insemination (IUI), and Intrauterine insemination (ICI)

For more information and resources on starting your family, visit <https://www.familyequality.org/family-building/path2parenthood/>

What Are My Resources: Being LGBTQIA+, Pregnant or Parenting, and Struggling with Substance Use

CT PROUD Program

The PROUD program offers support and family-centered treatment to LGBTQIA+ pregnant and parenting individuals of infants or young children, in all stages of substance use recovery.

CT REACH Program

The REACH Family Recovery Navigators provide community outreach and engagement services, case management, recovery coaching and community connections to treatment and recovery support resources to LGBTQIA+ pregnant and parenting individuals as they enter into and sustain recovery from substance use or co-occurring disorders.



Know Your LGBTQ+ Resources

CT has many supportive resources to assist you if you identify as LGBTQIA+ including:

- **Walk With Me**
Located in Wheeler Clinic, go to <https://www.wheelerclinic.org/services/lgbtqia-responsive-services-at-wheeler>
 - **New Haven Pride Center**
Located in New Haven, go to <https://www.newhavenpridecenter.org/>
 - **Triangle Community Center**
Located in Norwalk, go to <https://ctpridecenter.org/>
 - **Queer Unity Empowerment Support Team (QUEST)**
Located in Waterbury, go to <https://questct.com/>
 - **A Place to Nourish Your Health**
Located in New Haven, go to <https://apnh.org/>
 - **Translifeline**
Virtual crisis line, go to <https://translifeline.org/>
 - **Anchor Health**
Located in Hamden and Stamford, go to <https://anchorhealthct.org/>
- To learn more about resources in your area visit <https://portal.ct.gov/DMHAS/Programs-and-Services/Finding-Services/LGBT-Services>



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JUNE 2022: BEING INCLUSIVE IN HEALTHCARE (PROVIDER SIDE)



For individuals who identify as LGBTQIA+, going to a healthcare appointment can be a daunting experience. As a healthcare provider, your role is essential in making patients feel welcome and cared for, regardless of where they are, who they are and how they are. You should be using inclusive language and non-stereotyped communication to make patients feel comfortable!

BE NON-JUDGMENTAL

At clinical practices that do not prioritize inclusive care, LGBTQIA+ patient experiences might be invalidated many times over, by the intake forms, by health history questions and by you or your staff's failure to use gender neutral pronouns. You and your staff should ensure you are creating a non-judgmental, welcoming and inclusive environment for your patients.



Questions to Ask

- Not everyone who identifies as LGBTQIA+ is going to disclose their identity to their healthcare providers. You and your care team can begin patient encounters by asking **three routine questions** of all new patients and noting their preferences in the electronic health record:
 - **What is your gender identity?**
 - **What sex were you assigned at birth?**
 - **What are your pronouns?**
- Making sure that first encounter is safe can be key to fostering continued engagement with the healthcare system and good healthcare outcomes. It's also an opportunity to recommend medical and mental health resources or refer to specialists.
- CT DMHAS can help you find appropriate LGBTQIA+ resources and referrals for your patients. Go to <https://portal.ct.gov/DMHAS/Programs-and-Services/Finding-Services/LGBT-Services>.
- The **National LGBTQIA+ Health Education Center** also offers learning resources on providing competent care for LGBTQ+ individuals.

Inclusive Language

- Parenthood
- Birthing Person, Gestational Parent
- Non-Pregnant Person, Support Person
- Perinatal
- Pregnant People
- Postpartum Parent
- Siblings

Exclusive Language

- Motherhood and Fatherhood
- Mother, Mom
- Father, Husband, Male Partner
- Maternal
- Pregnant Women
- Postpartum Women
- Sister, Brother

Generally, you should avoid using terms that assume a pregnant person is female and married, or even partnered. Also remember there are many ways that individuals refer to people in their family structures. Asking your patients open questions and not making assumptions is always best. To learn more inclusive terms and definitions go to <https://www.hrc.org/resources/glossary-of-terms>.

Screen for SUD

- LGBTQIA+ individuals are subject to many of the same risks and effects of substance use as non-LGBTQIA+ individuals
- Universal screening should be practiced to ensure quality healthcare for LGBTQIA+ patients
- Provide feedback, clear advice, goal setting, and follow-up

In collaboration with the Connecticut Women's Consortium, DMHAS is excited to offer a FREE virtual conference during PRIDE month entitled, Intersectionality and the Gender Continuum on June 10, 2022 from 9am to 4pm. Participants will receive 6 CEC's. To learn more about this conference or to register: <https://womensconsortium.configio.com/pd/660?code=Iax2JbjoTH>

Voices from Patients

- "I identify as a non-binary lesbian. Safety in healthcare for me means that my identity will be affirmed, they have cared for people like me before & that they are educated on varying gender identities & do not seem bothered by having to remember my pronouns. I would appreciate it if I didn't have to constantly explain that there is not cisgendered men involved in my life and that whoever I'm speaking to knows what cisgender means. There is a lot to learn from a non LGBTQ+ perspective but just trying instead of disregarding it all goes a long way."
- "I identify as a gay man. Providers should ask questions about LGBTQ+ care with interest and care. If you are unsure, just ask. Do not make assumptions about peoples' pronouns, identity, or sexuality preferences. We should not need to justify our lifestyle or relationships to access medical care. Talking about it as a matter of fact and compassion, rather than opinion and judgement, makes a difference."