



# Women who use drugs

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*Gender specificities and example of the setting up of a women-only drug care service*

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*Gender Equality Commission, Council of Europe*

*– Strasbourg, 22 - 24 May*



# Pompidou Group and MedNET

The **Pompidou Group** is the Council of Europe co-operation platform in the field of drug abuse and illicit trafficking. It is an Enlarged Partial Agreement of 39 countries open to non Council of Europe member states (eg: Israel, Mexico, Morocco).

It promotes a balanced, multidisciplinary approach based on valid scientific data covering prevention, treatment, risk reduction and law enforcement to support human rights drug policy.

## Pompidou Group has a Gender Equality Rapporteur

**MedNET** covers 16 countries :

- 10 PG member countries: Cyprus, Croatia, France, Greece, Italy, Malta, Morocco, Portugal, Switzerland and Turkey
- 6 non PG member countries : Algeria, Egypt, Jordan, Lebanon, Palestine, Tunisia

It promotes **co-operation, exchange and two-way transfer of knowledge between countries of two rims of the Mediterranean (North-South, South-North and South-South co-operation)**



## **PART 1 : WOMEN WHO USE DRUGS**

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### **Gender specificities**

# Gender specificities: some main points

- Data in the addiction field show that **gender plays an important role.**
- Globally, women use less drugs than men. At world level, 1/3 of drug users are women, however only 1/5 are in treatment .
- Women start later, but when they start, they tend to become dependent more quickly.
- In Europe, drug treatment services for women who use drugs and are pregnant exist in only 2/3 of the countries.
- In general, women use more : alcohol, tobacco, **amphetamines, opioids, cocaine and crack.**
- Women abuse prescription drugs for non medical purposes which increases according to age group, peaking in their thirties.
- If differences exist between women and men, consumption behaviours seem to be converging.

## Some examples of specificities:

### Women in comparison to men present more health and social vulnerability factors

#### Women tend to :

- Be stigmatised and economically disadvantaged, and to benefit from less social support.
- Have a partner who uses drugs.
- Have children who can play a central role in their drug consumption and their readaption (pregnancy = motivation source to enter into treatment or children = stop to enter into treatment because of the services not being adapted or fear of losing custody).
- Be victims of aggressions and sexual or physical abuse, and to suffer from mental health problems linked to the abuse: Drug Treatment Data (TDI) show that 40 to 70% of women who use drugs have suffered from sexual or physical violence during their life time and 20% of women who have been victims of violence will develop a psychiatric disorder.
- Develop a drug dependency which may lead to prostitution, which may become a means to face it.
- Some groups of women have specific needs: **pregnant women or mothers**, **sex workers**, who often face violence; **women in prison**.

# Example of recommendations towards States

## 2016 INCB Report

- INCB (International Narcotics Control Board) encourages States to **collect sex aggregated data** on participation in prevention programmes and access to treatment services, for an efficient allocation of **resources**.
- Measures to prevent and treat drug abuse among women should be better funded, co-ordinated and evidence-based.
- In order to put into practice the equality between men and women, policy-makers should provide more accessible, affordable and acceptable services for women who use drugs.
- Measures that tend to **eliminate stigmatisation** linked to drug use especially among women should be among government priorities.
- UN rules on treatment of prisoners (**Bangkok rules**) recommend treatment adapted to women: needs and traumas.



## PART 2 : EXAMPLE

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**Development of a specialised service for women suffering from alcohol and other drugs disorder in Egypt**

# Women in Egypt

- Women represent half of the 90 millions inhabitants of Egypt
- **2013, inequality index between sexes of PNUD : Egypt = 110/159 pays**
- Big differences between men and women about health, economic participation and autonomy
- Some women work outside home, go to school/university, can vote, but tend to be **4 times more unemployed than men**
- Most of the women with children work at home, look after their children and elderly family members
- Men use more alcohol and others drugs than women in Egypt
- Within the general population, the prevalence of use is **6.4 %**
- In Cairo, the gap between men and women in the use of drugs is narrower and is about 3 to 1
- Women tend to use alcohol, Tramadol®, hashish and opium



# Development of the project of a drug treatment centre for women

## 2013 — proposal of a projet to MedNET, with two objectives:

- Study the needs for such a service in Egypt
- Train the staff to provide care and treatment taking into account the gender specificities



- **The Pompidou Group MedNET** gives funding for the project
- **The General Secretariat of Mental Health and Addiction Treatment** provides medical human resources and venue, covers the health costs , the training of staff and the implementation of the project.



# Project phases

**Phase I** — Review of gender specific prevention and treatment services on alcohol use and other drugs worldwide. Review of the literature on the use of drugs among women in Egypt.

**Phase II** — Evaluation : Interviews and group discussions among a random sample of 23 patients and 44 service providers on needs and expectations in terms of care and treatment.

