
Treatment Methods for Women

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Addiction to drugs is a serious, chronic, and relapsing health problem for both women and men of all ages and backgrounds. Among women, however, drug abuse may present different challenges to health, may progress differently, and may require different treatment approaches.

Understanding Women Who Use Drugs

It is possible for drug-dependent women, of any age, to overcome the illness of drug addiction. Those that have been most successful have had the help and support of significant others, family members, friends, treatment providers, and the community. Women of all races and socioeconomic status suffer from the serious illness of drug addiction. And women of all races, income groups, levels of education, and types of communities need treatment for drug addiction, as they do for any other problem affecting their physical or mental health.

Many women who use drugs have faced serious challenges to their well-being during their lives. For example, research indicates that up to 70 percent of drug abusing women report histories of physical and sexual abuse. Data also indicate that women are far more likely than men to report a parental history of alcohol and drug abuse. Often, women who use drugs have low self-esteem and little self-confidence and may feel powerless. In addition, minority women may face additional cultural and language barriers that can affect or hinder their treatment and recovery.

Many drug-using women do not seek treatment because they are afraid: They fear not being able to take care of or keep their children, they fear reprisal from their spouses or boyfriends, and they fear punishment from authorities in the community. Many women report that their drug-using male sex partners initiated them into drug abuse. In addition, research indicates that drug-dependent women have great difficulty abstaining from drugs, when the lifestyle of their male partner is one that supports drug use.

Consequences of Drug Use for Women

Research suggests that women may become more quickly addicted than men to certain drugs, such as crack cocaine, even after casual or experimental use. Therefore, by the time a woman enters treatment, she may be severely addicted and consequently may require treatment that both identifies her specific needs and responds to them.

These needs will likely include addressing other serious health problems-sexually transmitted diseases (STDs) and mental health problems, for example. More specifically, health risks associated with drug abuse in women are:

- Poor nutrition and below-average weight
- Low self-esteem

- Depression
- Physical abuse
- If pregnant, preterm labor or early delivery
- Serious medical and infectious diseases (e.g., increased blood pressure and heart rate, STDs, HIV/AIDS)

Drug Abuse and HIV/AIDS

AIDS is now the fourth leading cause of death among women of childbearing age in the United States. Substance abuse compounds the risk of AIDS for women, especially for women who are injecting drug users and who share drug paraphernalia, because HIV/AIDS often is transmitted through shared needles, and other shared items, such as syringes, cotton swabs, rinse water, and cookers. In addition, under the influence of illicit drugs and alcohol, women may engage in unprotected sex, which also increases their risk for contracting or transmitting HIV/AIDS.

From 1993 to 1994, the number of new AIDS cases among women decreased 17 percent. Still, as of January 1997, the Centers for Disease Control and Prevention had documented almost 85,500 cases of AIDS among adolescent and adult women in the United States. Of these cases,

- About 62 percent were related either to the woman's own injecting drug use or to her having sex with an injecting drug user.
- About 37 percent were related to heterosexual contact, and almost half of these women acquired HIV/AIDS by having sex with an injecting drug user.

Treatment for Women

Research shows that women receive the most benefit from drug treatment programs that provide comprehensive services for meeting their basic needs, including access to the following:

- Food, clothing, and shelter
- Transportation
- Job counseling and training
- Legal assistance
- Literacy training and educational opportunities
- Parenting training
- Family therapy
- Couples counseling
- Medical care
- Child care
- Social services
- Social support
- Psychological assessment and mental health care
- Assertiveness training
- Family planning services

Traditional drug treatment programs may not be appropriate for women because those programs may not provide these services. Research also indicates that, for women in particular, a continuing relationship with a treatment provider is an important factor throughout treatment.

Any individual may experience lapses and relapses as expected steps of the treatment and recovery process; during these periods, women particularly need the support of the community and encouragement of those closest to them. After completing a drug treatment program, women also need services to assist them in sustaining their recovery and in rejoining the community.

Extent of Use

The National Household Survey on Drug Abuse (NHSDA)* provides yearly estimates of drug use prevalence among various demographic groups in the United States. Data are derived from a nationwide sample of household members aged 12 and older.

- In 1996, 29.9 percent of U.S. women (females over age 12) had used an illicit drug at least once in their lives-33.3 million out of 111.1 million women. More than 4.7 million women had used an illicit drug at least once in the month preceding the survey.
- The survey showed 30.5 million women had used marijuana at least once in their lifetimes. About 603,000 women had used cocaine in the preceding month; 241,000 had used crack cocaine. About 547,000 women had used hallucinogens (including LSD and PCP) in the preceding month.
- In 1996, 56,000 women used a needle to inject drugs, and 856,000 had done so at some point in their lives.
- In 1996, nearly 1.2 million females aged 12 and older had taken prescription drugs (sedatives, tranquilizers, or analgesics) for a nonmedical purpose during the preceding month.
- In the month preceding the survey, more than 26 million women had smoked cigarettes, and more than 48.5 million had consumed alcohol.

* *NHSDA is an annual survey conducted by the Substance Abuse and Mental Health Services Administration. Copies of the latest survey are available from the National Clearinghouse for Alcohol and Drug Information at 1-800-729-6686.*

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This page last updated Friday, November 5, 1999.

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