

Book Review

Women in Substance Abuse: Gender Transparency. Edited by Sally J. Stevens and Harry K. Wexler. Hawthorn Press, Binghamton, New York, 1998, 277 pp.

This volume, published simultaneously as a volume of *Drugs and Society*, 13, 1/2, 1998, is a collection of articles on the treatment of women substance abusers. The fact that the authors recruited female substance abusers that are HIV positive, members of minority groups, mothers, in treatment and not in treatment, and one sample from prison, is a real tribute to their resourcefulness. There are 15 reports divided into five sections.

The second section compares women who are in treatment with those who are not. Gender comparison differences emerge with women reporting more use of cocaine, more sexual abuse, and greater concern about their children. Comparing women in treatment and those who are not, relevant factors like race, drug of choice, and injection HIV risk emerge.

The third section deals with a paper on sexually transmitted disease and a paper on violence. Risk factors for gonorrhea among women: trading sex for money or drugs, homelessness, and identity as an Alaskan Native American. Among the men, risk factors for sexually transmitted diseases include cocaine use, being African-American and older, illegal income, and amphetamine use. The second paper in this section is a study of violent behavior, and the authors are to be commended for including questions about the female respondents' violence. Whereas males (i.e., sexual partners) are more often violent (78.2%), the women also report themselves as perpetrators of violence (58.2%). Recent reports surprised most readers with the numbers and percentages of female assaults. According to police reports, about one-third of assaults perpetrated by women are directed toward other women, and two-thirds are directed toward men (probably the sexual partner).

The fourth section deals with physicians' assessment, pregnancy, and prenatal care. Such providers are apparently missing opportunities for prevention and referral for treatment.

The final section deals with treatment strategies: process, outcome, and cost-effectiveness. A prison-based therapeutic community is discussed including the barriers and relevant issues. A study of a residential treatment is presented. Twenty women with infants and 20 who did not have children were compared. Assessments at 6 and 12 months post-treatment showed an increase in employment and a decrease in criminal behavior, substance abuse, and signs of psychological disturbance. Longer stay in treatment was associated with more positive outcome. Although the

without-children group was older, with more severe drug and crime histories and more psychological disturbance, outcome data showed little difference between the two groups.

In another study comparing women with children and women without children, investigators report that outcome after 6 months shows the group of women with children to be doing better in terms of employment, child custody, and involvement in aftercare. Finally, a study of cost–benefits of treatment is presented. Although both genders show cost–beneficial results, in “some modalities,” men show a better cost–benefit than women (possibly because the male drug abusers were more likely to be involved in pretreatment criminal activity).

These are provocative, interesting papers, that make one think about this often-neglected population. Perhaps inevitably, the samples tend to be urban, poor, and very frequently minorities. The book left me with at least two unanswered questions: (1) Why not one paper about women alcoholics? (2) What does “Gender Transparency” mean?

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