

Special Topic: Considerations for Children & Families Affected by Opioid Use

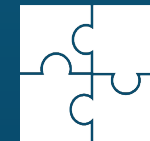
Child Welfare Training Toolkit



National Center on
Substance Abuse
and Child Welfare

Acknowledgement

This content is supported by contract number 75S20422C00001 from the Children's Bureau (CB), Administration for Children and Families (ACF), co-funded by the Substance Abuse and Mental Health Services Administration (SAMHSA). The views, opinions, and content of this presentation are those of the presenters and do not necessarily reflect the views, opinions, or policies of ACF, SAMHSA or the U.S. Department of Health and Human Services (HHS).



National Center on
Substance Abuse
and Child Welfare

Learning Objectives

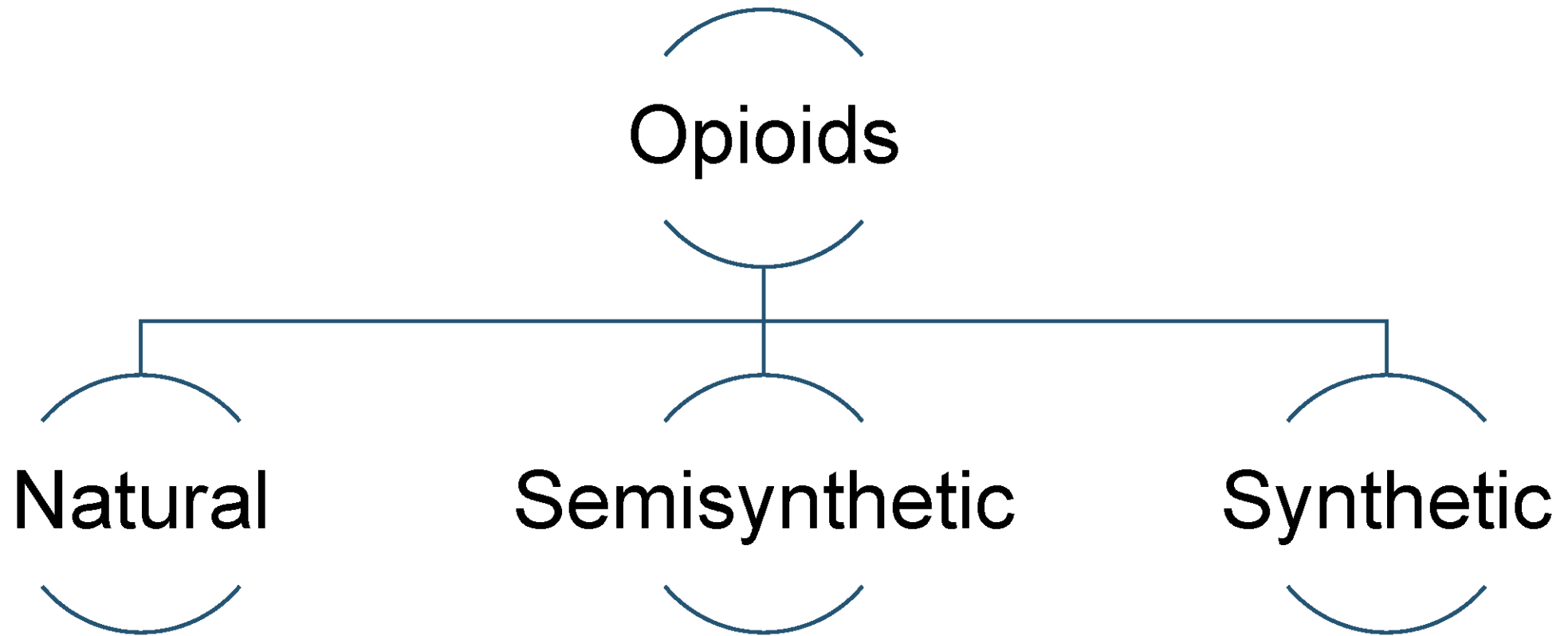
After completing this training,
child welfare workers will:

- Differentiate between different types of opioids and opioid analogs with knowledge of classifications, potency, and effects
- Identify physical indicators of opioid use including long-term physical and psychological effects
- Discuss risk factors and signs of opioid overdose with knowledge of current data trends
- Integrate opioid overdose prevention strategies to mitigate level of risk to children and families
- Recognize benefits of medication for opioid use disorder with knowledge of historical stigma, supporting evidence base for approved medications, and information on short- and long-term treatment options
- Understand special considerations for treatment of opioid use disorders before, during, and after pregnancy

Understanding Opioids: Classifications, Potency & Effects



Opioids: Chemical Structure & Terminology



What Is Fentanyl?

