

KY-Moms Maternal Assistance Towards Recovery (MATR)

Findings at a Glance 2025



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Introduction

The overall goal of the KY-Moms: Maternal Assistance Towards Recovery (MATR) case management program is to increase positive birth outcomes for high risk pregnant women in Kentucky by reducing inter-related risks. These include illicit substance/alcohol use, mental health symptoms, and intimate partner violence, which could potentially have a negative impact on the health of the pregnant mother, fetal development, and birth outcomes. KY-Moms MATR case management respondents received both traditional case management assistance to meet basic needs such as safe housing, food, and childcare, as well as referrals to substance use and mental health treatment services. Respondents also received information and support to facilitate a healthy pregnancy and fetus as well as to meet needs after the baby is born.

Evaluation Method

The KY-Moms MATR outcome evaluation includes a face-to-face baseline interview by program staff from Community Mental Health regions to assess these risk factors. In addition, respondents are offered the opportunity to be contacted for a postnatal follow-up interview approximately 6 months after the birth of their baby.

Results for this study include analysis of self-report responses on the evidence-based baseline and follow-up for 21 women who had not given birth to their babies before entering the KY-Moms MATR program and were not in a jail or controlled environment.

This Findings at a Glance summarizes results from the full KY-Moms MATR 2025 Outcomes Report¹ and is organized into four main sections: (1) changes on the three main factors targeted at prenatal baseline and postnatal follow-up; (2) changes in other factors examined at prenatal baseline and postnatal follow-up; (3) respondent satisfaction with the KY-Moms MATR program; and (4) birth events and outcomes.

Description of KY-Moms MATR Respondents Included in the Follow-up Sample

Twenty-one pre-birth respondents completed a six-month postnatal follow-up assessment and met criteria to be included in this report. Of those respondents, at baseline:

- They were an average of 24 weeks pregnant and were in the program an average of 7.1 months.
- They were an average of 29 years old and predominately White (81%).
- One-third were not married or currently cohabiting, 38% were married or cohabiting, and 29% were separated/divorced.
- About 71% of respondents were not currently employed at prenatal baseline.
- Close to 24% of the respondents considered themselves to be homeless.

¹ Findings from the full report can be downloaded from <http://cdar.uky.edu/KY-Moms%20MATR/>

Factors Targeted by KY-Moms MATR

Measures compare 6 months before the client became pregnant and the past 6 months at postnatal follow-up.²

Substance Use



REPORTED ANY ILLICIT SUBSTANCE USE***

78% **6%**
at baseline at follow-up



REPORTED ANY ALCOHOL USE

39% **0%**
at baseline at follow-up

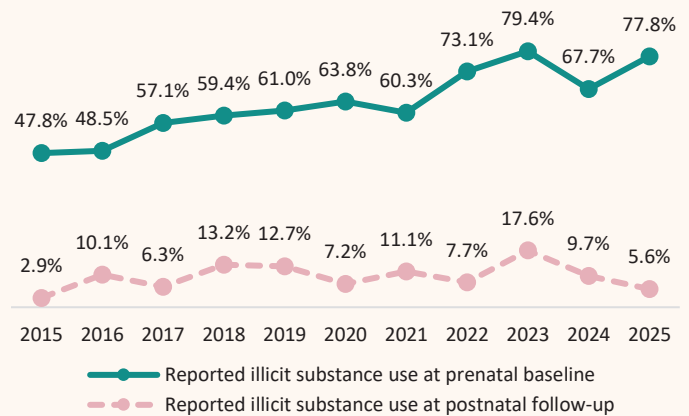


REPORTED SMOKING TOBACCO USE**

83% **44%**
at baseline at follow-up

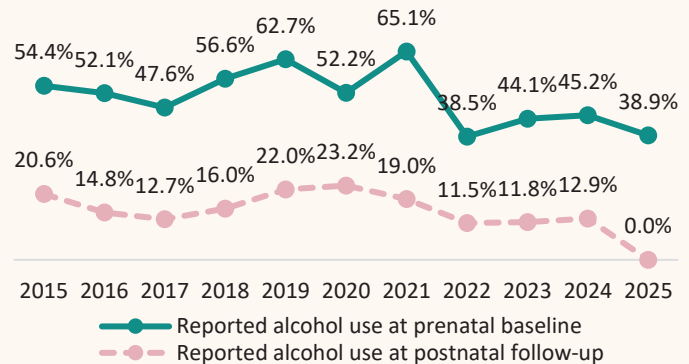
Trends in illicit substance use at prenatal baseline and postnatal follow-up

The percent of women who reported illicit substance use in the past 6 months at postnatal follow-up generally increased from 2.9% in 2015 to 12.7% in 2019 before decreasing to 7.2% in 2020. In 2025, 5.6% of respondents reported illicit substance use in the past 6 months at postnatal follow-up.



