“ENDURING VIOLENCE” IN THE LIVES
OF FORMERLY INCARCERATED WOMEN:
A STUDY IN INDIVIDUAL SURVIVAL AND SOCIETAL INDIFFERENCE

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by

Diane Miller Johnson

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“Enduring Violence” in the Lives of Formerly Incarcerated Women: A Study in Individual Survival and Societal Indifference

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Women in the United States who are released from prison face multiple obstacles in their efforts to establish stable lives outside the criminal justice system. According to the Bureau of Justice Statistics, more than half of the women released from jail are re-arrested within three years. Increasingly, research has documented the substantial likelihood that women who become incarcerated have childhood and adult histories of physical and sexual abuse and poverty. This qualitative study examines the “lived experience” of violence in the lives of formerly incarcerated women during three periods in their lives: childhood, adulthood and incarceration. An analysis of 41 in-depth interviews with twenty women reveals profound, “soul scarring” violence as the central defining theme of their lives. The analysis reveals not only the ways the violence
impacted them at the time of occurrence, but also the ongoing, residual devastating effects of these experiences in their lives today.

Based on emergent themes from these interviews, I propose an analytic concept, that of “enduring violence,” to help understand how the women in this study have “endured” the violence in their lives and how they have coped with lives characterized by enduring violence. I examine how this concept explicates a seemingly paradoxical reality: the women can and do endure such violence enabling them to survive, while simultaneously subjecting them to extreme “costs” in terms of their emotional, psychological and physical well-beings.

Drawing from Patricia Hill Collins’ work on “controlling images” and Jean Baker Miller’s work on “relational images”, I build and expand upon existing theories of trauma, intersectionality and violence to create the concept of enduring violence. I discuss the ways the concept of enduring violence can deepen our understanding of the enormity of the task and the profound obstacles faced by formerly incarcerated women as they try to envision and create a life free from crime and violence.

Based on the findings of this study, I discuss recommendations for policy changes to foster preemptive and ameliorative institutional interventions in the lives of girls and women who face the kinds of violence that so permeated the lives of the women I interviewed.
DEDICATION

This dissertation is dedicated to all of the women who participated in this study and who trusted me with their “stories.” I hope I have conveyed them accurately and that the pain and horror of their experiences will further efforts toward the eradication of violence against women everywhere.
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CHAPTER I

INTRODUCTION

The Incarceration of Women

During the past three decades in the United States, we have witnessed the incarceration of record numbers of women. Thanks, in part, to “The War on Drugs” (Greene, Pranis & Frost, 2006), harsh drug sentencing laws (Greene, Pranis, & Frost, 2006), disparities in sentences for crack-cocaine users (Mauer, 2006), and America’s seeming obsession with imprisoning rather than rehabilitating persons convicted of a crime (Greene, Pranis & Frost, 2006), we are faced today, not only with great numbers of women in prison, but also with record numbers of women released from prison and attempting to rebuild their lives (The Sentencing Project, 2007).

According to the Bureau of Justice Statistics, by June 30, 2006, the number of females incarcerated in State or Federal prisons and in local jails totaled 203,100 (Sabol et al, 2007). During the time period from June 30, 2005 to June 30, 2006, the number of adult women incarcerated in both prisons and jails grew at a faster rate than the rate of incarceration for adult males. Adult women’s rate of incarceration in prison increased between 2005 and 2006 by 4.6% compared to an increase of 2.7% for adult men in prison during the same period. Similarly, the
rate at which adult women were incarcerated in jail\(^1\) during this period increased by 4.9%, as compared to a 2.2% increase for adult men serving time in jail (Sabol et al., 2007). These statistics, the increasing number of women being incarcerated, as well as a rate of incarceration for adult women outpacing that of adult males, reflects a trend that has been evident since the mid 1980s (Greene, Pranis & Frost 2006).

**Release and Reentry**

The U.S. Department of Justice Office of Justice Programs for Reentry (2009) reports that approximately 650,000 inmates are released each year. Researchers have noted the often overwhelming barriers faced by offenders as they reenter the community and attempt to restart their lives. Obstacles such as poverty, unemployment, lack of job skills, mental and physical health problems, alcohol and/or drug problems and an inability to afford decent housing are the norm rather than the exception (Bednar, 2001; Petersilia, 2003). Wilkinson (2005) notes that over the past two decades, there have been many laws passed which impose serious restrictions on offenders’ job opportunities, on their right to access government-funded or subsidized programs including Food Stamps, Cash assistance and Supplemental Security Income, and on their right to vote. In

\(^1\) Jails are usually under the jurisdiction of the Local Governmental Unit
addition, laws have been enacted which ease the process of terminating the parental rights of offenders. Researchers refer to these obstacles as the “collateral consequences” and the “invisible punishments” that are part and parcel of having a criminal felony conviction (Petersilia, 2003; Demleitner, 2005; Uggen & Manza, 2005, Ferster & Aroca, 2005., Mauer and Chesney-Lind, 2002).

