Substance abuse treatment and care for women
Fewer women than men access treatment services. This can reflect that, in general, more men than women use drugs or that women face more barriers in their access to treatment than do men.

People using drugs face much social, personal and cultural stigmatization. For female drug users, the guilt and shame associated with drug use is often also added to the stigma. Additionally, in comparison to men, women seeking treatment seem to be younger, with fewer resources, have dependent children and often live with a drug using partner. They are more likely to have experienced trauma and have higher rates of concurrent psychiatric problems. All of these factors make it even more difficult for women to access and stay in treatment.

The above points indicate the need to develop specific drug treatment services for women to address their special requirements. Some studies on treatment entry and completion have found that women are less likely than men to enter and complete treatment programmes. However, although research has not found gender differences in treatment outcomes, recent research studies have found improved outcomes for women participating in programmes specifically designed to meet their needs. The UNODC publication *Substance Abuse Treatment and Care for Women: Case Studies and Lessons Learned* can be referred to as a resource of examples of treatment services designed for women in different regions of the world.

It is also important to note that women are usually the main care providers in the family. Therefore, investing in drug treatment for women not only benefits the women themselves but also their families and communities, as a whole.
What factors should be considered when developing gender responsive services?

There are a multitude of factors that could play a crucial role in the establishment and successful operation of treatment services for women. The following interventions could be considered depending on the availability of both human and financial resources and their feasibility and relevance to cultural settings:

- **Development of a comprehensive programme** that is non-judgemental, non-punitive and includes motivational enhancement. Attention to relationships, trauma and concurrent disorders is essential for successful service provision. Incorporation of these services into the primary health and social care network will also help reduce stigma and increase access for women using drugs.

- **National and local authorities** can play a crucial role in facilitating treatment services for women by keeping their needs in mind when planning services and allocating adequate funding. They can also promote the development of gender-specific guidelines and trainings for care providers and practitioners.

- **Involvement of the family and the community** enhances the provision of essential personal and social support to the client. It can also reduce the stigmatization surrounding drug use and related problems and consequences.

- **Employment, training and supervision of staff** is of vital importance. Training for staff should be provided on a variety of issues including understanding the specific needs of women, motivational approaches, problem assessment and referral to other linked services. Employing staff with backgrounds similar to the population of women being served is also a consideration.
Outreach is an important mechanism for reaching women who cannot easily access mainstream services. This can occur in women's homes, on the street, or in any location where women gather. Establishment of telephone hotline services can provide more access to information, counseling and referral to appropriate services for women.

Low threshold services work well with a highly vulnerable group of clients such as injecting drug users at risk of HIV and other blood-borne diseases and those involved in the sex trade. It is important to provide an HIV prevention package including information, counselling and various protective measures.

Development of a network of referral services can provide early detection and referral of drug using clients to treatment centres and provision of the essential related support services. These services include child welfare, obstetric/gynaecological, prenatal care and mental health services. Women generally have fewer resources and support than men and need assistance to develop self-sufficiency, a social support system and to acquire safe housing. Therefore, it is important to facilitate social support resources such as vocational training, employment and housing.

Provision of community-based services is cost-effective, less intrusive and accommodates women who have difficulties in entering residential services.

Establishment of a safe environment that is easily accessible, friendly, with free or affordable costs, childcare facilities and flexible opening hours can enhance the initiation of drug-using women into treatment and postively affect treatment outcomes. The provision of women-only spaces or hours could also be considered.
- **Provision of facilities and care for pregnant and parenting women** that is multidisciplinary, comprehensive and coordinated contributes to improved retention and outcomes for mothers and newborns.

- **Provision of opioid substitution treatment**, particularly methadone, is very effective in reducing illicit substance use and its related consequences. It is essential that this is provided in the context of other components of comprehensive care, i.e., psychosocial support. Pregnant women should be given priority access to opioid substitution treatment.

- **Incorporating programme monitoring, evaluation and research activities** provides a better understanding of women with substance use problems as well as the effective interventions. These activities not only demonstrate the impact of treatment services but provide important evidence and documentation for continuation of programme funding and support.
For further information please refer to:

*Drug Abuse Treatment Toolkit* series

*Substance Abuse Treatment and Care for Women: Case Studies and Lessons Learned*

The publication is available on-line at:


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