



Human Empowerment Campaign

26 June to 16th December 2019

Briefing

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1 BACKGROUND INFORMATION – DIANOVA & THE SDGs

Dianova International is an NGO dedicated to supporting a network of 26 organizations operating in 20 countries and 4 continents to help the most vulnerable populations, thus contributing to the United Nations' Sustainable Development Goals (SDGs). And, as part of its work to advocate social progress within international organizations and forums, the network's umbrella organization, Dianova International, also contributes to the SDGs.

At the core of the United Nations' 2030 Agenda, the Sustainable Development Goals are the blueprint to achieve a better and more sustainable future for all. They have been designed to address the global challenges we face, including those related to poverty, inequality, climate change, and peace and justice. Each goal and target relies on one another to achieve the equilibrium of economic, social, and environmental sustainability envisioned by the UN. The SDGs demand the active participation of all sectors to make the world a better place for everyone, everywhere, with no one left behind.

Dianova & Gender Equality

As part of its commitment to social progress, Dianova deems it essential to promote women's and girls' empowerment as a key factor in achieving this goal. Despite being a stand-alone goal (SDG 5), gender equality is a cross cutting issue in the UN's 2030 Agenda. There is a widespread consensus that progress on any and all of the SDGs will be stalled if gender equality and women's empowerment are not prioritized. Still, women continue to face discrimination in many areas, whether civil, economic, social, cultural, etc., and gender inequalities remain deeply entrenched in every society, making it much more difficult for them to access education, health care services, or job opportunities, to name just a few.

We cannot not address these challenges, this is why Dianova has made gender equality one of its priorities as well as a cross-cutting element of most of its activities and programmes. This commitment is reflected at several levels:

- **Through the integration of a gender perspective:** most Dianova programmes take into account gender specificities in terms of barriers to access and permanence in services, which is why these programmes, in their design and implementation, take concrete measures to achieve positive actions such as flexible hours or the possibility of participating with their children.
- **Through advocacy work:** Dianova representatives advocate gender equality as an issue inherent to human rights and social justice at international meetings, and, more specifically, the importance of developing gender-aware, human rights-based approaches to drug prevention and treatment.
- **Through public awareness campaigns:** Dianova's objective is to make the general public more aware of the remaining challenges in this area: equal pay, political representation, access to education and health, the need to integrate a gender perspective in programmes and services as an analytical framework that allows better attention to people without an androcentric vision.



Substance Abuse Prevention & Health Promotion Campaigns

For more than a decade, Dianova International has endeavoured to disseminate information about, and raise public awareness of, the risks associated with drug and alcohol abuse and non-substance addictive behaviours through international education and health promotion campaigns targeting various audiences including people with substance use disorders (SUD) and their families, youth in general, and decision makers.

Dianova's campaigns are designed to have the largest possible impact but also to reflect the organization's positions with regard to addiction and drug policy, including implementing person-centred, evidence- and public health-based approaches to prevention and treatment; developing diversified treatment models, whether residential or outpatient; rethinking addiction treatment programmes not based on the androcentric approach and responding to the specific needs of both men and women, as well as the growing number of people with dual disorders, i.e. addiction and associated mental health problems.

The organization's next campaign will be based on the concept of *Human Empowerment* and address both addiction- and gender-related issues. The first part of campaign will be launched on the 26th of June, *International Day against Drug Abuse and Illicit Trafficking*, and the second one on the 25th of November with Dianova's 16-day action against gender based violence.

2 SDGs INVOLVED

SDG 5: Achieve Gender Equality & Empower all Women and Girls

Women and girls, everywhere, must have equal rights and opportunity, and be able to live free of violence and discrimination. Women's equality and empowerment is one of the 17 Sustainable Development Goals, but also integral to all dimensions of inclusive and sustainable development. In short, all the SDGs depend on the achievement of Goal 5. Gender equality by 2030 requires urgent action to eliminate the many root causes of discrimination that still curtail women's rights in private and public spheres.

SDG 3: Ensure Healthy Lives & Promote Wellbeing for All at all Ages

SDG 3 targets 4 and 5 focus on the promotion of mental health and well-being and on strengthening the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol. In addition to substance abuse-related problems such as overdoses, suicides and the development or worsening of mental health disorders, people who use drugs (and more so those who inject) are more vulnerable to HIV, Hepatitis C and other blood borne infections. Lastly, because of the stigma they suffer, people with substance use disorders face greater difficulty in accessing treatment, harm reduction, and social reintegration services.