When Women Are Released

The growing rate of women being imprisoned means that there are increasing numbers of women being released from prison and jail. Society’s assumption is that these women will transition out of prison or jail and become integrated into life in the community. However, making this transition successfully can be a formidable process. The Bureau of Justice Statistics three year follow-up study of 272,111 male and female prisoners released in 1994, found that within the study time frame, 67.5% of the released prisoners included in their study were rearrested, 46.9% were reconvicted and 25.4% were again sentenced to prison (Langan & Levin, 2002). Looking at the data for women releasees only, Langan & Levin found that 57.6% of the women were rearrested for a new crime; 39.9% were reconvicted in State or Federal court for a new crime; 17.3% were returned to prison with a new prison sentence; and 39.4% were returned to prison with or without a new prison sentence. This last statistic includes those women remanded
to prison for violating a condition of their release, for example, failing to show up
for an appointment with their parole officer or failing a drug test, as well as those
women sentenced for the commission of a new crime. While women constituted
only 7% of the 272,111 released prisoners followed for this study, still it is clear
that many women, once in the criminal justice system, are likely to experience a
re-arrest and a return to prison (Langan & Levin, 2002).

The Problem of the Invisibility of Female Offenders

Despite the fact that their numbers in the criminal justice system are
increasing, women continue to be largely invisible (Girshick, 2000; Owen, 1998;
Petersilia & Tonry, 1999; Rafter, 1983). Until recently, this invisibility has carried
over into research in the areas of release from prison, reentry into the community,
the process of attempted reintegration and looking at the precipitants of
recidivism. Historically, it had been commonly assumed women’s experiences of
incarceration and their needs while in prison were similar to those of men and
therefore unnecessary for separate focus or study (Girshick, 2000; Loucks and
Zamble, 2000; Petersilia & Tonry, 1999; Rafter, 1983). Women’s prisons were,
in effect, miniature replicas of male prisons (Rafter, 1983; Shaw, 2000) and the
common view was that studying the experiences of incarcerated women had little
to add to mainstream penology and criminological studies (Owen, 1998; Rafter,
1983; Shaw, 2000).
Thanks in large measure to the work of feminist criminologists, we have seen during the past two decades a growing body of research focused on the lives and experiences of women who have come into the criminal justice system. What has emerged from this research is evidence that the experiences of female offenders are, in fact, different from the experiences of male offenders and should not be presumed to be indistinct from men’s experiences (Daly and Chesney-Lind, 1988; Leonard, 1982). Furthermore, research has established that women have very different pathways to criminal activity and into the criminal justice system (Chesney-Lind, 2002; Richie, Tsenin & Widom, 1999). Importantly, this research has provided evidence that the experiences of female offenders reflect issues of gender, violence and race in a way that is different from the experiences of male offenders (Chesney-Lind, 2000). In addition, the work of black feminists has challenged us to understand how marginalized women, in particular, live their lives at the point of intersection of issues of race, class and gender. In seeking to understand the experiences and perceptions of female offenders, we must attend to the ways that race, class and gender intersect and work in tandem as “interlocking structures of oppression (Murphy et al., 2009, p. 13), as well as work to understand the ways these forces are compounded in the day to day lives of women offenders.
This Study

As noted above, even though there is a growing body of scholarship focused on the experiences of women in the criminal justice system, there still is much that is not well understood about the distinctive issues faced by these women (Greene and Pranis, 2006). One of the areas not well researched is the area of women’s reentry into the community after leaving prison or jail. This study was designed to add to the knowledge base about the gendered nature of women’s reentry experiences and, in particular, to learn more about the ways in which women’s past experiences and relationships continue to affect their lives post-incarceration.

Choice of Research Method

I chose a qualitative grounded theory methodology in order to best capture the depth and breadth of the women’s reentry experiences. I conducted a total of forty-one in-depth interviews with twenty formerly incarcerated women, all presently living in the community. Most of the women interviewed had been released from jail or prison less than a year prior to the interviews. Rather than starting with “grand theory” and deductively identifying variables to be tested, I began with what Blumer (1954) referred to as “sensitizing concepts” and worked inductively from the data “upward.” The sensitizing concepts guided the beginning stages of data gathering and served as reference points as the themes
began to emerge from the data. Using constant comparative methods outlined by Glaser and Strauss (1967) to analyze the data, I was able to identify emergent themes. These emergent themes, then, became the “building blocks” of my theoretical concept of enduring violence.