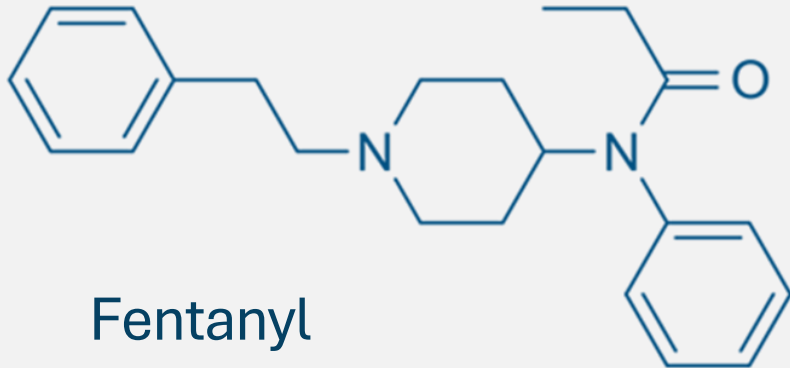
**Highly potent
synthetic opioid**

**Primarily used to treat
severe pain** in post-operative hospital settings

**Schedule II-controlled
substance**

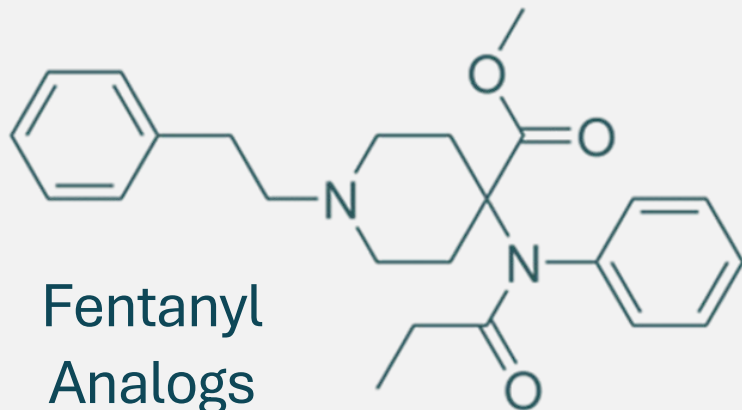
**100x more potent
than morphine**

Fentanyl & Fentanyl Analogs



Fentanyl

Fentanyl is 100x more potent than morphine.



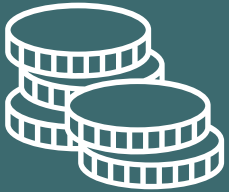
Fentanyl
Analog

Carfentanyl is estimated to be as high as

- 10,000x more potent than morphine
- 100x more potent than fentanyl, and
- 50x more potent than heroin.

Illegal Manufacturing of Fentanyl

Higher potency and cheaper to produce compared to other opioids



U.S. drug supply primarily **from Mexico and China**

Increase in **intentional contamination** with other illicit drugs



How Opioids Affect the Brain & Nervous System

Spinal Cord

Brain Stem

Limbic System





Physical Signs of Opioid Use

Euphoria	Elation	Sedation	Drowsiness	Nodding Off
Dry Mouth	Warm Flushing of the Skin	Heavy Sensation in Arms and Legs	Decelerated Breathing	Upset Stomach/ Diarrhea
Severe Itching	Scabs, Sores, Puncture Wounds	Depression (from drug wearing off)	Clouded Mental Functioning	Weight Loss/ Poor Hygiene



