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WOMEN AWAITING TRIAL: COMMON PROBLEMS AND COPING STRATEGIES

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Based on ethnographic research in three bail hostels, this paper discusses the common problems experienced by women awaiting trial and the strategies they employed to manage the realities of their lives. Whilst the women living in the hostel came from diverse backgrounds, what united them, apart from the experience of being charged with a criminal offence was a sense of low self-esteem and experiences of multiple and complex problems including abuse, unemployment and poverty, homelessness, and the sole responsibility of caring for dependants. Often, they sought strategies to cope with these problems in ways which are ultimately counter-productive such through substance abuse (illegal drugs, alcohol, prescribed medication and food), self-harm and offending behaviour. The paper ends with a discussion of some of the ways in which hostels were able to support women in making changes to their lives, but also offers a realisation of the difficulties which impinge upon the provision of support.

Introduction

Increasingly the particular experiences of women appearing before the courts are being documented. Following in this tradition, this paper provides an analysis of problems which permeated the lives of many of women awaiting trial with a particular focus on experiences of abuse, caring for dependants, poverty and homelessness. The solution to these social problems was to develop highly individualised ways of coping through substance use, self-harm and offending behaviour. Using these strategies to cope with the pressures they face produces short-term positive effects but they are ultimately counter-productive, producing additional problems and exacerbating existing ones. An important theme of this paper is the gendered nature of experience and the need for the criminal justice system to recognise the particular needs of women who offend.[1]

The findings discussed in this paper derive from research on bail hostel provision for women awaiting trial. In particular, the project explored the specific needs of women residents, the ways in which bail hostels offer them support and the factors which impinge upon the provision of support. Data were gathered from ethnographic observation and semi-structured interviews with staff and residents in three bail hostels.[2] Two were women-only hostels (Victoria House and Carlton House), the latter with provision for children, and one mixed hostel (North Street Hostel).[3] This paper draws mainly on the accounts of the fifteen women residents who were interviewed. These women were aged between nineteen and sixty-one, although the majority were in their twenties and thirties. The majority were white (thirteen women). They had been charged with a wide variety of offences from minor property offences to murder. In terms of their criminal careers, they differed a great deal. Five women had not had any contact with the criminal justice system before and only two women had served a custodial sentence. The remaining women had previous convictions which resulted in them being given a community penalty or fine. Although they lived very different lives prior to being referred to a bail hostel, there were some recurring themes within their accounts, for example, unemployment (fourteen women), responsibility for dependents (nine women), experiences of

violence and abuse (nine women), drug and alcohol abuse (seven women), health problems (seven women) and homelessness (four women).

The discussion which follows introduces the complexities surrounding the women's lives and adds to the background information already presented. It begins with three vignettes which capture three women's experiences before and after being referred to the hostel. For ethical reasons [4], they are fictional characters but based on the experiences of women met during the fieldwork. In order to maintain the commitment to protecting the confidentiality of the women residents interviewed, detailed descriptions of individual interviewees could not be offered. These stories illustrate the different experiences, personalities, backgrounds and current circumstances of the women who come into bail hostels. From the different stories, common themes appear these accounts and those of many of the women interviewed: experiences of physical, sexual and emotional abuse, substance abuse, poverty and homelessness, difficult childhoods and the absence of support. This is set against a background of diverse experiences. However, there are some features common to all their accounts and this has been noted by probation officers in South Wales who have established a feminist groupwork model for women on probation (Jones et al., 1993). They include being charged with a criminal offence, low self-esteem and lacking a sense of themselves and of their needs as individuals in their own right. Another recurrent theme in their stories is the way in which coping strategies are developed in response to the difficulties that stem from their socio-economic position in a patriarchal society, poverty, homelessness, unemployment, experiences of abuse and responsibilities for child care. The term 'coping strategies' refers to the ways women manage the realities of their lives, a term of reference implied in the women's accounts but not explicitly referred to.

Vicky is 27 and awaiting trial at Carlton House for handling stolen goods (related to her need to finance her heroin addiction) and the possession of heroin. It is her third offence. Her young child, Natalie is being cared for by her mother, although Vicky's relationship with her mother is difficult. Her partner, also her co-defendant, is remanded in custody. Her mother hates the thought of Vicky being a 'junkie' and is sceptical about her ability to provide and care for Natalie. She wants to continue to care for Natalie after Vicky leaves the hostel, even if Vicky does not receive a custodial sentence. The hostel has provision for children but both Vicky and her mother feel that it would be unfair for Natalie to experience living in a hostel because of the dangers it presents, and also because it would mean moving her from the school where she is settled. The thought of losing Natalie and the fear of going in to custody, along with the support of the hostel, motivates Vicky to seek help from the community drugs team for her heroin addiction. Through counselling sessions and the prescription of methadone, she is able to publicly identify her drug use as a problem and reduce it. The support of her keyworker is appreciated by Vicky who helps her to find other things to do now her time is not spent looking after her daughter, or supporting her drug habit. Ultimately, she receives a probation order and is found a place in a treatment centre. She is found temporary bed and breakfast accommodation until a suitable flat is found for her and her daughter.

At 52, Liz stands out at Victoria House, not only because of her age, and the seriousness of the offence she has been charged with, murder, but also because she has had no prior involvement with the criminal justice system. After getting divorced in her mid-30s, she met Charlie and he moved into her home. After many experiences of violence linked to his alcohol abuse, she retaliated through force and was charged with his murder. This appeared at the time to be her only way out because she felt unable to leave, because she was fearful of his reaction and felt unable to talk to anyone about her life. She was immediately remanded in custody and held on the hospital wing, but referred to the hostel by the prison bail unit. She has been waiting trial for several months. Her family visit regularly and are supportive. However, she finds it hard to open up and talk about her experiences of violence to the staff who she still regards as strangers, or to her children who she wants to present a particular image to, of someone in control of her life, who is strong-willed and able to cope. Despite the extreme violence she suffered, she is now wrestling with feelings of guilt and shame. She continues to take benzodiazepines to cope with her depression and to enable her to sleep at night. The effects of waiting trial are extreme for her: her health has deteriorated, she experiences loneliness and isolation, her rented home has been lost and her future is still marked with uncertainty, almost a year after the offence.

Michelle is just 17 when she is referred to the North Street Hostel. She has been charged with criminal damage, a relatively minor offence but has been refused bail because she does not have a permanent address. She has been homeless since leaving care over a year ago, living

with friends, in a squat and for a while on the streets. She appears unhealthy from living on the streets and battling with eating disorders since her mid-teens. Being in care since she was seven when she was abused by her father, she is very much institutionalised. The hostel is mixed, a setting she finds difficult because of her experiences of abuse, but also because of the very structured regime of daily house meetings, chores to do and keyworking sessions, a lifestyle she is not used to. The only support she has is from her keyworker who is not always around because of the shift system. The other staff she feels she cannot trust. There is only one other female resident, a drug user living a chaotic lifestyle who she is fearful of. Staff become concerned when she begins to harm herself again, a practice begun when she was in care. Feelings of being unable to cope alone and the thought of imprisonment escalate to the point where she absconds.

This paper will now explore the problems experienced by many of the women referred to the hostel and women more generally. It will also discuss the strategies they developed to cope with these difficulties. A clear relationship between the women cannot be implied. What is presented is an account of problems, illustrating inter-relationships between the problems.