SDG 10: Reduce Inequality Within and Among Countries



Inequalities remain persistently stark in the world today. From 1988 and 2008, the wealthiest 5 percent of people captured 44 per cent of global income, while little changed for the poorest. In developing countries, income inequality rose by 11 per cent between 1990 and 2010. With less income and fewer assets than men, women, particularly single-mother households, are more likely to live below 50 per cent of median income. Evidence suggests that inequality between women and men in a household is a strong contributing factor to overall income inequality in society.

For women and girls, gender inequalities have consequences for income as well as other fundamental needs, such as health and education. Cross-sector analysis of how gender inequalities interacts with other potential vulnerability areas, such as those related to age, functional diversity, ethnicity, migration, economic status, etc. that multiply the burden of inequalities.

3 WOMEN & ADDICTION – THE SITUATION

Over the last decades, alcohol and drug-related disorders have spread dramatically and no nation remains immune to their considerable human and economic costs. Although rates of SUD seem to be lower for women than for men, the physical and mental consequences can be more profound for women.

The prejudices and social stigma associated with female drug users delay the treatment process. On the one hand, they are pointed out for being drug users or having an addiction problem and, on the other for not fulfilling the gender-related roles that are expected from them (double stigma). When they try and face such situations, stigma affects them to a greater extent. In addition, women and LGBTI people with SUD are often invisible. Addiction treatment programmes are generally grounded in an androcentric perspective that does not meet everyone's needs, which engenders obstacles to treatment: women account for only one out of five people in treatment for drug use.

Women, Addiction & Recovery

Most studies and research related to substance abuse are still carried out with a predominance of male participants. In addition, research carried out on SUD and women mostly focuses on pregnancy, the negative impact on their children, and infectious diseases, being somewhat stigmatizing and reductionist in nature. Recent research however indicates significant differences between men and women in the substance-related epidemiology, social factors, biological responses, progression to abuse and dependence, medical consequences, co-occurring psychiatric disorders, and obstacles to treatment entry, retention, and completion.

When it comes to substance use and addiction, women face unique issues that are mostly influenced by sex (differences based on biology) and gender (differences based on culturally-defined roles for men and women). Research studies on substance use and addiction disorders have found that:

- Women describe reasons for using drugs that are different than men's, including weight control due to the strong pressure of beauty standards, fighting exhaustion due to double working hours, (care for others, including children and the elderly), generating a more important consumption of legal drugs.
- Most women use substances differently from men, e. g. consuming smaller amounts of certain substances for less time before becoming dependent.



- Women who attend treatment programmes may experience a greater sense of discomfort and lack of motivation because their needs are not fully taken into account; in addition, they are more likely to relapse after treatment completion due to a lack of social support, economic problems or because they are unable to break the circle of violence.
- Women who use drugs may also experience more physical effects on their heart and blood vessels.
- Women may be more likely to go to the emergency room or die from an overdose or other substance-related consequences due to the invisibilization of women's problematic use of drugs: detected long after the onset of drug use, they also take a longer time to be treated.
- Women may be more likely to go to the emergency room or die from overdose or other effects of certain substances.
- Women who are victims of gender-based violence are at increased risk of substance use.
- Divorce, loss of child custody, or the death of a partner or child can trigger women's substance use or other mental health disorders, due to gender socialization and the social expectations that women should be in charge of people's care.

Intimate Partner Violence & Addiction

Intimate partner violence can be described as pattern of assaultive and coercive behaviours that may include inflicted physical injury, psychological abuse, sexual assault, progressive social isolation, stalking, deprivation, intimidation and threats. Substance abuse has been found to co-occur in 40 to 60% of intimate partner violence incidents across various studies in the US and several lines of evidence suggest that substance use disorders play a facilitative role in these incidents by precipitating or exacerbating violence.

Spousal abuse has been identified as a predictor of developing a substance abuse problem and/or addiction. Additionally, women in abusive relationships have often reported being coerced into using alcohol and/or drugs by their partners. Drug and alcohol-related disorders are more prevalent among women who experience intimate partner violence compared to women having had no such experience of violence. (*American Journal of Public Health, 1996*).

In addition, a report of UNDCP (1994) on women and substance abuse also draws attention on the alarming indirect consequences of substance abuse, including intimate partner violence, on women. According to this report:

- Substance abuse directly affects cognitive and physical function, reducing self-control and leaving individuals less capable of negotiating non-violent resolution to conflicts;
- Experiencing violence within a relationship can lead to substance abuse as a coping mechanism;
- Children who witness violence or threats of violence between parents are more likely to display harmful consumption patterns later in life.



