

# RENEW

## Review

November 2019

RENEW counseling: Skilled staff; Nutrition-focused

Try the activity on your own or with others from your agency.

### RENEW Review Activity: Counseling moms experiencing opioids

You may have heard about [the opioid crisis](#) and have seen stories in the news. In WIC, you may be seeing pregnant participants who are using opioids, sometimes illegally and sometimes prescribed. Opioid use impacts a baby's health after birth. Learning more about how opioids affects mothers and babies can help WIC staff better support these families.

Learn more – Check out these options

1. WIC nutritionists and breastfeeding coordinators recently heard [a presentation](#) about how the Asante health care organization has been working with families experiencing opioids. Talk with your WIC nutritionist or breastfeeding coordinator about what they learned.
2. Watch an 8-minute video on Asante's "Eat, Sleep, Console" method.
  - Click on this link <https://www.asante.org/services/women-and-children/family-birth-center/>.
  - On the left navigation bar there is a link called "Eat, Sleep, Console Tour" that takes you to the video.
3. Review this handout – [Talking About Substance Use During Pregnancy](#)
4. Take a look at updated [Policy 880 Referrals](#) and the new substance use referral poster.

Think about it

Assessing and referring for substance use can be tricky to say the least. Staff often feel uncomfortable just asking about it. Take a minute to think about how you talk about substance use.

- What implicit biases do you notice in yourself related to substance use?
- What questions or probing questions do you use to assess for substance use?
- What referrals could you make in your area?
- How do you offer a referral for substance use treatment or counseling?

Consider how substance use may impact nutrition-focused counseling

While WIC doesn't do substance use diagnoses or counseling, we can provide related nutrition-focused counseling and a supportive environment where women feel safe in sharing their experiences. After watching the video and reviewing the handout, consider what nutrition-related counseling or support you might provide to a family experiencing opioid use.

- How could you support the participant's breastfeeding goals?
- What are the differences between breastfeeding recommendations for a healthy infant versus a baby experiencing withdrawal?
- How could you identify and focus on the family's strengths?
- How do your opinions, thoughts, and feelings about substance use influence your counseling?

## Case Studies:

A. Gemma injured her back during her pregnancy and was prescribed pain pills (opioids). She is under a doctor's care and has continued to use them to deal with the pain so she can continue to work. She plans to breastfeed her baby when it is born. She is due in 2 weeks.

- What risk, if any, would you assign?
- What referrals, if any, would you make?
- What nutrition-focused counseling would you offer?

B. Natalie is on methadone as part of her treatment for substance use. She is here with her baby, 1-month old Talia. Talia was in the hospital for 2 weeks after delivery due to withdrawal symptoms. Natalie is breastfeeding and hopes to continue at least until Talia is 6-months old.

- What risk, if any, would you assign?
- What referrals, if any, would you make?
- What nutrition-focused counseling would you offer?

## Practice- five-day focus

For the next five days, pay attention to how you assess and refer for substance use.

- a. What implicit bias do you notice in yourself?
- b. What kinds of things do you notice about different participants that impact how you assess?
- c. How do you change how you counsel if a participant discloses substance use?

### Case study risk factors:

**Case Study A:** Assign [Risk 357 – Drug Nutrient Interactions](#). If Gemma continued using opioids beyond the time when they were prescribed, you would assign [Risk 372 – Alcohol and Substance Use](#).

**Case Study B:** Assign [Risk 357 – Drug Nutrient Interactions](#). And, if Talia was hospitalized due to withdrawal symptoms from “neonatal abstinence syndrome”, then [Risk 383](#) could be assigned. Otherwise, it should not be assigned as the condition needs to be specifically diagnosed by the health care provider.