**Phase III**— International workshop in Cairo and study visit in Malta in 2013.

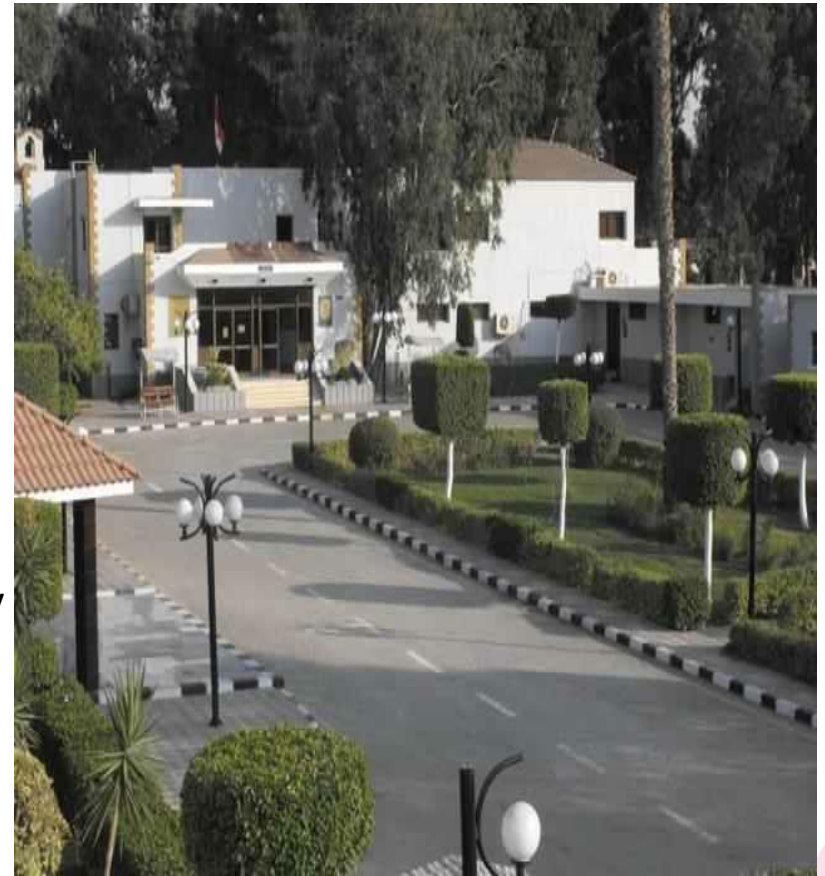
**Phase IV** — Launch of the pilot service based on models identified during Phase I and following the visit to Malta.

**Phase V** — Evaluation of pilot service from January 2015 until July 2016.

**Phase VI** — Final project conference in 2016.

# Opening of a drug treatment service for women in Cairo

- Treatment services for women who use Drugs in Psychiatric Hospital Héliopolis (El-Matar), Cairo
- Building separate from the hospital which cares and treats addiction disorders
- Special entry for the safety of clients
- Most of the service providers are women who have participated in the study visit to Malta
- Care and treatment for women only
- Clinical evaluation - includes violence suffered by women (post-traumatic treatment programme)



## Principles/standards introduced by the service

- Recognising the role of personal relationships in women's lives
- Addressing the unique health concerns of women
- Taking into account various caregiver roles women assume in life
- Taking into account traumas during the first diagnostic interview
- Guarantee of confidentiality
- Taking into account stigmatisation and taboos during the treatment
- Recognising the importance of socio-economic problems
- Motivation for therapy
- Taking into account the fear from legal consequences
- Taking into account the balance between therapy and family obligations
- Taking into account the fact that the guardian might refuse therapy
- Learning self protection against violence

# Treatment Programme Implemented

***Daily group therapies for in-patients:*** meditation, support group  
parental skills and childcare skills according to the needs

***Rehabilitation activities:***

- Creative activities weekly: painting, handcrafts, writing, cooking, gardening, cooking own food once a week to share with therapy team

***In-patient stay for 4 weeks*** to avoid drop outs for married women

***Outpatient clinics***

***Follow up of clients after discharge :***

- Phone calls and website LHAA « for her »
- Communication with families during and after therapy: breakfast parties for patients and former patients with therapy team and family to instil hope, model for those under therapy.

# Positive outcome

**2015 National Drug Observatory** : 17,165 consultations for drug addiction 2.1 % women

Evaluation El-Matar hospital — within one year between 2014 and 2015 :

**New out-patient women cases increased from 5 to 249**

**Follow up of out-patient women cases increased from 28 to 470**

**Number total of out-patient women cases (including new and follow-up of patients) in 2018: 2325**

**Women in-patients increased from 7 to 55 in 2018**

**Impact: 3 specialised clinics for women in Héliopolis, Al-Maamora, Al-Abbassiaa**

Challenge: prevention of early drop outs due to social pressure including questioning female absence from home and stigma attributed to maternal responsibilities

**Follow up: Setting up of specialised services for women who use drugs and are pregnant**



# Achievements of the projet

- A gender sensitive responsive service for women in Egypt has been created
- The service is culturally acceptable, responds to the needs of Egyptian women
- This service impacted on all public mental health services in Egypt, creating a cascade of similar services
- **Its main achievement is that many professionals in various specialities now know about the specific needs of women in treatment and are prepared to support them.**
- The challenge will be to maintain collaborative links with other services worldwide in order to make further improvements.
- Data by the service since its inception indicate that it has a unique role in providing services for women with substance use problems in Egypt.