Impact of Repressive Policies, Stigma

Women suffer disproportionately from the impact of repressive drug policies. Women in Europe, Asia and Latin America are imprisoned at a disproportionately high rate for non-violent drug offences. Frequently these women are in situations of extreme poverty, have low levels of formal education and limited prospects in the licit economy, with instances where women, particularly from ethnic minority communities, are forcibly coerced into participating in the illicit drug market.

Women who use drugs also face significant stigma, hindering their access to health and social services. In Eurasia, NGOs have documented repeated police brutality and sexual abuse against women who use drugs. To address the disproportionate impacts of drug control policies on women and ensure the achievement of SDG 5, a review of drug policies with a strong gender perspective should be conducted to develop alternative policy approaches that actively promote the achievement of gender equality and women's empowerment.

The Gender Perspective in Addiction Services

Treatment for SUD in women may progress differently than for men. Women report consuming alcohol or other drugs for a shorter period of time when entering treatment, however, their substance use tends to progress more quickly from first use to addiction.

It can be hard for any person with SUD to quit, but women in particular can be afraid to get the help they need because of the fear of being stigmatized and considered deviant persons for not having been able to fulfil the traditional roles – of wife, mother and family nurturer – traditionally expected from them. In addition, women encounter specific structural, social and personal barriers to treatment when pregnant or after pregnancy due to possible legal or social fears and lack of child care while in treatment. Women in treatment often need support for handling the burdens of work, home care, child care, and other family responsibilities, but they most often do not receive this support and have to leave treatment, not because of lack of motivation but because of the strong societal pressures to take care of others.

Call for Specific Programmes for Women with SUD

The issues of women's barriers to accessing addiction treatment programmes, the stigma associated with their condition and their need of specific treatment modalities have been widely unrecognized and underfunded. There is an urgent need to rethink addiction treatment programmes and implement services that effectively and comprehensively address the complex needs of women with SUD and their children. In addition, we believe that one should give the highest priority in sensitizing the public opinion and health professionals into providing women with the same standards of treatment men are entitled to.

Dianova advocates the implementation of specific modalities for women SUD, including integrated treatment programmes that offer a wide range of services including addiction treatment, parenting counselling, service linkages, housing, legal assistance, and job and vocational training. In addition,



these programmes should be culturally-adapted and provide modalities such as separate programmes for women, acceptance of children and attention to pregnant women.

4 CAMPAIGN'S OBJECTIVES & CONCEPT

'Human Empowerment' Concept

Dianova believes that girls' and women's rights are fundamental human rights and that there is an urgent need to create more awareness of the specific problems women face when confronted with substance use disorders, including stigma, gender-related differences, violence, and obstacles to treatment and social reintegration. This is the reason why the campaign will endeavour to emphasize how addiction and gender are closely interconnected, through the lens of a single concept, **Human Empowerment**.

It is urgent to raise awareness of the need of implementing programmes based on a gender perspective as an analytical framework that enables adequate assessment of the impact of gender on men's, women's and LGBTI people's relationship with drugs. There is in particular a need for services that effectively and comprehensively address the complex needs of women with substance use disorders, including those resulting from their gender socialization.

The number of women enrolling in treatment programmes, including Dianova's, remains very low despite the soaring prevalence of women with substance use issues. Women enrolling in treatment programmes typically have a shorter stay than men and, after treatment completion, are more frequently exposed to relapse.

In addition to experiencing physical and mental health problems, these women often have personal histories of exposure to physical and sexual abuse and other relationship problems, negative or inadequate social support systems, inadequate income, unemployment, unstable housing, and involvement with the criminal justice system. On top of this, women entering treatment often find themselves in a male-centric environment, designed for and populated by men, not addressing their specific needs for an adequate and efficient recovery. Lastly, it is essential to determine why women do not enrol in treatment programmes and rethink the way drug treatment services and policies are designed.

Lastly, women who do not enrol in a treatment programme may do so because of economic problems, or, if they happen to be single mothers, because admitting their substance use problem could lead to their losing custody.

General Objective

The campaign's general objective is to raise awareness of the need for change in people with substance use or other addiction disorders, to promote the use of effective treatment programmes, and to urge governments, the private sector, foundations and other stakeholders to support some of the Dianova network's specific programmes and projects with financial aid and other contributions.



A three-phase campaign

The campaign will be developed throughout the remainder of the year under the umbrella of the *Human Empowerment* concept and following three consecutive phases.

