

Women, trauma and alcohol dependency: Connections and disconnections in alcohol treatment for women

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Abstract:

Statement of the Problem: Women who have experienced Intimate Partner Violence (IPV) are at greater risk for physical and mental health problems including Post Traumatic Stress Disorder (PTSD) and alcohol dependency. On their own IPV, PTSD and alcohol dependency result in significant personal, social and economic cost and the impact of all three may compound these costs. Researchers have reported that women with these experiences are more difficult to treat and many do not access treatment and those who do, frequently do not stay because of difficulty maintaining helping relationships. However, these women perspective have not been previously studied. The purpose of this study is to describe the experience of seeking help for alcohol dependency by women with PTSD and a history of IPV in the context in which it occurs.

Methodology and Theoretical Orientation: An inter subjective ethnographic study using hermeneutic dialogue was utilized during participant observation, in-depth interviews and focus groups. An ecological framework was utilized to focus on the interaction between the counselors and the staff to understand this relationship and the context in which it occurs.

Findings: The women in this study were very active help seekers. They encountered many gaps in continuity of care including discharge because of relapse. Although the treatment center was a warm, healing and spiritual place, the women left the center without treatment for their trauma needs and many without any referral to address these outstanding issues.

Conclusion & Significance: Women with alcohol dependence and PTSD with a history of IPV want help however the health and social services do not always recognize their calls for help or their symptoms of distress. Recommendations are made for treatment centers to become trauma-informed that would help this recognition.

Biography

Deanna L Mulvihill is a Senior Nurse Therapist and a researcher who has developed a technique called Rebinding of the Body which helps people recover from trauma, learn self-help techniques and lead more productive lives. Her intersubjective ethnographic study has been published in a text called, "Women, Trauma and Alcohol Dependency, Connection and disconnections in alcohol treatment for women". She has published several articles in child and family psychiatry including an extensive literature review called "The Health Impact of Childhood Trauma". Presently, she has a small private practice and she works as a consultant for Cogenz and Thought Leadership and Innovation Foundation. She graduated from the University of Western Ontario with Doctor of Philosophy in Nursing in 2009. Her dissertation was "Seeking and Obtaining Help for Alcohol Dependence by Women who have Posttraumatic Stress Disorder and a History of Intimate Partner Violence."



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About Research Topic

Alcohol is a psychoactive substance with dependence-producing properties that has been widely used in many cultures for centuries. Worldwide, 3 million deaths every year result from harmful use of alcohol, this represent 5.3 % of all deaths. Overall 5.1 % of the global burden of disease and injury is attributable to alcohol. Alcohol consumption causes death and disability relatively early in life. In the age group 20–39 years approximately 13.5 % of the total deaths are alcohol-attributable. There is a causal relationship between harmful use of alcohol and a range of mental and behavioural disorders, other non-communicable conditions as well as injuries. Beyond health consequences, the harmful use of alcohol brings significant social and economic losses to individuals and society at large.

About Institution:

LAAS, located in Toulouse, France, is a research unit of the CNRS, the French National Center for Scientific Research, within the Department of Information and Engineering Sciences and Technologies. LAAS is associated to the University of Toulouse (Université Paul Sabatier, Institut National Polytechnique de Toulouse, Institut National des Sciences Appliquées de Toulouse). The research topics of LAAS, fundamental or applied, are focused on the study of complex systems at different scales with a multidisciplinary and systemic vision and an integrative approach. With 750 researchers, university faculty, engineers, technicians, post-docs and PhD students, LAAS is one of the key players in Systems research in the Midi-Pyrénées region, in France and in Europe.

References:

1. Drug Abuse Treatment and Rehabilitation: a Practical Planning and Implementation Guide (United Nations publication, Sales No. E.03.XI.II)
2. B. Bloom and S. S. Covington, "Gender-specific programming for female offenders: What is it and why is it important?" paper presented at the 50th Annual Meeting of the American Society of Criminology, Washington, D.C., 11-14 November 1998
3. S. S. Covington, Beyond Trauma: a Healing Journey for Women (Center City, Minnesota, Hazelden Publishing and Educational Services, 2003)
4. B. Bloom, B. Owen and S. S. Covington, Gender-Responsive Strategies: Research, Practice, and Guiding Principles for Women Offenders (United States, Department of Justice, National Institute of Corrections, 2003)
1. L. Nelson-Zlupko and others, "Women in recovery: their perceptions of treatment effectiveness", Journal of Substance Abuse Treatment, vol. 13, No. 1 (1996), pp. 51-59.
1. W. C. Bonney, D. A. Randall and J. D. Cleveland, "An analysis of client-perceived curative factors in a therapy group of former incest victims", Small Group Behavior: International Journal of Therapy, Counseling and Training, vol. 17, No. 3 (1986), pp. 303-321.
2. J. Copeland and others, Evaluation of a Specialist Drug and Alcohol Treatment Service for Women: Jarrah House, Technical Report No. 17 (Sydney, National Drug and Alcohol Research Center, 1993).
3. C. Kirk and K. R. Amaranth, "Staffing issues in work with women at risk for and in recovery from substance abuse", Women's Health Issues, vol. 8, No. 4 (1998), pp. 261-266.
4. D. Hedrich, Problem Drug Use by Women: Focus on Community-based Interventions (Strasbourg, Pompidou Group, 2000)
5. United States of America, Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Treatment, Intensive Outpatient Treatment for Alcohol and Other Drug Abuse, Treatment Improvement Protocol series No. 8 (Rockville, Maryland, 1994)
6. R. Fiorentine and others, "Drug treatment: explaining the gender paradox", Substance Use and Misuse, vol. 32, No. 6 (1997), pp. 653-678.
7. Health Canada, Best Practices: Treatment and Rehabilitation for Women with Substance Use Problems (Ottawa, Minister of Public Works and Government Services, Canada, 2001)
8. National Institute on Drug Abuse, Principles of Drug Addiction Treatment: a Research-Based Guide, NIH publication No. 99-4180 (National Institute on Drug Abuse, United States Department of Health and Human Services, 1999), p.

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