

Drug Dependency and Women's Health

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Context: The present review attempts to distinguish some management, challenges and solutions to drug dependency of women. The issues make clear the need for accomplishing different prevention and management strategies in both genders.

Evidence Acquisition: The present review comprised data of related domain from different printed and online data bases such as UN, SID, ISC, Medline, ISI and etc., as well-known sources of scientific studies.

Results: The review of data in corresponding domain presented two distinct sections which are challenges of addiction in women, and strategies for sufficient treatment of addicted women which include some underlying strategic subcomponents

Conclusions: As indicated by the studies, serious attention must be paid to the treatment needs of women, regarding tools, and practical and potentially equal strategies necessary for having a healthy community.

Keywords: Treatment; Women's Health; Iran

1. Context

Drug dependency or addiction affected many people annually; and are influenced by multifaceted predisposing factors (1). According to American Society of Addiction Medicine (2014) the phenomenon is a primary, chronic disease of brain reward pathways, motivation, memory and related conditions. Dysfunction in any of these entities leads to characteristic biological, psychological, social and spiritual manifestations. This is a pathological process by which an individual seeks reward and/or relief from substance use and other behaviors. The addiction is characterized by inability to consistently abstain from substance abuse, impaired behavioral control, craving, diminished recognition of significant problems associated with individual's behaviors and interpersonal relationships, and a dysfunctional emotional response. The problem often involves cycles of relapse and remission. Without treatment or engagement in recovery activities, addiction is progressive and can result in disability or premature death (2). Problems related to drug abuse place a great threat to society and deteriorate the quality of life, family structure, and lifestyle (3). According to evidences shown over the last decades, both genders are vulnerable to substance dependence. Also some studies contend that females are more susceptible than males to addiction during transition periods of drug use, characteristic of drug addiction and relapse (3). The issue could lead to other problems such as suicide ideation and suicide attempts (4). Commonly it is assumed that natural char-

acteristic of women play a significant role in consolidation of family, parenting and promotion of psychosocial health of society. On the other hand, the populations are often susceptible to gender-related roles regarding social problems. Biopsychological differences between males and females exert great influence on the prevalence, incidence and management of disorders. Among several problematic situations the drug dependency might be a more striking plight confronting women. Substance abuse among male adults is more common than women, but recently the rate of drug dependency has increased among women (5). Although in this domain, men are more likely to drink heavily and inclined to drug misuse than women, the abstinence is common among females. As some authors believe, this is because of a sagacious attribute, which could predict self-efficacy and confidence (6). Some studies indicate that substance abuse especially opioids have increased over the last two decades (7, 8). In addition, a research has shown that although men are more likely to misuse illicit drugs, women mostly indulge in the misuse of prescription drugs such as tranquilizers and anti-depressants (9). Some studies indicate that drug dependency in females might result from inappropriate medication prescribed by physicians, mass media effects, and personal desire to mental manipulation (10). Nowadays the issue of increasing drug abuse among women in society alarmed experts to think about etiology and plans to decrease the rate of drug consumption. Changes in life