1. Recovering one's Capacity to Choose, Embracing Life

People start using drugs for many reasons: they want to feel good, stop feeling bad, or perform better at school or at work, or they feel curious because other people are doing it and they want to fit in – the last reason is common among adolescents. Drugs excite the parts of the brain that make people feel good. But after a while, the brain gets used to the drug and people need to take more of the drug to get the same good feeling. Soon, people have to use the drug to just feel normal in their brain and body, and when they can't use, they feel sick, awful, anxious, and irritable. This phenomenon is called addiction.

Everyone can be affected by addiction problems. Regardless of gender, race or social status, no one can say they are immune to substance use disorders or behavioural addictions such as compulsive gambling. And they can lead to a world of pain. Although using drugs is, at least at the beginning, a personal choice, addiction never is. As science defines it: *"addiction is a chronic, relapsing disorder characterized by compulsive drug seeking, continued use despite harmful consequences"*.

Over time, addiction sets in and people and society start looking at you with different eyes. People facing addictive disorders must face a highly stigmatizing moral judgment from society as a whole, particularly with regard to people who use illicit drugs. These experiences can result in people feeling shame, guilt, rejection, and a sense of worthlessness or hopelessness which can in turn trigger further alcohol or other drug use and other forms of risky behaviours.

Considering people living with a SUD or other addiction as people deviant and responsible for what happens to them is a blatant injustice. Addiction is a multifaceted problem that encompasses a number of factors, but none of them has anything to do with deviance or low morality. Stigma, repressive policies and exclusion only create obstacles to treatment, harm reduction and other health services; they prevent people from enjoying the full extent of their rights.

Through the 'Human Empowerment' campaign we want to emphasize that it is possible to overcome these obstacles with a little empathy and a helping hand, which is why we consider it urgent to promote better accessibility to programmes adapted to people's needs and expectations. Finally, and above all, we want to help people regain their autonomy and their ability to make responsible, well-informed choices in regards to substance use and other potentially-addictive behaviours.

2. Education. Achieving Empowerment through Life Skills

We envision a world in which all children can pursue a quality education that enables them to reach their full potential and contribute to their communities and the world. We believe that with the right set of social and essential life skills, lives of people recovering from a substance use disorder can be truly transformed – on a personal and professional level.

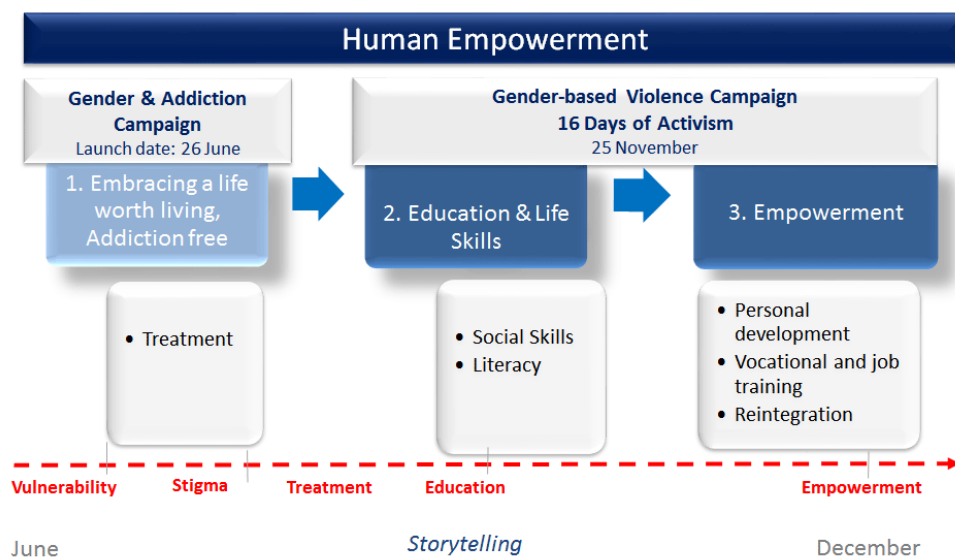


For this campaign to achieve its goal, we must address the specific needs of women and LGBTI people in treatment and post-treatment programmes. For instance, women respond better to treatment and have better compliance when included in psychotherapy and group counselling. Sexual education and family planning, as well as diagnosis of psychiatric comorbidity, eating disorders and trauma related to sexual abuse and violence are priority issues that need to be integrated in the treatment agenda for women.

3. Empowerment

Only when women and girls have full access to their rights – from equal access to education, health care, decent work, financial independence, sexual and reproductive rights, and freedom from violence, to representation in political and economic decision-making processes – will true equality exist. And only then will all women and girls have the self-determination they are entitled to.