# Impact of the project

After Egypt experience, other MedNET countries, wish to improve prevention, care and treatment of women who use drugs

**Lebanon Ministry of Health** just published, **with MedNET support**, and in consultation with NGOs a report on « **Needs of women with substance use disorders: qualitative research report** » (2019)

Other projects :

Egypt : model of care for patients with dual diagnostic

Seminar Algeria on care of women and drugs

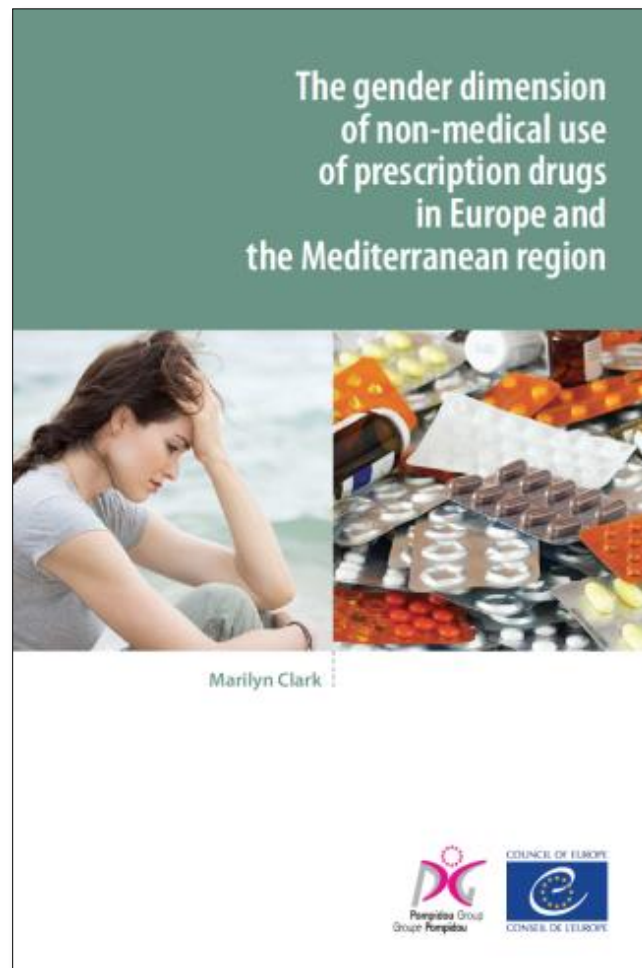
DU diplomas including a module on gender dimension

In Morocco and Tunis

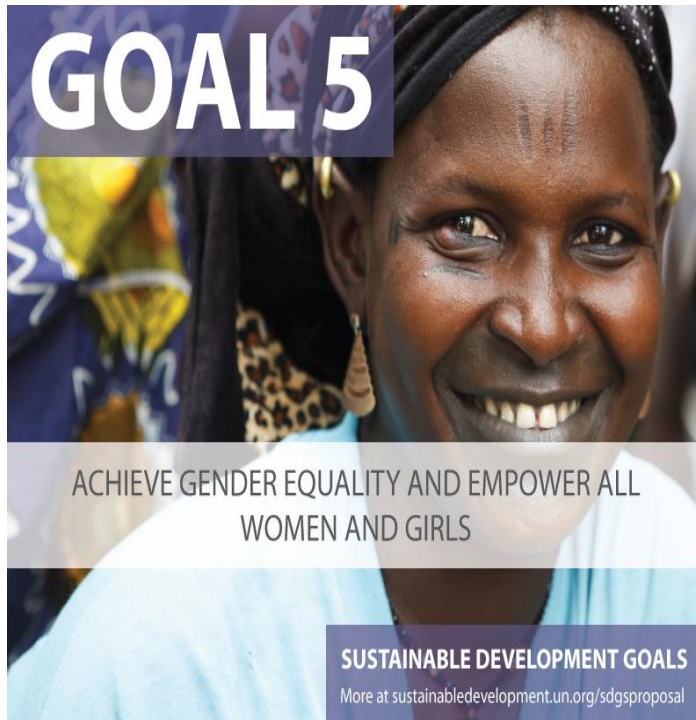




# Pompidou Group Publications



# International Organisations reports



- **2015 UN Assembly** underlined the critical importance of gender equality and the empowerment of women
- **UN CND Resolution 59/5 2016** « Mainstreaming a gender perspective in drug-related policies and programmes »
- **UNGASS 2016** outcome document encourages member States to address specific needs of women in the context of drug policy
- **The International Narcotics Control Board (INCB) 2016 annual report** - specific chapter on women and drugs
- **UN CND 2019** confirms “the importance of appropriately mainstreaming a gender perspective into drug-related policies and programmes”

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**Thanks for your attention !**



“We cannot succeed  
when half of us are  
held back.”

Malala Yousafzai