Behavioral Signs of Opioid Use

**Doctor shopping
for prescriptions**

**Poor performance
at work or school**

**Unexplained
periods of absence**

**Stealing
prescriptions from
family or friends**

**Not fulfilling
personal
responsibilities**

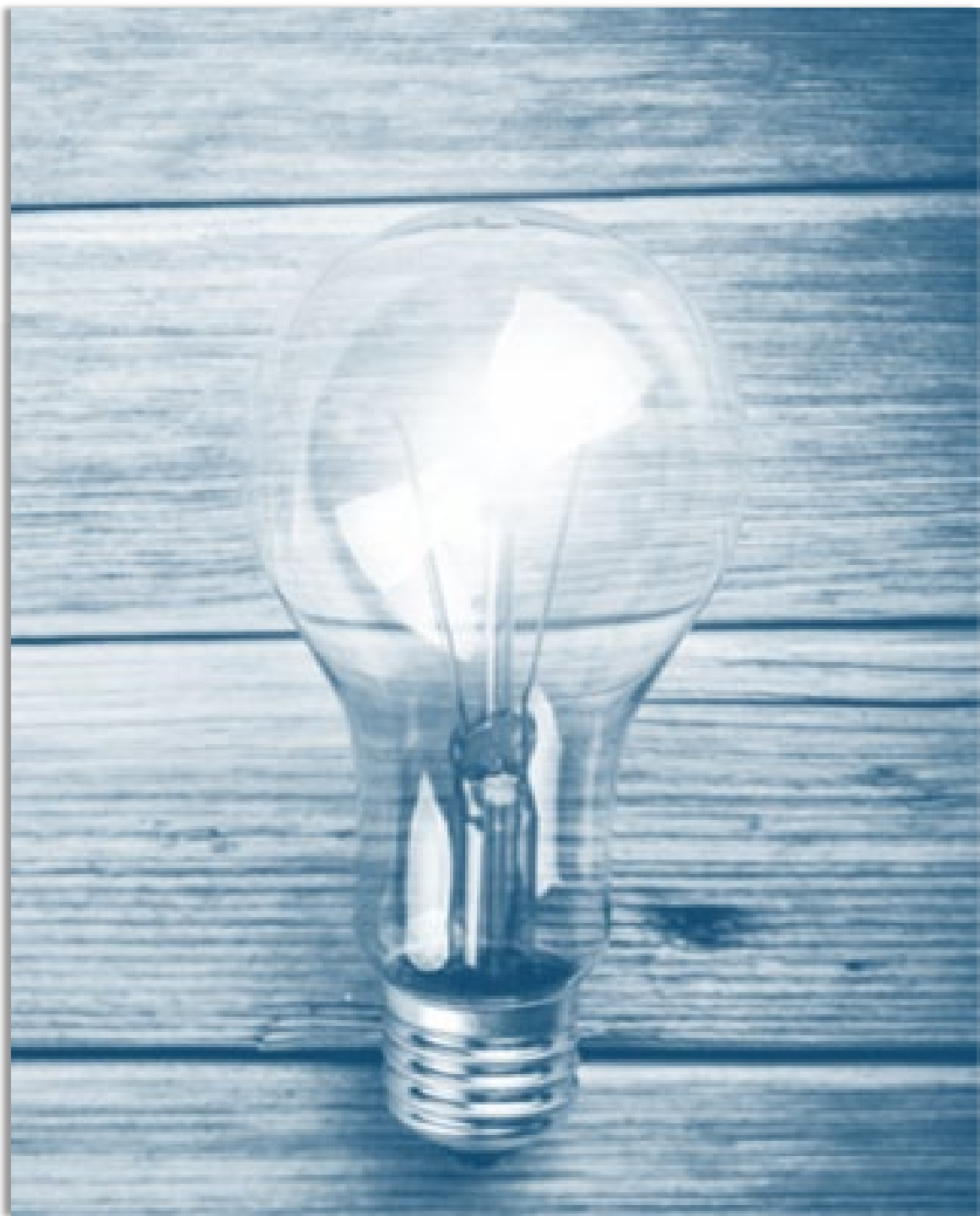
**Increased social
isolation**

Understanding the Psychological & Physical Effects of Opioid Use

Tolerance

Withdrawal

Addiction



Risk Factors for Opioid Overdose

Changes in tolerance levels

Mixing opioids with respiratory depressants

Mixing opioids with stimulants

History of chronic health conditions

History of past overdoses



Signs of an Opioid Overdose



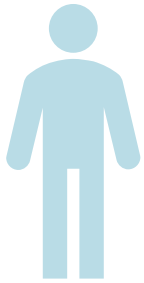
- Unconsciousness
- Slow or shallow breathing
- Faint heartbeat
- Vomiting
- Inability to speak
- Very small pupils
- Limp arms and legs
- Pale skin
- Purple lips and fingernails

Opioid Overdose Death Rates & Emerging Trends



Opioid Trends: National Overdose Death Rates

81,806
Involving
Any Opioid



73,838
Involving
Synthetic
Opioids



14,716
Involving
Prescription
Opioids



5,871
Involving
Heroin



Total Drug-Involved Overdose Deaths in 2022 **107,941**



Safety & Risk Considerations: Opioid-Related Deaths Ages 1-17

985 Deaths spanning 2018-2022

Opioid Ingestion

- 63% involved prescription opioids including in combination with fentanyl
- 44% involved illegally made fentanyl including fentanyl analogs
- 7% involved heroin



By Age

- 67% Adolescents ages 15-17
- 21% Infants and toddlers ages 1-4
- 10% Youth ages 10-14
- 2% Children ages 5-9



Environment

- 93% of opioid-related deaths occurred in response to accidental overdose/acute intoxication (with 5% attributed to intentional poisoning)
- 64% of these deaths occurred at home whereas 13% occurred at a friend's house
- 46% were coded as urban, followed by 41% suburban, and 13% rural



Safety & Risk Considerations: Increased Access & High Potential for Misuse



8.5M

Age 12 or Older Misused Prescription Pain Medication

44.6%

Obtained access
through a friend or
relative's unused
prescription



Increased Access

45.1%

Hydrocodone

30.7%

Oxycodone

Codeine **22.2%**

High Potential for Misuse

Opioid Trends: Fentanyl Combined with Xylazine

- Xylazine is a powerful sedative
- Fentanyl-related deaths with xylazine detected increased by 276% between 2019-2022
- Prompting executive designation authority for the first time in U.S. history



Opioid Trends—Let's Talk About It!