Empowering women and girls across all programmes and advocacy efforts will fuel sustainable economies and benefit societies and humanity at large. With stepped-up action on gender equality, every part of the world can make progress towards sustainable development by 2030, leaving no one behind.



5 CAMPAIGN SPECIFICS

Target Audiences

The Human Empowerment campaign aims to achieve specific, measurable objectives that will be defined depending on each target audiences. Each member organization will select one or more targets: decision makers, foundations, companies, beneficiaries and their families, and the academia – based on the changes expected in each audience, and according to the social and political context.

Definition of Audiences

- *Decision makers* – institutions, governments, ministries in key positions with decision-making power to carry out changes.



- *Private foundations* – related to the theme of the campaign and those who have experience with the funding of related causes.
- *Companies* – having gender equality plans at the workplace, involved and sensitized with the theme and working on the SDGs.
- *People with SUD and their families* – people with SUD or other addictive disorder who need help and their family members who need support to accompany the former in their change process.
- *Educational community* – primary and secondary schools, universities, teachers and students. Schools having developed addiction prevention programmes.

What change should be achieved in the target audience?

- *Decision makers* – they should invest funds and resources in specific activities and adapt laws; establish or consolidate new alliances with Dianova International and its members; invest resources for specific programmes for women.
- *Private foundations* – they should provide additional resources for studies and research and in specific programs or projects targeting the issue of gender and addiction.
- *Companies* – they should develop specific awareness programmes for their employees; invest financial resources in specific activities, including gender specific personal development and labour integration programmes.
- *People with SUD and their families* – they should be more aware of the consequences of their addiction disorders and willing to enrol in treatment programmes.
- *Family members* – they should provide people with SUD with adequate support and help address stigma-related difficulties that they may face, especially women.
- *Educational community* – they should integrate gender specific, addiction prevention programmes in the curriculum and participate in research programmes on this issue.

Once the target is selected, each member organization will develop its communication strategy and adapt the campaign's messages to the selected target audience.

Creative Concept

Dianova International is currently working on the creative concept and the logo that will identify the campaign.

As stated in section 4 of this document, Dianova believes that girls' and women's rights are fundamental human rights and that there is an urgent need to create more awareness of the specific problems women face when confronted with substance use disorders. This is why, the campaign will be grounded on the concept of Human Empowerment, with a strong focus on the interactions between gender and addiction,

Dianova International will be responsible for designing and producing common visual materials, texts and position papers available to all participants.



Implementation

The global campaign will run from June 26 to December 16, 2019.

The campaign will be offered to the ordinary and associate members of the Dianova International network in the following countries:

Chile, Uruguay, Nicaragua, USA, Spain, Italy, Portugal, Sweden, Slovenia, Kenya, Pakistan, India, Norway, Togo, DRC, Romania, Turkey, Bangladesh.

Participating member organizations will have the possibility to select their own images, adapted to their country's political, social and cultural contexts. Before the beginning of campaign, these images should be sent to Dianova International for review, adaptation, integration of logo, and dissemination through the campaign's various posters.

Languages: Spanish, English, French, Portuguese, Italian, Swedish, Slovenian, Norwegian.

Materials & Resources

Editorial contents:

- Infographic of the three-phase approach. Prepared by Dianova International,
- Infographic of the campaign topics (vulnerability, stigma, treatment, education, empowerment). Prepared by Dianova International,
- Storytelling on video, could be used starting in November – pending,
- Social media kit. Prepared by Dianova International,
- 3 Press release. Prepared by Dianova International,
- 5 articles for the web. Prepared by Dianova International,
- Reports, data, good practices. Prepared by Dianova International.

All this material will be available for download on the Dianova International website starting on June 21st.

Digital Contents:

Hashtag: #HumanEmpowerment

Images:

- Provision of images,
- Adaptation to different supports and social networks (web sites, Facebook, Tweeter, LinkedIn profiles images)

Other elements:

- A3 posters of the selection of images by each member organization,
- Pins Human Empowerment (English).



Evaluation – Global Indicators

Dianova International will provide a template for data collection.

Online Communication key performance indicators (KPI)

Online Impact

- Size: number of publications, post, tweets, number of web views,
- Vitality: scope, number of people impacted,
- Influence: number of interactions, likes, shared, comments, retweets,

Offline impact

- Number of posters placed and potential audience,
- Number of articles published in the press, estimated audience,
- Other actions with offline impact.

KPI Marketing for each selected target audience:

- Number of contacts made,
- Number of collaborations achieved,
- Global impact (people impacted) of collaborations achieved,
- Funding resources or non-monetary contributions achieved.

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