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HOW GENDER CONSIDERATIONS CAN INFORM PUBLIC POLICIES
DEMAND REDUCTION AND SUPPLY REDUCTION
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How Gender Considerations Can Inform Public Policies Demand Reduction and Supply Reduction

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Outline

- § Gender Differences
- § Policy Implications
 - Demand Reduction
 - Supply Reduction
- § Future-Forward Horizons




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Gender Differences and Demand Reduction

Key Messages

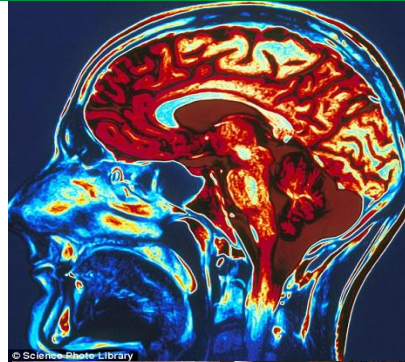
- ▶ Women have a variety of unique issues to consider in developing drug-related policies.
- ▶ Gender is not a protective factor against drug addiction.
- ▶ Gender is also not a predictor of treatment outcome success or failure; however, there are specific ways that drug-related policies can be informed by gender-related research.



Gender Differences and Drug Addiction

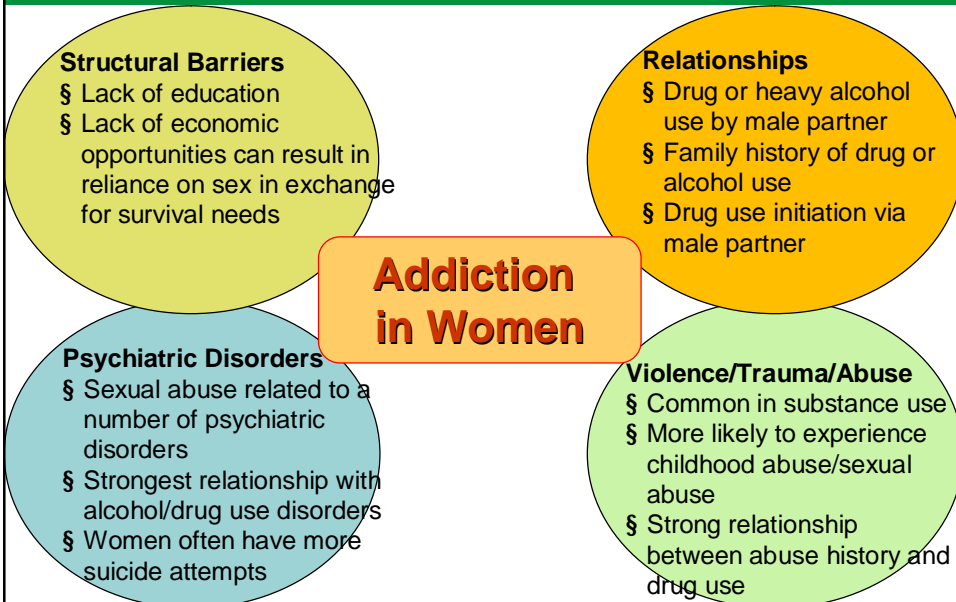
Compared with men, women:

- ▶ Initiate alcohol and other substance use at an earlier age than in previous generations, and at approximately the same age as men.
- ▶ Show increased prevalence in past two decades of alcohol and drug use with lower levels of abstaining and higher levels of dependence.
- ▶ Telescoping: Advance more rapidly from regular use to first treatment episode.
- ▶ At treatment entry, with fewer years of use, exhibit more medical, psychiatric, and adverse social consequences.