Large Group Discussion



Opioid Overdose Prevention Strategies

Opioid Overdose Prevention Strategies in the Context of Child Well-Being—Let's Talk About It!

Large Group Discussion

Examples of Opioid Overdose Prevention Strategies in Child Welfare



Providing lockboxes for medications

Referring to treatment services

**Connecting children to age-appropriate
therapeutic and mental health services**

Teaching positive parenting skills

**Removing children from the home
when they are in immediate danger**

**Incorporating healthy family routines
to aid in reunification and recovery**

Safe Storage & Proper Disposal of Opioids

Steps to Ensure In-Home Safety:



Lock Box



Pharmacy
Drop Off Box



Mail Back
Programs



FDA Flush List



Trash Disposal



Fentanyl Test Strips

Benefits

- + Detect the presence of fentanyl and fentanyl analogs
- + Effective with all different types and forms of illicit drugs
- + Cost effective method for reducing harm and saving lives

Drawbacks

- Do not provide any information about the quantity or potency of the fentanyl detected
- Can not detect the presence of any other harmful substances
- Remain illegal in some states due to drug paraphernalia laws

Naloxone



Opioid antagonist

Rapidly reverses an opioid overdose

Restores normal breathing

Administered as an injectable
or nasal spray

Jessica's Story

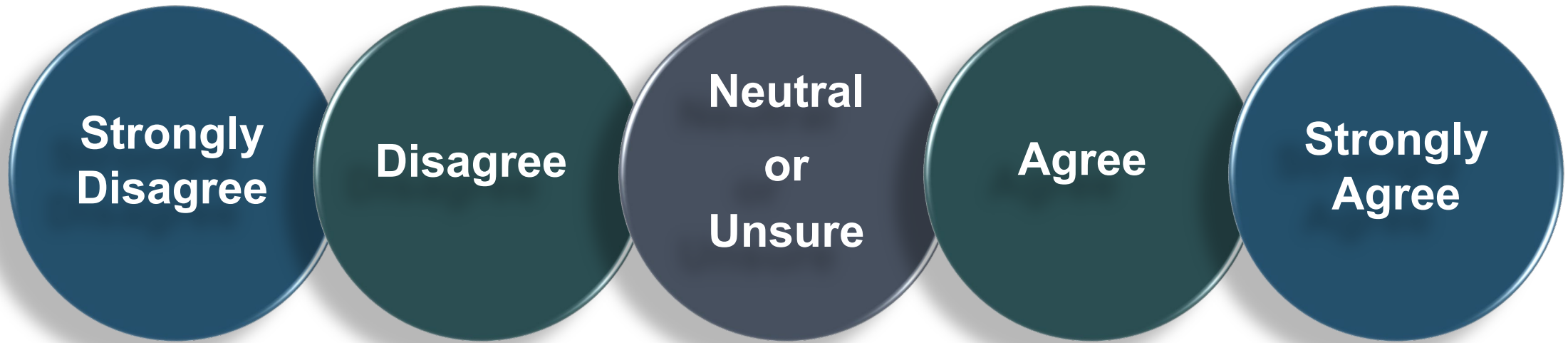
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[Digital Story on Narcan Opioid Overdose Reversal](#)

Medications for Opioid Use Disorder (MOUD)



MOUD Values Discussion



-
- Treatment programs that provide medication for opioid use disorders are just substituting one addiction for another.
 - The stigma associated with medication for opioid use disorders prevents parents from seeking treatment.
 - Medication for opioid use disorders should be made available to pregnant women.
 - Opioid-exposed newborns and their parents should be referred for child welfare intervention regardless if the exposure was illicit or provider-prescribed (as in treatment for medication for opioid use disorders).

MAT or MOUD: Why This Matters

Medication-assisted treatment (MAT) implies that medication plays a secondary supportive role to other forms of OUD treatment

MOUD reinforces that medication is its own form of OUD treatment



Reducing MOUD Stigma

MOUD is safe and effective
when taken as prescribed

MOUD treatment
is considered recovery



What Are These Medications & How Do They Work?

