

**YSAS**  
SEEING **YOUTH** IN A  
DIFFERENT **LIGHT**

**YSAS SNAPSHOT:  
YOUNG WOMEN IN YOUTH ALCOHOL  
AND OTHER DRUG SERVICES**

November 2013

YOUTH  
SUPPORT +  
ADVOCACY  
SERVICE



# THE KEY FINDINGS AMONG WOMEN IN YOUTH AOD TREATMENT

1. 41% of women were **separated from family**; 46% of young women had been involved with **Child Protection**; and 66% of young women had **experienced a housing problem**
2. Drug use severity and **drug-related harms are higher among young women** than men
3. **77% of young women had experienced neglect and/or abuse**, compared with 55% of men
4. Three quarters of young women have mental health issues and the prevalence of self-injury and suicide attempts **twice as common** in women than men

## RECOMMENDATIONS

1. Development of specific youth AOD treatment services tailored for young women
2. Consideration of women's needs in the development of existing programs
3. Fostering of 'women's spaces' within services
4. Actively target young women earlier in their drug use pathways to reach them prior to the point of severe use and vulnerability

*YSAS is currently developing an online module in the Youth AOD Toolbox ([youthAODtoolbox.org](http://youthAODtoolbox.org)) on Specific Approaches for Young Women which makes recommendations for clinical work and program design*

## INTRODUCTION

In the past two years, two studies have been undertaken in the youth alcohol and other drug (AOD) sector<sup>1,2</sup>. These have found significant differences in the needs and characteristics of young men and women accessing youth AOD services. Uncovering these differences encouraged the researchers to analyse their data regarding gender more systematically. A brief account of the findings are presented in this snapshot.

At the broadest level, the prevalence and severity of all psychosocial problems measured in both studies were considerably greater for young women. The only exception was criminal justice involvement.

The current Victorian alcohol and other drug treatment system was instituted by the State government in the late 1990s in response to an expert inquiry chaired by Professor David Pennington<sup>3</sup>. Up until this time, young people were expected to access adult services. This inquiry incorporated a comprehensive treatment response for young people. This was a breakthrough and an Australian first. However, the new youth AOD treatment system was not designed with the specific needs of young women in mind.

From the time the youth AOD treatment system was established, the majority of clients had been involved in the criminal justice system. This meant that more males were referred to AOD treatment as they are heavily overrepresented in the criminal justice system. This perpetuated the gender imbalance in drug treatment services. To add to this discrepancy, young people's substance misuse is commonly viewed as a behaviour undertaken by delinquents and deviants, mostly assumed to be young men. Increasingly, the evidence challenges this perception with almost as many voluntary requests for AOD treatment coming from young women and more women beginning to be referred by the courts.

The youth AOD treatment system evolved and diversified under subsequent governments, but to date, the needs of young women have not been specifically identified and catered for in a systematic way. A reform of the youth AOD treatment system in Victoria is now underway, representing a unique opportunity for the state government to develop services that properly respond to gender differences.

### The emerging research: a brief overview

There are two concurrent studies which have each pointed to the issue of gender. The first is a qualitative study by Daley<sup>1</sup> (forthcoming) which involved life-history interviews with 61 young people accessing youth drug treatment services in Victoria (42% female). The second is the recently completed Statewide Youth Needs Census (SYNC; Kutin, et al 2013<sup>2</sup>) where frontline youth AOD workers completed a survey for each of their current clients. In total, 1000 surveys were completed from 36 different services and this was 84% of the reported population.

Daley's study sought to understand how young people come to experience problematic substance use and essentially, there were two dominant explanations. The young men were constrained by sub-cultural norms of masculinity where machismo dominated and vulnerability was dismissed; and the young women used substance use as a way of coping with unresolved pain from a childhood of sexual abuse and abandonment. Among the young women, a clear relationship between childhood sexual abuse, abandonment, self-injury, substance use and suicidality was very clear. Twenty of the 26 women disclosed a history of self-injury, and 80% of these also disclosed a history of childhood sexual abuse. Of those who had self-injured, 70% had attempted suicide. Drugs were being used as an anaesthetic for intolerable emotional pain.

1 Daley, K. Forthcoming. 'To Stop Feeling': Understanding young people's problematic substance use. PhD thesis, RMIT University.  
2 Kutin, J., Mitchell, P., Bruun, A., Daley, K., & Best, D. 2013. SYNC 2013 Technical Report: Young People in AOD Services in Victoria. Youth Support + Advocacy Service.  
3 Victorian Premier's Drug Advisory Committee. 1996. Drugs and Our Community: Report of the Premier's Drug Advisory Committee. Melbourne: Victorian Government.

