

Psychosocial adversities in women substance dependence: A case report

Sir,

Until recently, psychoactive substance use perceived as a male phenomenon. Although men out-rate woman in prevalence of substance use, women are at greater risk for its adverse effects.^[1] Gender status influence many aspects of substance use/dependence. Women substance use associated with psychiatric co-morbidity especially depression and anxiety disorder, while men substance use is related with more externalizing spectrum disorders such as antisocial personality.^[2-4] Many studies demonstrated that women suffer substantially higher health complications^[5] and psychosocial adversities^[6] related to substance dependence. Psychosocial factors influencing to the initiation, continuation and outcome of substance use in women.^[3]

In general, homelessness predisposing to many health and mental health conditions^[7] including substance abuse. A homeless woman is more vulnerable to trauma, victimization mental and physical health issues, and experience barriers for accessing treatment^[8]. The homeless women are more likely to use alcohol and drugs than other women.^[9] While homelessness itself predisposes women to many psycho-social adversities, add on substance abuse further increases their vulnerabilities.^[9]

Many women with substance dependence have experienced childhood or adult physical/sexual abuse and they likely to have substance use/dependent partners.^[3] A few available study from India suggest that childhood adversities, influence of partner or peers, problems in intimate relationship, role transition, life style changes, and physical and emotional stress can cause for the initiation or maintenance substance use in women.^[3,4,10] Nevertheless, women substance dependence is under researched topics when compared with the plethora of literature exploring male alcohol consumption and its related harms.^[11,12] There is dearth of knowledge and understanding about pathway of women substance dependence especially from India. Using a single case study approach, we illustrate the life trajectory of a woman with substance dependence. Informed consent to publish this case, on the basis anonymity, was obtained from the patient

Mrs. Geetha (real name masked) is a 42 year old woman and she brought by a counsellor to a community psychiatry clinic at Wayanad, with prolonged history of multiple substance abuse associated with irritable mood, anger outburst and over activity which later diagnosed as substance induced mood disorder by our consultant psychiatrist

Mrs. Geetha was born in a poor socio-economic background with history of substance abuse in both parents. She left home at the age of nine years and worked as a housemaid in several places till seventeen years of age. Later, she started living in a slum at Calicut, Kerala from the age of 17, where she begun to use multiple substances such as alcohol, nicotine, cannabis, brown sugar which progressed over time. During this time, she got in to commercial sex work to earn money for food and substances. In the meantime, she got in to a living relationship with a man of similar habits and gave birth to a male child. The couple didn't own a house and they lived in street with the child. A few years later, she captured in TV news with pictures of brown sugar use. Consequent upon this, she got arrested and imprisonment for many years. After the punishment period, she find hard to live her life without having a job or support. She was unable to trace her partner or son. Thus, she involved in begging to earn money for food and substances. Later, a volunteer rescued her from the street and placed in a charitable home at Calicut. She received de-addiction treatment and started to work as a home nurse. However, a few months ago, she relapsed and admitted again for the treatment. On discharge, she was rehabilitated in a destitute home in Wayanad form where she brought for the treatment.

The psychosocial adversities/vulnerabilities in the Mrs. Geetha's life included homelessness, parental substance abuse, separation from parents in childhood, early exposure and dependent to multiple substances, living in street and brothel house during childhood, economic hardship, poor social support, commercial sex work and legal punishments including Jail life.

This case report highlights the role of social and family environment in shaping substance

abuse. Studies among street and shelter women populations report one-quarter to one-third have alcohol use problems, while around half have used or abused illegal drugs.^[13] Further, homelessness experience specific hurdles in seeking treatment, for example, not having a place to live makes it difficult to engage in substance abuse treatment.^[14] Being homeless also means having poor support system. Hence, this also hinder for the initiation and maintenance of treatment. In this case, we had difficulty in continuing the treatment as patient transferred to another destitute home.

Substance use problems tend to run in families, suggesting a family history of substance use problems is a significant risk factor for the development of substance use disorders^[15,16] and children of disrupted families are at high risk of initiating substances and sexual intercourse.^[17] Clearly, parental substance abuse negatively influences children and family environment. However, most of the studies examined parental substance abuse in relation to substance use behaviours among boys/males, while such effects in women substance use/abuse is largely unknown. Since gender influence many aspects of substance abuse,^[3,10] the findings pertaining to male substance abuse cannot generalize to the context of female abuse. A few studies conducted in this area reveals that certain occupations such as sex work and working in alcohol joints, serve as risk factors for initiation of alcohol or substance use in women. The women who drink heavily have been shown to be more likely to have early sexual experiences, to have a greater number of sexual partners, and to have unprotected sex.^[3,4] The women with substance dependence are less educated, unemployed and initiated drug use in younger age as compare with males. The men use more alcoholic beverages while women use cocaine or similar substances.^[18] Deficits in social support increase vulnerability to substance use in female.^[10] The men and women drinkers who cohabited were more likely to engage in heavy episodic drinking.^[10] The women tend to delay in accessing/availing de-addiction treatment than men and they experience severe psychological, physiological and social consequences due to the substances.^[10]

Majority of the above findings are comparable with our findings in this case report.

The women substance dependence is a complex phenomenon intervened with many individual, family and social factors. A detailed assessment of psychosocial adversities including issues of homelessness, support system, abuse and neglect, parental and family factors, legal issues are particularly important to be examined and addressed in de-addiction services.

Aleena George
Psychiatric Social Worker, NIMHANS,
Bangalore, India

Anvar Sadath
Postdoctoral Researcher, Department of Public
Health, University College Cork, Ireland
Email: anvarvakkayil@gmail.com

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