Problems experienced by female residents

Fulfilling the domestic role as mother, daughter and partner

Definitions and ideals of how men, women and children should behave are a central organising feature of all societies. (Gittins, 1993: 35)

Prevalent in every society are notions of appropriate female and male behaviour and expectations of the roles women and men should fulfil, often justified in terms of an appeal to 'natural' differences between the sexes (Oakley, 1972). Dominant within Western culture is the ethos that a woman's primary role is in the home as mother, partner and carer. These supposedly 'natural' aptitudes of women are constantly taught and reinforced, monitored and sanctioned through socialisation, the media, social policy, legislation and responses to women who actively reject traditional feminine roles. For example, as Carlen (1988a) notes, women who break the law are portrayed as bad wives, mothers and daughters, as masculine rather than feminine. They may be portrayed as doubly deviant, offending against society's behavioural rules and against the more fundamental norms which govern sex-role behaviour (Heidensohn, 1970; Worrall, 1990). The court's assessment of them as wives, mothers and daughters is crucial at the sentencing stage (Carlen, 1983; Dominelli, 1984; Farrington and Morris, 1983).

The dominant familial ideology of the nuclear family prescribes gendered behaviour in terms of the husband as the main breadwinner and the wife as the full-time housewife/mother who may work part-time (Gittins, 1993). This family form dominant in rhetoric rather than reality was not found amongst the women in this study. Some lived alone, others lived with their partners of either sex, some were single parents, some were homeless. However, many experienced the responsibilities traditionally linked with the female role, caring for children and other dependants and domestic work. For those who were mothers, their children were a central aspect of their lives. For example, Margaret remarked 'my son is important to me. That's the only person who is'. Many of the women in the hostel defined themselves in terms of their relationships with others and judged their achievements by reference to their ability to care for others. This may be a consequence of being denied, to a great extent, access to other areas of achievement such as education and employment. Feminist theorists such as Chodorow (1978) and Gilligan (1982) propound a similar view. While women's experiences differ, 'the centrality of motherhood and caring for children runs as a thread of continuity between women' (Graham, 1993: 72).

What many of the women were struggling to cope with was the gap between idealised expectations of motherhood and caring and the realities of their lives. Common-sense ideologies of motherhood socially construct it in an idealised and romanticised way. (Phoenix and Wollett, 1993). Class is crucial to this analysis. The lives of the women residents were characterised by a struggle to make ends meet, trying to survive on benefits and trying to keep a roof over their heads, struggles which do not characterise the lives of their middle-class counterparts. As Campbell (1981: 150) asserts

Virtually all our ideas of femininity ... are derived from the middle-class 'lady'. To be pampered, egoistical, passive, nurturous, care-taking requires a certain level of economic security.

Like the drug-using women in Taylor's (1993) study, many of the women had a poor assessment of their own capabilities and felt they fell short of their idealised image of what a 'good' mother should be like. Yet at the same time they felt that their children were not totally neglected. They wanted more for their children than they felt they could provide at present. Margaret talked about the appeal of committing property crime for those on low incomes to fulfil their needs and provide for their children:

They say there's temptation. There is temptation. You want better for yourself, your child and your home.

Many of their future plans involved their children and they were prepared to make changes to their lives for the sake of the children.

The role of carer was not one confined to women with children. Others had other dependents. Erica had elderly parents, both of whom were ill and in need of constant care and attention. As the eldest daughter without a family of her own it fell to her to provide this, to juggle this responsibility with that of building up her own business. Helena was the carer of her partner:

My boyfriend suffers from blackouts and someone has to be with him 24 hours a day. He has no family, well he has but no close family to speak of, so I'm the nearest thing he has got, We manage, we get by.

A dominant assumption is that caring is an attribute and activity which naturally belongs to women (Land, 1991). The impact of community care policies has been to manipulate the boundaries between the public and private in such a way that caring, which traditionally took place in public institutions, is now undertaken, largely by women, in the domestic sphere (Pascall, 1986; Tester, 1996). This can create enormous pressures on the women involved and a struggle to cope with day to day demands of life. Helena implies this when she refers to managing and getting by.

Caring responsibilities impacted on their lives in many ways. For example, it limited their access to employment. Margaret talked about a 'catch 22' situation: she wanted to work to create a better home and life for her child but because she had a child and access to affordable child care was limited, she was unable to work. Siobhan was fortunate to have a well-paid job but felt she had to give it up because the pressures and stresses it created through long hours and the need to work away from home. The pressures of a 'good' job and being a 'good' mother conflicted. It also limited their access to leisure or simply time for themselves (Hochshild 1989). Studies of motherhood have found high levels of dissatisfaction, tiredness and depression (Badinter, 1981; Boulton, 1983; Graham and McKee, 1980; Popay and Jones, 1990), higher amongst those who face the pressures of poverty, poor housing and unemployment (Graham, 1984; 1993). However, as Rich (1985) notes, motherhood is characterized by contradictory pleasures and pains.

Many of these women coped with the pressures of caring on their own. Some of the women were in ongoing relationships, although their partners did not take over responsibility for children when the women were referred to the hostel. Usually, their children were cared for by female members of the family. For others, relationships had broken down or become difficult, sometimes characterized by violence and abuse. The image of the happy family was very distant from the reality of their lives, although it was not an image rejected by all as a future aspiration. Many had experienced, or were experiencing, what Morgan (1975) terms the dark side of family life: child abuse and violence within relationships.

Experiences of emotional, physical and sexual abuse

This study found high levels of emotional, physical and sexual abuse amongst the female residents interviewed (nine out of fifteen women). Other studies of women appearing before the courts have found equally high levels of abuse, both physical and sexual, during childhood and adulthood. (HM Inspectorate of Probation, 1991; Posen, 1986; Swift, 1995). Some disclosed their experiences in an interview, but the high levels of abuse amongst women were visible in other ways. During the fieldwork, a number of women returned to the hostels with injuries caused by violence within relationships. Staff commented, too, on the high levels of abuse:

I suppose I was quite shocked at the percentage of clients who have disclosed some form of abuse or another, whether it's in their childhood or later life or both. It's quite often both. [Staff member, Victoria House]

In women's hostels, you have to deal with the fact that the majority of residents have been abused throughout their lives. [Staff member, Carlton House]

For those women who had been abused as children, the consequences of that abuse continued into their later life:

Their own experiences as children are often what they bring to us. It doesn't go away until somebody is able to look at it. [Staff member, Victoria House]

At a personal level, likely effects included anxiety, feelings of isolation, low self esteem and psychological problems. The effects of child abuse impacted greatly upon relationships with others, in particular an inability to trust others and the likelihood of re-victimization (Wyatt and Powell, 1988). The tendency for those abused in childhood to be abused again in adult life was highlighted by some members of staff:

It's quite often both [abuse in childhood and adult life], a knock-on effect. [Staff member, Victoria House]

Quite often, some of them are from families which are abusive, sexually, mentally and physically and they find themselves going back into that situation and environment because it's the only people they know. [Staff member, Victoria House]

Although many of those abused as children do not engage in offending behaviour, some may be more vulnerable to involvement in crime, particularly if they are taken into care. Carlen (1987) argues that this experience makes women more likely to become subject to the regulation of the criminal justice system. Additionally, through involvement in substance abuse which Wyatt and Powell (1988) suggest may be linked to abuse during childhood, offending becomes a likely outcome.

A number of the women had experienced physical violence within an adult relationship, like Helena and Sue:

I was married for ten years. My husband was violent towards me but I've divorced him now and I'm living in [another town]. (Helena)

When I was twenty I met up with this guy ... I had a really bad life with him and in the end I had to move ... just to get away from him. Every time I left him, he found me and beat me up. (Sue)

Some women had experienced other forms of abuse, as Brenda described:

At home he kept me going all the time. He never gave me a minute to myself. Some days I didn't have time to clean my teeth. Even if you were sitting on the toilet, he would say 'come on, you haven't got time for that' and off I'd have to go and do something for him. I couldn't even do that for myself. He doesn't seem to think that you've got any rights at all. A woman is just there for him sexually or financially.

