Women and Drug Abuse: Applying a Gendered Lens to Treatment Programs

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# Women and Drug Abuse: Applying a Gendered Lens to Addiction Treatment

## Introduction

**Main Issue**
- Roughly 23.5 million adults currently experience chemical dependency in the US
- Nearly 700,000 Americans seek treatment each day for their addiction
- Women compose 1/3 of clientele
- Only 30% of women receive treatment
- Ratio of 3:1 for men and women users
- Women’s rate of use and abuse are meeting the high rates of men

**Research Questions**
- What are the gender barriers women face?
- Why don’t women enter treatment?
- What is the stigma women face?
- Why is addiction a growing social problem?

**Concepts**
- *Addiction*: primary chronic diseases of brain reward, motivation, memory, and related circuitry
- *Addiction Treatment*: behavior modification therapy for those who use substance to the detriment of themselves and others
- *Gendered Lens*: framework for examining any area from a gendered perspective
- *Gender Socialization*: process by which men and women learn the expectations with their gender
- *Gendered Institutions*: institutions that exhibit the total pattern of gender relations, expectations, relationships, and placement of men and women

**Previous Research**
- The lack of empirical research on the creation and implementation of gender based models shows the overall negligence to clients’ specific needs, and how recovery is being devalued through deplorable generalization
- Diverse viewpoints such as psychological, pharmacological, medical, and criminal justice models
- Treatment centers should offer gender separate and mixed programs that are based on a woman’s comfort and history
- Suggestions for implementation of gendered based models

## Abstract

At present, research on chemical dependency programs exist, but the body of literature does not adequately address gendered barriers to treatment. The vast differences between men and women’s involvement in treatment programs is creating inequality. A gendered approach is needed to focus on women and addiction to conceptualize and address women’s experiences as distinctive from that of men. A gendered approach sheds light on how gender plays a role in the entrance, continuance, and success of women in treatment programs for chemical dependency. In my research, I argued that applying a gendered lens will lay the groundwork for addressing women’s specific needs in regards to substance abuse treatment. The research design for this project utilized an analysis of existing secondary sources. Specifically, I examined historical, ethnographic, and narrative accounts of treatment programs. I asserted that applying a gendered lens on the study of women in drug treatment programs reveals women’s particular barriers, stigmas, and struggles. Applying a gendered lens is thereby beneficial to the future of women’s treatment and continued sobriety. Findings from research projects such as this one raise awareness about the inequalities women face, and advocate for heightened responsibility on the part of medical practitioners to develop treatment plans specific to the needs of women.

## Methodology

**Theoretical Framework**
- *Feminist Theory*: utilization of this theory allows for the understanding of the status of women in society and using that knowledge to improve women’s lives
- The means of this framework is to interpret data through a gendered lens for use in such areas such as problem identification, maximizing understanding, and implementing strategic solutions

**Research Design**
- Using a gendered sociological approach, qualitative research was conducted on existing secondary sources
- The goal of examining secondary sources is to analyze data in relation to women’s experiences and the creation of gendered treatment programs

## Findings

### Barriers, Struggles, & Stigmas
- Finances, social ties, isolation, health, child care, family, caretaking
- Women are more likely to use in isolation, under pressure, use in response to negative emotions, have a family history, become addicted more quickly, use as a form of self medication, experience negative consequences sooner, self administer larger doses
- **The Role of Gender**
  - A woman may avoid treatment to mask their feelings of shame, guilt, and moral failings
  - Some physicians fail to diagnose dependency or abuse, because women patients do not resemble the social stereotypes of addicted women
  - Bureaucracy, male focused treatment, and lack of sensitivity toward women

### Creation of Gendered Programs
- Women patients reported that the single gender treatment provided them with a safe and more comfortable environment, which increased treatment outcome and satisfaction
- The most effective factors to incorporate into women based programs have been determined to be: food, clothing, shelter; transportation; child care; job counseling and training; legal assistance; educational skills; parenting training; family therapy; medical services; social support services; mental health services; and assertiveness training
- Within society, women are socialized to blame themselves for their failures, but not to reward themselves for their success

## Discussion & Conclusions

**Importance of Research**
- A gendered lens should be taken to address women’s experiences in treatment programs for 3 main reasons:
  - Shed light on how gender plays a role in the entrance, continuance, and success of women
  - Reveal women’s particular barriers, stigmas, and struggles
  - Advocate for the creation of programs tailored to women’s needs

**Implications and Suggestions**
- Recommend reevaluation of existing systems and increased focus on creating gendered programs
- Tailored treatment is effective for women because:
  - Decreases drug use, psychiatric symptoms, criminal behavior
  - Increases positive behaviors, attitudes, beliefs, retention rate and attendance
- Women are more happy with their treatment experiences
- Create a safe place for recovery and holistic self improvement