# 1. 41% OF WOMEN WERE SEPARATED FROM FAMILY; 46% OF YOUNG WOMEN HAD BEEN INVOLVED WITH CHILD PROTECTION; AND 66% OF YOUNG WOMEN HAD EXPERIENCED A HOUSING PROBLEM

Being disconnected from family is a considerable risk factor for young people and increases their vulnerability. Many were separated from their families, though this was far more common among females. The vast majority of women had experienced problems with the family (83% cf. 69% of males). Given this, it was not surprising that women were less likely to be living with family members. Young women were also far more likely to have been involved with Child Protection. Subsequently, it followed that a higher percentage of women than men had housing problems.

**Table 1: Gender comparison of vulnerability indicators**

Vulnerability Indicator	Women	Men	Overall
Abuse, Neglect &/or Violence	77%	55%	62%
Mental health problem (ever)	75%	59%	64%
Mental health problem (current)	67%	52%	57%
Self-injury	61%	31%	42%
Suicide attempt	38%	20%	26%
Involvement in Child Protection (ever)	46%	26%	33%

The Statewide Youth Needs Census (SYNC), conducted on June 6, 2013, developed a snapshot of the whole youth AOD population. This was the first study of its kind internationally and has provided the most comprehensive quantitative data set ever compiled on this population. The survey measured many domains of a young person’s past and current life experience including histories of abuse and neglect; prevalence of homelessness; drug use trends; engagement with school/work; physical and mental health; and quality of life.

Young women had higher prevalence of neglect, sexual abuse and physical abuse and therefore, it made sense that they also had a higher representation in state care and protection systems. Women had much higher rates of disconnection from family and thus, had a higher prevalence of homelessness. With these backgrounds, it is perhaps not surprising that there is also a higher incidence of mental health issues, including self-injury and suicide. The gender differences found in the SYNC study support the contention that young women have been a ‘silent minority’ in AOD treatment. The study found that young women comprise one third of all clients (34%). The over-representation of males can be explained by the high numbers of court referred clients; of these, 85% are male.

- 46% of women had been involved with Child Protection, compared with 26% of men
- 41% of young women separated from family (cf. 28% of young men)
- 66% of women ever had a housing problem (cf. 49% of men)
- Women were more likely than men to be residing in: Crisis Accommodation; prison; couch-surfing; Supported Accommodation; or Child Protection
- Although the majority of those in the child protection system reside in foster care, most young people in AOD treatment who were currently involved with child protection were living in residential units
- Among the sample, women were twice as likely as men to be living in residential units (9% cf. 4%)
- Almost two-thirds (63%) of the young women had a trusted adult in their lives who was not a family member, compared with just over half of the young men (53%)
- 30% of girls had a current housing problem compared with 22% of boys

## 2. DRUG USE SEVERITY AND DRUG-RELATED HARMS ARE HIGHER AMONG WOMEN THAN MEN

The SYNC study found that for both young women and men, the three most commonly used drugs (excl. Nicotine) were Cannabis, Alcohol and Meth/Amphetamine. Cannabis was the most common primary drug of concern across both genders and this was almost equal in prevalence (38% and 39% respectively). Among some of the other drugs, there were nuances between genders. Table 1 shows the top six drugs used by young people in the past month.

**Table 2: Drug use among young people in the past four weeks**

	Women	Men
Cannabis	61%	66%
Alcohol*	58%	66%
Methamphetamine	39%	33%
Heroin*	10%	6%
Prescription drugs (non-opiate)*	17%	11%
Nicotine	57%	49%

\*Gender difference is statistically significant at the .01 level

### Key gender differences among drug use patterns of young people

- In the past four weeks, young women were less likely than men to have used alcohol
- Heroin use is declining among young people in AOD services; however its use is more prevalent among young women. 10% of young women had used heroin compared with 6% of young men
- Injecting drug use was more common in women, with 28% having ever injected compared with 19% of men
- The use of non-opiate prescription drugs such as benzodiazepines was more common among women, with 17% having used prescription drugs in the past month, compared with 11% of men
- The question measuring the severity of drug use offered some curious patterns. Young women were more likely than men to be described as having 'No substance use' (9% cf. 5%); but were also more likely to be classified as having 'Severe' drug use (11% cf. 9%). Most young people, both men and women, fell within 'Moderate' or 'High' severity, with 62% of each gender falling into these two classifications
- 43% of women had experienced serious drug-related harms compared with 36% of men

## 3. 77% OF YOUNG WOMEN HAD EXPERIENCED NEGLECT AND/OR ABUSE, COMPARED WITH 55% OF MEN

Both neglect and all forms of abuse – sexual, physical, and emotional – were more common among the women (77% cf. 55%). This likely explains their over-representation in Child Protection. The negative effects of childhood abuse and neglect are well-established. Workers were asked to rate young people's level of vulnerability and again, women fared worse.