Feminist research has exposed how all women are vulnerable to male violence (Stanko, 1985; 1990). However, some of the women passing through the hostel system, although in no way to blame for their experiences of abuse, seemed particularly vulnerable because of the lifestyles they led. Hostel staff, particularly at Victoria House, were attuned to this as a worker there commented:

Sometimes women are attacked by people they don't know because of the lives they lead, drugs scene or drunk on the street, they are more vulnerable to attack.

Feminist work in relation to domestic violence has also exposed the barriers women face when leaving the home (Dobash and Dobash, 1979, 1992, Glass 1995), both material barriers such as not having any accommodation to move on to or no independent income, and emotional barriers which may include blaming themselves or feelings of guilt and shame

which inhibited their ability to reach out and seek support. Glass (1995) asks the question why women don't leave abusive men. She suggests that being totally controlled and isolated by a man's abuse can destroy the confidence necessary to make the smallest decision. Deciding to take control again is both exhilarating and frightening. Whilst some of the women, like Helena and Sue had managed to leave, others were continuing in those relationships.

Abuse in all its forms had far-reaching effects on both their emotional and physical health. The barriers to seeking support were numerous. No-one spoken to had sought justice through the criminal justice system. For some women, this was denied to them, if for example the violence had taken place when they were involved in a criminal activity, such as buying drugs or prostitution, or if they were ultimately convicted for a violent offence against their partner. Many of the women had led what staff often termed 'damaged lives'. As other writers have noted (Faith, 1993; Gilfus, 1992), the categories of victim and offender are therefore blurred in relation to women appearing before the courts.

Struggling to make ends meet

Women outnumber men amongst those living in poverty, their chances of being poor are higher and they stay poor for longer. (Millar, 1996: 52)

Dependence on the welfare state was a feature of the lives of all but two of the women met during the fieldwork. Many felt that reliance on state benefits did not provide enough money to live on. Whilst some had worked in the past, they had been concentrated in jobs which are not well-paid and require little skill such as shop work, work in cafes and restaurants and auxiliary nursing. These are areas of the labour market where women are most likely to be concentrated (Rees, 1992; Callender, 1996). Continuing in employment for many was difficult because of their caring responsibilities:

Some people can't work because they've got families and if you are single you can't do it. If you want to work, you've got to get a babysitter or whatever, or leave them with friends and pay them, so it's money, money, money. (Margaret)

Others could not work because of ill-health (both physical and mental health):

I wasn't working because I'm epileptic and my fits are quite frequent so I've been put on the lay. (Judith)

I can't work. I'm medically retired after a serious attack at work. (Clare)

For many substance abusers, their lives were perhaps too chaotic to undertake the responsibility of looking for and continuing in a job. As a result many of the women lived in situations of poverty with its implications on health, both physical and mental (Graham, 1993), and its destructive impact on relationships (Cohen et al., 1992). As primarily working class women living in alternative households to the nuclear family, their struggles can be explained not only in terms of economic recession aggravating women's powerlessness, but also in terms of deliberate government policies designed to discourage dependence on the welfare state in favour of dependence within the nuclear family (Carlen, 1988b; Millar, 1996). Moreover, these policies fail to appreciate the realities of many of the women's lives: precarious accommodation, lack of access to affordable child care, and lack of access to well-paid jobs, in addition to the destructive impact of violence and substance abuse. Even those living with their husband and children did not necessarily have sufficient funds to provide for themselves and their children, as Jackie described (cf. Pahl, 1989):

I've got money for myself now which I didn't have before. Before he was looking after the money side of it.

For women living in situations of poverty, offending is a possible, individualistic solution to social inequality stemming from class exploitation and sexism (Carlen, 1988b):

Benefits are shit. That's why most people commit crime isn't it? Because they need the money and the dole don't give you enough. (Ruth)

No home to call their own

Some of the women coming into the hostel could be described as homeless, an elusive term, often used narrowly by politicians, policy makers and those who allocate housing which contributes to its invisibility (Watson, 1986). As the campaign group Shelter (Dibblin, 1991) highlight, part of the mythology which surrounds homelessness is to define it as rooflessness, downplaying the scale of the problem. The current official definition of homelessness suggested by the Department of the Environment (1994) is broader than this and argues that a person is homeless if they have no accommodation that they are legally entitled to occupy, or they have accommodation but cannot secure entry to it, are experiencing threats of violence or actual violence from someone living there, it is not reasonable for them to continue to live there or their accommodation is movable and they have nowhere to place it.

Whilst homelessness in some cases was a consequence of waiting for trial, some of the women who came to the the hostel had experienced homelessness before arriving, and in some cases this was linked with their criminal charge. Research studies to date illustrate the link between homelessness and crime as the Home Office review of the literature summarises (Ramsay, 1986). The conclusion to this review argued that although crime has not been shown to be the inevitable consequence of homelessness, some clear links have been exposed. Homelessness produces a criminogenic situation (McCarthy and Hagan, 1991) such that the pressures to offend are great. Conflict with the police can arise from begging, shoplifting, prostitution or simply sleeping rough. The study by McCarthy and Hagan (1991) found that for many young people offences had been committed after, rather than before, becoming homeless. The impact of being charged with a criminal offence, particularly if sent to custody produces a spiralling effect. This can be seen in the lives of at least three of the women, Jane, Rosemary and Josie, their lives characterised by periods in custody, in bail and direct access hostels and sleeping rough. The findings by Anderson (1991) of the high levels of criminal convictions among users of hostels, day centres and soup runs provides further evidence of the links between homelessness and crime.

The very fact that women and men are homeless can have an impact on the bail decision. The lack of a permanent address can make them more vulnerable to being remanded in custody, as research highlighting the higher rates of homelessness among the remand population suggests (Morgan and Pearce, 1989; Walmsley et al., 1992). They are unable to meet the additional demands of bail conditions, often to meet a curfew, without a permanent address. Hostels are therefore used if the defendant is judged a suitable client and is perceived unlikely to contravene the requirements of the 1976 Bail Act.

The women within the three hostels who could be described as homeless were a heterogeneous group. Only a few fitted the stereotype of someone living on the streets. Others were staying with friends, usually sleeping on floors of accommodation that was already crowded, using direct access hostels and refuges, or living in bed and breakfast accommodation. The reasons for their homelessness were diverse: damage to their property rendering their homes uninhabitable, the need to escape from domestic violence or abuse, previous experiences of imprisonment, or a breakdown in a relationship. Social, economic and political factors have an impact on their continued homelessness: the 'right to buy' policy introduced by Thatcher in the 1980s has reduced the council housing stock at a greater rate than rebuilding programmes, there is lack of affordable, and quality accommodation in the private sector to rent, particularly for those claiming benefits. There is also the difficulty of breaking the cycle of homelessness, unemployment and poverty. Watson (1986) proposes that it is a gendered experience too. She argues that patriarchal social relations, the sexual division of labour and the dominant family model in a capitalist society all serve to marginalise women in terms of housing. There is evidence to support this view. The traditional role for males is the provider, the breadwinner. More and more women are entering the labour market but their earning power is lower than that of males, often because the jobs available to them are unskilled and part-time (Walby, 1990). Compared to hostel provision for men, there are fewer bedspaces for women in hostels (Watson, 1986). Those that are available are mainly in London and often in mixed hostels which may not be suitable for the many women who are homeless and who have experienced abuse (Dibblin, 1991). Single mothers are portrayed in the media as 'queue jumpers', only having children to ensure access to housing. Women who try to leave abusive men are usually sent back to their unsafe homes or given

accommodation which is often unsuitable or sometimes in dangerous places (Malos and Hague, 1993).

