

Screening of Pregnant Women for Substance Use: An Assessment of Prenatal Care Providers in Santa Clara County

Background

- The largest and only prevalence study of substance use among pregnant women in California was conducted in 1992. It estimated that 11.35% of maternity patients at California hospitals used alcohol, tobacco or other drugs (ATOD) within hours or days of delivery. The prevalence in Santa Clara County is estimated at 9.76% (Vega et al., 1993).
- U.S. Surgeon General Richard H. Carmona, MD, has warned women who are pregnant or who may become pregnant to abstain from alcohol. No amount of alcohol consumption can be considered safe during pregnancy (U.S. Department of Health & Human Services, 2005).
- Healthy People 2010 has set a national goal of increasing the proportion of pregnant women who achieve complete abstinence from alcohol to 94%, with 100% abstinence from illicit drugs (Armstrong et al., 2003).
- The American Medical Association has endorsed universal screening for ATOD among pregnant women, and health services researchers have determined that brief intervention for pregnant women who do use ATOD saves \$7 for every dollar spent (ACOG, 2004).
- Nationwide, obstetricians screen 97% of pregnant women for alcohol use, but only 25% use any standard screening tools, and only 20% know that complete abstinence from alcohol is the only way to avoid adverse alcohol-related pregnancy outcomes (ACOG, 2004).

Research Question:

To what extent are Obstetrician/Gynecologist (OB/GYN) providers in Santa Clara County screening pregnant women for ATOD use?

Methodology

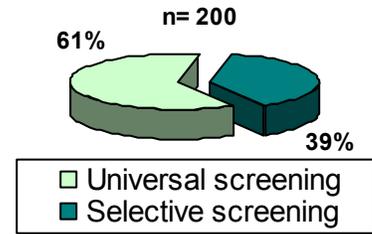
- An anonymous survey was mailed to 200 prenatal providers in Santa Clara County in March, 2006, to assess the current ATOD screening procedures used with pregnant women.
- 200 OB/GYN were recruited from the Public Health Integrated Health System* and the Santa Clara County Medical Association.

Demographics of Provider Survey Respondents

- 96.8 % of respondents were OB/GYN's.
- The largest response rate (43.5%) was between the ages of 36 and 50 years.
- 60% of respondents were White; 35% were Asian/Pacific Islander; 3.3% were African-American; 1.7% were Latino.

Key Findings

- Almost 100% of respondents ask their pregnant clients about tobacco use, but **only 11% screen for alcohol.**
- 88% continue to see women for prenatal care after identifying ATOD use.
- 25% reported that if women who screened positive for ATOD did not return for prenatal care, respondents suspect fear of being reported to Child Protective Services was the cause.
- **Only 35% knew of residential facilities available to pregnant substance-abusing women.**
- **67% reported needing assistance with identifying which women are using substances.**
- 61% believe that there should be universal screening of pregnant women for ATOD while 39% believe screening should be selective.



Characteristics of Universal^a & Selective^b Screening

Respondents using Universal Screening ^a	Respondents using Selective Screening ^b
52.6% are age 36-50	50% are age 51-60
100% ask screening questions using a standard assessment form	70.8% ask screening questions using a standard assessment form
95% ask screening questions routinely	62.5% ask screening questions routinely
52.6% perform routine toxicology screening	4.2% perform routine toxicology screening

^a **Universal Screening:** Screening for substance abuse of all women at every prenatal appointment.

^b **Selective Screening:** Screening women based only on suspicion of using substances during pregnancy.

Bibliography

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Limitations: Subjects do not represent all OB/GYN's in Santa Clara County.

Disclaimer: Information on this fact sheet is given for informative and educational purposes only.

For more information: Contact Maternal, Child and Adolescent Health (MCAH), Santa Clara County Public Health Department at 1-800-310-2332.

DATA FACTS

