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Research and Intervention for Drug-Addicted Mothers and Their Children: New Perspectives

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1. Introduction

According to research carried out by the EMCDDA, drug-addicted women in Europe account for at least one quarter of the total European population consuming illicit substances (Emcdda, 2006a). A specific research platform entitled “Women and Drugs” was created within the context of the second European project “Democracies, Cities and Drugs.” This platform is focused on what characterizes and distinguishes female substance addiction from male substance addiction: its manifestation, its attributes, and the interventions or services which can be put into effect while devoting special attention and offering specialized care to this phenomenon. Our findings confirm that women substance users are exposed to a great number of risks such as medical, social, economic, familial and psychopathological risks requiring intervention through specific tools and aimed responses (see Brentari, Hernandez, Tripodi, 2011). The investigated factors included pregnancy, parenthood and the well-being as well as development of the child, while taking into account institutional and ethical reflections regarding this complex theme.

The substance abuse phenomenon indeed affects a high number of fertile women. When drugs are consumed during pregnancy, they can have serious, direct and indirect effects on the postpartum development with subsequent effects on the child (OTIS, 2010). Substance abusing mothers represent an at-risk parenting situation which, in turn, profoundly influences the quality of the mother-child relationship. The awareness of these at-risk situations for children along with the widely accepted notion that ideally, children should always be raised by their mothers led to the introduction of residential treatment in Italy. These services deal with maternal pathologies and provide care and assistance for children; in fact, these therapeutic communities accommodate addicted mothers as well as their children.

Up until recently, therapies for children (particularly medical ones) were administered by institutions outside of the community, while no therapeutic treatment was mandated for minors. The first therapeutic communities for drug addicted mothers and their children appeared in Europe in the early nineties. These institutions must provide assistance to
children and assure them the greatest possible social, psychological and physical well-being. In addition to the funds available for each mother, funds for each individual minor are made available on a daily basis. Our project: “Research and intervention on minors in communities for addicted mothers and their children: from at-risk parenting to child well-being” was promoted within this specific intervention framework. The project aims to secure child well-being by assessing maternal parenting as well as by carrying out direct and indirect observations of the child, his/her caregivers and the caregiver-child relationship. At the same time, the most suitable intervention for each single subject is put into effect.

2. Female substance addiction, pregnancy and parenthood

As stated above, there is an ever increasing interest towards defining characteristics which are specifically related to substance abuse in the female population, with specific reference to the following two crucial aspects.

a. general differences, in terms of individual and relational characteristics, life history and family history which single out addicted women as subjects with experiences of trauma, abandonment or neglect, from either a physical or psychological standpoint (Parsec Association, 2004; Stocco et Al., 2000, 2002; Studio VEdeTT, 2007). These subjects suffer also for their specific medical problems (HIV, sexually transmitted pathologies, etc.), for their social situation (prostitution, access to the job market, etc.) and institutional difficulties (organization and access to services). From this point of view, the interest is to detect and realize any available data projections referring to female substance addiction and feasible interventions from the legislative and health perspective (Home Ministry Government, 2010).

b. specific issues related to pregnancy and parenthood in substance abusing women from the medical-gynecological perspective, including all psychological aspects which might have an impact on the subsequent relationship with a child.

2.1 Substance abuse

All international data confirm a commonly shared view according to which male drug users outnumber women drug users by far (UNODC, 2004). However, recent research suggests that the gender gap may be narrowing, at least with reference to some types of drugs (EMCDDA 2006a). For example, for cannabis use and binge drinking, differences in drug use between men and women have substantially narrowed, at times showing an almost equal consumption between the genders. Another trend indicated a higher percentage of female rather than male students using tranquilizers or sedatives which are bought without prescription. Patterns of drug use based on gender differences are illustrated by the percentage of patients entering treatment services in Europe. The percentage of female patients is around 20% (EMCDDA 2005): among those receiving drug treatment, problems relating to amphetamine-type stimulant drugs (ATS) are most common among young people (under 20 years old), whereas problems relating to the use of sedatives or pharmaceutical drugs are most widespread among older patients (over 39 years old) (EMCDDA 2005).


NSW Department for Women, Young Women’s health: depression and risk taking behavior. Retrieved from <www.youngomens.health>


