

Moving Towards Women's Health

No. 13 April 2001

Including Black Women in Health and Social Policy Development: Winning Over Addictions*

Drug use, more specifically crack cocaine addiction and abuse in the African Nova Scotian community, has received little public attention even though it is a major concern within the community itself. Of particular concern is the effect of this drug on the stability of families and children. Individual efforts to address this problem are met with varying degrees of success. Many of these women are not able or willing to access current services, and there are no culturally relevant services available to them. Agencies are frustrated by their inability to effectively reunite these women and their children. These mothers are frustrated by the lack of services to meet their specific needs and tend to give up in despair, plunging them even further into their addiction and subsequent behaviours.

The purpose of this study was two-fold: 1) to better understand how the policies of health and social agencies impact on the experiences of African Nova Scotian women who are recovering from drug addiction and have had involvement with a child welfare agency; and 2) to engage those most affected in a participatory action research project to address the identified problem(s).

* Including Black Women in Health and Social Policy Development: Winning Over Addictions, Empowering Black Mothers with Addictions to Overcome Triple Jeopardy was conducted by Wanda Thomas Bernard. This participatory action pilot research project began a process of inquiry into a critical social issue for the African Nova Scotian community – an issue that is quickly becoming an out of control social phenomena.

Methodology

Phase One: Direct participation of the key stakeholders, Black women who were "winning over their addictions", in the participatory action research project. Twelve women were recruited to participate as co-researchers and participants in the consultation. For fifteen months, a core group of six women met bi-weekly with the principal researcher, occasionally meeting weekly when one of the women was in crisis. The women shared and analyzed their experiences, identified gaps in services, identified service providers to be invited to participate in the Phase Two consultation, and made recommendations for the larger research project.

Phase Two: Community consultation with service providers regarding programs and services in the Halifax Regional Municipality to address the needs of Black women who are mothers, dealing with addiction, and have involvement with a child welfare agency. Service providers discussed the services they are able to provide and collectively identified gaps in services to the target group. Participants also identified barriers in their agencies that limit Black women's access to their programs and strategies they could implement to overcome these barriers.

Findings

Stigma and shame from the community: Women with addictions are more actively discriminated against and have fewer supports available to them. They deal not only with prejudice based on their gender and addiction, but with the burdens of race and class. They are less capable of concealing their addiction and more likely to have agencies such as child welfare and income assistance involved in their lives.

Other problems underpin the addiction: Each woman's involvement with substance abuse was rooted in another critical issue, e.g., a family history of alcohol addiction, a personal history of abuse survival, either as a child or an adult, an experience of abandonment, and/or an experience of failure.

Threats from child welfare don't help: The loss of their children represented failure and contributed to the damaged self-esteem and shameful existence of these women. The women repeatedly stated that threats from child welfare did not help. They understand child welfare workers must do what is in the best interest of their children; they question why there are no services to help them meet their children's needs.

Lack of gender specific and culturally appropriate services: There is only one gender specific addiction treatment service in Halifax and no culturally appropriate addiction treatment services in Nova Scotia. These women want services without the expectation and added burden of explaining their unique cultural experiences. Agencies must address racism among staff and other participants.

Lack of supports from extended family and the wider Black community: Of great concern to these women was the stigma they felt in their own families and in the wider Black community. For many, this disconnection gave them a sense of hopelessness, pushing them into closer ties with the drug culture.

There is a link between the addiction and crime: Several women had been in conflict with the law (e.g., theft, prostitution) due to their addiction problems. Being incarcerated allowed them time to 'get clean' but forced a separation from their children. The stigma added to the jeopardy they already experienced. This involvement put these women at risk for a host of other problems as well.

Agencies are aware that they are not reaching this segment of the population: Community agencies clearly articulated they are not meeting the needs of this target group. There are real and perceived structural barriers for Black women that limit their access to these services. The agencies expressed wish to engage in a discussion of alternatives and a process to address these problems.

Recommendations

- Develop policies to meet the unique needs of African Nova Scotian women
- Develop residential treatment programs that allow women to keep their children with them
- Make existing programs and services more culturally relevant
- Treat this issue as a matter of urgency considering the long-term impact on children, families and communities
- Enhance awareness in the African Nova Scotian community about the real experiences of women who are struggling to win over addiction
- Conduct more research exploring the links between racism and other forms of oppression and the impact on women's health