- Reduce or eliminate opioid withdrawal symptoms
- Reduce risk of opioid overdose or death

Methadone

+

Buprenorphine

Methadone

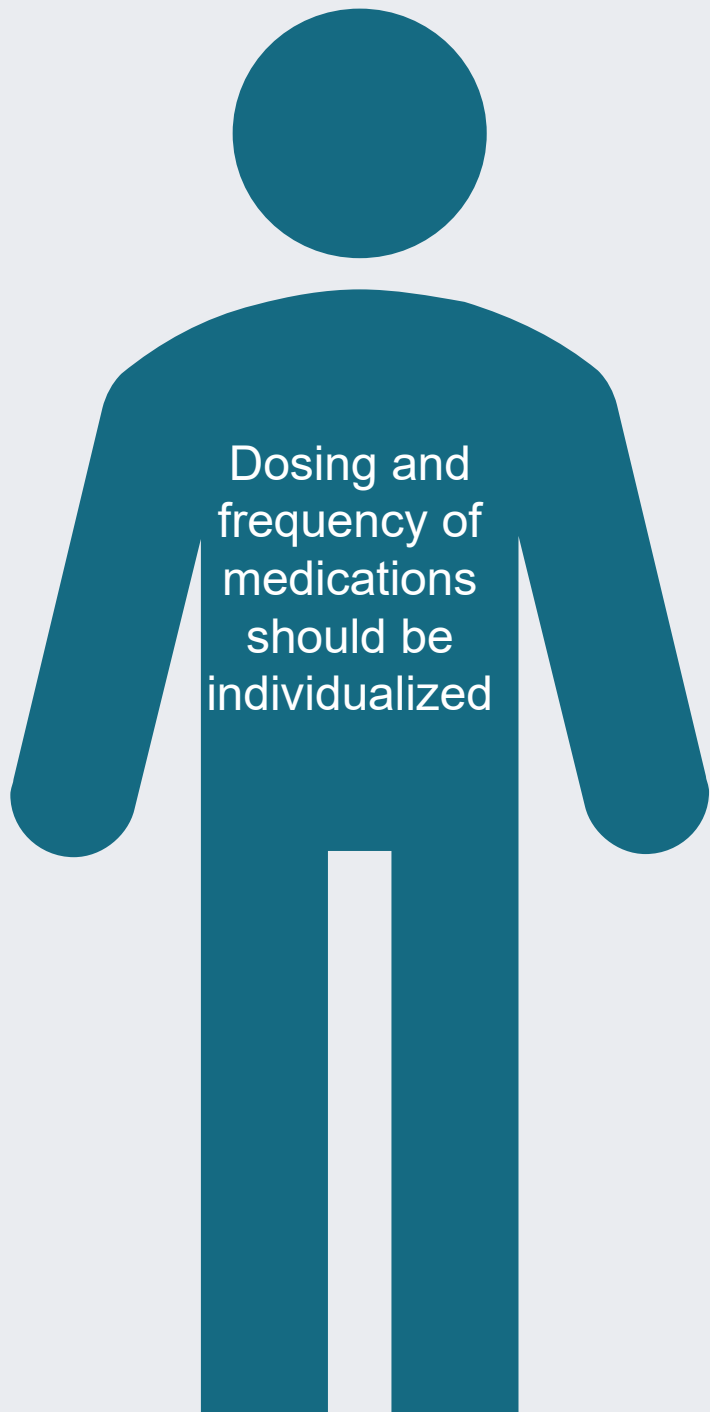
+

Buprenorphine

+

Naltrexone

- Blunt or block effects of illicit opioids
- Reduce or eliminate opioid cravings



MOUD Treatment

Length of treatment includes both short-term and long-term options:

Medically Supervised Withdrawal

Medication Tapering

Maintenance Treatment





MOUD Benefits



Reduces illicit opioid use



Retains individuals in treatment



Reduces risk of opioid overdose and death



Lessens healthcare usage and treatment costs

Treatment for Opioid Use Disorder Before, During & After Pregnancy





MOUD During Pregnancy

Guidance from ACOG and SAMHSA:

Methadone or Buprenorphine

Behavioral Therapies

Medical Services



Neonatal Abstinence Syndrome (NAS) vs Neonatal Opioid Withdrawal Syndrome (NOWS)

NAS is a treatable condition that infants may experience as a result of prenatal exposure to certain substances including opioids

NOWS is a related term referring to the symptoms that infants may experience as a result of exposure to opioids specifically

NAS/NOWS symptoms may include



Severe irritability



Difficulty feeding



Gastrointestinal
issues



Respiratory
problems



Neurological
seizures

Treatment Options for NAS/NOWS



Non-Pharmacological



Pharmacological



Important
Considerations for
NAS/NOWS
Treatment:

Type of infant prenatal substance exposure

Infant's overall health
(including length of mother's pregnancy term)



