



“A chicken and egg scenario”
Acknowledging women’s history in drug and alcohol
service provision

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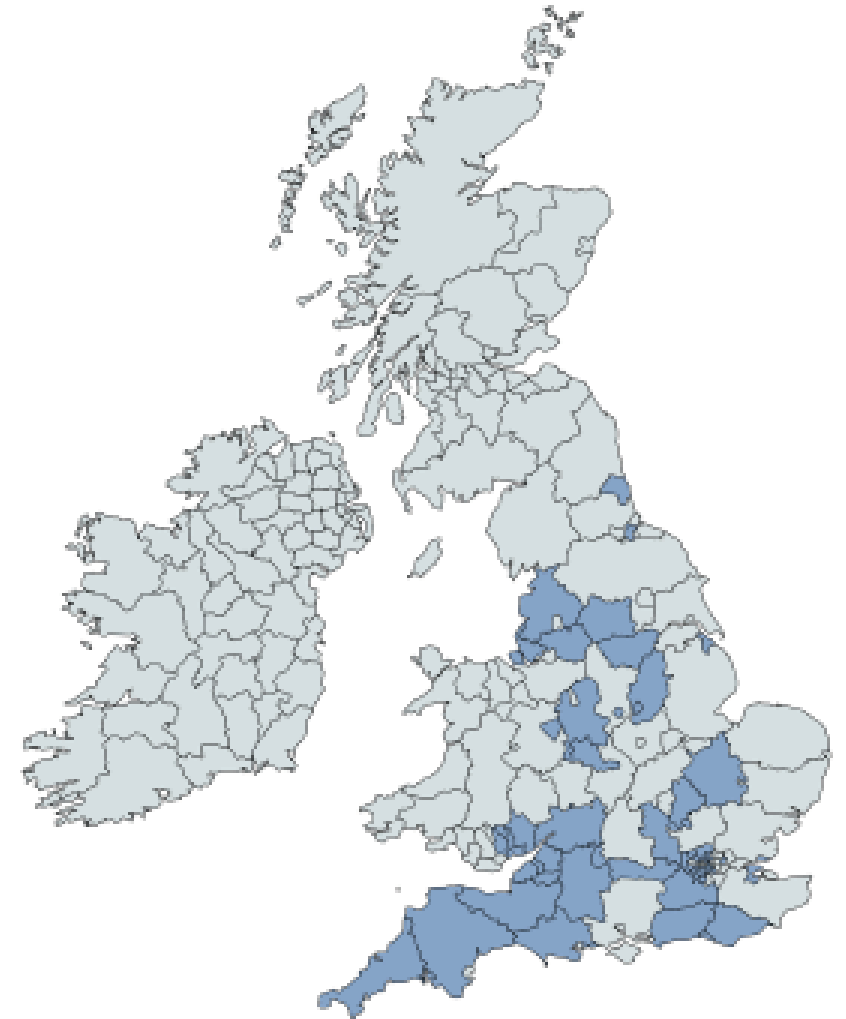
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MAPPING THE MAZE

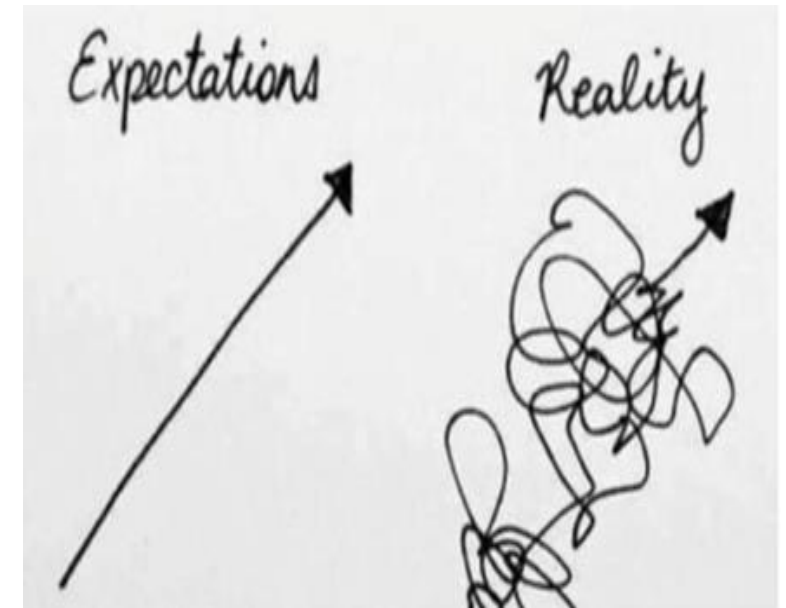
- 528 support options available to women in England and Wales
- 15.7% (n=83) are Substance use related
- Just under half of the local authorities in England report women's specific substance use services (n=74)
- Women's group in a generic addiction service or a substance misuse midwife were the most popular support types