Listening to the women's accounts, some of their experiences of homelessness were largely peculiar to them as women, in particular, decisions to leave their homes because of violence and abuse, as Helena describes:

I went up North to get away from him, to get as far away from him as I could. I knew no-one up there. I went to a refuge at first but now I'm living in bed and breakfast.

Other issues were discussed too, such as the implications of their homelessness on their child caring responsibilities. However, other aspects of their experiences were common to all homeless people, the impact on health, on employment chances and on maintaining social and community ties. At a symbolic level the home has different meanings for women compared to men. As Darke (1994) and Reith (1986) note, there is a distinctive relationship between women and their homes. For women, a roof over their heads is not enough. Women's sense of worth, status and self-esteem is tied up with their experiences of home. Thus for women the loss of a home can have devastating emotional and material consequences.

Low self-esteem

A common theme running through the lives of many of the women coming into the hostel, regardless of class, race, age and sexuality is low self-esteem. As Sanford and Donovan (1993) argue, low self-esteem is experienced to a greater degree by women which is largely the result of female oppression in a male dominated culture and society, and helps to continue that oppression. They offer a critique of early androcentric theories of self-esteem, validated on men and passed off as general theories (Coopersmith, 1967; Rosenberg, 1979) and prioritise the links between gender and self-esteem. Biological deterministic accounts are rejected in favour of highlighting the importance of gender role expectations with regard to self-esteem and the double standard which regards high self-esteem in men as a moral virtue but in women as vanity and arrogance.

Low self-esteem was implicit in the accounts women gave of their experiences of waiting for trial. Implicit in the sense that they did talk directly about it, but also in the sense that sometimes they tried to portray an image of themselves as confident and in control of their lives. It also manifested itself in the attitude towards the research. For example, many were eager to be interviewed, but felt their experiences were not valid and of no interest to anyone. Comments were often made along the lines of 'I wouldn't know what to say' or 'you don't really want to hear about me do you'. The lack of self-esteem amongst women was also something staff drew attention to in their accounts:

We build on what little self-esteem they have and gradually that confidence comes back. [Staff member, Victoria House]

Mental health problems almost invariably relate to low self-esteem. What they've suffered in the past will manifest itself in different ways and one of those is depression. We have a lot of people who are depressed. [Staff member, Carlton House]

In particular, perhaps some women were more vulnerable to low self-esteem: substance using women (Barber, 1995), women who have been abused (Glass, 1995; Wyatt and Powell, 1988), women who harm themselves (Liebling, 1992) or suffer from eating disorders (Wolf, 1990). Those who have been through the criminal justice system before are also likely to suffer from low-self esteem, as a member of staff at Victoria House explained:

If you've been in custody a few times, you feel pretty damned useless. Society is then saying you are useless, we want you locked up inside and I think it increases that feeling of failure.

Sanford and Donovan (1993) suggest that low self-esteem lies at the bottom of the coping strategies faced by women coming through the hostel: substance use, eating disorders, self-harm. Working with the women then involves more than countering the harm caused by the coping strategies, but rather looking at the underlying causes of this low self-esteem in the problems they experience in their lives such as abuse, poverty, unemployment, pressures to be a 'good' mother and partner.

Coping strategies

The first collection of coping strategies utilised (substance use and self-harm) focus on the body. Traditional sociology has adopted a disembodied approach, influenced by an acceptance of a mind/body dichotomy and has focused on the mind as that defines humans as social beings (Shilling, 1993). As Shilling (1993) propounds, under conditions of high modernity: the radicalisation of globalisation, industrialisation, secularisation and the growth of science, the body becomes increasingly central to the modern person's self-identity. Interest in the body has therefore increased in consumer culture and at the level of academic sociology (Falk, 1994; Scott and Morgan, 1993; Turner, 1992). The literature highlights the way in which we are able to control our bodies and at the same time have them controlled by others. Feminist literature highlights the ways in which the discourses of law and medicine have allowed increased control over women's bodies and their lives (Oakley, 1993; Smart, 1992). Where women do try and seek control over their lives using the body as a medium of expression, they do so in ways which are ultimately self-destructive. Lawrence's (1987) concept of the 'control paradox' illustrates this in relation to eating disorders. The consequences of the assertion of control over their bodies is to increase the control of others over their lives. This can be seen in relation to the female defendants whose use of licit and illicit substances and self-harm techniques exposed them to the surveillance and control of the criminal justice system, therapists, social workers, counsellors and psychiatrists. Their strategies for coping were diverse but share a common theme. Their behaviours were the result of the internalisation of social pressures. Personal feelings are kept private, turned against the body, rather than made public and politicised.

Substance use: drugs and alcohol

A growing body of criminological literature has explored the links between substance use and crime (Bennett, 1990; Hammersley, 1988; South, 1994; Tonry and Wilson, 1990). Recognition has been made that women are engaged in substance use, although they have been studied in isolation from men (Anglin and Hser, 1987; Erickson and Watson, 1990; Rosenbaum, 1981; Silverman, 1982), and therefore a full analysis of the role of gender is lacking. The feminist critique by Ettore (1992) is an important contribution to the field. Other studies of female offenders have pointed to the high levels of substance use within this population (Carlen, 1988a, 1990; Daly, 1994; Eaton, 1993). Within this study, the use of either drugs and/or alcohol was an important aspect of the lives of many of the women who came into the hostel. For example, an in-house study found that in one month in 1994 at Victoria House, two-thirds of the referrals were from those charged with drug-related offences and/or drug users, a figure which excludes cannabis users. Usually, it linked in with their offending behaviour. This could be direct, for example being charged with importation, dealing or possession, like Margaret who was charged with the possession of amphetamines or Rebecca who was charged with importation. However, usually the link is more indirect, committing property crime to support a drug or alcohol problem. For instance, Siobhan was charged with handling stolen goods to finance her heroin and crack addiction and Lynsey was charged with GBH, behaving violently under the influence of alcohol. These links were visible to both hostel staff and the women themselves. Siobhan remarked:

I know that all my offences are drug-related. I went from 1990 to 1994 without using drugs. I was clean and I didn't get into trouble with the law. I know why I'm breaking the law.

That's when I began to get into trouble. It [drug use] was sending my head funny. I wasn't thinking straight. (Judith)

Staff, too, saw clear connections between drug use and offending:

You look at the 609 [criminal record] and you see the definite links with them needing money to support that habit. [Staff member, Victoria House]

I think it helps to look at the circumstances of their lives and to look for patterns of offending. I see this with drug users where when they have been using drugs, there are lots of offences and when they've been off it, it's stopped. [Staff member, Victoria House]

A number of researchers have offered explanations for women's use of illicit drugs. In much of the literature, a deviance model dominates which explains women's substance use in terms of individual pathology and produces an image of female substance users as emotionally

unstable, weak, dependent and passive. (Friedman and Alicea, 1995; Taylor, 1993). Neglected from this analysis is an understanding of the role of social, economic and cultural factors. Thus as Marsh (1982) illustrates, the public issues of women's substance use is manifested most painfully as the private troubles of drug users.