Non-Pharmacological Treatment Strategies for NAS/NOWS

Allowing infant to stay in the same room as mother

Encouraging skin-to-skin contact, swaddling, gentle rocking, and other positioning methods to increase infant's comfort

Providing frequent feedings of high calorie formula or breast milk in small quantities to help improve infant's feeding habits

Limiting sound and light exposure to help reduce over stimulation

Use of Pharmacological Treatment for NAS/NOWS



Medications can be used to treat moderate to severe withdrawal symptoms

First-line medications include liquid oral morphine or liquid oral methadone

Adjuvants for severe NAS relief also include clonidine or phenobarbital

Benefits of medication use include control and prevention of seizures, reduced agitation, improved feeding, and digestive health



Post Discharge Care for Infants Treated for NAS

Referral and Linkage:

- Home visiting programs
- Case management services
- Access to specialized health care providers

Best Practice Example:

- Plans of Safe Care

Unique Risks of Neonatal Abstinence Syndrome



**Difficult to interpret
cues from infants**



**Parenting challenges
caused by difficult to
interpret cues**



**Consequences of
lack of training and
protocols among
hospital staff**

NAS Treatment & Collaborative Discharge Planning

Small Group Discussion

- **Do your local community birthing hospitals universally screen for infant prenatal substance exposure (or IPSE) including NAS?**
- **What types of non-pharmacological strategies are being used for treatment of NAS infants and their mothers?**
- **What role does child welfare play in the treatment and collaborative discharge planning for NAS infants and their mothers?**
- **Are there any current initiatives in place in your local communities to support improved collaborative practice for prenatally exposed infants and their families?**
- **Have agencies or organizations in your community implemented Plans of Safe Care?**

Small Group Discussion Questions

Postpartum Treatment Considerations for Opioid Use Disorders

Increased risk for overdose 7-12 months post birthing event

May require MOUD dosing adjustments due to physiological changes

All plans for discontinuation of MOUD should be made with the mother's healthcare team



**Recovery
Is Possible!**



Doorway Recovery Videos

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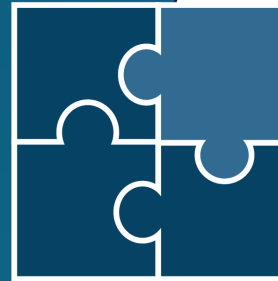
[Fay's Story: Learning to Love Herself All Over Again](#)

Contact

Contact the NCSACW TTA Program

Connect with programs that are developing tools and implementing practices and protocols to support their collaborative

Training and technical assistance to support collaboration and systems change



National Center on Substance Abuse and Child Welfare



<https://ncsacw.acf.hhs.gov/>



ncsacw@cffutures.org



Toll-Free @ 1-866-493-2758

References

References, 1 of 4

- American College of Obstetricians and Gynecologists. (2017). Opioid use and opioid use disorder in pregnancy. Committee opinion No. 711. *Obstetrics & Gynecology*, 130(2), e81–e94. <https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2017/08/opioid-use-and-opioid-use-disorder-in-pregnancy>
- American Medical Association. (2017). *Promote safe storage and disposal of opioids and all medications*. American Academy of Addiction Psychiatry. <https://www.aaap.org/wp-content/uploads/2017/04/opioid-safe-storage-and-disposal.pdf>
- Anderson, L. A. (2023). *How do opioids affect the brain?* Drugs.com. <https://www.drugs.com/medical-answers/opioids-affect-brain-3564739/>
- Center for Drug Evaluation and Research. (2021). *Safe opioid disposal - Remove the risk outreach toolkit*. U.S. Food and Drug Administration. <https://www.fda.gov/drugs/safe-disposal-medicines/safe-opioid-disposal-remove-risk-outreach-toolkit>
- Centers for Disease Control and Prevention. (2024). *Fentanyl test strips: A harm reduction strategy*. National Center for Injury Prevention and Control, Division of Drug Overdose Prevention. https://www.cdc.gov/stop-overdose/safety/?CDC_AAref_Val=https://www.cdc.gov/stopoverdose/fentanyl/fentanyl-test-strips.html#cdc_preparedness_risks-fentanyl-test-strips-a-harm-reduction-strategy
- Centers for Disease Control and Prevention. (2025). *Treatment for opioid use disorder before, during, and after pregnancy*. U.S. Department of Health and Human Services. <https://www.cdc.gov/opioid-use-during-pregnancy/treatment/index.html>
- Children's Hospital of Philadelphia. (2023). *CHOP researchers find rate of fatal opioid poisonings among children more than doubled over 13-year span*. <https://www.chop.edu/news/chop-researchers-find-rate-fatal-opioid-poisonings-among-children-more-doubled-over-13-year>