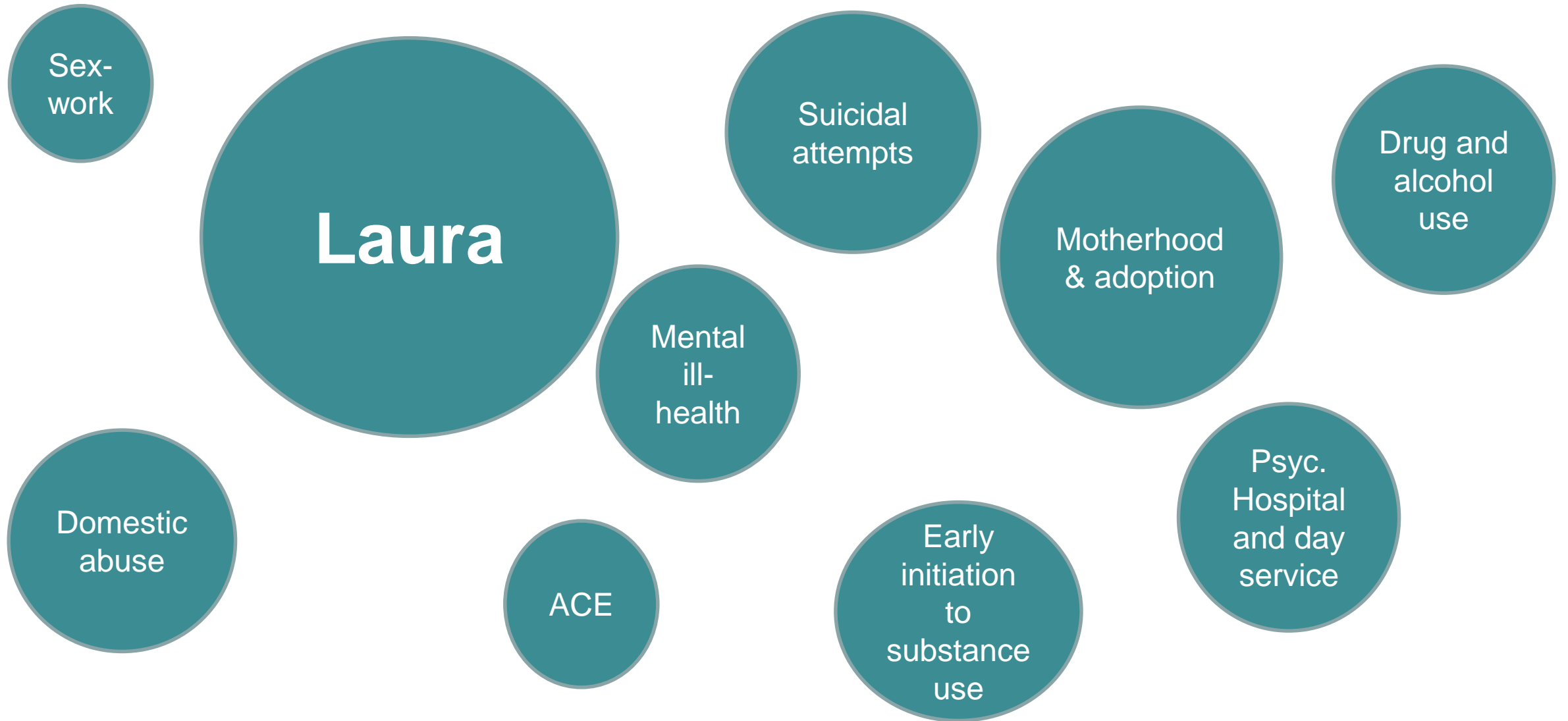
(Holly, 2017)

