Details:
Topic: Neonatal Abstinence Syndrome and its effects, along with solutions to try and fix this issue.
Purpose: To inform my audience about what NAS is, the effects it has on mothers and, specifically, babies, and some actions that can be taken to try and help babies born with this condition.
Type of outline: Topical (Advocacy)

Introduction:

Attention getter: Imagine you’re visiting a friend or family member in the hospital who had a baby and while you’re walking past the nursery you see that one of the babies looks a little different than the others. He is shaking and crying uncontrollably, and it seems like he might be having a seizure. This baby has NAS, also known as Neonatal Abstinence Syndrome. Sadly, this hypothetical scenario is becoming more and more common in our country, and specifically in Ohio today.

Thesis: By trying to prevent NAS in babies before they are even born or learning where to place a baby with NAS once born, we will be able to prevent this condition in babies, and treat the symptoms of NAS for infants that unfortunately have this condition.

Preview: Today, I would like to explain what Neonatal Abstinence Syndrome is, the magnitude of this issue, and the effects that it has on babies being born today. Then, my partner Katie Miller will explain a few solutions to this epidemic, explaining how to solve the effects that this problem creates.

Body:

I. Problem: In Ohio there are many neonates being born to mothers who have addictions to opioids and therefore suffer the consequences of having NAS.

A. Definition: According to The Ohio Department of Health, this condition, otherwise known as Neonatal Withdrawal Syndrome, creates “symptoms associated with
the abrupt withdrawal of opioids and other drugs when infants are born to mothers who were taking these substances” (“Neonatal Abstinence”, 2015), such as “seizures, excessive crying, and breathing problems” (Ohio’s Appalachian”, 2016).

PUT UP SLIDE! - We are going to watch a 10 second video of a neonate with NAS, and as you watch, notice the different types of symptoms that the baby is experiencing as a result of this condition.

As you can see, this baby has already had an unfortunate start to life.

TRANSITION: A couple ways that babies get to this point is often because their mothers suffer with quitting their addictions due to a few different reasons. These include not having the best support group and insufficient funds for treatment.

PUT UP SLIDE!

TRANSITION: With these two restrictions that mothers may face, the opioid epidemic has been growing over the past few years. According to The National Institute on Drug Abuse, on the screen you can see how the rate of maternal opiate use has increased over the last few years” (“Dramatic Increases”, 2015). As you can see, the rate of babies being born as a result of NAS was 1.19 out of 1000 live births in 2000 compared to 5.63 in 2009. As a result of the increased number of maternal opiate use, it’s clear to see that the rate of NAS has also increased.

1. Magnitude (stats)-
a) Let’s take a look at the rates of babies being born with NAS across the United States as a whole. In the USA the CDC found that “In 1999 the rate of NAS was at 1.5/1000 births and has jumped to 6/1000 births in 2013” (“Long-Term Outcomes”, nd) PUT UP SLIDE!

b) Narrowing our region down to Ohio, “The rates for babies born with NAS quadrupled from 2.2 around [2006] to 8.8 around [2011]” (Long-Term Outcomes, nd). And more recently, these rates have increased to about “12.3 between 2011 and 2015” (“Number”, nd) PUT UP SLIDE!

c) Comparing 3 regions, the third being Greene county, you can see that the rates in Ohio and more specifically in Greene county are about double the national average. PUT UP SLIDE!

TRANSITION: Now that we were able to see the magnitude of the opioid epidemic by examining the rates of NAS across America, throughout Ohio, and in Greene county, let’s take a look at the effects that this syndrome has on babies, besides the immediate symptoms at birth.

B. Effects:

1. **First**, babies with NAS are more likely to end up in foster homes.

   According to Dr. DeGarmo (LIKE CAR), “as the number of babies born to opium-addicted parents continues to skyrocket, there is also an increase in finding homes for these children. Many of them are placed into foster care — a **foster care system that struggles** to keep up with this increasing number”. (DeGarmo, 2017).
Along with higher chances of ending up in foster care, these babies have a few consequences that they have to deal with as they get older.

2. **Second:** According to the Seattle Children’s Hospital research team, some of these challenges may include “chronic stress, family instability, mistrust of healthcare, inconsistent caregiving”, and as we mentioned previously, “out-of home placements” (“Long-Term Outcomes”, nd).

**Conclusion:**

As you can see, there are many effects that infants have to face as a result of having NAS. Since the rates of mothers using opioids increases and more babies are being born with this disease, we are able to see that there is a real need for intervention not only for the babies, but for the mothers as well. **TRANSITION INTO KATIE’S SPEECH:** Today I have talked about what Neonatal Abstinence Syndrome is, the magnitude it has on neonates today, and the effects it has on the babies and their families. Now, my partner Katie is going to reveal to us a few solutions that might help this issue, and then inform us on how these solutions solve the effects of NAS.
References


5. “Number of Neonatal Abstinence Syndrome (NAS) Hospitalizations and the Average NAS Rate by County of Residence, Ohio 2011-2015.” Ohio Department of Health, Ohio Hospital Association,