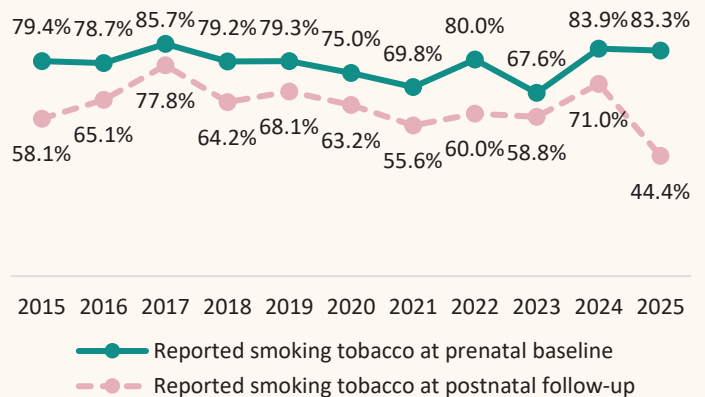
Trends in alcohol use at prenatal baseline and postnatal follow-up

For the majority of the past 11 years, around half of respondents reported alcohol use in the 6 months before pregnancy. In 2019 and 2021, however, around two-thirds of respondents reported alcohol use at prenatal baseline, and in 2025, 38.9% reported past-6-month alcohol use. In addition, alcohol use at follow-up was between 0% and 23%.



Trends in smoking tobacco use at prenatal baseline and postnatal follow-up

Smoking tobacco use was high at prenatal baseline for each year with well over three-quarters of women reporting smoking tobacco in the six months before pregnancy. At follow-up, a large number of women continued to smoke tobacco.



p < .05, *p < .01.

² For each trend report presented, the years correspond to years in which the annual reports were published. In addition, all trend analyses present only annual report data at baseline and follow-up and do not include between-year statistical analysis.

Mental Health and Sleep Difficulty



MET STUDY CRITERIA FOR DEPRESSION**

52% **19%**
at baseline at follow-up



MET STUDY CRITERIA FOR DEPRESSION AND/OR ANXIETY**

62% **19%**
at baseline at follow-up



AVERAGE NUMBER OF DAYS MENTAL HEALTH WAS NOT GOOD**

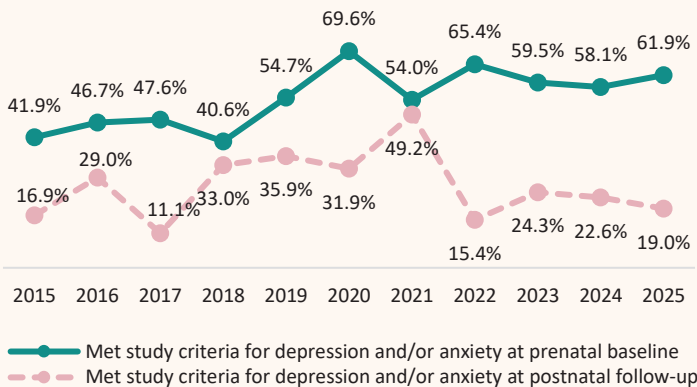
11.2 **3.0**
at baseline at follow-up



REPORTED NO SLEEP DIFFICULTIES***

26% **74%**
at baseline at follow-up

Trends in depression and/or anxiety at prenatal baseline and postnatal follow-up



The percent of respondents who met study criteria for depression and/or anxiety at prenatal baseline was fairly consistent from 2015 to 2018. In 2021, the percent of women reporting depression and/or anxiety at prenatal baseline decreased compared to the previous year.

At follow-up, the degree to which the percent of respondents who met study criteria for depression and/or anxiety decreased fluctuated. Since 2022, with smaller sample sizes than in previous years, small percentages of respondents met study criteria for depression and/or anxiety.

