

Barriers to stimulant treatment access for women who use methamphetamine in inner Sydney

A qualitative study

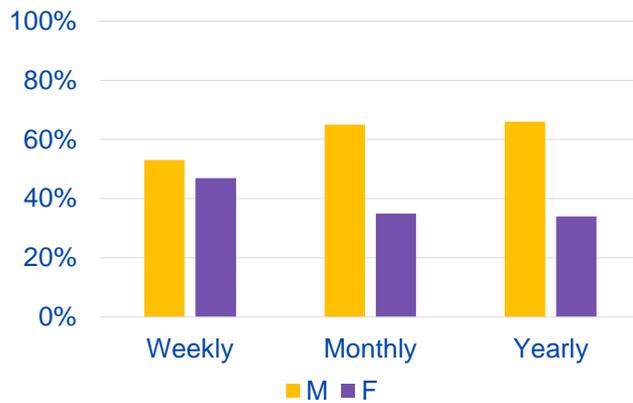
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UNDER THE STEWARDSHIP OF MARY AIKENHEAD MINISTRIES

Where are all the women?



Frequency of use by gender (NDSHS)



Aims



To understand the barriers to accessing the Stimulant Treatment Centre, Darlinghurst for females who misuse methamphetamines.

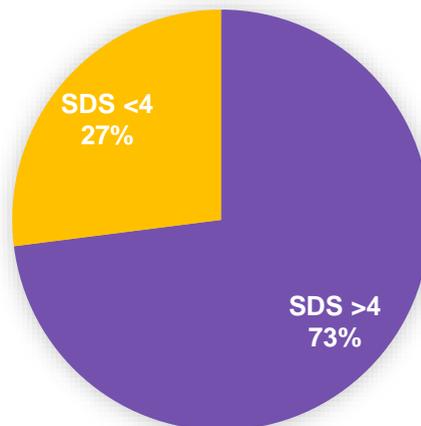


Method

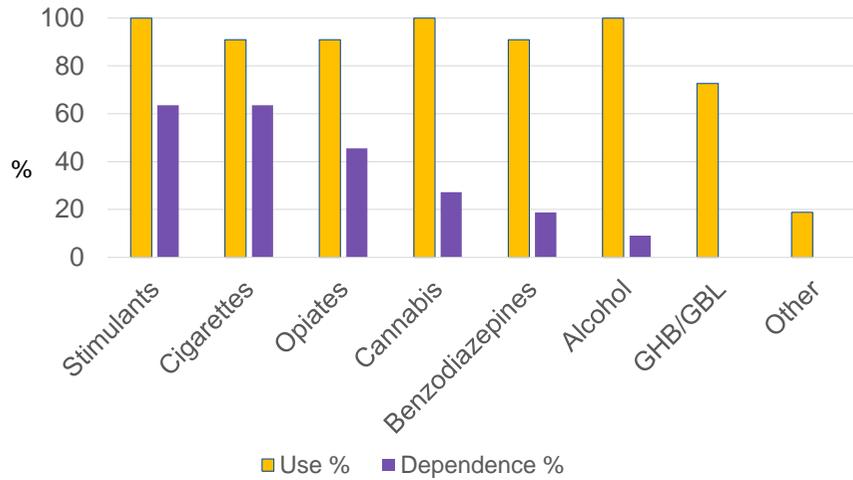
- A qualitative enquiry
 - Questionnaire and semi structured interviews
 - Eligibility - weekly MA use, identify as women
 - Ethics - St Vincent's Hospital Sydney HREC
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Participant Characteristics

- N=11
- 3 women identified as Aboriginal/
Torres Strait Islander



Participant Characteristics



Findings

Findings

Barriers to accessing drug specific treatment are due to:

- Not identifying as dependent
- Stigma
- Social Isolation

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I'm not normal...but I'm not that bad

Theme	Barrier
Gender transgression	Not identifying as dependent
Boundary setting	



Gender Transgression

"I really need to go back to the family. The ice has stopped me from doing things that I should be doing"

(Participant 6)

Boundary Setting

"You know, swapping sex for drugs - it's not my thing"

(Participant 3)

"I feel sorry for her...she doesn't have that self control"

(Participant 1)

I sometimes feel powerless... but I'm not a victim



Theme	Barrier
Power discordance	Stigma
Impact of use	Social Isolation
Empowered use	Not identifying as dependent



Power discordance



'With some doctors ...once they realised you're a sex worker or a drug user their whole persona changes'

(Participant 4)



Impact of use

“There's too much co-dependency ... I think that's why women aren't stepping out”

(Participant 6)

Empowered use

*“I enjoyed the experience very much ... it elevated my levels of ... **superwoman likeness**”*

(Participant 3)

Discussion

Women were:

- aware of transgression with use but set boundaries
 - able to identify benefits to use
 - health seeking but not for methamphetamine dependence
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Discussion

Accounts of

- stigma and abuse at multiple levels when seen to transgress from expected carer role
 - variation to the extent women identified as victims
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Conclusion

Barriers to accessing drug specific treatment are due to:

- Lack of identity of dependence
 - Persistent judgement and stigma at an interpersonal, structural and institutional level, for females who misuse methamphetamines.
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Limitations

- Metropolitan (limited applicability to outer urban/rural/remote use)
 - Participants recruited from services, so already able to engage to some degree.
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Practice implications

Improve our service by:

- Continuing research
 - Improve identification
 - Encourage harm reduction strategies
 - Provide non-judgemental care
 - Support women's needs
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Disclosure of interest

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References

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Questions?