**Review of Relevant Literature**

In conjunction with using a grounded theory approach, I have elected to handle the review of relevant literature in a way that enables me to start with the women’s narratives. Therefore, rather than beginning the dissertation with a separate chapter reviewing the relevant literature, I have chosen, instead, to weave my discussion of the literature throughout the text. This format has allowed both the literature and the themes from the data to “emerge” together. This format has also allowed me to stay close to the data and allowed the data to determine the direction of this dissertation.

**Study Findings**

The findings of this study indicate that formerly incarcerated women have experienced multiple incidents of “soul-scarring” violence and that these past experiences of violence continue to affect these women as they are released from prison and reenter the community. The cumulative effect of these violent experiences negatively impacts the ways in which formerly incarcerated women
view themselves, how they view the world around them and how they view the possibility of having non-exploitative, non-criminal related, nurturing relationships.

In reporting the findings, as much as possible I let the women tell the stories of what they have experienced. Much of what the interviewees describe is brutal and horrific, yet it is “their story.” As hard as it may be to read their words, to hear their “voices” as they recount such violence and abuse, these experiences are what these women have lived…and survived. In the chapters describing the study results, I will be looking to identify the “scars” left by the ubiquitous violence experienced by the women in the study. Having immersed myself in the women’s stories and systematically “sifted and sorted” (Maietta, 2008) to develop generative themes, I present the results in Chapters III, IV and V. In Chapter VI, I present a discussion of my findings and situate my research and findings within a critical discussion of relevant literature. In Chapter VII, I present my conclusions and offer recommendations for policy and programmatic changes. I also make suggestions of areas for future research.

Chapters to Follow

Chapter II, “Methodology,” describes how this study was conceptualized, structured and conducted and how the methodology employed best reflects the goals of the study. Also included in this chapter is a description of the study
sample including demographic data describing the women who participated in this study. Points of congruence and points of divergence between the demographics of this study and the demographics of the overall population of women who have been incarcerated are also discussed.

Chapter III, Results: “Growing up in Hell,” is the first chapter delineating the findings of this study. In this chapter, I discuss the violence and abuse experienced by the study participants during their childhoods and adolescent years and the meanings attributed to these events. I discuss also how these experiences of violence and abuse communicated the message that all relationships are characterized by domination and exploitation, thus setting the stage for the women to enter into violent and abusive relationships as adults. An emergent generative theme uncovered in the collective narratives is the cumulative impact of this violence over the life course. Specifically, the data will illustrate the degree to which being the recipient of enduring violence embeds itself in the women’s lives and reinforces the women’s feelings of low self worth and low self-efficacy.

Chapter IV, Results: “In the Life,” is the second findings chapter. In this chapter, I describe some of the “pathways” which have led the women into criminal activity. I focus particularly on the impact that the women’s experiences of violence and abuse have played in this “career trajectory” and discuss the role that violence continues to play in their lives. Included is a discussion of the
impact of these experiences on the women’s sense of themselves and of the world and how these feelings of unworthiness have kept them trapped in abusive relationships.

Chapter V, Results: “Doing Time,” is the third findings chapter. In this chapter, I discuss how violence continued to manifest itself in the lives of the study participants while they were incarcerated and I focus the discussion on the continued impact of these experiences on their feelings of low self-esteem, low self-efficacy and feelings of powerlessness with regard to controlling the direction of their lives.

Chapter VI, “Discussion of the Study Findings,” is the chapter where I present an analysis of the women’s experiences of violence and abuse, situating my research and analysis within and drawing on the relevant literature. In order to do this analysis, I introduce the concept of “enduring violence” which emerged from the data and which I have developed as a concept to help increase our understanding of the impact of violence in the lives of formerly incarcerated women. In the development of the concept of enduring violence, I draw most heavily from Patricia Hill Collins’ concept of “controlling images,” Jean Baker Miller’s work on “relational images,” Judith Herman’s work on trauma and recovery, Paulo Freire’s work on oppression and the work of black feminists around the concept of intersectionality. In addition to using the concept of
enduring violence to analyze the study findings, I also look critically at other literature attempting to analyze the nature and impact of trauma and violence.

Chapter VII, Conclusions, Policy Recommendations and Suggestions for Future Research” first presents a summary of the findings of the study. From these findings, I derive a set of conclusions which I use as the basis for a set of premises which underlie my recommendations for both policy changes and program initiatives. I conclude with a set of recommendations for further research.
CHAPTER 2

METHODOLOGY

Lived experience is the starting point and end point of phenomenological research. The aim of phenomenology is to transform lived experience into a textual expression of its essence—in such a way that the effect of the text is at once a reflexive re-living and a reflective appropriation of something meaningful: a notion by which a reader is powerfully animated in his or her own lived experience.