There are however alternative explanations. Ettore (1992) argues that women's use of substances can be viewed as a maladaptive attempt to deal with life stresses, and in this way individuals are viewed as active agents who are trying to cope with their lives, rather than in terms of a disease model of addiction. Other have suggested a similar view. For example, Carlen (1983) argues that the women imprisoned at Cornton Vale had learnt that alcohol could temporarily deaden the pain caused by difficulties in their domestic lives, primarily slum housing and violent men. Women's use of substances can therefore be interpreted in a political way (Ettore, 1992; Friedman and Alicea, 1995; Taylor, 1993), stressing the interaction between the human agency of women and the constraints they face in a patriarchal gender order. Women's use of substances are therefore presented as linked with their experiences of patriarchal pain, 'the distressing ordeals women experience both publicly and privately in the gendered system of domination' (Ettore, 1992: 153). In this way Taylor (1993: 157) argues that drug use has a dual role for women:

It provides them in the public sphere with a lifestyle which has meaning, structure and purpose, gives them an outlet for entrepreneurial and innovative abilities, and provides a form of independence and even equality for women in otherwise subordinate relationships. Within the domestic sphere, moreover, drug use provides a means of enabling them to meet the demands and cope with the stresses encountered in the family arena, and to cope with the guilt which arises from the women's self-blame for their lack of contentment.

Drawing on their experience of working with drug and alcohol users on a regular basis, the hostel staff were able to offer their own explanations, gender-specific explanations relating to realities of women's lives and women's vulnerability to male violence. They saw it primarily as a response to pressures in the domestic sphere:

But drugs and alcohol are not the problem. There is a problem why they are on drugs or have a drink problem: sexual violence, physical violence, emotional abuse. [Staff member, Victoria House]

The initial problem presented is the drug or alcohol use which has brought them into the situation, but underneath that what we are often dealing with is people's past lives, which I presume they are trying to mask through drug use. The main issues in that are abuse throughout childhood into their adult lives, parent's violence, sexual abuse, women who spend a lot of time in care. [Staff member, Victoria House]

In this way, the use of substance can be seen as a coping strategy, a way of dealing with traumatic events or as one hostel worker explained 'drug and alcohol use is obliterating those feelings and is therefore a way of coping with the pain'.

The evidence they used to support this view was that often women who come to the hostel decide to seek support in giving up drugs and alcohol. The process of coming off is a time when their emotions come back to the fore, and a time when issues around abuse are presented to staff because the issues do not simply disappear. Survivors of abuse require counselling and support. This meshes with Josie's view on why she began using drugs again:

Josie agrees to talk to me at a later date and the immediately begins to talk to me about being raped, her son who was born afterwards, who she still loved because she did not blame him for what happened to her, but who dies in a car crash, and the miscarriage she had experienced in Holloway. She links this up with her drug use, how she gave up when she was pregnant and how her inability to accept the miscarriage (she went around telling everyone she was still pregnant) forced her back into using drugs. (Fieldnotes - Victoria House)

Others, like Siobhan, although able to draw clear links between her use of drugs and her offending behaviour, could only offer vague explanations for her entry into drug use:

I've been taking it [heroin and crack] for ten years ... I don't know how I got involved. I was just very young with nothing to do and very impressionable. I don't know.

Margaret offered similarly vague explanations:

I took amphetamines for five years, it was fun. No, I was with someone at the time and she was on them and so I went along with her and I liked it so I said 'I'll have a bit of that'.

It was easier for them to explain the reasons why they continued to carry on with drug use. For both, it was not only the addictive nature of the drug they were taking but also because of the central position which drug use occupied within their social networks, even though they were from different class backgrounds and led radically different lifestyles. Margaret was

living in a large city with high levels of poverty and few job opportunities. She herself was unemployed and struggling to support herself and her son. Siobhan, a university graduate, was employed in the fashion industry, earning a good salary and often travelling abroad. However, both lifestyles exposed them to the availability of drugs, social networks of drug users and ongoing temptation.

The impact of either drugs and/or alcohol on the lives of substance users is influenced by gender. Litt (1981) argues from research on adolescent female drug users that their drug use has serious social, psychological, physical and medical implications which are both qualitatively as well as quantitatively different from those of adult males in general and adolescent males in particular. The effects on women who come into hostels are far-reaching. Many had neglected themselves over a long period of time. A staff member at Victoria House remarked that drug users tend to spend all their available money, dole and proceeds of offending, on drugs. Consequently when they are arrive in the hostel:

They are malnourished. They've not eaten a proper meal for years. [Staff member, Victoria House]

Spending all their money in this way means drug users are often living in situations of acute poverty. Employment is difficult to manage because of their state of mind, and because so much of their life revolves around their drug use. As Taylor (1993: 145) notes, 'despite its chaotic appearance to outsiders, the drug user's life is structured and organised'. Much of their time is spent 'scoring' and 'grafting', finding drugs to purchase and ways of obtaining the money to pay for them. The high costs of drug use result in the need to explore illegitimate avenues of obtaining money. Hence, the offences drug users most commonly commit include shoplifting, theft and deception.

There are other implications too. Whilst substance use, particularly the use of illicit 'hard' drugs is condoned for females and males, women who use substances are subjected to greater censure. They are viewed as unfeminine (Perry, 1979), as 'polluted' women (Ettorre, 1992: 75) and unfit mothers (Taylor, 1993). As Marsh, Colten and Tucker (1982: 1) summarise:

Social reactions to drug and alcohol use by women have been more extreme and negative than reactions to substance use by men. Women who use substances are viewed as sick or deviant - more deviant in fact than men who use the same drugs.

Consequently, many of them faced the constant fear of having their children taken away from them, a very real fear (Perry, 1987). The loss of children was an experience faced by some of the women in the hostels since only Carlton House has provision for children. This was a consequence of being charged with a criminal offence and granted bail on a condition of residence, but linked in with their use of substances. The fear still remained that grandparents looking after the children would be unwilling to give them back, that social services would not allow them to be reunited with their children in the future, or that their children would be taken away if their use of substances could not be controlled.

There is also the issue of safety, a concern for both female and male substance users but one that can take on a gendered dimension. They are at risk from infections passed on by shared needles, from the substances they are taking and what they are often mixed with by drug dealers to make greater profits, and at risk from overdoses and alcohol poisoning. The lifestyles they lead can make them more vulnerable to violence:

These women lead dangerous lives ... Throughout the time I've worked here we've had quite a number of women return from buying drugs, or just living in dangerous situations, who have been seriously assaulted. [Staff member, Victoria House]

Louise arrived in the early hours of the morning, two days late, accompanied by the police and in a dreadful state. She is coming off heroin, but was picked up for being drunk. She is alleging rape and so the police want to talk to her urgently. (Fieldnotes - Victoria House)

Risk of violence is shared by women and men, but drawing on the experiences of hostel staff and female residents, women seemed particularly vulnerable. For example, for some of the women, the pressures to finance their drug habits had been so great that they had turned to prostitution and become involved with pimps, working for them in return for drugs or money for drugs:

Some of the women, none at the moment, usually have pimps hanging around. Hopefully, getting methadone will break that link but it comes back to the fact that some of the women are so frightened of these men that control them that they will still go out there and work for these people or they will be physically attacked. [Staff member, Victoria House]

Perhaps, the extent of drug and alcohol abuse amongst women in the three hostels so far has been exaggerated. It is important to realise that some residents did not take drugs at all. Some had experimented, like Lynsey:

I took drugs before but I ended up in hospital because of them. It was a one-off. I took speed, E and a trip.