(Compton et al, 2007; Grucza et al, 2008; Randall et al., 1999; Hernandez-Avila et al., 2004, Jones et al., 2004 Piazza et al., 1989; Randall et al., 1999)

Gender Differences and Drug Addiction



Gender Differences and Drug Addiction Treatment

- ▶ **Probability of entering treatment for substance abuse is lower for women than men**
- ▶ **Women may preferentially seek care for drug addiction in mental health or primary care settings with chief complaints of depression, anxiety, and family problems (not alcohol or drug abuse)**
- ▶ **Specific barriers to treatment entry exist for women**



Gender Differences and Drug Addiction Treatment

Entry

Barriers for women include:

- **Lack of treatment services for pregnant women**
- **Lack of childcare services for parenting women**
- **Economic barriers (e.g., women in entitlement programs; lack of insurance; other resources)**
- **Higher risk for certain co-occurring psychiatric disorders such as mood, eating, anxiety, and post-traumatic stress disorder**
- **Trauma histories**
- **Social stigma and discrimination**

(Brady and Ashley, 2005; Pelissier and Jones, 2005; Grella, 1997; Brady and Randall, 1998; Greenfield et al., 2007)

Gender Differences and Drug Addiction Treatment

Women-Focused Treatment and Relationship to Special Needs of Women

§ Evidence of improved treatment outcome in women-focused programs that provide adjunctive services and address psychosocial needs (potential barriers) that are more common to some subpopulations of women with substance use disorders:

- q Childcare needs
- q Financial concerns
- q Support for pregnant women
- q Job training
- q Life-skills training
- q Transportation
- q Assistance with transportation
- q Social and peer support
- q Special programming to minority women
- q Programming for women with trauma

(Grella et al., 1999; Volpicelli et al., 2000; Hien et al., 2004)

Gender Differences and Demand Reduction

Key Messages

- ▶ Women have a variety of unique issues to consider in developing drug-related policies.
- ▶ Gender is not a protective factor against drug addiction.
- ▶ Gender is also not a predictor of treatment outcome success or failure; however, there are specific ways that drug-related policies can be informed by gender-related research.



How Does Scientific Evidence Regarding Gender Inform Public Drug-Related Policy?

Forward-thinking drug-related public policy aims to promote the public good:

- ▶ improving individual and public health
- ▶ reducing crime
- ▶ improving neighborhood safety
- ▶ increase community and family cohesion

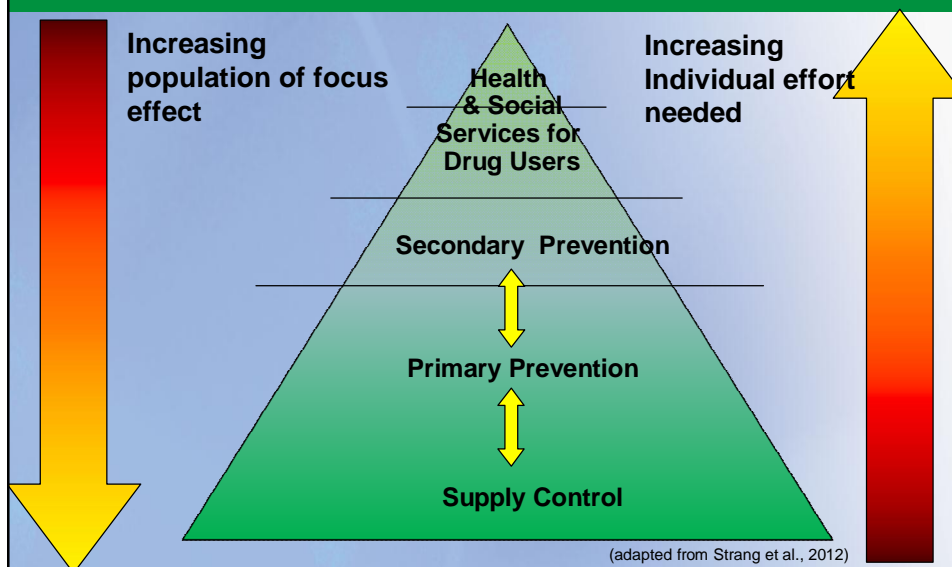
Drug-related public policy promotes the public good through diverse administrative actions (e.g., laws, regulations, and enforcement) that are designed to:

- ▶ Prevent the initiation of drug use
- ▶ Help drug users change their behavior and reduce drug-use consequences
- ▶ Control the supply of illicit drugs and the supply of diverted prescription drugs used for non-medical purposes

Scientific evidence can help policy makers select policies that best achieve agreed upon goals

(Strang et al., 2012)

How Does Scientific Evidence Regarding Gender Inform Demand Reduction Policy?