(Van Manen, 1990, p. 36)

A Phenomenological Philosophical Approach

The population that I wished to study was formerly incarcerated women and the phenomena I was interested in learning about were the experiences of formerly incarcerated women once they were released from prison or jail. My interest was in the nature of their experiences, the meaning they attributed to these experiences and the process by which they created and attributed meanings to these experiences. In order to get the richest understanding of the complexity of their lives, qualitative methodology offered the best “fit.”

Within the qualitative research framework, I have approached this study from a particular philosophical perspective, that of phenomenology. A
phenomenological approach starts with the premise that the focus of the research study will be to learn about the “lived experiences” of the study participants with regard to the phenomena being studied. Phenomenology does not seek “objective” truth, but seeks to understand phenomena through the lived experiences and attributed meanings of those experiencing the phenomena.

A central premise of a phenomenological approach is that the researcher imposes no pre-formed structure of thought on the study participants’ descriptions of their experiences of the phenomena under study. Rather, the goal is to be able to arrive at a point where the researcher, through data collection and analysis, understands much more clearly both the nature of the phenomena described and, as Creswell describes, the “essential, invariant structure (or essence) of the experience” (1998, p. 55). Thus, the findings from this study are derived from the narratives of twenty formerly incarcerated women as they reflected on and interpreted their experiences of reentry into the community after periods of incarceration.

A Grounded Theory Methodology

In addition, I have used elements from grounded theory (Charmaz, 2004, 2006; Glaser and Strauss, 1967; Strauss and Corbin, 1998) to inform the process of moving from the stage of data collection to the stage of theory development. Charmaz (2004) describes grounded theory as a methodology designed to help the
researcher move from the process of gathering data to the development of theory through the use of very specific procedures of data analysis. Charmaz identifies what she terms the “distinguishing characteristics” of grounded theory methodology:

(1) Simultaneous involvement in data collection and analysis phases of research
(2) Creation of analytic codes and categories developed from the data, not from preconceived hypotheses
(3) The development of middle-range theories to explain behavior and processes
(4) Memo-making, i.e. writing analytic notes to explicate and fill out categories, the crucial intermediate step between coding data and writing first drafts of papers
(5) Theoretical sampling, i.e., sampling for theory construction, not for representativeness of a given population, to check and refine the analyst’s emerging conceptual categories
(6) Delay of the literature review

(Charmaz, 2004, p. 497)

Strauss and Corbin (1998) note that the methods and procedures put forth as part of using grounded theory methodology are there to serve a purpose: to help the researcher learn to move easily from the concrete (the data collected) to the abstract (the development of concepts) and back again to the concrete. This process, repeated to the point of data saturation, helps the researcher to begin to develop a “vision” (1998, p. 8) of where the data is leading her/him. Thus, argue Strauss and Corbin (1998), these procedures help the researcher to build and propose theories which are firmly grounded in the research data.
Using Both Phenomenology and Grounded Theory

Creswell (1998), in his book comparing five traditions of qualitative research, notes that phenomenology and grounded theory (as well as ethnography, biography and case study) each include procedures to ensure a thorough and systematic approach to the research undertaking. Though phenomenology is most associated with philosophy and psychology and grounded theory with sociology, each approaches the research endeavor in a similar fashion: collecting data from individuals (phenomenology: up to 10; grounded theory: 20-30) who have experienced the same phenomena or participated in a process related to the phenomena under study. In each of these approaches, interviews serve as the means to gather data, an approach less intrusive than some other methods of data gathering.

The transcription and analysis of the interviews serve as a means of developing a systematic, evolving conceptual understanding and mapping of the data. Though a phenomenological approach appears to allow for more variability in methodological approach than does grounded theory, still, as Creswell (1998) points out, both phenomenology and grounded theory “hold to the primacy of the subjective experience” (1998, p. 276). Thus, I drew on both of these research traditions in the design, data gathering, analysis of the data and theory building stages of this study.
The Strengths of a Qualitative Research Design

Lincoln and Guba (1985) and others (Berg, 1989; Denzin and Lincoln, 1994; Marshall and Rossman, 1999) have described qualitative research as the methodology best suited to learning about the “lived experience” of a particular group. One of the goals of qualitative research is to broaden and deepen the information obtained so as to provide a more in-depth picture of the phenomena being studied and to understand how individuals give meaning to the phenomena. Gathering personal narratives through interviews is one method of obtaining a fuller and more complete sense of a person’s life and her/his experiences. Jane Elliott (2005), writing about the use of narratives in social research, explains how in the formulation of one’s “story,” the individual is again “making meaning” out of the events of one’s life:

