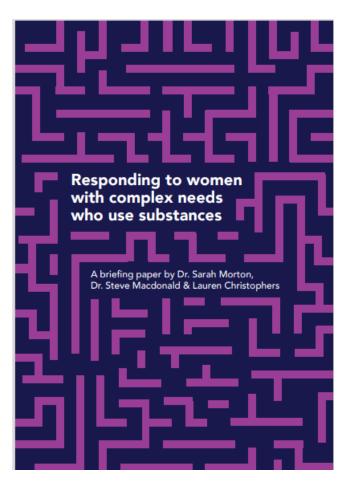
International Overdose Awareness Day 'Trauma and trouble': how can we intervene earlier in women's lives?

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IMPLEMENTING A GENDER APPROACH IN DRUG POLICIES: PREVENTION, TREATMENT AND CRIMINAL JUSTICE



Carine Mutatayi, Sarah Morton, Nadia Robles Soto, Kristín I. Pálsdóttir and Cristiana Vale Pires

on, A handbook for practitioners and decision makers



"Why are we not seeing women before they get to these levels of trauma and trouble? Women are hugely under-represented at the start of their difficulties, they present when something drastic has happened, a hospitalization, an overdose, the loss of children. Why are they not asking for help way before that?"

Criteria for innovation

- Provision of responses and interventions to women's substance use with a gender inclusion or gender sensitive focus.
- ► Gender-specific aspects practical, theoretical.
- Evaluation and evidence base.
- Mechanisms by which gender inequalities and differences are addressed.

Acknowledge and address structural inequalities

- Structural inequalities undermine the work done by services that support women creating difficulties at all stages of accessing, maintaining and moving on from intervention.
- Structural inequalities may also impede recovery and result in further traumatization.
- Co-location of services that cover physical health, mental health, and social supports in an integrated care model may offer the potential to address this issue (Jego et al., 2018).



Build trust

'Trust' includes trust between the service user and the practitioner and between the service user and the agency (Edland-Gryt and Skatvedt, 2013). How trust is built is a key question. **Positive client and practitioner interactions** can be the key to engendering trust (Morton & O'Reilly, 2019; McNeil & Guirguis-Younger, 2012).

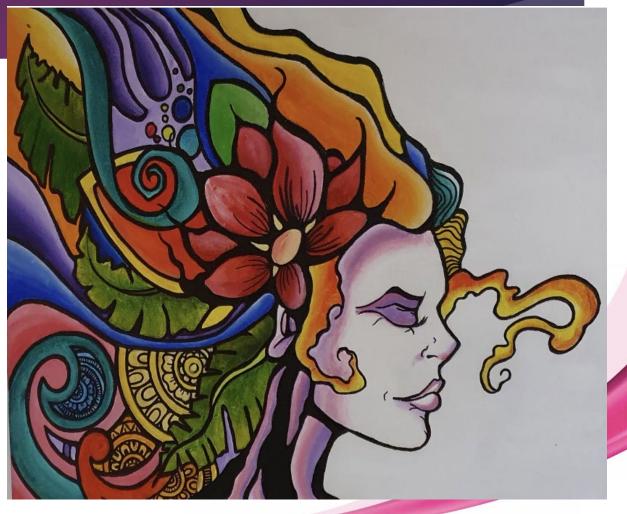
The values of practitioners may also underpin trust building, so where these values centre on addressing inequality, unconditional positive regard, and relational caring (Wright, 2004) conditions for trust can be created.

Attending to language may also be key.



Attend to safety

- Safety tends to be considered as safety in regard to practitioners and the organisation and connected to intoxication, violence and drug dealing within wider health settings (Morton & O'Reilly, 2019)
- Need to attend to safety both in wider lives of our clients or in relation their sense of safety as they engage in supports.
- Attending to safety can require the practitioner to stay both vigilant yet relationship-focussed, and clarity in regard to staff responsibilities within organisations has found to be important in ensuring a safe context and safe engagement (Morton & O'Reilly, 2019).



Consider immediacy and pathways...

Immediacy can be key.

Access to appropriate and gender specific services.

► Seamless referrals is a challenging process to achieve – but the dedicated caseworkers are identified as key in improving mechanisms of bridging services and navigating the complex landscape of service provision.

Women often assume they are ineligible for certain supports because they do not fit certain criteria or do not identify with a specific service.

Keeping service terminology and criteria general may promote inclusion.



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