

# Addressing Gaps in Substance Use Disorder (SUD) Identification and Treatment

## Substance Use in Pregnancy-Associated Deaths in Tennessee (2017-2019)

### By the Numbers

**21%**

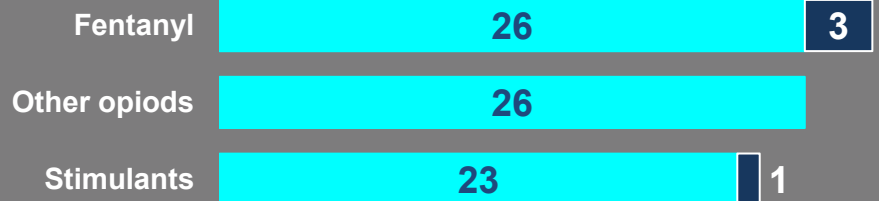
of pregnancy associated deaths were **caused by an overdose**

**57%**

of overdose deaths had **mental health conditions** as a contributing factor

### Most pregnancy-associated overdose deaths involved multiple substances

■ Polysubstance overdose    □ Single substance overdose



**1 in 5** (19%)

Women received no referral or resources during or after pregnancy



**1 in 6** (16%)

Women experience lack of adherence to care



**1 in 10** (9%)

Women experience implicit bias



### With substance use in pregnancy, I'm surrounded by many barriers...

I delivered my baby without having any prenatal care during the pregnancy.

I arrived at the ER pregnant with active substance use and received no care coordination or case management to establish prenatal care when discharged.

I had a history of substance use and had no assessment for it during my prenatal care or delivery.



I visited the ER several times and had no screenings for my substance use.

I visited the ER and had no referral to treatment for my substance use during my postpartum period.

I reported substance use while pregnant in the ER but was discharged without referral.

Need free referral assistance for addiction treatment and recovery services in Tennessee?

Call or text the Tennessee **REDLINE** at **1 (800) 889-9789**.

For victims of domestic violence call **1-800-356-6767** for help.