Others had not used drugs at all, or even come into contact with drug users. This can contribute to great anxiety before coming into the hostel. Some did not drink, others did drink and it could be described as a coping strategy, but their use of alcohol was associated with socialising, with pleasure, as Margaret described:

I've got my ale and I'll turn to a drink of vodka ... Yeah I have a drink, but I don't drink everyday. When I'm flush. I drink to socialise.

Other women developed alternative ways of coping.

Substance use: the use of prescribed medication

For some of the women, coping was dependent on their use of prescribed medication. The use of illicit drugs and alcohol appeared more widespread, but a number of women used tranquillisers and anti-depressants to cope with difficult periods in their lives. Judith discussed her experiences of waiting for trial and made clear 'it's a wonder I haven't cracked up and ended up taking tablets like I have for most of my life'. Despite a decrease in the consumption of tranquillisers in the 1980s, the number of people taking them remains high, and women are over-represented among the recipients of minor tranquillisers (Doyal, 1995). Researchers have argued that such medication is used as a means of social control, used as a means to keep women docile and passive. The literature on their widespread use in penal establishments would seem to suggest that they do have this potential (Sim, 1990). Qualitative research has challenged the notion that women taking psychotropic drugs are passive victims (Gabe and Thorogood, 1986). Rather the research has illustrated how women use them as an active strategy to sustain themselves, weighing up the risks and benefits of prescribed drug use. One opinion advanced by a worker at Victoria House suggests that the women turned to them to block out the pains of their lives:

People have such emotional baggage that they are often expecting doctors to work miracles, and go to the doctor and prescribe something that will make them better, and that isn't going to happen.

As this member of staff suggests, as with other coping strategies their effects can be contradictory, alleviating the pain but also perpetuating the damaging situation (Doyal, 1995; Graham, 1993).

Self-harm

The flexibility of a semi-structured interview schedule allowed issues such as self-harm to be discussed, which were not the subject of explicit questions and were not clearly visible from the outset as a major issue. Two of the women, one at Carlton House and one at North Street hostel discussed how they sometimes engaged in self-harming behaviour:

I was in hospital the other week. You get aggravated quickly here. People just piss you off. (Ruth)

I can self-harm quite easily. I've done it for two years since I was attacked at work. (Clare)

From the hostel workers' accounts, it appeared to be more of an issue at Carlton House. For example,

If you think about the number of time I've been to the hospital accident and emergency department. Hundreds of times I've been there. It's amazing with accidents, or cutting up normally.

This contrasted with the reflections of a hostel worker at Victoria House, where it was still an issue but not to the same degree. Women there may have been more likely to use alternative coping strategies, for example, drug use:

When I first arrived in the hostel we had a number of women who were threatening suicide or who were self-harming. It actually hasn't happened for a while. It is something that there is always the potential for because a number of women in the past have self-harmed.

The reasons why women self harm are believed to be complex and multi-factorial in origin (Coid et al., 1992). Their research on female remanded prisoners suggests that self-harm may be a symbolic gesture, a symptom relief mechanism or a response to external stresses. This meshes with the accounts given by Ruth and Clare. For Ruth, self-harm was a way of coping with the tensions and frustrations of hostel life and for Clare, a means to deal with the emotional consequences of the attack she had experienced at work. Others have referred to it more explicitly as a coping strategy:

The woman may cope with feelings of powerlessness by dissociating, or psychologically separating herself from her body, a tactic often used to survive the actual abuse during childhood. Self-harm may be a desire to reconnect with one's own body - a desire to ensure that one can feel. In this sense it is a life preserving measure. (Pollack, 1993: 59 quoted in Faith, 1993)

Offending as a coping strategy

In many ways, women's offending behaviour can also be regarded as a coping strategy. The female offender has stereotypically been portrayed as unbalanced and mad, therefore explaining her motivations for offending without reference to rationality. Women are often characterised as being 'at the mercy of their anatomy and emotions' (Walker, 1985: 71). The few classical criminological texts which look at female offenders emphasise the role of biology and physiology. The work of Lombroso and Ferrero (1895), Thomas (1923) and Pollak (1961) suggests that female crime could be explained in terms of women's hormones and their reproductive role producing emotionality, irrationality, childishness and deviousness. In contrast, male offending was not to be explained in terms of biology, rather in terms of inability to achieve the cultural goal of economic success through institutionalized means (Merton, 1938), status frustration (Cohen, 1955), and adherence to lower-class values (Miller, 1958). Work within the Lombrosian tradition prioritising biological determinism continued to have an impact long after the publication of the key texts. As Heidensohn (1985) notes, neo-Lombrosian studies of girl delinquents were still being carried out in the 1970s. Entering the 1980s, prostitution was still viewed as evidence of individual psychopathology rather than a rational economic choice for women (McLeod, 1982). At the level of practice, the stereotype of the unadjusted female offender has informed the criminal justice response to offending by women. For example, both Holloway (London) and Cornton Vale (Scotland) have been constructed on a therapeutic model informed by the disciplines of psychiatry and psychology. Women are more likely to be remanded in custody for psychiatric reports or to receive a psychiatric disposal (Allen, 1987). Explanations for female crime in this tradition still continue, in particular explanations for murder in terms of pre-menstrual tension or 'battered woman syndrome' and the condition of 'learned helplessness' (Dobash and Dobash, 1992). In this way to construct their defence, women are required to deny responsibility for their actions.

Many of the women in this study were still waiting for trial, while a number maintained their innocence, those who said they would plead guilty offered explanations for their offending behaviour. They were not specifically asked, but it appeared important to them to rationalise their offending behaviour. The theme which emerged was that the circumstances of their lives made offending a likely, although not inevitable, outcome. A theoretical explanation is thus required which is non-deterministic, steering a course between structure and action. The women's accounts revealed that offending had become a way of coping with the difficult circumstances of their lives, behaviour actively chosen, albeit in the face of constrained choices.

The discussion of the problems facing the women revealed how issues such as unemployment, poverty and homelessness make women vulnerable to offending. It has also elucidated how substance use, a coping strategy, can lead to offending to support an addiction or as a result of behaviour caused by that addiction. There are other factors to consider in explaining women's offending. In some cases, the influence of others over their lives was an important factor, as Helena explained:

It's basically something my ex-husband got me into ... I've been in trouble before, things my ex-husband got me into. Last time I was in prison was two years ago but I've managed to get away from him now. I think that he was such a bad influence over me that I turned bad.

The influence of others was stressed by staff too as an important explanation of female offending:

Often what comes up is that the woman's partner is a huge issue, either because they are taking the blame, going guilty for something they haven't done, male partners usually. Often there is a man involved somewhere along the line, not always but very often. Even women who offend themselves take the rap for their partner. [Staff member, Victoria House]

Some of the women, none at the moment, usually have pimps hanging around ... some of the women are so frightened of these men that control them that they will go out there and work for these people or they will be physically attacked. [Staff member, Victoria House]

This should not portray an image of the female offender as passive and weak-willed. They were fearful of the consequences if they did not act accordingly which could result in violence. In some cases, the offence was a very drastic action to a situation in which they felt unable to cope. For example, murdering a partner who had been violent over a number of years:

I'm accused of murder. I'm not guilty of murder by any means but the man is dead so I must have killed him. (Heather)

The action taken was extreme, a serious offence had been committed but within the explanation there is some degree of rationality. She felt unable to cope with the violence any longer, unwilling to leave her home and unwillingly to seek support from her family because of the shame she felt. It was her way of coping at that particular time.

Offending for these women has a tremendous impact on their lives, coping with the implications of waiting for trial and living in the hostel but also coming to terms with their feelings about the offence. In some cases, they were battling with feelings of guilt and shame and wishing their lives could have turned out differently. For example, Lynsey remarked 'I wish I'd never done it now and I wouldn't be in this trouble' and Rebecca 'It was a mistake'.