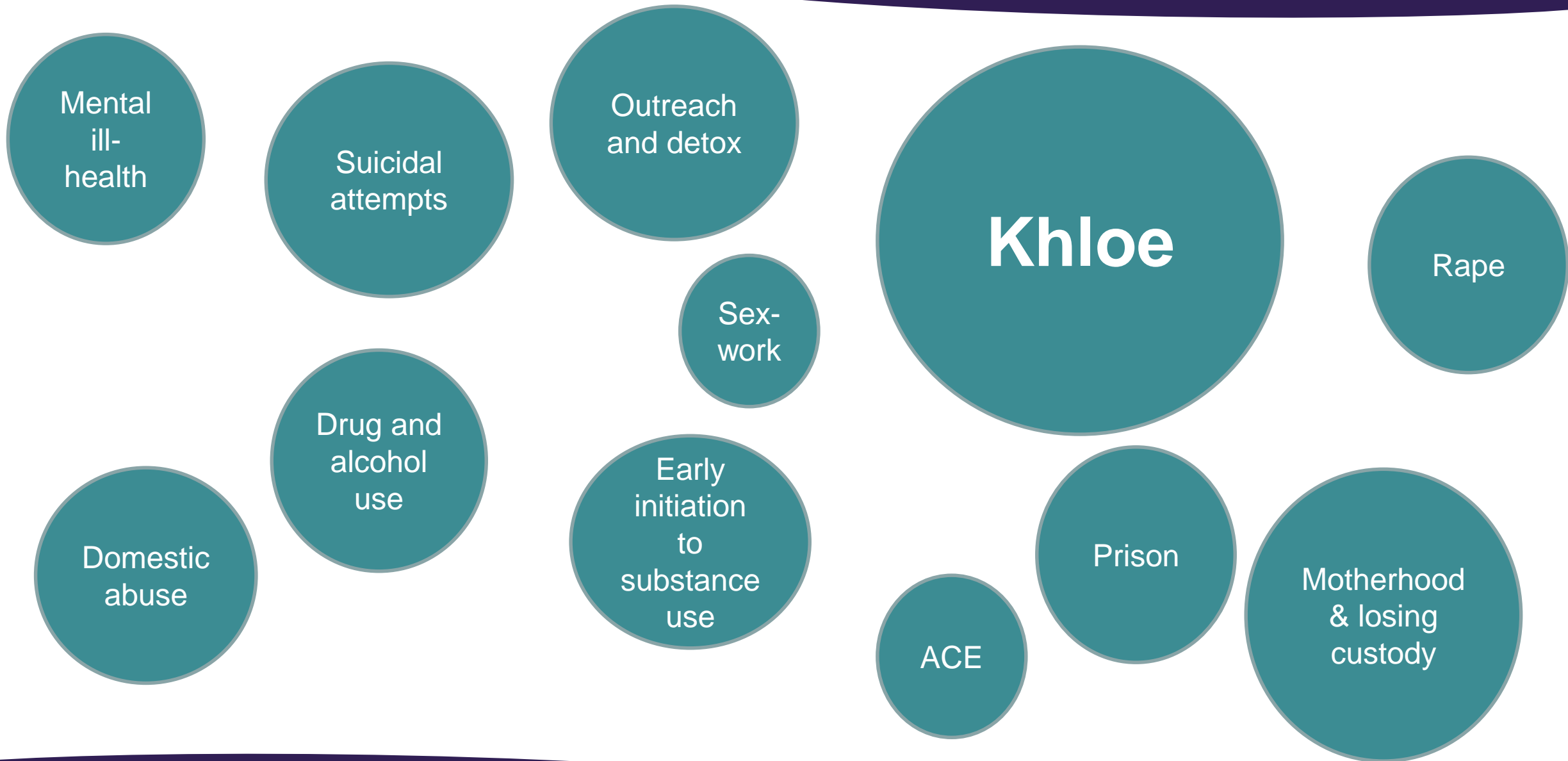


Data Collection and Analysis

- Recruited 12 women
- History of or, current experiences of substance use and domestic abuse
- Facebook, face to face
- Feminist methodology
- Interpretative phenomenological analysis