Intimate Partner Violence

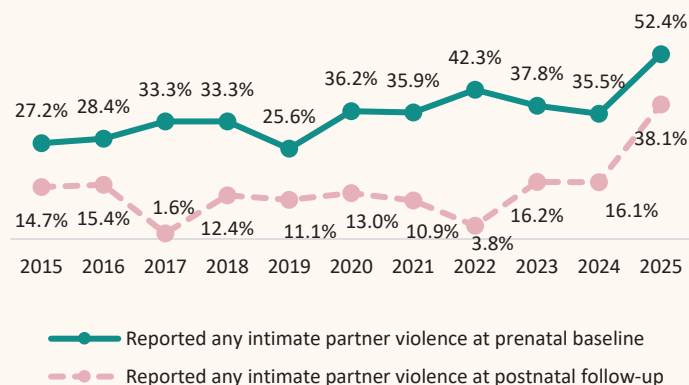


REPORTED ANY FORM OF INTIMATE PARTNER VIOLENCE

52% **38%**
at baseline at follow-up

Trends in any intimate partner violence at prenatal baseline and postnatal follow-up

The percent of respondents who reported any intimate partner violence at prenatal baseline was fairly consistent from 2015 to 2019. Since 2019, however, the number of respondents who reported any intimate partner violence at baseline has increased. Overall, the percent of respondents who reported intimate partner violence at follow-up was also fairly consistent with about 11% to 16% of respondents reporting intimate partner violence in the 6 months since the birth of the baby (with the exception of 2017 at 1.6% and 2022 at 3.8%). In 2025, the percent of respondents who reported intimate partner violence at prenatal baseline and follow-up was higher than in previous 10 years.



p < .05, *p < .01.

Other Factors Examined at Postnatal Follow-up

Economic Hardship



REPORTED DIFFICULTY MEETING AT LEAST ONE OF THE BASIC LIVING NEEDS

60% at baseline **40%** at follow-up



REPORTED DIFFICULTY MEETING AT LEAST ONE OF THE HEALTH CARE NEEDS

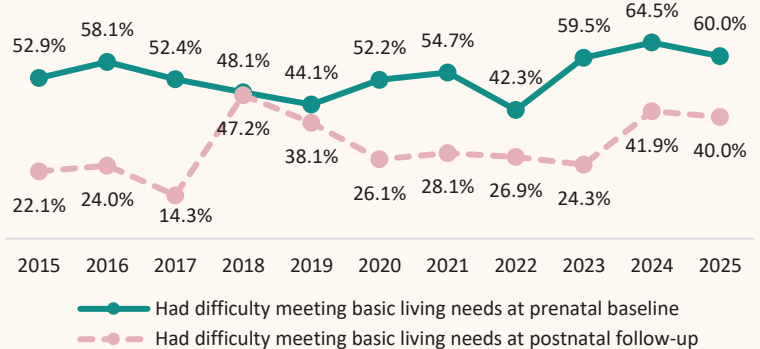
33% at baseline **10%** at follow-up

"It helped me, overall. I had someone who was there for me. I felt comfortable and they helped me reach my goals I needed. And kept me on track, I loved the program."

- KY-MOMS MATR RESPONDENT

The percent of respondents who reported having difficulty meeting basic living needs in the six months before pregnancy remained between 42% and 60% over the past 11 years at baseline. In 2018 and 2019, the percent of respondents who reported difficulty meeting basic living needs at follow-up did not decrease significantly from baseline to follow-up. In 2025, 9.5% of respondents reported difficulty meeting basic health care needs at postnatal follow-up.

Trends in difficulty meeting basic living needs at prenatal baseline and postnatal follow-up



Rating of Experience with KY-Moms MATR Program

At follow-up, respondents were asked to rate their experience with the KY-Moms MATR program on a scale of 0 = "not at all right for me" to 10 = "exactly right for me"



8.6 average rating



86% would refer a family/friend to the program



95% reported that the KY-Moms program worked pretty well or extremely well for them