- 60% of women and 37% of men had ever been physically abused
- Emotional abuse was ever experienced by 69% of women and 45% of men
- More than half of the young women had been neglected (54%), compared with a third of the young men (34%)
- The prevalence of sexual abuse was very high. At least 44% of the women had been sexually abused, and it was unknown for a further 34%. This compares with 8% of young men who had been sexually abused (and unknown for 43%)
- 52% of young women were rated as 'High' or 'Severe' vulnerability compared with 37% of young men

The relationship between abuse and problematic substance use are complex. Many people who are abused as children do not go on to develop a drug problem; therefore, why some do is a question of relevance. The high prevalence of both abuse and neglect appears to be the key. Daley's<sup>3</sup> study shows that many young women in youth AOD services have been sexually abused, but also 'abandoned'. The abuse, almost always by someone within the family, was often not believed by the mother and/or the young woman was asked to leave the home. The absence of safety and support to recover from the abuse caused considerable trauma.

## 4. THREE QUARTERS OF YOUNG WOMEN HAVE MENTAL HEALTH ISSUES AND THE PREVALENCE OF SELF-INJURY AND SUICIDE ATTEMPTS WAS TWICE AS COMMON IN WOMEN THAN MEN

Given the backgrounds of abuse, neglect, family disconnection and homelessness, it followed that young women also had greater issues with their mental health.

- Three quarters of the young women (75%) had ever experienced a mental health problem (cf. 59% of males)
- 61% of women had a history of intentional self-injury, compared with 31% of men
- Suicide attempts were considerably more common among women. 38% had attempted to take their own life, compared with 20% of men

Self-injury and suicide are not one and the same. While many of the young women who had attempted suicide also had a history of self-injury, it is more likely that the cause of both issues was their childhood sexual abuse, subsequent abandonment and housing issues.



## DISCUSSION

The four key findings presented in this snapshot are likely to be interrelated. For instance, young women are more like to have severe drug use; but in turn, have more severe backgrounds. Young women are over-represented in both Child Protection and homelessness, but it is almost certain that this is because they are also over-represented in experiences of abuse and neglect. Similarly, as most abuse and neglect is experienced in the family home, it was not surprising that more women than men were disconnected from their families.

Each of these factors were interconnected; but each also created a further barrier for the young women. These barriers, and an absence of support, were detrimental to young women's mental health, where prevalence of mental health issues, self-injury, and suicide attempts were all more common among women than men.

When women present for treatment they are further along in their drug use 'careers' and have greater severity than men despite being the same age (on average, 18 years). This points to two things: first, young women appear to begin their pathway into problematic substance use earlier than men; second, services are not engaging young women as effectively as they do men.

Young women fare worse on all measures of psychosocial vulnerability. Whether this points to young women being more complex; or services only engaging the particularly 'pointy end' of young women is unknown. It is clear that there is a need to engage young women earlier. Given that few, if any, services specifically target young women, it is probable that there is a significant unmet need.

