

“Women, Trauma Histories, and Co-occurring Disorders: Assessing the Scope of the Problem,” by Joy Newmann and Jolanda Sallmann in the September 04 issue of Social Service Review summarizes the research literature on co –occurring substance abuse and mental health disorders (ADM) and reports findings from a recent study of ADM in Dane County, Wisconsin. The research literature describes “an emerging profile of vulnerability” linked to poverty and victimization. “Existing studies ... consistently show that women with co-occurring addictive and mental health disorders have poorer treatment outcomes than women who have only one such disorder.”

“A key assumption is that women’s histories of interpersonal victimization, including both physical and sexual abuse, figure importantly in the development and course of co-occurring addictive and mental disorders, as well as in a host of other related problems.” The authors note that ADM is more common among women than men, and that almost two thirds of women participating in substance abuse treatment are likely to have a co-occurring mental health problem. On the other hand, only 10 -20% of women involved in mental health treatment are likely to have a substance abuse problem.

The authors comment that “women who report being victims of childhood sexual abuse are at higher risk for 13 of 16 subsequent lifetime mood, anxiety and substance disorders in comparison to women who do not have such childhood experiences.” Women with childhood histories of sexual abuse are at 10 times greater risk of having posttraumatic stress disorder (National Co-morbidity Survey) , 9 times greater risk of becoming manic depressive, 2-3 times more likely to have drug/ alcohol problems and major depression and are at elevated risk for anxiety disorders. “Studies among women do suggest that in the vast majority of cases mental disorders precede the onset of addictive disorders.”

These authors sampled 257 women in Dane County, Wisconsin with treatment episodes for mental health and substance use problems, 215 women who received only mental health treatment and 202 women who received treatment for substance abuse only. All of these women received treatment in 1998. 204 of these women agreed to participate in the study, an overall participation rate of about 31%. The authors insist that the women participating in the study did not differ in age, ethnicity and presenting problems from (sampled) women who could not be located or who refused participation. Approximately 20% of the women included in the study were African American (compared to 2% of women in Dane County) and 9% were of mixed ethnic backgrounds.

“...Women who received services in the public ADM system are substantially disadvantaged when compared to the general population of women in Dane County in terms of human capital and material resources.” These women are less likely to be

employed and, if employed, are less likely to be working full time. Women in the ADM system survive on incomes that are less than one third the average incomes of all women in Dane county (\$947 vs. \$3300 per month). A larger percentage of the women have never married, or, if they have been married, are more likely to be separated or divorced. These women are more likely to live alone than other women in Dane County.

“Almost three quarters of the women with ADM problems reported (histories of) both physical abuse and sexual abuse.” Women with co –occurring disorders were more likely to have been placed in foster care as children (18.5% vs. 8% for women with only a mental health or substance abuse disorder)”and of the women who are mothers, over half were separated from their own children against their will.” The authors’ hypothesis that “rates of physical and sexual abuse and other life adversities will be significantly higher among women who report a mental health and substance abuse problem than among women who report only a mental health or substance abuse problem” was confirmed in this study.

The authors note that “nearly 60% of the women in the total sample of high end service users have been hospitalized for a mental health problem at some point in their lives, with an average of 7.6 hospitalization episodes across the two groups.” Almost two thirds of women with co –occurring disorders have attempted suicide with an average number of 4 suicide attempts. “Women with co-occurring ADM problems not only have more complex diagnostic histories than women in the comparison group, but they are also more likely to struggle with self destructive thoughts and behaviors, to experience inpatient treatment episodes for substance use problems, and to receive an array of medications for their problems.

In commenting on the policy and practice implications of these findings the authors comment that, however concerning these women’s histories of childhood abuse, other life adversities “may be more immediate and require more attention”, especially issues related to provision of basic needs such as housing, food and child care. The authors support “one stop shopping” service integration efforts and urge service providers to come to grips with “competing ideologies” of therapeutic intervention, a reference to tensions between substance abuse and mental health treatment approaches. The authors comment on the ethnically diverse profile of these women and on the need for the appreciation of other differences in this client group. The authors emphasize that poverty is central to these women’s lives of struggle; “economic adversity continues to loom large in their lives.”

Finally, the authors comment that “A related finding, and one that is disturbing in its scope, is the predominant theme of violence in these women’s lives.” “Such violence begins early, and, for many women interviewed, continues into adulthood.” Almost 60% of the women in both groups in this study had been incarcerated. Many of these women experienced further abuse in jail or prison either at the hands of other inmates or guards, and of course, many of the women had experienced violence at the hands of intimate partners. “In short, many women who enter the ADM system have been exposed to an epidemic of interpersonal violence across the life course.” “The authors

recommend “a greater sensitivity to the role of violence in the development and course of women’s problems with mental health and substance abuse.”

“Accordingly, the starting points of our efforts to improve services should be recognition of the multiple hardships that women face and the limited resources they have at hand to cope with those hardships.”

I have summarized this excellent article at length because it is a description of the most troubled and chronic parents served by child welfare agencies. It is a grim hard to face picture; nevertheless helping parents with co- occurring substance abuse and mental health disorders is the biggest therapeutic challenge in child welfare.