References, 2 of 4

- Das, S., Egan, D., Fraifeld, B., & Trainum, B. (2022). *Opioid use disorder*. American Psychiatric Association. <https://www.psychiatry.org/patients-families/opioid-use-disorder>
- Davis, C. (2023). *Legality of drug checking equipment in the United States*. Network for Public Health Law. <https://www.networkforphl.org/resources/legality-of-drug-checking-equipment-in-the-united-states/>
- Drug Enforcement Administration. (2025). *Carfentanil: A synthetic opioid unlike any other*. U.S. Department of Justice. <https://www.dea.gov/stories/2025/2025-05/2025-05-14/carfentanil-synthetic-opioid-unlike-any-other>
- Jansson, L. M., & Velez, M. (2015). Lactation and the substance-exposed mother-infant dyad. *The Journal of Perinatal & Neonatal Nursing*, 29(4), 277–E1. <https://doi.org/10.1097/JPN.000000000000108>
- Johns Hopkins Bloomberg School of Public Health. (2022). *Fentanyl 101: What everyone should know*. <https://opioidprinciples.jhsph.edu/fentanyl-101-what-everyone-should-know/>
- National Center for Fatality Review and Prevention. (2024). *Opioid-related deaths in children ages 1 to 17*. <https://ncfrp.org/center-resources/quick-looks/opioid-related-deaths-in-children-ages-1-to-17/>
- National Center on Substance Abuse and Child Welfare. (n.d.). *Neonatal abstinence syndrome*. Administration for Children and Families, Substance Abuse and Mental Health Services Administration. <https://ncsacw.acf.hhs.gov/topics/neonatal-abstinence-syndrome.aspx>
- National Center on Substance Abuse and Child Welfare. (2024a). *Tip sheet #1 Harm reduction in the context of child well-being: An overview for serving families affected by substance use disorders*. Administration for Children and Families, Substance Abuse and Mental Health Services Administration. <https://ncsacw.acf.hhs.gov/files/harm-reduction-part1.pdf>

References, 3 of 4

- National Center on Substance Abuse and Child Welfare. (2024b). *Tip sheet #2 Harm reduction in the context of child well-being: Key considerations for policymakers*. Administration for Children and Families, Substance Abuse and Mental Health Services Administration. <https://ncsacw.acf.hhs.gov/files/harm-reduction-part2.pdf>
- National Center on Substance Abuse and Child Welfare. (2024c). *Tip sheet #3 Harm reduction in the context of child well-being: Practice recommendations for child welfare workers*. Administration for Children and Families, Substance Abuse and Mental Health Services Administration. <https://ncsacw.acf.hhs.gov/files/harm-reduction-part3.pdf>
- National Institute on Drug Abuse. (2022). *Naloxone drugfacts*. National Institutes of Health, U.S. Department of Health and Human Services. <https://nida.nih.gov/publications/drugfacts/naloxone>
- National Institute on Drug Abuse. (2024a). *Drug overdose death rates*. National Institutes of Health, U.S. Department of Health and Human Services. <https://nida.nih.gov/research-topics/trends-statistics/overdose-death-rates>
- National Institute on Drug Abuse. (2024b). *Opioids*. National Institutes of Health. <https://nida.nih.gov/research-topics/opioids>
- Substance Abuse and Mental Health Services Administration. (2018). *Clinical guidance for treating pregnant and parenting women with opioid use disorder and their infants*. HHS Publication No. (SMA) 18-5054. U.S. Department of Health and Human Services. <https://store.samhsa.gov/product/clinical-guidance-treating-pregnant-and-parenting-women-opioid-use-disorder-and-their>
- Substance Abuse and Mental Health Services Administration. (2021). *Medications for opioid use disorder. Treatment improvement protocol (TIP) series 63*. Publication No. PEP21-02-01-002. U.S. Department of Health and Human Services. <https://store.samhsa.gov/product/TIP-63-Medications-for-Opioid-Use-Disorder-Full-Document/PEP21-02-01-002>

