

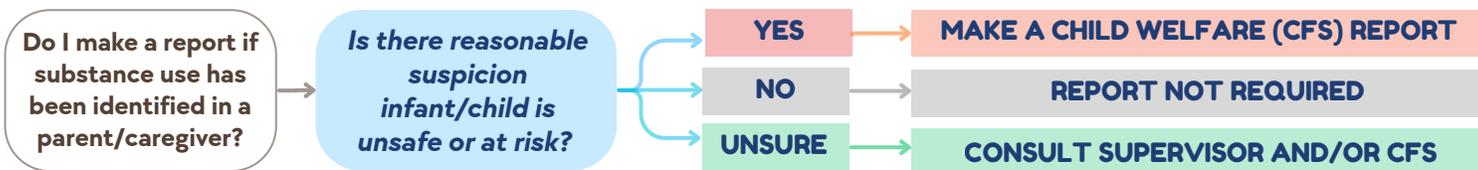
SUBSTANCE USE IN PREGNANCY & PARENTING: GUIDANCE FOR MANDATED REPORTERS IN CALIFORNIA



This document summarizes existing California child welfare reporting guidance to help health care and social services providers understand when a mandated report may be required when substance use is identified during pregnancy, at delivery, or postpartum. **This document does not constitute legal advice. Mandated reporters should follow local & employer policies and consult legal counsel or child welfare authorities when uncertain.**

START HERE: CALIFORNIA LAW ON MANDATED REPORTING

Mandated reporters must make a report when, in their professional capacity or within the scope of their employment, they **know** or **reasonably suspect** that a child has been the victim of abuse or neglect. The initial report must be made immediately, or as soon as practicably possible, by telephone - with a written report submitted within 36 hours. [CA Penal Code §11166(a)]. *Child abuse and neglect* includes sexual abuse, severe or general neglect, willful harm or injury or endangerment, and unlawful corporal punishment [CA Penal Code §§11165.1-11165.4].



SCENARIOS

IS A CHILD WELFARE (CFS) REPORT REQUIRED?

WHEN TO REPORT

Substance use identified during pregnancy

No. California’s mandated-reporting laws apply to cases involving a child after their birth. Prenatal substance use by itself does not meet the statutory definition of child abuse or neglect.

If there are other children in the household, concerns about their safety should be assessed separately.

Pregnant individuals should still be connected early to supportive services, prenatal care, and substance use treatment, as these services reduce risks and improve outcomes for mom and baby. See QR code below for Ventura County-specific resources.

Positive toxicology at delivery

Not automatically. A positive toxicology screen at the time of the delivery is not in and of itself a sufficient basis for reporting child abuse or neglect. However, *any indication of maternal substance abuse shall lead to an assessment of the needs of the mother and child. If other factors are present that indicate risk to a child, then a report shall be made* [CA Penal Code § 11165.13].

If child has been harmed, or there is a substantial risk the child may experience serious physical harm or illness, because the parent or caregiver is unable to adequately supervise, protect, or provide regular care [WIC §300(b)(1)] - or child is experiencing serious emotional harm or substantial risk of emotional harm [WIC §300(c)] - a report is required. Examples:

- inadequate supervision or protection, such as impairment/intoxication while supervising; exposure to violence
- failure to provide adequate food, clothing, shelter, or medical treatment, such as caregiver does not seek medical care - or follow up on treatment and the child’s health is affected

Seek consultation from employer, legal counsel, and/or CFS if uncertain.

Parent/caregiver discloses substance use

Not automatically. A parent or caregiver’s disclosure by itself does not require a report. Evaluate the disclosure in the context of safety, caregiving capacity, treatment involvement, and protective factors.

Parent/caregiver in MAT program

No. Participation in medication-assisted treatment (MAT), such as methadone or buprenorphine, does not by itself indicate child abuse or neglect. MAT is an evidence-based medical intervention and a protective factor. Reporting decisions should be based on whether there is reasonable suspicion that a child is unsafe or at risk.

Ventura County 24/7 CFS hotline: 805-654-3200

LINK TO LOCAL RESOURCES



For providers: Prenatal Screening, Brief Intervention, and Referral Pathway

For patients/clients: Understanding Mandated Reporting for Substance Use in Pregnancy; Community Resources for Substance Use/Recovery

TRAUMA-INFORMED, FAMILY-CENTERED CARE

- **Substance use alone does not indicate unsafe parenting.** Parenting capacity depends on safety, stability, and support.
- **Treatment is protective.** Engagement in treatment and supportive services demonstrates a commitment to health and caregiving.
- **Your words matter.** Use neutral, nonjudgmental language to build trust.
- **Support builds safety.** Connecting families to resources (e.g., public health nurses, ECM programs, treatment, parenting support) promotes child safety and well-being.