How Does Scientific Evidence Regarding Gender Inform Supply Reduction Policy?

- Increasingly, women are being used to traffic drugs across borders.
- Increasingly, women are being incarcerated for drug crimes and this provides an opportunity to re-evaluate laws related to drug crimes and sentencing.
- Drug trafficking affects women directly and indirectly via sex trafficking, prostitution, and associations with DTO members.
- Polices and resources to implement policies to provide for women's needs in prisons and to provide protection, resources, return of documentation for sex traffic victims as well as economic opportunities to help women avoid prostitution are needed.



Supply Control

How Does Scientific Evidence Regarding Gender Inform Demand Reduction Policy?

- Science shows that women and men typically initiate drug use in different ways (e.g., women via relationships with men and men via peer relationships).
- The gender gap is closing in terms of age of initiation of drug use.
- Thus, prevention programs should start at young ages, be applied without interruption in all grades, and in public health campaigns and take gender initiation issues into account.



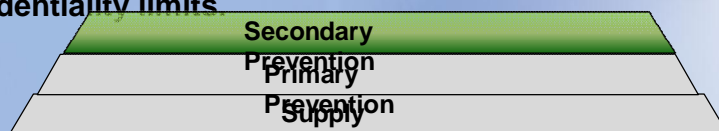
Primary Prevention



Supply Control

How Does Scientific Evidence Regarding Gender Inform Demand Reduction Policy?

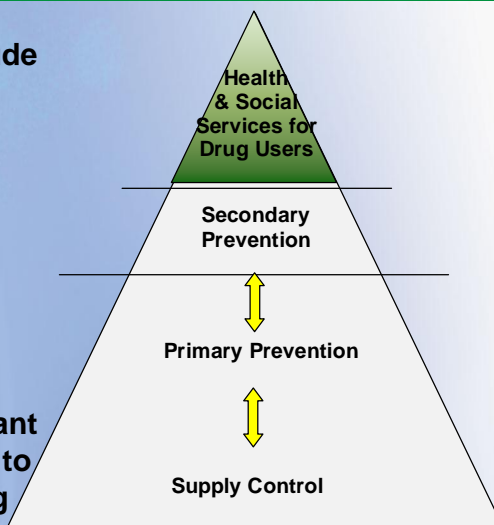
- For women, secondary prevention can be accomplished based on screening and brief intervention that can be conducted in places where they are most likely to intersect with assistance, in a primary medical or obstetrical/gynecological care setting, or when seeking help for family or mental health issues.
- Thus, policies and resources to implement policies could include training of diverse staff to perform women-centered drug-use screening and brief intervention and referral for women with greater severity. Policies should also recognize the issues associated with different screening methods and confidentiality limits.



How Does Scientific Evidence Regarding Gender Inform Demand Reduction Policy?

§ Policies and resources to implement them could include evidence-based women-focused programs that provide adjunctive services and address psychosocial needs and barriers to treatment that are more common to some subpopulations of women.

§ The special needs of pregnant and parenting women need to be recognized in developing policies



FUTURE-FORWARD HORIZONS

The next generation of drug-use-related policies have the opportunity to use scientific evidence regarding gender differences and similarities to address the structural, programmatic, and socio-cultural antecedents and consequences of drug use in order to maximize the public good.

Likewise, science has the opportunity to benefit from drug-use-related policies to improve its design and implementation.