styles among young people suggest that substance misuse may pose a greater problem for women compared to its traditional trend (5). As previously mentioned gender roles and characteristics could lead to a variety of situations in women. The drug consumption by women follows different patterns, such as major mental and behavioral disorders developing before drug consumption. This means that psychological disorders and habits lead females into drug abuse and dependency (11). The females are affected faster by drug abuse and experience harm more quickly than males. Some researchers contend that low social control, depression, lower religious beliefs and delinquent peers influence drug abuse of women (12). Yet, drug abuse among Iranian women, is lower in contrast to other countries (13). Women are more likely to be victims of drug abuse, since 65% of drug dependents in Iran are married males who may expose their wives to greater risk for addiction (14). These women experience more psychological symptoms than those without addicted husbands (15). In addition, there is significant correlation between depression, stress disorders, and substance abuse among them. Women might have psychological problems simultaneous with drug abuse. According to a national study on substance abuse treatment admissions, 46% of females with mental disorders were at risk for consuming alcohol as their primary drug of choice followed by 18% using opiates, cocaine 17%, marijuana 10%, and stimulants 4%, and 4% other drugs (16). They usually abuse drugs to manipulate their psychological status. Addicted women confront several other problems including stigma, poverty, and family reaction (17). Physical and sexual violence against girls, are mainly associated with risk for drug use. Drug-dependent women are also more likely to have a high prevalence of lifestyle predicament or behavior-related health problems such as sexually transmitted diseases, anemia, and dental disease (18). Drug abusing women suffer from serious medical disturbances such as heart disease, increasing likelihood of HIV infection and C hepatitis, surgical conditions, and breast disease (5, 18). Drug dependent women face possible involvement in prostitution, increasing risk for HIV exposure and AIDS (19, 20). While drug abuse in women could result in illness and mortality, it could also compromise the pregnancy. Studies pointed that negative moral values, and social stigma of addiction in women, could have preventive role in initiation of substance use. While females could successfully submit to drug withdrawal interventions (21), at the same time the issue is also a barrier for female drug users to comply with management and treatment of drug dependency (22-24). Studies indicate that there is substantial difference in the management of drug consumption in males and females. The differences and similarities in drug use between males and females have not yet been fully understood. Especially in Iran, evidences suggest that influential initiating factors of addiction vary among males and females (5).

A larger proportion of women, become familiar with drugs by family members, especially their spouses (14) which in turn cause other social problems like HIV/AIDS that is among the most destructive side effects of drug abuse. It seems that family disturbances, drug availability, and presence of an addicted person in the family facilitate drug abuse.

2. Evidence Acquisition

The data for this archival review was retrieved from well-controlled global investigations including Iranian researches, organizations and institutions. Initially the data gathered through valid electronic and printed materials such as PubMed, SID, ISC, ISI, UN, etc., were reviewed and finally arranged to provide a systematic view on addiction.

3. Results

After gathering data and in-deep study, the issues to be considered were as follows: A) Challenges and addiction in women; and B) Management and strategies to treatment of women.

3.1. Challenges of Addiction in Women

In each society there are some challenging obstacles that confront the studies. In this context, studies in Iran revealed 4 elements that act as barriers to women's consenting to the process of treatment. These include:

- 1- Stigma, shame feeling, internalizing the idea that addiction is a moral collapse and denial of addiction.
- 2- Humiliation, family and society rejection, poverty, financial barriers, restrictions of services, shortage of female physicians and counselors to educate health services, inappropriate health conditions and welfare facilities, concerns about weight gain, choosing drug consumption against emotional problems.
- 3- Having stressful lives, fears on losing significant relationships with friends and relatives, need for children's care, during the treatment process of addiction.
- 4- Unnecessary bureaucracy and male - biased treatment plans.

3.2. Management and Strategies for Sufficient Treatment of Addicted Women

In this section authors listed gender-responsive issues. These programs regard needs of women in all aspects of their design and delivery, considering residency, staffing, extending content and materials of treatment program.

- 1- Providing specific management services tailored to needs of women, in particular psychosocial services, including shelters to keep addicted women, job creation, protection and support for children to enhance success of treatment should be regarded wisely.
- 2- Addiction management and treatment programs for women would be successful with special reference to

main risk factors, and caring barriers.

3- The programs need to identify gender differences, common pitfalls and special needs in the population.

4- Background of drug dependency consists of sexual and physical aggression and parental violence towards women. Therefore, investment in education, parenting, and lifestyle modification based on Iranian and Islamic culture could be an important strategy for prevention of addiction in women.

5- Designation of training programs for family, partner, and employer of drug dependent women and securing their support in the treatment process, in order to modify the prevailing view that addiction is a moral problem, not a disease.