Trends in ratings of experience with KY-Moms MATR at postnatal follow-up

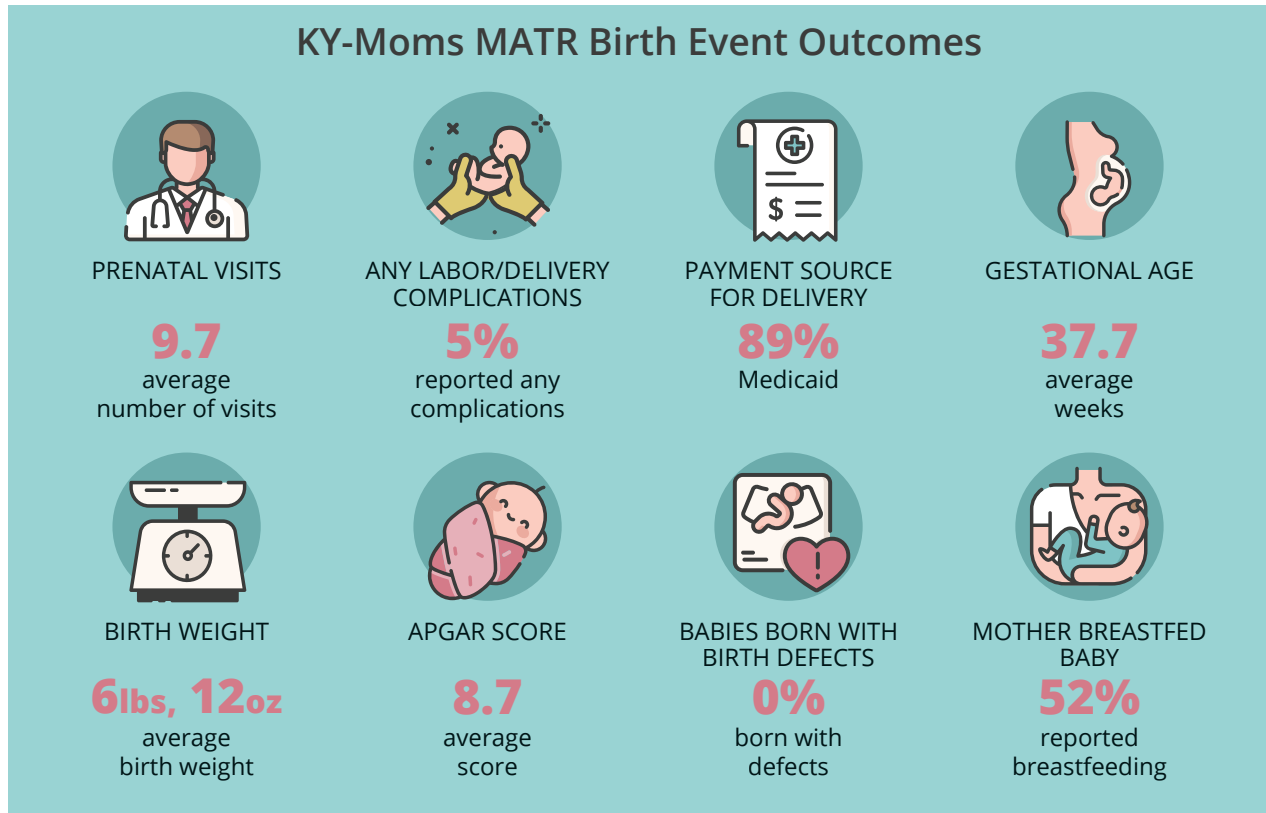
KY-Moms MATR respondents have consistently rated their experience with the program as an average of 9.1 or higher over the past 11 years, indicating that they are very satisfied with the KY-Moms MATR program. In 2025, however, the average experience rating decreased to 8.6.



—●— Postnatal follow-up

Birth Events and Outcomes

The Kentucky Vital Statistics birth event data set was used to examine birth outcomes for 21 KY-Moms MATR respondents who entered the program before the birth of their babies and who gave birth between January 2023 and December 2023.



Note: Responses in the birth event data set may vary from responses in the KY-Moms MATR assessments because the time frames are different as well as question wording.

Conclusion

This study provides support of the efforts by the Kentucky Division of Substance Use Disorder to address the rising statewide and national problem of substance-exposed pregnancies, given the positive changes in the women's substance-using behavior once interventions were initiated. Trend reports provided throughout this report reflect the importance of annual data collection. These data trends over time can show consistency, improvement, or highlight an area which may need further attention in the KY-Moms MATR program. Overall, evaluation results indicate that pregnant women participating in the KY-Moms MATR program significantly improved on a variety of inter-related risk factors including illicit substance/alcohol use, mental health symptoms, and intimate partner violence, and had positive birth outcomes.