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

A qualitative study

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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

Participant Characteristics

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

SDS >4 73%
SDS <4 27%
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

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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*

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**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

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
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.

Limitations

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

Improve our service by:

- Continuing research
- Improve identification
- Encourage harm reduction strategies
- Provide non-judgemental care
- Support women’s needs

Disclosure of interest

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References


Bunting PJ, Fulde GWO & Forster SL. Comparison of crystalline methamphetamine ('ice') users and other patients with toxicology-related problems presenting to a hospital emergency department. The Medical journal of Australia. 2007 Aug. 187;10: 564-566


Questions?