

What's Gender Got To Do With It?



About one-third of alcoholics in the United States are women. But despite having differences in the causes and symptoms of alcoholism, men and women receive the same treatment. Why?

By Regina Walker

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It is estimated that of the roughly 15 million alcohol-abusing individuals in the United States, approximately 4.6 million (almost one-third) are women. The disease may be the same but there are numerous differences between men and women in the cause and symptoms of alcoholism. You'd think this would naturally lead to different treatment strategies for women and men – but you'd be wrong. Despite a huge body of evidence that women with an alcohol dependency are different from men in essential respects – from alcohol metabolism, to psychological consequences, to social perceptions – women are still, and all too often, square pegs forced into the round hole of a one-size-fits-all treatment strategy, with often predictably poor results.

Biologically, women react differently to alcohol. Alcohol is more soluble in water than fat. A woman's body contains more fatty tissue than a man's of the same size, so women tend to experience a higher blood alcohol level than men even if they're the same size and drinking the same amount. Women also make smaller amounts of alcohol dehydrogenase – the liver enzyme that breaks alcohol down – which also adds to a heightened blood alcohol concentration.

Essentially, women experience significantly greater damage from alcohol than men. Female alcoholics have death rates 50 to 100% higher than those of male alcoholics. A greater percentage of female alcoholics die from suicides, alcohol-related accidents, circulatory disorders, and cirrhosis of the liver. Women are much more vulnerable to damage to cognitive

functioning than men as a result of long-term alcohol abuse as well (though, unsurprisingly, both male and female alcoholics performed more poorly than nondrinkers during specific cognitive functioning tests). And in general, studies comparing alcohol dependency in women and men show that though women don't drink as much, or for as long, as men, they still show equivalent damage.

Women who suffer from alcoholism face bigger challenges, not just physically, but psychologically as well. All alcoholics suffer from the social stigma of the disease but women are especially judged as morally weak when they deviate from their expected roles as caretakers of others including children and partners. In the "Big Book" of Alcoholics Anonymous, there is a chapter entitled, "To The Wives." The goal of the article is to assist the wives of alcoholics in dealing most effectively with their alcoholic husbands. But what of the female alcoholic in AA? Women alcoholics are often portrayed (in books and movies) as sexually promiscuous and lacking self-control.

It is estimated that between 30% and 80% of alcoholic women were victims of sexual abuse in childhood. Although there is no definitive connection between early sexual abuse and alcoholism, the implications for the treatment of alcoholic women are significant. Many women who have experienced physical, sexual, or emotional abuse may develop post-traumatic stress disorder (PTSD) and use alcohol to self-medicate the symptoms of this disorder.

Often, the shame and guilt experienced by women prevent them from seeking treatment. They may be more reluctant to acknowledge that a problem exists for fear they will be punished or humiliated. If the woman is the primary caregiver of young children, she will need support in terms of child-care to access treatment. In addition, these women may fear the loss of the children through the legal system if they request help and acknowledge their alcoholism.

Pregnancy itself may present a barrier to treatment. Laws in some states impose criminal consequences for women who are abusing drugs or alcohol during pregnancy.

Recovery rates for addicted women in treatment are lower than men.

And why is that?

Much discussion in the addiction field has been made about the need for "women specific" treatment but little change has been made to address the unique challenges female alcoholics and addicts face.

Most treatment programs still follow the 12-step approach to recovery: a program developed by men and primarily for men. Next to most beds in inpatient treatment programs, you will find a copy of the "Big Book" of Alcoholics Anonymous.

Yet, numerous other self-help programs exist to support and assist the addicted individual. Unfortunately, they do not get the press AA does and thus, there are fewer of these meetings occurring and less is known about them by those seeking help for alcoholism.

One such program that is geared directly toward women is ["Women For Sobriety."](#) Founded in 1973 by Dr. Jean Kirkpatrick, a lifelong alcoholic who made numerous attempts at treatment and sobriety, Dr. Kirkpatrick (inspired by the writings of Ralph Waldo Emerson and other metaphysical writers) created "Women For Sobriety" also called "The New Life Program." Dr. Kirkpatrick expressed the belief that the concept of "powerlessness" used in AA was [counterproductive for women](#). Her belief was that most women were socialized to feel powerless and it was important to empower women. She believed that most female alcoholics suffered from low self-esteem and therefore required treatment that would support them in rebuilding a positive self-image, thus making sustained sobriety a possibility.

Dr. Kirkpatrick believed that most female alcoholics shared other problems, including depression, loneliness, excessive feelings of guilt and that these problems fueled active addiction. Recovery therefore needed to address these issues and rebuild the self-esteem, confidence, and sense of competence of the recovering female alcoholic.

Women For Sobriety focuses on letting go of past mistakes and creating a more hopeful and productive future. The program strongly emphasizes the importance of group support.

A pivotal component of the program is the 13 Statements (Affirmations) which form the basis of "The New Life Program." These 13 Statements include:

1. I have a life-threatening problem that once had me.
I now take charge of my life and my disease. I accept the responsibility.
2. Negative thoughts destroy only myself.
My first conscious sober act must be to remove negativity from my life.
3. Happiness is a habit I will develop.
Happiness is created, not waited for.
4. Problems bother me only to the degree I permit them to.
I now better understand my problems and do not permit problems to overwhelm me.
5. I am what I think.
I am a capable, competent, caring, compassionate woman.
6. Life can be ordinary or it can be great.
Greatness is mine by a conscious effort.
7. Love can change the course of my world.
Caring becomes all important.
8. The fundamental object of life is emotional and spiritual growth.
Daily I put my life into a proper order, knowing which are the priorities.
9. The past is gone forever.
No longer will I be victimized by the past, I am a new person.

10. All love given returns.
I will learn to know that others love me.
11. Enthusiasm is my daily exercise.
I treasure all moments of my new life.
12. I am a competent woman and have much to give life.
This is what I am and I shall know it always.
13. I am responsible for myself and for my actions.
I am in charge of my mind, my thoughts, and my life.

The concept set forth by Dr. Kirkpatrick is similar in many ways to the cognitive-behavioral approach to change. Dr. Kirkpatrick saw that actions and personal beliefs follow our thinking. When she was able to consciously alter her negative beliefs about herself to more positive, productive ones, she found she could remain sober. Women For Sobriety seeks to teach, support, and encourage female alcoholics to tap into their own personal strength and ability for positive change – rather than reinforce disempowering stereotypes of helplessness.

Some changes have been made in the treatment of the addicted woman; gender specific groups and gender matching with counselors, for instance. This, however, is only a beginning; much more needs to be done to remove the stigma attached to the female alcoholic/addict and to more thoroughly address her needs in treatment.

*Regina Walker is a writer, photographer and psychotherapist in NYC.
She is the Senior Writer of Revolution Magazine (USA).*

She has written a number of articles published on [The Fix](#).



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