References, 4 of 4

- Substance Abuse and Mental Health Services Administration. (2023). *Key substance use and mental health indicators in the United States: Results from the 2022 National Survey on Drug Use and Health* (HHS Publication No. PEP23-07-01-006, NSDUH Series H-58). Center for Behavioral Health Statistics and Quality. <https://www.samhsa.gov/data/sites/default/files/reports/rpt42731/2022-nsduh-nnr.pdf>
- Substance Abuse and Mental Health Services Administration. (2025). *SAMHSA overdose prevention and response toolkit*. Publication No. PEP23-03-00-001. U.S. Department of Health and Human Services. <https://www.samhsa.gov/resource/ebp/opioid-overdose-prevention-toolkit>
- Teater, D. (n.d.). *The psychological and physical side effects of pain medications*. National Safety Council. <https://www.nsc.org/getmedia/0113f259-d2c5-4a3e-abca-f05299f65ec2/adv-rx-side-effects-wp.pdf>
- U.S. Drug Enforcement Administration. (2021). *Facts about fentanyl*. U.S. Department of Justice. <https://www.dea.gov/resources/facts-about-fentanyl>
- Velez, M., & Jansson, L. M. (2008). The Opioid dependent mother and newborn dyad: Non-pharmacologic care. *Journal of Addiction Medicine*, 2(3), 113–120. <https://doi.org/10.1097/ADM.0b013e31817e6105>
- The White House. (2023). *Fact sheet: In continued fight against overdose epidemic, the White House releases national response plan to address the emerging threat of fentanyl combined with xylazine*. Biden White House Archives. [https://bidenwhitehouse.archives.gov/briefing-room/statements-releases/2023/07/11/fact-sheet-in-continued-fight-against-overdose-epidemic-the-white-house-releases-national-response-plan-to-address-the-emerging-threat-of-fentanyl-combined-with-xylazine/#:~:text=2022%2D002\)%2C%20the%20goal,U.S.%20census%20regions%20by%202025.](https://bidenwhitehouse.archives.gov/briefing-room/statements-releases/2023/07/11/fact-sheet-in-continued-fight-against-overdose-epidemic-the-white-house-releases-national-response-plan-to-address-the-emerging-threat-of-fentanyl-combined-with-xylazine/#:~:text=2022%2D002)%2C%20the%20goal,U.S.%20census%20regions%20by%202025.)

Resources

Resources, 1 of 2

- American Academy of Pediatrics: [*America's Opioid Crisis: The Unseen Impact on Children*](#) (2018)
- American Academy of Pediatrics: [*State and National Opioid Fact Sheets*](#) (2022)
- The American College of Obstetricians and Gynecologists: [*Committee Opinion No. 711: Opioid Use and Opioid Use Disorder in Pregnancy*](#) (2017)
- California Health Care Foundation: [*Opioid Safety Toolkit: Emerging Options for Neonatal Abstinence Syndrome \(NAS\)*](#) (2019)
- Centers for Disease Control and Prevention: [*Understanding the Opioid Overdose Epidemic*](#) (2025)
- Health Resources and Services Administration - Maternal and Child Health: [*Addressing the Opioid Epidemic in Maternal and Child Health Fact Sheet*](#) (2019)
- Health Resources and Services Administration - Maternal and Child Health: [*HRSA's Home Visiting Program: Supporting Families Impacted by Opioid Use and Neonatal Abstinence Syndrome*](#) (2018)
- National Association of State Alcohol and Drug Abuse Directors: [*Opioids Fact Sheet-Version V*](#) (2018)
- National Center on Substance Abuse and Child Welfare: [*A Collaborative Approach to the Treatment of Pregnant Women with Opioid Use Disorders: Practice and Policy Considerations for Child Welfare, Collaborating Medical, and Service Providers*](#) (2016)
- National Center on Substance Abuse and Child Welfare and the Office of Civil Rights, Video Series: [*Part 1: Civil Rights Protections for Individuals with a Disability: The Basics*](#); [*Part 2: Civil Rights Protections for Individuals with an Opioid Use Disorder; Medication-Assisted Treatment and Common Misconceptions*](#); [*Child Welfare Case Staffing: Social Worker and Supervision*](#); and [*Child Welfare Case Staffing: Child Welfare Court Case*](#) (2021)

Resources, 2 of 2

- National Center on Substance Abuse and Child Welfare: [Tip Sheet #1 Harm Reduction in the Context of Child Well-Being: An Overview for Serving Families Affected by Substance Use Disorders](#) (2024)
- National Center on Substance Abuse and Child Welfare: [Tip Sheet #2 Harm Reduction in the Context of Child Well-Being: Key Considerations for Policymakers](#) (2024)
- National Center on Substance Abuse and Child Welfare: [Tip Sheet #3 Harm Reduction in the Context of Child Well-Being: Practice Recommendations for Child Welfare Workers](#) (2024)
- National Perinatal Association: [Perinatal Substance Use Webpage](#)
- Office of the Assistant Secretary for Planning and Evaluation: [Research Brief: Substance Use, the Opioid Epidemic and the Child Welfare System: Key Findings from a Mixed Methods Study](#) (2018)
- [Ohio Perinatal Quality Collaborative Website](#) (2022)
- Substance Abuse and Mental Health Services Administration: [SAMHSA's Overdose Prevention and Response Toolkit](#) (2025)
- U.S. Department of Health and Human Services: [Opioids Webpage](#) (n.d.)
- U.S. Food and Drug Administration: [Safe Opioid Disposal - Remove the Risk Outreach Toolkit](#) (2021)