Concluding comments

Women who live bail hostels are generally experiencing a number of complex problems. They have developed ways of coping, ways of surviving, but the strategies they employ can be self-destructive. For example, this paper has shown how responding to difficulties through turning to substance abuse may result in problems such as poor health, vulnerability to violence and extreme poverty. Women's ability to survive needs to be recognised, but coupled with a recognition of how this may lead to harm. They are not passive victims, yet neither are they able to exert control over their lives to any great extent. An important aspect of hostel work therefore centres around encouraging women to develop alternative ways of coping with the pressures they experience, and deal with the harmful effects of the strategies used to date.

In the hostels studied, staff aimed to provide a woman-centred approach which offered practical and emotional support. This entailed responding to women's needs and recognising the gendered nature of their experiences. Hostel work involved presenting women with choices and working with the women for the women but at the same times expecting them to take responsibility for their own lives. The aim of this work was to enable women to move from situations of 'crisis' to situations in which they could exert great control over their lives. In practical terms, this required hostel workers to provide formal support in the form of individual sessions with a keyworker and informal support on a day-to-day basis. Shared working with specialist agencies, for example community drug teams, was an important dimension of support as a way of dealing with the multiple and complex problems experienced by the women. This takes place against a backdrop of the practical realities of hostel life, particularly the lack of resources (see Wincup, 1997). This problem is exacerbate in mixed hostels in which women are very much in a minority (Wincup, 1996). Hostel work does not take place in a vacuum and much is dependent upon the outcome of the pending court cases. Ultimately, the ability of bail hostels to offer support is subverted through criminal justice policies which fail to emphasise welfare-oriented approaches and to appreciate the needs of female defendants, coupled with the lack of social policies to support women in 'crisis'.

Notes

1. This paper is based on my doctoral research which was funded by the School of Social and Administrative Studies, University of Wales, Cardiff.[Back to text]
2. For a fuller description of the methodology of the project, see Wincup, E. (1997) Waiting for Trial: Living and Working in a Bail Hostel, Unpublished PhD thesis, University of Wales, Cardiff.[Back to text]
3. The names of the three hostels are pseudonyms.[Back to text]
4. Bail hostel provision for women in England and Wales is limited. For example, there are only three bail hostels which provide accommodation only for women. Having conducted research in two of these and having interviewed women whose cases had attracted media attention, in order to protect the confidentiality of the women (an access requirement), detailed descriptions of residents are avoided.[Back to text]

References

Allen, H. (1987) *Justice Unbalanced: Gender, Psychiatry and Judicial Decisions*. Milton Keynes: Open University Press.

Anderson, I. (1993) *Single Homeless People*. London: HMSO.

Anglin, M. and Hser, Y. (1987) 'Addicted Women and Crime', *Criminology*, Vol. 25, 359-97.

Badinter, E. (1981) *The Myth of Motherhood*. London: Souvenir.

Barber, J. (1995) *Social Work with Addictions*. Basingstoke: Macmillan.

Bennett, T. (1990) 'Links Between Drug Misuse and Crime', *British Journal of Addiction*, Vol. 85, 833-5.

Boulton, M. (1983) *On Being a Mother: A Study of Women with Pre-school Children*. London: Tavistock.

Callender, C. (1996) 'Women and Employment', in C. Hallet (ed.), *Women and Social Policy: An Introduction*. Hemel Hempstead: Harvester Wheatsheaf.

Campbell, A. (1981) *Girl Delinquents*. Oxford: Blackwell.

Carlen, P. (1983) *Women's Imprisonment*. London: Routledge and Kegan Paul.

Carlen, P. (1987) 'Out of Care Into Custody', in P. Carlen and A. Worrall (eds.), *Gender, Crime and Justice*. Milton Keynes: Open University Press.

Carlen, P. (1988a) 'Women's Imprisonment: Current Issues', *Prison Service Journal*, Vol. 70, 7-12.

Carlen, P. (1988b) *Women, Crime and Poverty*. Milton Keynes: Open University Press.

Carlen, P. (1990) *Alternatives to Women's Imprisonment*. Milton Keynes: Open University Press.

Chodorow, N. (1978) *The Reproduction of Mothering*. Berkeley, Ca.: University of California Press.

Cohen, A. (1955) *Delinquent Boys*. New York: Free Press.

Cohen, R., Coxall, J., Craig, G., and Sadiq-Sangster, A. (1992) *Hardship Britain*. London: Child Poverty Action Group.

Coid, J., Wilkins, B., Coid, B., and Everitt, B. (1992) 'Self-mutilation in Female Remanded Prisoners II: A Cluster Analytic Approach Towards Identification of a Behavioural Syndrome', *Criminal Behaviour and Mental Health*, Vol. 2, 1-14.

Coopersmith, S. (1967) *The Antecedents of Self-Esteem*. San Francisco: W.H. Freeman and Co.

Daly, K. (1994) *Gender, Crime and Punishment*. New Haven: Yale University Press.

Darke, J. (1994) 'Women and the Meaning of Home', in R. Gilroy and R. Woods (eds.), *Housing Women*. London: Routledge.

Department of the Environment (1994) *Homelessness: Code of Guidance for Local Authorities*. London: HMSO.

Dibblin, J. (1991) *Wherever I Lay my Hat*. London: Shelter.

Dobash, R. and Dobash, R. (1979) *Violence Against Wives*. London: Open Books.

Dobash, R. and Dobash, R. (1992) *Women, Violence and Social Change*. London: Routledge.

Dominelli, L. (1984) 'Differential Justice: Domestic Labour, Community Service and Female Offenders', *Probation Journal*, Vol. 3, 100-103.

Doyal, L. (1995) *What Makes Women Sick*. Basingstoke: Macmillan.

Eaton, M. (1993) *Women After Prison*. Milton Keynes: Open University Press.

Erickson, P. and Watson, V. (1990) 'Women, Illict Drugs and Crime', *Research Advances in Alcohol and Drug Problems*, Vol. 10, 251-72.

Ettore, E. (1992) *Women and Substance Use*. Basingstoke: Macmillan.

Faith, K. (1993) *Unruly Women*. Vancouver: Press Gang Publishers.

Falk, P (1994) *The Consuming Body*. London: Sage.

Farrington, D. and Morris, A. (1983) 'Sex, Sentencing and Conviction', *British Journal of Criminology*, Vol. 23, 229-48.

Friedman, J. and Alicea, M. (1995) 'Women and Heroin: The Path of Resistance and its Consequences', *Gender and Society*, Vol. 9, 432-49.

Gabe, J. and Thorogood, N. (1986) 'Tranquilisers as a Resource', in J. Gabe and P. Williams (eds.), *Tranquilisers: Social, Psychological and Clinical Perspectives*. London: Tavistock.

Genders, E. and Player, E. (1987) 'Women in Prison: The Treatment, the Control and the Experience', in P. Carlen and A. Worrall (eds.), *Gender, Crime and Justice*. Milton Keynes: Open University Press.

Gilfus, M. (1992) 'From Victims to Survivors to Offenders: Women's Entry and Immersion into Street Crime', *Women and Criminal Justice*, Vol. 4, 63-89.

Gilligan, C. (1982) *In a Different Voice*. Cambridge, Mass.: Harvard Univerity Press.

Gittins, D. (1993) *The Family in Question*. Basingstoke: Macmillan.

Glass, D. (1995) *All My Fault: Why Women Don't Leave Abusive Men*. London: Virago.