Mental
ill-
health

Motherhood
& losing
custody

Psych
hospital
and s.u
service

Childhood
sexual
abuse

Michelle

Early
initiation
to
substance
use

Homelessness

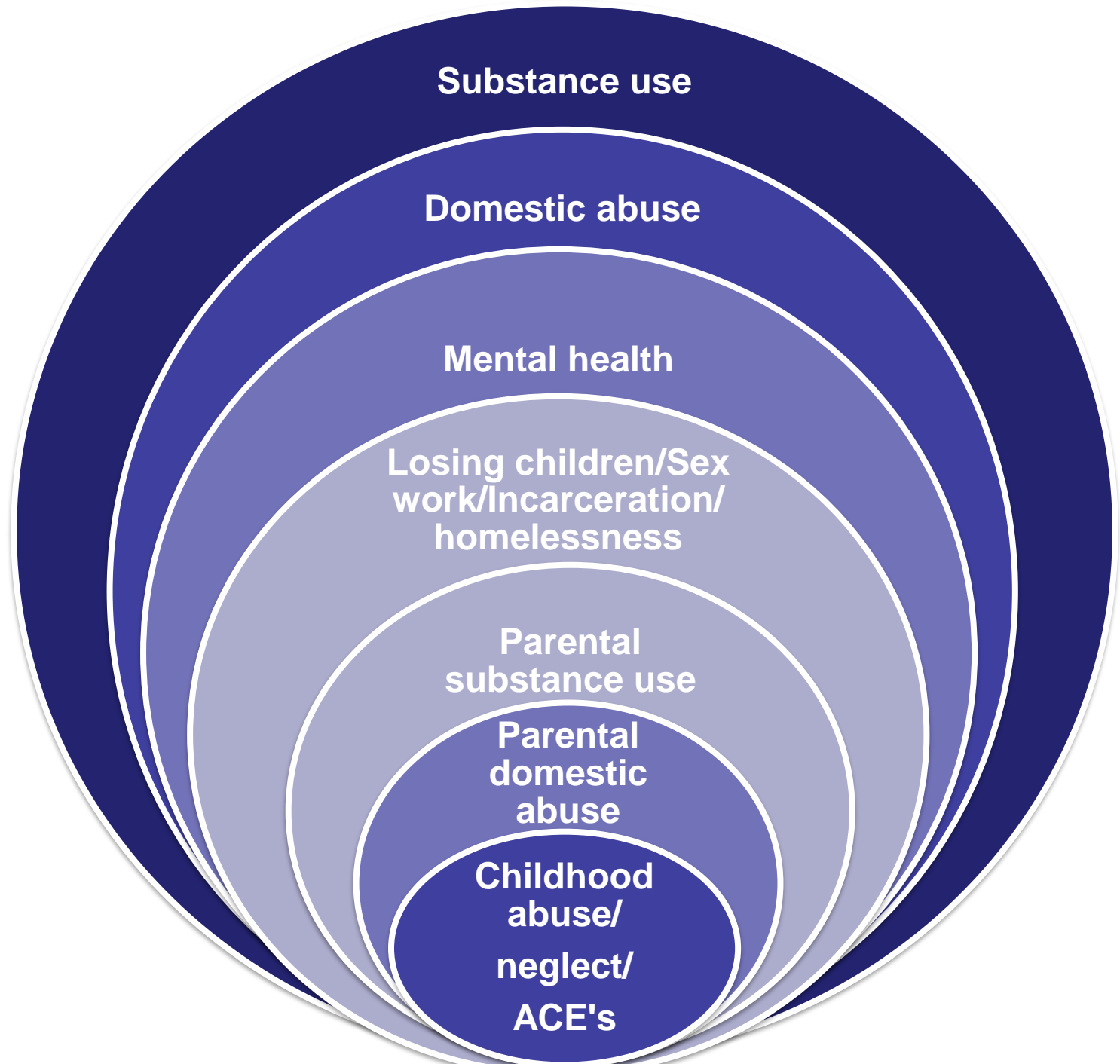
Alcohol
use

Domestic
abuse

ACE

Care

Suicidal
attempts



Substance use

Domestic abuse

Mental health

**Losing children/Sex
work/Incarceration/
homelessness**

**Parental
substance use**

**Parental
domestic
abuse**

**Childhood
abuse/
neglect/
ACE's**

1. More than substance use!!!
2. Understanding the role substances play in the experiences of abuse and abuse plays in substance use
3. Gendered understanding of addiction
4. Moving away from siloed approaches of support
5. Gender-responsive
6. Trauma Informed

Gender Responsive

...creating an environment through site selection, staff selection, program development, content, and material that reflects an understanding of the realities of women's and girls' lives and is responsive to their strengths and challenges.

(Covington et al., 2008)

Trauma informed Practice

1. Recognise the impact of violence and victimisation on development and coping strategies
2. See recovery from trauma as a primary goal
3. Use an empowerment model
4. Aim to maximise a women's choice and control over her recovery
5. Based on a relational collaboration (recognising the power imbalance)
6. Create an atmosphere that is respectful of survivors need for safety, respect and acceptance
7. Emphasises women's strength, highlighting adaptations over symptoms and resilience over pathology
8. Should minimise the possibilities of re-traumatisation
9. Should be culturally competent and understand each woman in the context of her life experiences and cultural background
10. Should include women in treatment design and evaluation

Elliot et al., (2005)

Research and Policy

1. Ask the experts.....women
2. Focus on the gender differences of drug and alcohol use
3. Quantitative statistics
4. Ask the hard questions to build evidence to show the need for specific support
5. Critique policy

“Women also use drugs – not that you can tell from drug policy”

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