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*"Acquittance of addictive behaviours recovery-based programmes as social& health response for women in treatment all around Europe"*

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# Recovery

- Best, Bliuc, Iqbal, Upton & Hodgkins define 3 concepts linked to Recovery:
- 1. Contagion is the capacity of influence in social context;
- 2. Connection is the capacity to build community and society; and
- 3. Homophily is a tendency of relation with people like us. (Best, Bliuc, Iqbal, Upton & Hodgkins, 2107)



# Objectives

- To analyze the effectiveness of Recovery oriented programmes for women with addictive behaviours problems.
  - To identify Recovery mediators, especially for women in treatment.
  - To detect gaps and limitations in Recovery intervention for women with addictive behaviours; and
  - To prevent unexpected effects of Recovery oriented programmes for women.



# Methodology

Qualitative analysis of primary data (18 interviews with selected informants, visits to addictive behaviours treatment centers in 7 european countries) and qualitative & quantitative analysis of secondary data (reports and memories). Action research approach (Tiburcio & Kressel, 2011)

For bibliographical review it has been used Prisma Declaration tool.

During the whole process it has been used COREQ tool.



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Observatorio Europeo de las  
Drogas y las Toxicomanías

# Respuestas sanitarias y sociales a los problemas relacionados con las drogas

UNA GUÍA EUROPEA



**UNODC**

United Nations Office on Drugs and Crime



## TREATNET Quality Standards

for Drug Dependence Treatment  
and Care Services



Triple R: Rehabilitation for  
Recovery and Reinsertion



# Methodology

Selection of center was done in two levels: harm reduction programs & recovery oriented programs; with a must of specific gender perspective programmes.

For direct (non-participant) observation, the dimensions of Efficacy, Efficiency, Relevance, Visibility, Coverage and Social Impact (unexpected effects) were used.



# Methodology

Approval from the UCM Deontological Research Commission, UCM PR2019\_20\_043.

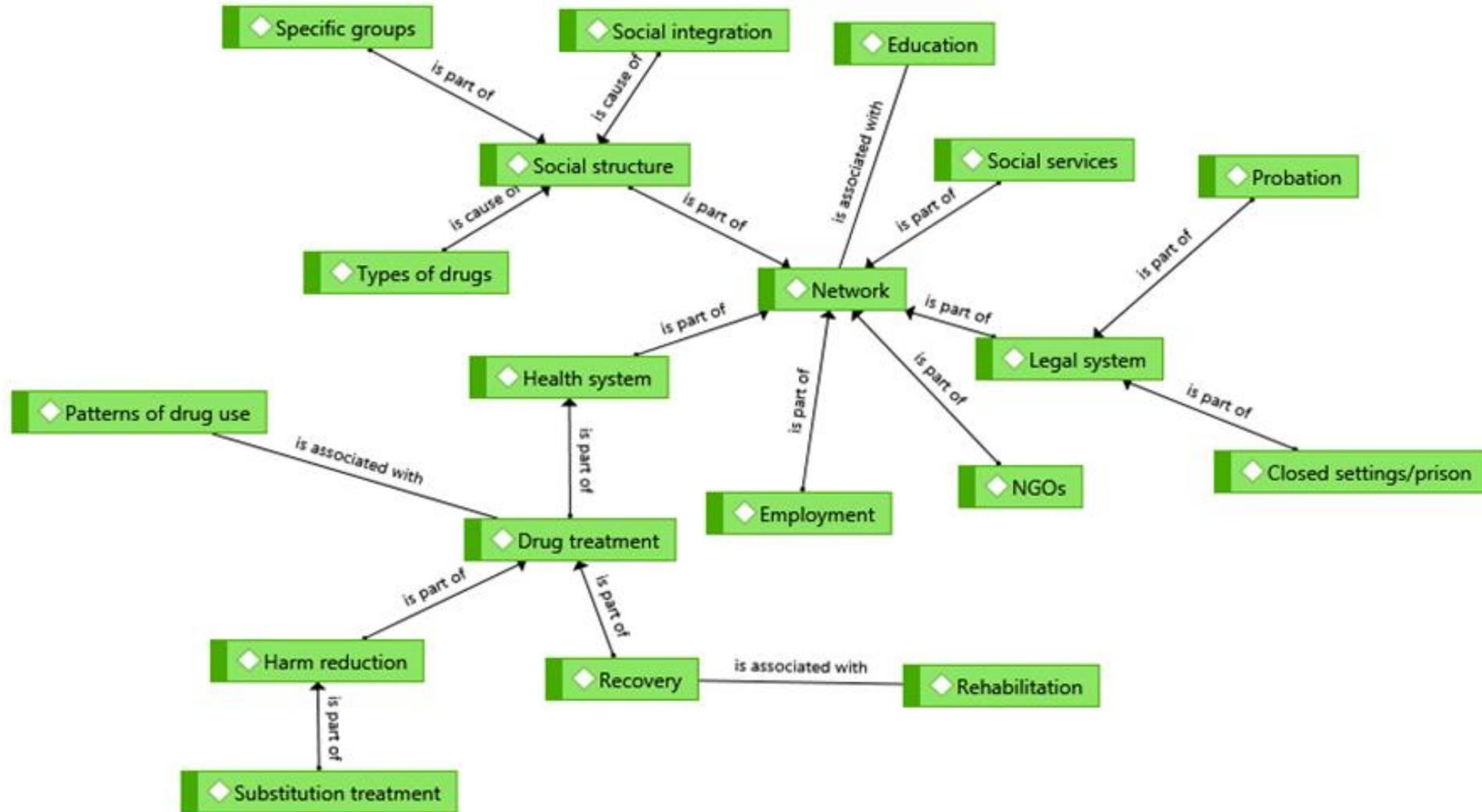
Reliability among judges was calculated with seven randomly chosen interviews (35.7%) at the end of data collection, coded by two researchers. Kappa value between 0.75 and 0.82, average of 0.79.

