

SUBSTANCE- USING WOMEN AND PREGNANCY: EXPLORING CLIENT ENGAGEMENT AND COMPLIANCE WITH HUMAN SERVICE EXPECTATIONS

Authors: Jennette Mcgrory, Jan Breckenridge, Jane Mowll

^{1.} *Nepean Blue Mountains Area Health Service, Sydney, Australia* ² *University of New South Wales, Sydney Australia* ³ *University of New South Wales, Sydney Australia*

Presenter's email: Jennette.mcgrory@health.nsw.gov.au

Introduction / Issues: Practice wisdom and select research suggests for women who use substances in pregnancy, service delivery decisions and outcomes, including the removal of children, are substantially affected by various and at times conflicting, practitioner assessments of their engagement and compliance with their respective service requirements. This research identifies characteristics of a specific cohort of these women, providing one of the first Australian datasets about women who use substances in pregnancy. Co-morbidities identified by practitioners, referrals to services and initial uptake of referrals are examined.

Method / Approach: This paper presents tentative findings from Phase One of a mixed methods project. Case files are reviewed for a sample comprising 67 women who accessed a health service in Sydney, Australia.

Key Findings: A high rate of co-morbidities (97%) and child protection involvement (93%) were identified, with over a third having had at least one child removed. Individual women were referred to up to nine professionals/services, with a quarter of the sample referred to over five professionals/ services. For the various services, the percentage of women taking up the referral and attending at least once ranged between 42% and 72%, leaving a high proportion of women not accessing these services despite high needs.

Discussions and Conclusions: A siloed service structure creates challenges for clients navigating a system that requires engagement with a myriad of services. There is a gap in robust evidence examining women's own understanding of practitioner expectations of their engagement and compliance, and how their responses may determine whether they keep their child post birth.

Implications for Practice or Policy: Phase 2 will examine the factors or circumstances (personal, social and service dimensions) these women identify as facilitating or hindering their engagement and compliance, towards assisting services and practitioners to reduce the barriers for these women and enhance engagement and compliance with service plans.

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