

How Women in Recovery Navigate Pregnancy, Postpartum, and Early Motherhood

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Background

- Maternal opioid use disorder (OUD) during the perinatal period significantly impacts the mother and infant.
- Prior research has focused on processes healthcare providers use to guide the care of women and their infants impacted by OUD.
- In the perinatal period, best practice for OUD includes medications for opioid use disorder.
- A comprehensive look at the processes women use during pregnancy to self manage OUD has not been examined.

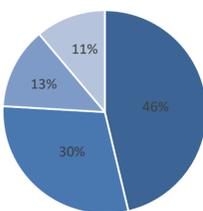
Purpose

- To develop a situation-specific theory to explain processes women use to self-manage their recovery from opioid use disorder during pregnancy and early motherhood.

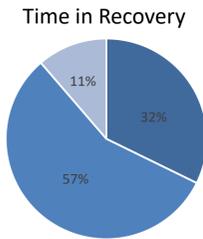
Participant Characteristics

- 16 Participants
- Mean age 31.5 years

Pregnancy History

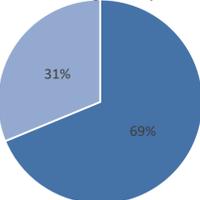


Time in Recovery



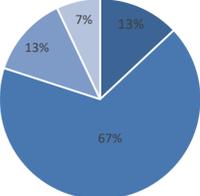
■ < 1 year ■ 1-5 years ■ > 5 years

MOUD Use Prior to Pregnancy



■ Yes ■ No

Race/Ethnicity



■ Black ■ White ■ Hispanic/White ■ Hispanic/Black/White

Methods

Design

- Constructivist grounded theory approach

Data Collection

- Individual, semi-structured interviews

Analysis

- Data collection and analysis occurred concurrently
- Constant comparative methods

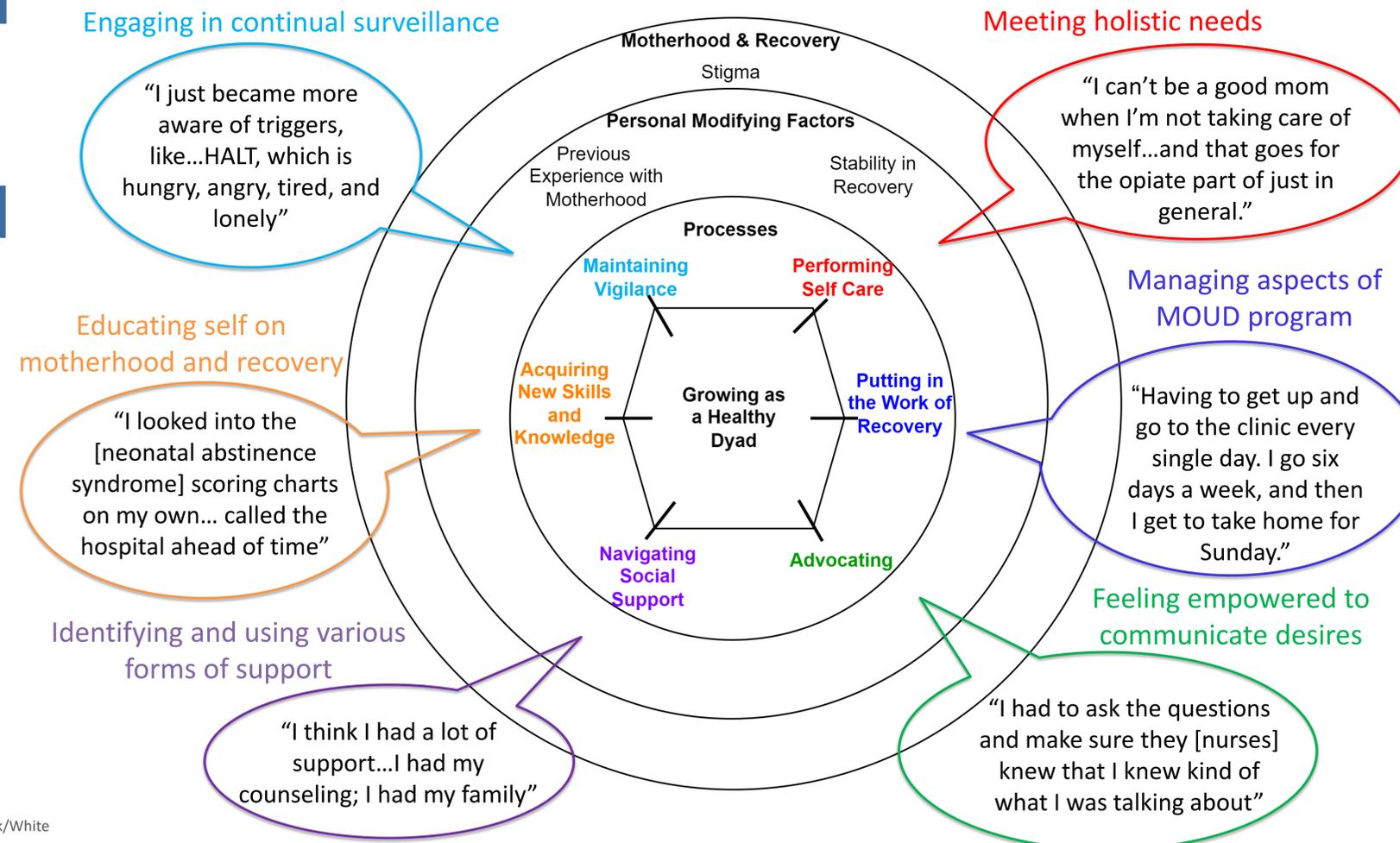
Recruitment

- Snowball sampling through local treatment centers and social media platforms
- Inclusion criteria:
 - English-speaking
 - 18 years of age or older
 - Live in the United States
 - Within the first year after birth
 - Using medications for OUD

Results

- Pregnancy and Early Parenting in Recovery: A Situation Specific Self-Management Theory
- Women negotiate two identities, Mother and Person in Recovery.
- Six processes are used to grow as a healthy dyad.
- Three factors impact processes:
 - Previous experience with motherhood
 - Stability in recovery
 - Stigma

Theory: Pregnancy and Early Parenting in Recovery



Conclusion

- Mothers who use medications for OUD actively engage in processes to self-manage their recovery and mothering.
- Enhancing engagement in each process will support self-management efforts leading to improved health outcomes for the dyad.
- Theory-driven support services that build on women's strengths and account for personal modifying factors are needed.
- Processes of self-management may differ in individuals following a different recovery pathway.

References



Let's Connect



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