6- Strengthening and providing prevention and treatment services, integrated into the primary health care system are highly important management issues, because women instead of referring to addiction treatment centers tend to follow their treatment through mental health providers.

7- Training of personnel, especially physicians in primary health cares and screening systems for addicted women are among the most important measures. A comprehensive and accurate screening program plays a significant role in assessing the medical needs of the patients. Health care workers engaged in primary health care systems and practitioners involved in treatment programs at higher levels, are quite capable to identify and solve problems, especially, treatment of mental disorders associated with drug use.

8- Cultural and age differences among drug dependent females, addiction risk factors for women, addiction-related behaviors, urge practitioners to pay attention to design and implement local and indigenous preventive programs.

9- With regard to peculiarity and population growth, a special predictive attention should be considered in governmental planning.

10- It is recommended to focus on causes of injecting drug and trend of drug abuse in different female populations, rather than spending human and financial resources just for repetitive epidemiological studies.

11- Most drug dependent women live with an addicted partner or communicate with addicted friends (15). Therefore, in designing treatment programs, it is important to pay attention to co-dependency.

12- Drug use by parents, especially the mother, increases the possibility of physical and sexual abuse, as well as neglecting children. Caring for children during process of treatment is of paramount importance in designing programs, especially for those unable to pay for the upkeep of their children, a condition provided by supporting institutions such as welfare foundations.

13- Since the family and friends of drug dependent women are less likely than addicted men to persuade women to abandon drug, it is recommended to take appropriate measures in regard to designing programs, raising pub-

lic awareness and education.

14- Addiction treatment services for drug dependent women must be free from violence and punishment to guarantee physical and mental health and behavioral changes.

15- Constant and continuous health-related supervision by involved institutions must be reflected in improved services after treatment process. This could significantly reduce illicit activities such as drug relapse, and risky behaviors in women. Thus, designing plans with one year duration seems essential.

16- It is useful to train staff who are compassionate and familiar with women's characteristics. This encourages addicted women to refer more easily to health providing centers.

4. Conclusions

Drug dependency is a multifaceted problem which involves both individual and community. Promotion of gender management issues at the international, regional or national level needs official recognition. For example, women who receive various services in the same-sex center have better opportunity to comply with treatment (25, 26). Also affiliations with governmental and non-governmental organizations created by experts are essential for a successful treatment. In this connection, the findings of a meta-analysis indicate that integrative program based on females needs is a viable approach to reduce substance abuse in the population (27). Though management programs may be eclectic in the types of counselling methods employed, a unifying theory and set of principles provides a framework for programs, in relation to development, content and materials. These ensure the productive treatment of women using Women's Integrated Treatment (WIT) model (28).

As studies indicate, women also have more severe problems in relation to compliance with treatment than men (24). Many have experienced trauma for which they turned to substance use. They are more likely to have mental health problems such as anxiety, depression or post-traumatic stress disorder than men. They also have fewer resources in terms of education, employment and finances. On the other hand, men use illicit and other substances more than women; most management and treatment programs have been designed to favor males and do not take into account the gender differences (29). Treatment services which concentrate on only women programs have led to gradual increase in attracting addicted women (30). Also therapeutic community (TC) approaches which increased over the past decades have largely neglected addicted women (31); although there are some benefits in these approaches (32), women may encounter difficulties if their needs are underestimated. In relation to addicted women in Iran, serious attention must be paid to their successful treatment program by providing tools, and obligatory directives and practical

approaches. Previous studies demonstrated that integrative programs could benefit women even pregnant drug dependent females (30). Thus considering evidence-based managements such as Early Start (EA) which resulted in successful outcome might help policy makers arrange more accurate decisions at community level.

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Authors' Contributions

Dr Saber, as the first author by relying on his scientific history and experiences recruited data resources, planning, preparing papers in Persian. Dr Jadidi as corresponding author arranged the data and edited the article in English format. Then the ultimate draft prepared.

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