



# Examining the health system barriers for pregnant opioid users in north Georgia



By Joëlle Walls

Evelina Sterling, assistant professor of sociology at KSU, conducts public health translational research as related to addiction disorders and mental health, most notably health disparities in north Georgia.

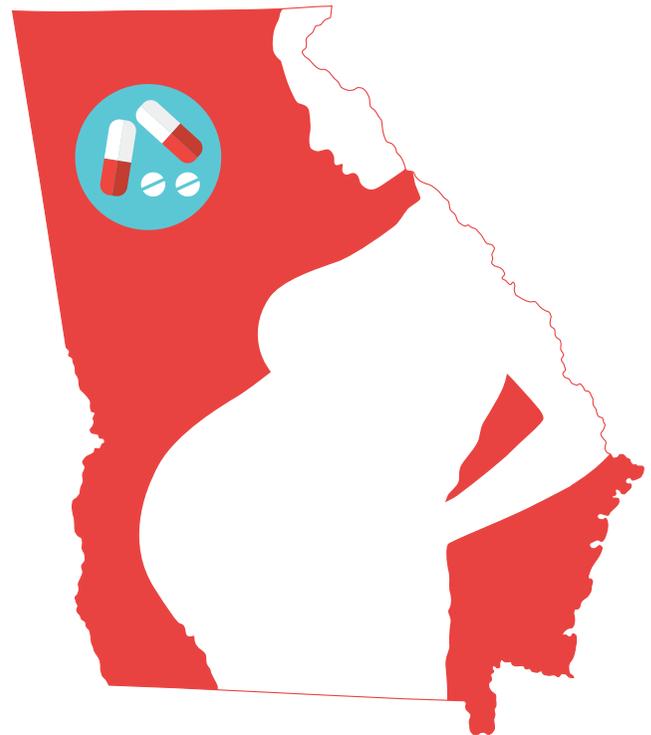
In support of her recent research on system barriers encountered by pregnant opioid users, she was awarded an \$18,000 grant in early fall of 2018 from the Georgia Health Foundation. The private foundation,

dedicated to improving the health of Georgians, presented the grant to Sterling at its annual awards luncheon in December.

She is using this grant to conduct qualitative research and a policy analysis, examining the system barriers for treatment of pregnant opioid users in north Georgia.

“When you look at the epidemiological maps in terms of opioid use, you can track the usage from West Virginia and Kentucky to Tennessee with north Georgia as the next area to be affected,” said Sterling. “Although there are policies and guidelines in place to protect opioid users and encourage them to seek treatment, the pregnant opioid users are falling through the cracks because nobody is interpreting those policies in the same way.”

Sterling explained that there are a number of other complex factors contributing to the lack of coordinated access of health resources for this underserved population. These women are not seeking prenatal care because they are afraid to be identified as opioid users.



In turn, drug treatment providers do not recommend that pregnant opioid users quit entirely at once because it can have an effect on the fetus or cause miscarriage. Criminal justice issues include possible punitive consequences for the women such as losing custody of their children during the transition to drug recovery.

Thus, she said her research is an essential first step to identify the barriers within this fragmented system and then develop a toolkit – a list of recommendations – to facilitate the appropriate processes in directing pregnant opioid users toward treatment options as quickly as possible.