

# Creating a Better Life

## A Brief Report on a Support Program for Women at Risk for Drug-Related Harm

BY CAROL ROBERTS, SHARON O. BURKE, RON SHORE AND PENNY LAVALLEY

*Cet article présente un programme unique et innovateur qui vise spécialement les femmes utilisatrices de drogues à injecter, surtout celles qui sont enceintes ou qui ont la garde de leurs enfants. Ce programme est destiné à aider les femmes à développer des façons de réduire les risques associés à l'usage des drogues et les incite à améliorer leur bien-être moral, physique et social.*

Creating a Better Life (CBL) is a unique, innovative support program especially targeted toward women who use injection drugs, particularly those who are either pregnant or with custody of dependent children. The program was designed to support these women in developing ways to reduce risks associated with drug use and assist them in improving their emotional, physical, and social well-being.

The program was developed and implemented through a partnership between Queen's University, School of Nursing and the Kingston, Frontenac, Lennox and Addington (KFL&A) Health Unit who operate the Street Health Centre, a storefront location in the downtown core of Kingston, Ontario. At the onset of this program, the Street Health Centre operated a busy needle-exchange program, Keep Six! and a Methadone Treatment Clinic.

In the Spring of 1998, Queen's School of Nursing completed a study among women who were parenting and were currently using the services of Street Health (Roberts, Burke, and Simons-Chambers). Findings from this study and others in the literature (Pursley-Crotteau and Stern; Roberts; Rosenbaum) provided the groundwork for this intervention/evaluation project.

These findings were further supported by recommendations set forth in "HIV/AIDS and Injection Drug Use: A National Action Plan" (Health Canada). This "Call for Action" outlined a number of priority issues related to women on injection drugs. Recommendations of this report coupled with local research findings echoed the need to develop, implement and evaluate a comprehensive support program for high risk injection drug using women within the context of existing programs at KFL&A's Street Health Centre.

In January 1999, Health Canada HIV/AIDS Prevention, Care and Treatment Programs provided \$100,500 funding to develop, implement and test Creating a Better Life over a 28-month period. In September 1999, a further \$15,000 was granted by Health Canada. This funding was

targeted specifically toward programming for high-risk women. In February 2000, funding in the amount of \$38,000 was received from Sunnyside Children's Foundation. This funding was targeted to enhance parenting skills among this population and to provide specialized services for their children, aged twelve and under, over a one-year period.

Creating a Better Life incorporated a number of key features, including:

- Partnership between a local Health Unit and a University School of Nursing;
- Individualized and group counselling;
- Outreach home visiting by a public health nurse and a community/peer worker;
- Accessible, storefront setting in the downtown core, specific facility for women's program;
- Child care provided during programs and appointments;
- Transportation (bus or taxi) provided to and from the storefront;
- Programming tailored specifically to high-risk injection drug using women;
- Active participation of women in program development and management;
- Peer support worker to assist in outreach and recruitment;
- Development of outreach peer support network;
- Comprehensive healthcare, addictions counselling, needle exchange, methadone program on-site, food and clothing distribution available;
- Community education regarding harm reduction approaches to care;
- Nonjudgemental approach to care and support using harm reduction strategies
- Collaboration with a number of agencies including: HIV/AIDS Regional Services, Ontario Aboriginal HIV/AIDS Strategy, Better Beginnings, Frontenac Children's Aid Society, Action on Women's Addictions Research and Education (AWARE), as well as Healthy Babies, Healthy Children and the North Kingston

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Community Health Centre;

- Improved accessibility to appropriate health services.

### Summary of Research Procedures

A total of 26 high-risk women were recruited into CBL. All were drug dependent and 86 per cent reported recent injection drug use, primarily opiates and/or cocaine. Seven per cent were HIV positive and 87 per cent were HCV positive. Women had full or part-time custody of 23 children. Four were pregnant. A total of 21 women completed one year of the program. A pretest-post-test design was used to measure a number of clinical and behavioral parameters assessed at the onset of the program and at the end of 12 months of intervention. Parameters included changes in drug behavior, health, family dynamics, parenting skills, self-esteem, and empowerment. Qualitative data about women's self-reports of feelings, attitudes, and perceptions about CBL were collected through in-depth interviews and focus groups following twelve months of participation.

