EXPLORING CONCEPTIONS OF WELL-BEING AMONG WOMEN AND GENDER-DIVERSE PEOPLE WHO USE DRUGS: IMPLICATIONS FOR WHAT MATTERS IN ADDICTION CARE

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Background

Gender issues are often inadequately addressed in addiction services, perpetuating or even exacerbating health inequities. For example, harm reduction approaches tend to focus on biomedical risks, overlooking the need to take gender into account through a broader understanding of well-being. This study aims to understand the meaning and sources of well-being among women and gender-diverse people with lived experience of drug-use difficulties, as well as factors in service provision that can either support or hinder well-being.

Approach

Semi-structured interviews were conducted with 30 participants who have used addiction services in relation to past or present drug use in the province of Quebec, Canada, including 27 (90%) who identify as women and 3 (10%) as gender-diverse (trans, non-binary, gender fluid). Thematic analysis was guided by a gender-based health promotion framework. People with lived experience participated in the interpretation of results.

Analysis

Well-being encompasses multiple meanings and dimensions, including access to safe spaces, the fulfillment of basic needs, dignity, personal strengths, and strategies for self-protection and personal development (leisure, sports, arts, etc.). However, efforts to improve well-being often come up against structural barriers within addiction services such as restrictive access criteria and fragmented service provision. Experiences of stigmatization related to complex needs, economic status, gender, and parenthood can fuel a sense of mistrust that discourages service use. Conversely, non-judgmental approaches that take complex life trajectories and experiential knowledge into account can foster trusting relationships that leverage a broader approach to well-being.

Conclusion

Approaches centred on overall health and sources of well-being can facilitate service use and contribute to reducing harms for women and gender-diverse people. Integrated service environments that are sensitive to lived experience are needed to address the complexity of drug-use trajectories. A systemic, intersectoral approach to organizing addiction services and supporting well-being could help reduce gender-related health inequities.

Disclosure of interest

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