Graham, H. (1984) *Women, Health and the Family*. Brighton: Wheatsheaf.

Graham, H. (1993) *Hardship and Health in Women's Lives*. London: Harvester Wheatsheaf.

Graham, H. and McKee, L. (1980) *The First Months of Motherhood*. London: Health Educational Council.

Hammersley, R. (1988) 'Crime Amongst Alcohol, Cannabis and Heroin Users', *Medicine and Law*, Vol. 7, 185-193.

Heidensohn, F. (1970) 'Sex, Crime and Society', in G. Harrison (ed.), *Biosocial Aspects of Crime*. Oxford: Blackwell.

Heidensohn , F. (1985) *Women and Crime*. Basingstoke: Macmillan.

Hochshild, A. (1989) *The Second Shift: Working Patterns and the Revolution at Home*. New York: Viking Press.

HM Inspectorate of Probation (1991) *Report on Women Offenders and Probation Service Provision*. London: HMSO.

Jones, M., Mordecai, M., Rutter, F. and Thomas, L. (1993) 'The Miskin Model of Groupwork with Offenders, in A. Brown and B. Caddick (1993) (eds.), *Groupwork with Offenders*. London: Whiting and Birch Ltd.

Land, H. (1991) 'Time to care', in M. Maclean and D. Groves (eds.), *Women's Issues in Social Policy*. London: Routledge.

Lawrence, M. (1987) 'Introduction', in M. Lawrence (ed.), *Fed Up and Hungry: Women, Oppression and Food*. London: The Women's Press.

Liebling, A. (1992) *Suicides in Prison*. London: Routledge.

McCarthy, B. and Hagan, J. (1991) 'Homelessness: A Criminogenic Situation', *British Journal of Criminology*, Vol. 31, 393-410.

McLeod, E. (1982) *Women Working: Prostitution Now*. London: Croom Helm.

Malos, E. and Hague, G. (1993) *Domestic Violence and Housing*. Bristol: WAFE and University of Bristol.

Marsh, J. (1982) 'Public Issues and Private Problems: Women and Drug Use', *Journal of Social Issues*, Vol. 38, 153-66.

Marsh, J., Colten, M. and Tucker, M. (1982) 'Women's Use of Drugs and Alcohol: A New Perspective', *Journal of Social Issues*, Vol. 38, 1-8.

Merton, R. (1938) 'Social Structure and Anomie', *American Sociological Review*, Vol. 3, 672-82.

Millar, J. (1996) 'Women and Poverty', in C. Hallet (ed.), *Women and Social Policy: An Introduction*. Hemel Hempstead: Harvester Wheatsheaf.

Miller, W. (1958) 'Lower Class Culture as a Generating Mileu of Gang Delinquency', *Journal of Social Issues*, Vol. 14, 5-19.

Morgan, D. (1975) *Social Theory and the Family*. London: Routledge and Kegan Paul.

Morgan, P. and Pearce, R. (1989) *Remand Decisions in Brighton and Bournemouth*. Home Office, Research and Planning Unit Paper 53. London: HMSO.

Oakley, A. (1972) *Sex, Gender and Society*. London: Templesmith.

Oakley, A. (1993) *Essays on Women, Medicine and Health*. Edinburgh: Edinburgh University Press.

Pascall, G. (1996) *Social Policy: A Feminist Analysis*. London: Tavistock.

Pahl, J. (1989) *Money and Marriage*. London: Macmillan.

Peckham, A. (1985) *A Woman in Custody*. London: Fontana.

Perry, J. (1987) 'Fit to be Parents?', *Druglink*, Jan/Feb, 6.

Perry, L. (1979) *Women and Drug Use: An Unfeminine Dependency*. London: ISDD.

Phoenix, A. and Wollett, A. (1993) 'Introduction', in A. Phoenix, A. Wollett and E. Lloyd (eds.), *Motherhood: Meanings, Practices and Ideologies*. London: Sage.

Pollak, O. (1961) *The Criminality of Women*. New York: A.S. Barnes.

Popay, J. and Jones, G. (1990) 'Patterns of Health and Illness Amongst Lone Parents', *Journal of Social Policy*, Vol. 19, 499-534.

Posen, I. (1986) 'Holloway Reception Survey'. Unpublished.

Ramsey, M. (1986) 'Housing for the Homeless Ex-offender: Key Findings from a Literature Review', *Home Office Research Bulletin*, Vol. 20, 57-60.

Rees, T. (1992) *Women and the Labour Market*. London: Routledge.

Reith, L. (1986) 'Single Women and Homelessness', *Housing Review*, Vol. 35, 201-2.

Rich, A. (1985) *Of Woman Born: Motherhood as Experience and Institution*. London: Virago.

Rosenbaum, M. (1981) *Women on Heroin*. Brunswick, NJ: Rutgers University Press.

Rosenberg, M. (1979) *Conceiving the Self*. New York: Basic Books.

Sanford, L. and Donovan, M. (1993) *Women and Self-esteem*. London: Penguin.

Scott, S. and Morgan, D. (eds.)(1993) *Body Matters*. London: Falmer Press.

Shilling, C. (1993) *The Body and Social Theory*. London: Sage.

Silverman, I. (1982) 'Women, Crime and Drugs', *Journal of Drug Issues*. Spring: 167-83.

Sim, J. (1990) *Medical Power in Prisons*. Milton Keynes: Open University Press.

Smart, C. (ed.) (1992) *Regulating Womanhood*. London: Routledge.

South, N. (1994) 'Drugs: Control, Crime and Criminological Studies', in M. Maguire, R. Morgan and R. Reiner (eds.). *The Oxford Handbook of Criminology*. Oxford: Clarendon Press.

Stanko, E. (1985) *Intmate Intrusions*. London: Routledge and Kegan Paul.

Stanko, E. (1990) *Everyday Violence*. London: Pandora.

Swift, S. (1995) 'Women and the Penal System', paper given to the 1995 Howard League Conference, unpublished.

Taylor, A. (1993) *Women Drug Users: An Ethnography*. Oxford: Clarendon Press.

Tester, S. (1996) 'Woman and Community Care', in C. Hallett (ed.), *Women and Social Policy: An Introduction*. Hemel Hempstead: Harvester Wheatsheaf.

Thomas, W. (1923) *The Unadjusted Girl*. Boston: Little and Brown.

Tonry, M. and Wilson, J. (eds.) (1990) *Crime and Justice: A Review of the Literature, Volume 13*. Chicago: University of Chicago Press.

Turner, B. (1992) *Regulating Bodies*. London: Routledge.

Walby, S. (1990) *Theorising Patriarchy*. Oxford: Blackwell.

Walker, H. (1985) 'Women Issues in Probation Practice', in H. Walker and B. Beaumont, (eds.), *Working with Offenders*. Basingstoke: Macmillan.

Walmsley, R. and Howard, L and White, S. (1992) *The National Prison Survey 1991: Main Findings*. Home Office Research Study 128. London: HMSO.

Watson, S. (1986) *Housing and Homelessness: A Feminist Perspective*. London: Routledge and Kegan Paul.

Wincup, E. (1996) 'Mixed Hostels: Staff and Resident Perspectives', *Probation Journal*, Vol. 43, 147-51.

Wincup, E. (1997) 'Waiting for Trial: Living and Work in a Bail Hostel'. Unpublished PhD Thesis, Cardiff University.

Worrall, A. (1990) *Offending Women*. London: Routledge.

Wyatt, G. and Powell, G. (1988) *Lasting Effects of Child Sexual Abuse*. Newbury Park, Ca.: Sage.

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