

An Inevitable Collaboration? Working Together to Support Pregnant Women Experiencing Homelessness and Alcohol and Other Drug Related Harm

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'There's no stability. I hadn't really had [any] stability my whole life. I had nothing. No structure, no security, no nothing'

— patient from The Women's Alcohol and Drug Service

Pregnant women at the intersection of homelessness and alcohol and other drug-related dependency and harm are among some of the most disadvantaged in our community. They face stigma, discrimination and significant barriers to accessing appropriate pregnancy and postnatal health care for themselves and their infant.

Homelessness is often only one issue affecting pregnant women experiencing alcohol and other drug (AOD) harm. Many have past and/or current experiences of family violence, trauma and co-occurring mental health issues. The complex ways in which these issues intersect, amplify and influence the trajectory of a woman's path to safe and secure housing and her journey towards recovery from AOD use is not straightforward.

It is for these reasons that the Women's Alcohol and Drug Service (WADS) at the Royal Women's Hospital came together with Uniting Alcohol and Other Drug Services (Uniting) and the Cornelia Program to find better ways of working. WADS and Uniting have for many years held the view that better collaboration and integration can improve access to treatment options and outcomes for pregnant women using substances and their babies. This article discusses how services from separate organisations can work cooperatively to support at risk women, recognising that there are distinct gendered drivers of both AOD use and homelessness.

The Women's Alcohol and Drug Service

WADS was established in the late 1980s due to a growing demand for specialist services for AOD dependent maternity patients. The WADS program is the only state-wide AOD service providing specialist clinical services and professional support for pregnant women with complex substance dependence and psychosocial issues. WADS comprises a multidisciplinary team situated within the Social Model of Health Division at the Royal Women's Hospital, recognising the cycle of disadvantage that many women experience and the range of health and wellbeing issues that need to be addressed. As part of routine obstetric care women also access addiction medicine, social work, psychiatry, pharmaceutical, dietetics, physiotherapy, paediatric, lactation and legal assistance, an education coordinator and outreach social worker.

Lack of affordable housing and homelessness are significant social issues that impact the women we work with, impeding their recovery. Many patients live in poverty and have cycled in and out of homelessness, experiencing unstable family relationships and exposure to violence both before and after becoming pregnant. Women are acutely aware these issues impact on their AOD recovery, and sometimes perpetuate continued AOD use whilst a woman is pregnant.

WADS patients, like many women affected by AOD, report that their AOD use directly relates to managing stressful life experiences and past traumas such as sexual assault and abuse, family violence and being placed in out-of-home care as a child.

The fact that so many of these patients have experienced gendered violence and structural barriers requires models of care that are trauma-informed and women-centred to build on the existing strength and resilience of these women. Historically though, there have been very few services in Victoria that offer this type of specialist support. Our partnership with Uniting Vic.Tas's Curran Place Adult and Mother Baby Withdrawal Service is one such partnership that fills a service system gap.

Uniting's Curran Place Adult and Mother Baby Residential Withdrawal Service (Curran Place)

In October 2016, Uniting Vic. Tas, funded by the Victorian Department of Human Services, added a four-bed purpose-built wing to its existing 12 bed AOD withdrawal facility. Designed by architects in collaboration with AOD clinicians, it is the first of its kind in Victoria, specifically designed to cater to the needs of mothers and their newborn babies.

Parenthood, and birth of a new child, can be a prime motivator for ceasing or reducing AOD use. For many, withdrawal can be an important early step in an AOD treatment plan and a starting point for longer term behaviour change.

Curran Place allows a mother to complete a withdrawal from AOD and remain together with her infant (up to 12 months of age or walking stage). Many women access the service during pregnancy or in early days post-delivery and many are referred to us from WADS and the Cornelia Program as part of a longer-term plan to address a woman's substance use and find safe and stable housing.



Some of the women we work with have multiple admissions throughout their pregnancy and into the early months after birth. The majority have complex substance use, mental health and housing issues. Many also have contact with the criminal justice system, previous children in out-of-home care, current family violence and other factors that bring them to the attention of child protection services, as well as partners currently on remand or in custody. These women require long-term, wrap-around support that can address the multiplicity of health and social needs.

On arrival at Curran Place, childcare workers, a family worker, nurses and AOD staff facilitate more independent parenting as the mother commences full time care of her infant for the first time since birth. A mother will also use this time to bond and form a strong attachment with her baby while addressing her AOD use.

When we opened the service in 2016, we did not anticipate the number of women who would be facing imminent homelessness at the point they were seeking AOD treatment from us. Family violence often means they have been brought to the attention of Child Protection and the ongoing violence in the home places them at risk of losing care of their newborn child. Finding appropriate pathways into stable and safe accommodation has been one of the major challenges for our service over the past five years.

It is through the relationships with specialist services like WADS and Cornelia that admission to Curran Place becomes a stage in the journey of recovery, reducing substance use and supporting long term goals of mother and infant remaining together.

The Cornelia Program (Cornelia)

The Cornelia Program is a collaboration between The Women's, HousingFirst and Launch Housing with each organisation working together to provide housing and wrap-around support to pregnant women and new mothers who are homeless. The program opened in August 2021 with the first intake of women and babies. Since then, over 40 women and their babies have participated in the program. Referrals come through the Women's Hospital from WADS and the Social work team and a range of community services.

Pregnancy and birth are often moments when women are actively motivated to make positive changes to break the cycle of homelessness. Cornelia provides these women with stable housing with wrap-around support for a period up to 12 months to improve the health and wellbeing of these women and babies and change the trajectory of their lives. Its role is to engage with a woman and help her address the circumstances that may have contributed to her homelessness.

Substance use is one aspect of a woman's care that she will continue to be supported with in the community. Staff regularly review with a woman where she is on her path to recovery and will provide care coordination throughout the duration of her tenancy. This includes liaising with a range of specialist AOD supports within the community and the hospital as part of her antenatal care. The midwife is also able to provide support to the women throughout their pregnancies and then six weeks postnatally, facilitating birth education sessions, breast feeding support and postnatal in the home care. The ability to seamlessly refer a woman to Curran Place either before, or after

the birth of her baby has enabled a positive outcome for several women and their babies by keeping them together and improving the health and wellbeing of both mum and baby.

Importantly, accessing Curran Place whilst participating in the Cornelia Program does not jeopardise a woman's tenancy. The positive relationship with our housing partners enables a woman to negotiate having her rent reduced whilst she pursues AOD treatment and support. This allows her to return to a stable and supportive base to continue addressing her substance use and develop proactive strategies for recovery.

There have been a number of women who have transitioned to permanent housing — or been reunited with children where this had not been previously possible. Cornelia staff stay engaged until women have moved to their new housing and are linked with the relevant community supports. There has also been a small number of women where the child has not been able to stay in their care. In these cases, the program provides continued care which includes ongoing support and referral to address any substance dependence. Women can stay in the program for the duration of their 12-month tenancy and continue engaging with program support staff to improve their chances of reunifying with their child and breaking the cycle of homelessness.

It is in the coming together that we can provide a better service to women and their infants. And in doing this we can hope to support women to break the cycle of homelessness, harmful substance use, and family violence that affects so many of the families we work alongside.