### Summary of Findings

Women identified the most important intervention in CBL as "support." The most important categories of support included: peer groups, counselling, health care, and advocacy/referral. These were described in detail in the qualitative data. These interventions correspond to those most frequently cited by staff as most important for women's outcomes.

The outcomes of support include "making changes." Making changes include personal changes and relationship changes that were identified in the quantitative data and were confirmed through qualitative data analysis of interviews and focus groups.

The following personal changes noted after one year of programming:

- Improved self-esteem;
- Improved health;
- Less involvement with the criminal justice system;
- Reduction or cessation of injection drug use (IDU).

Some continued dependency on other drugs. Some continue IDU. All pregnant women ceased IDU throughout pregnancy and delivered healthy babies.

•Improved knowledge of risk factors associated with drug related harm, HIV and HCV.

•Making changes include changes in relationships with others after a year of programming, including:

- Better understanding of others in relationships;
- Less conflict with partners. Less control by partners.

Less physical abuse;

- Less conflict with family and social contacts;
- Less feelings of isolation
- Development of peer support networks;

- Family dynamics unchanged;
- Less parental stress;
- More control over child safety and health;
- More mature parenting attitudes;
- Improved knowledge and attitudes about violence prevention;
- More confidence about parenting skills.

A second category of outcomes included "facing up to problems" and "getting on with life." These outcomes were noted in the qualitative data as follows:

- Improved problem solving skills, decision making;
- More assertive in approaching own problems and issues;
- A more realistic approach to problems;
- Going back to school, getting a job;
- Reconnecting with family after control or cessation of drug use;
- Needing continued support.

### Limitations and Implications

It would not have been possible to operate CBL on our current budget if space had not been provided by Hotel Dieu Hospital and some support services provided by KFL&A Health Unit. The storefront space was easily accessible for most women and it provided a comfortable drop-in in addition to programming. This cozy atmosphere enhanced feelings of belonging and likely affected outcomes.

In spite of budget limitations, CBL continues and is an excellent example of a demonstration support program for drug dependent women located in a mid-size Canadian city. Women's outcomes such as improved mental and physical health, reduced drug use, improved knowledge about drug related harm, improved parenting attitudes and knowledge, and better social relationships should have a positive local impact on health, legal, and social services, as well as the community at large. Women are more confident and knowledgeable about services and should access them more appropriately in seeking assistance for themselves and their families. Through networking with local agencies and providing community education, we believe we have created a sensitivity to the needs of these special high-risk women and their families.

On a national level, CBL has a number of innovative and important features that may have implications for future programs in similar mid-size Canadian cities. The program has particular relevance for established health units offering harm reduction services such as a needle exchange and/or methadone therapy.

*A full report on this project will be published in the near future. We wish to thank all of the staff and agencies involved with the program and the women who shared their stories.*

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*Ron Shore has spent close to ten years in the design and delivery of harm reduction-based health centres. He is the Coordinator of the Street Health Centre in Kingston and is completing his masters in Public Administration at Queen's University.*

*Penny Lavalley is the Director of the Infectious Disease Prevention Program at the Kingston, Frontenac and Lennox and Addington Health Unit. Penny is responsible for the Sexual Health/STD programs which also includes the needle exchange program, housed at the Street Health Centre.*

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## DESI DI NARDO

### Alas We Were

Of those moments  
When turning dirt over in our thoughts  
Reworded our blind paths  
We trailed arms over shoulders like belt-hung  
words  
Dragging ourselves without relief or certainty  
Pointed, spear-shaped tragedies  
We nestled them in around us  
One last time and  
Forgave ourselves  
For knowing that the next day would bring  
stiff necks  
And an abysmal haze of lust  
We wrestled with sympathetic eyes and  
panted  
Waking to find ourselves  
With orange rinds between our toes

### Save the Last Dance for Me

like a fly on the wall, she looks bigger today  
swollen with derision and saddened  
growing and shrinking  
pulsing with oddity  
she rubs her hands with curiosity  
looming at me  
like a déjà vu  
backwards  
behind big thimble eyes  
vision splits and scatters  
and I am secreted  
in every direction but down  
because she is there  
there she is  
awaiting my next move  
sprawling clues of me  
swarming me with the knowledge  
that she is coming

*Desi Di Nardo's work can be seen in journals like Fireweed and The Toronto Review of Contemporary Writing Abroad. As well as teaching English in College, she is currently working on a novel and a collection of poetry.*