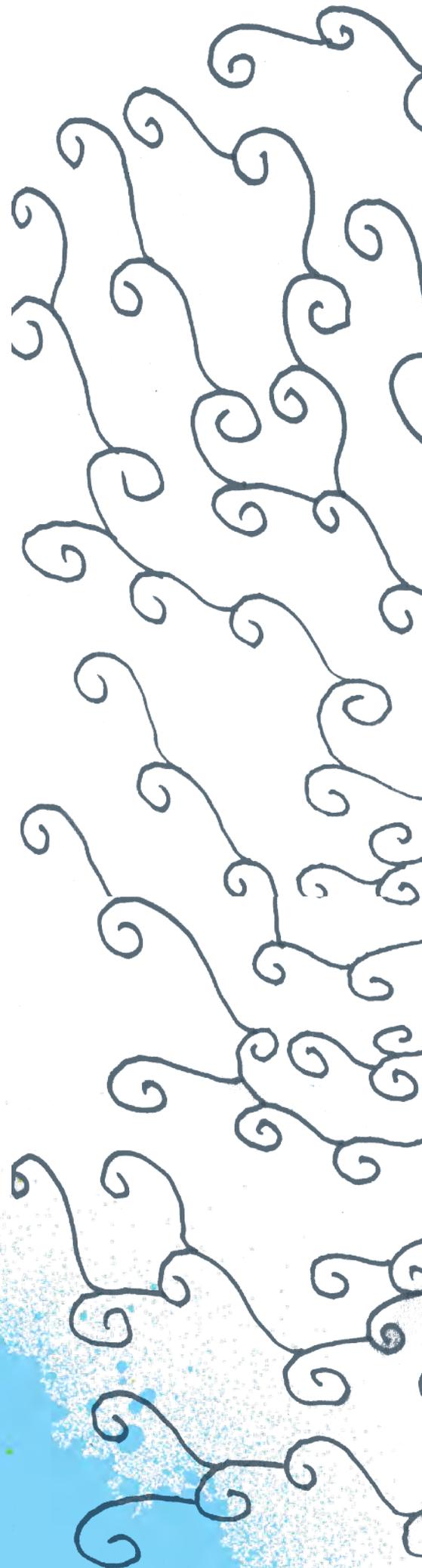
The statistics shown in this snapshot highlight that the needs of young women are both neglected and insufficiently addressed. Services would better meet the needs of women by considering gender in their program design. However, it is clear that what is necessary at a broader level is the development of a service designed for women, which actively seeks to engage them and systematically addresses their needs.

## HOW IS YSAS CURRENTLY ADDRESSING THE NEEDS OF YOUNG WOMEN?

YSAS deliver specialised support to young parents in the DHS Southern metropolitan region. This enables an experienced key worker to support 10 parents who have multiple and complex needs to receive simultaneous parenting and substance abuse support. The target group comprises 15-25 years olds who have a substance abuse problem and have children or who are pregnant. The program utilises a range of evidence-based therapeutic approaches from the YSAS Practice Framework and the YSAS *Working with Young Parents who are Substance Users – A Practical Casework Guide*. Beginning in 2014, YSAS will also be launching the 'Unite' program. This is a specific response to young parents whose children are in the care of Child Protection with the aim of reuniting families.

Birribi, YSAS' residential rehabilitation program, offer gender-specific camps within their program. These offer young women the opportunity for time with other young women in a structured environment designed to address their needs specifically.

YSAS are currently developing a module on *Specific Approaches for Working with Young Women* to be launched in the Youth AOD Toolbox ([youthaodtoolbox.org](http://youthaodtoolbox.org)). This will offer background information on the needs of women in youth AOD services; considerations for different practice contexts; and recommendations for clinical work and program design.



## RECOMMENDATIONS

### 1. Development of specific youth AOD treatment services tailored for young women

The best way to improve services for young women would be to create one for them. There are ways of adapting and accommodating existing services, some of which are detailed below; however, best practice would be to design a service or program for young women that takes into consideration their specific needs. This would be trauma-informed and with attention to improving education and employment opportunities for young women.

### 2. Consideration of women's needs in the development of existing programs

Program design needs to specifically target the issues that young women present with. Family disconnection and childhood abuse and neglect are the norm among women accessing youth AOD services, and almost two-thirds of young women have engaged in self-injury. Given this, these issues need to be systematically addressed in young women's treatment and staff need to be provided resources to do this effectively.

### 3. Fostering of 'women's spaces' within services

Existing services could make their programs more 'female friendly'. At present, most youth services' recreational spaces are filled with video games, pool tables, boxing bags and computers. Creating spaces for women, and women's only days / outings / residential stays, reduces a barrier to treatment for women who feel unsafe in the company of men.

### 4. Actively target young women earlier in their drug use pathways to reach them prior to the point of severe use and vulnerability

Young women in treatment are the same average age as the young men (18 years), yet their severity and vulnerability are greater. This indicates that services are meeting women later in their pathway than they do men. Targeting young women for earlier intervention at the early teen years would likely see services reaching them before their substance use and associated issues are as extreme. Rather than waiting for women to find services, services need to actively seek to find the young women.

## ACKNOWLEDGMENTS

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## SUGGESTED CITATION

Daley, Kathryn & Kutin, Jozica. 2013. YSAS Snapshot: *Young Women in Youth Alcohol and Other Drug Services*. Youth Support + Advocacy Service: Melbourne, Australia.

## FURTHER INFORMATION:

Kutin, Jozica., Mitchell, Penny., Bruun, Andrew., Daley, Kathryn., & Best, David. 2013. SYNC 2013 Technical Report: Young people in AOD services in Victoria. Victoria-wide Results. Youth Support + Advocacy Service: Melbourne, Australia.