The SPSS Statistics V23.0 programme (SPSS Inc., Chicago, IL, USA ) was used to calculate the Kappa value.

Qualitative data analysis was conducted using Atlas.ti-8 software.



# Qualitative methodology: Categories





# Qualitative methodology: participants

Table 2. Study participants.

Participants	Profession
Female	Professor of Public Health, Ireland
Female	Programmes Manager, Sweden
Female	European projects coordinator, Italy
Male	Clinical Director, Croatia
Female	Communication and Drug Policies Coordinator, Serbia
Female	Psychologist, Spain
Male	Clinical Coordinator, Croatia
Male	Professor of Criminology, United Kingdom
Male	Professor of Criminology, Croatia
Male	European Parliament
Male	President of European Network
Male	President of European Network
Male	Professor of Psychology, Belgium
Female	International Projects, Russia
Female	European Projects Coordinator, Sweden
Male	European Projects Coordinator, Italy
Male	Treatment network coordinator, Belgium
Female	Harm-Reduction Programmes Coordinator, Croatia



# Verbatim: Women with addictive behaviours

*“Opioid addicts have specific treatments. Youth and women addicted to stimulants, amphetamines, and cannabis do not receive appropriate treatment. If we go further, programmes appropriate to gender and age do not exist.”*

*“Treatment for women with substance abuse problems should take into account not only biological aspects, but also social and environmental factors, trauma, and sexual assault (which is more common in women seeking treatment for drug dependence problems) and related factors with financial independence, pregnancy, and childcare.”*



# Verbatim: Women with addictive behaviours

*“We have a very low number of women seeking help and additionally gender sensitive treatment programs are not available.”*

*“Gender issues are now more central to the discussion about treatment, and more programs that consider women’s specific needs are now available in some public services for drug users. Professionals are now aware that women have different health problems, as well as of the existence of all the issues connected to children and pregnancy, and slowly this awareness is changing also the treatment programs available.”*



## Discussion

Results of the study are consistent with other studies about Recovery programmes gender perspective but also with other addictive behaviours programmes (Hansen, 2019).

There are general gaps in women recovery treatment about assessment, treatment and social integration (Meneses, 2007; Martínez, 2018). Professionals must receive specific training about gender differences and topics (Covington, 2008; Zohala, 2016; Hansen, 2018).

Topics like trauma, sexual abuse and violence need specific intervention in safe environments (Martínez, 2018).



# Conclusions

Women in treatment are functional, demanding proper treatment for their needs and situations. Women in treatment are not an homogeneous groups, with diversity and different situations.

Currently, there are still gaps in the introduction of a gender perspective and intersectional analysis in drug- treatment programs (including Recovery), so that attention is not effective for women.



# Conclusions

It is necessary to review the design of Recovery intervention programmes (and other addictive behaviours treatments) and the specific training of professional staff, to adapt the recovery treatment to gender specificities.

Employment, housing and links back to society have been routinely neglected for women in treatment. They play a significant role in recovery process and in reality recovery happens in the community and not in a clinic. The evidence now clearly indicates that those women who have a job, housing and support from family and friends have a significantly higher likelihood of achieving long term stable recovery.



Article

# Psychosocial Intervention in European Addictive Behaviour Recovery Programmes: A Qualitative Study

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Questions?  
Lot of thanks

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