

Sweat Equity: A pandemic hasn't locked down the need to help women with substance abuse problems

August 17, 2020 8:44 AM

By Tony Norman / Pittsburgh Post-Gazette

Located in a former convent in Swissvale, POWER — which stands for Pennsylvania Organization for Women in Early Recovery — opened the doors to its first clients in fall 1991, a year after it was founded.

In September 1992, Rosa Davis was recruited by the organization to be its CEO, a role that continues to fill her with immense satisfaction and joy.

"The impetus for starting POWER was to provide a safe place for women to continue their treatment in a program that reflected their lives," Ms. Davis said.

"At the time POWER opened, there were very few programs for women-only across the Commonwealth. POWER offered the only halfway house in-patient treatment program in Allegheny County [specifically] for women."

Over the decades, it has grown from a single program agency to an organization that provides a range of genderresponsive, trauma-informed treatment for women with substance-use problems. "POWER helps women reclaim their lives from the disease of addiction and related emotional health issues," Ms. Davis said.

She said the organization helps approximately 1,800 women each year, working with them to build a strong foundation that will empower them to sustain their recovery. "Since opening in 1991, more than 20,000 women have benefited from our programs and services."

POWER is about to add to that number when it unveils a new 21-bed in-patient treatment program for detox and rehabilitation at another location on the East End in January.

Seven beds will be dedicated to detox, and 14 beds will be available for short-term rehabilitation so clients can continue treatment once they've successfully emerged from the withdrawal process.

Just as at its location in Swissvale, each woman will have a private room and bathroom. The new facility will be staffed 24 hours a day. Because of the emphasis on privacy and personal space, social distancing during the pandemic will not be a problem.

"People go to detox programs in a crisis, usually after surviving an overdose," Ms. Davis said. "This means women will begin their treatment while we help safely manage their withdrawal symptoms."

Treatment will be introduced at admissions and integrated into each woman's care while POWER clinicians, in collaboration with contracted medical staff, manage withdrawal symptoms. Women are also eligible for the rehab program if they completed detox at another treatment center or if detoxification isn't immediately warranted.

"All of the CDC's, Pennsylvania Department of Health's and Allegheny County Health Department's guidelines and recommendations will be followed," Ms. Davis said.

She said those toiling in the addictions treatment field are adapting to the changes imposed on them by COVID-19.

"We've learned so much," Ms. Davis said. "Our mission has remained the same, but service delivery has had to change in many instances. In our intake, outpatient and mentoring programs, for example, we quickly transitioned to telehealth, providing virtual individual and group sessions.

"As we get back to some form of normalcy, we'd like to continue to offer telehealth services as an alternative to face-toface services if a client prefers. In a residential program, obviously, we'll continue providing services in person and will be taking as many precautions as possible in an effort to reduce the risk of contracting or spreading the coronavirus."

The pandemic impact has been felt in other ways, too.

Ms. Davis said there has been a 20% reduction in referrals to POWER in the last five months because people sitting at home are engaging in alcohol abuse and other drugs while being disconnected from friends and family who would intervene.

Prior to COVID-19, referrals had increased dramatically in recent years. "Families seem to have been more involved in trying to find help for their loved ones," Ms. Davis said. "And while addiction has always been a public health issue, in recent years, as the opioid epidemic started to increase in white communities, it had been an illness that was criminalized."

Ms. Davis lamented racial and gender disparities in the way substance abuse was addressed until recently.

"The only positive that has come out of the public's attention to opioid addiction and the overdose crisis has been more open dialogue, and that's led to more people seeking treatment," she said, referring to pre-COVID-19 trends that will probably return.

Currently, POWER has 75 employees, mostly women. "A few years ago, we expanded our recovery support services to men," Ms. Davis said. "So while all of our treatment programs are designed for women only, our support services, like intake and mentoring are offered to both women and men. We match male mentors with male clients and female mentors with female clients," she said.

The organization relies on volunteers to help out in a number of roles, she said. "In this era of COVID-19, we've suspended on-site volunteering, but some of our volunteers have used technology to stay connected to and supportive of clients." Ms. Davis gives as an example a group from a local church playing games online with clients and other volunteers providing guidance for resume writing and job interviewing.

POWER receives funding from Medicaid and the Allegheny County Department of Human Services, contracts with commercial insurance, including Highmark and UPMC, and direct fundraising efforts.

"[We] must raise more than \$600,000 this year from fundraising, including from foundations, corporations, individuals and fundraising events," Ms. Davis said. In May, the organization held its annual POWER Promises event — virtually. She said the online gathering raised \$80,000.

The organization is planning to create a POWER Campus in the near future and is purchasing property next to its residential treatment facility known as POWER House in Swissvale. "With the expansion of a campus, we will bring in community partners to broaden the services we can provide to women seeking recovery," she said.

Still, she wishes the expanded services weren't necessary.

"The best outcome would be to eradicate substance-use problems and work ourselves out of our jobs," Ms. Davis said. "Since that is unlikely, our plan is to keep improving and enhancing the care we offer, to remain open to evidence-based and promising practices so that we continue to offer help and hope to women, their families and our communities."

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First Published August 17, 2020 7:30 AM