In order to provide the details of life experiences in the form of a story, individuals are forced to reflect on those experiences to select the salient aspects, and to order them into a coherent whole. It is this process of reflection and 'making sense' out of experience that makes telling stories a meaning making activity. For some this evaluative or 'meaningful' dimension of narratives is understood as an important advantage for the qualitative researcher

(Elliott, 2005, p.24)

Indeed, what qualitative research allows us to unearth are the individual, personal “truths” which underlie the meanings individuals ascribe to the events of
their lives and which together form a dialectic. Qualitative research also allows us to understand how individuals convey the meanings of their experiences to others. Elliott (2005) describes this process:

A narrative will not capture a simple record of the past in the way that we hope that a video camera might. However, if the research focus is more on the meanings attached to the individuals' experiences and/or on the way that those experiences are communicated to others, then narratives provide an ideal medium for researching and understanding individuals lives in social context.

(Elliott, 2005, p.26)

Feminist scholars have stressed the importance of using a qualitative methodological approach when doing research with oppressed populations (Devault, 1990). Indeed, feminist researchers argue that qualitative approaches are ideally suited to research with marginalized populations because the in-depth nature of qualitative research allows us to hear the voices of those who usually are not heard. These are the voices of those whose experiences are not well-represented in the literature. Creswell (1998) adds to the feminists’ argument, noting that qualitative research emphasizes “the researcher’s role as an active learner who can tell the story from the participants’ view rather than as an ‘expert’ who passes judgment on participants” (Creswell, 1998, p.18). Elliott (2005) agrees, arguing that "...allowing respondents to provide narrative accounts of their lives and experiences can help to redress some of the power differentials
inherent in the research enterprise and can also provide good evidence about the
everyday lives of research subjects and the meanings they attach to their
experiences (p.17)." Marshall and Rossman (1999) concur, noting that
qualitative research stresses “the importance of context, setting and the
participants’ frames of reference” (Marshall and Rossman, 1999, p.54)

There is another reason that I chose to use qualitative methodology for this
study. The literature indicates that the majority of women who end up
incarcerated are women of color (James, 2002; Bloom & Owen, 2002). I
expected, therefore, that the majority of women in this study would also be
women of color. Black feminist scholars have argued that the experiences of
Black women and families often have been “misrepresented, misappropriated
and/or misconstrued” (Few et al, 2003, p.205) by researchers. These scholars
argue that in order to accurately portray the experiences of Black women and the
diversity within that experience, researchers must understand the history and
culture of Black women and use this understanding to contextualize and interpret
research findings (Few et al., 2003).

Black feminist scholars argue that the use of qualitative methods affords the
researcher the best opportunity to understand the meanings, the cultural
expressions and the multiple and diverse layers of Black women’s experience
(Few et al, 2003). This view is supported by the anthropologist Clifford Geertz
(1994) who stressed the importance of gathering what he referred to as “thick
description.” “Thick description” refers to the importance of understanding human behavior in the context within which the behavior occurred.

In addition to the strengths of qualitative methodology described above, qualitative research also provides an avenue through which the reader can connect on a visceral, as well as an intellectual level, with the experiences of the population being studied. This visceral connection allows one to relate these experiences to one’s own lived experience. The quote above by Van Manen (1990) points to the power of qualitative research to provide such an avenue, to stir and evoke feelings and thoughts, not only on the part of the person being interviewed, but also on the part of the researcher and the reader.

As a final note about the use of qualitative methodology, particularly methodology which relies upon data extracted from the personal narratives of individuals who have experienced a particular phenomena, we can turn to sociologists W.I. Thomas and D.S. Thomas (1928): “If men (sic) define situations as real, they are real in their consequences” (p. 571-572). Thus, all methods of research, those which seek to provide “objective truth,” as well as those which seek to advance our understanding of “lived experience” can and should form the basis of policies designed to remedy or remediate social ills.
The Study Design

The data for this study were collected through semi-structured, in-depth, face-to-face interviews. This qualitative methodology was chosen, in part, because it afforded the opportunity to build or begin to build a trusting relationship with the women interviewed. Again, I was very aware of what would be perceived by most of the women as differences between us, for example, differences in race, ethnicity, age, socio-economic status, and I realized the negative impact the perception of these differences could have on the data gathering process. My hope was that through the use of individual, face-to-face interviews a relationship could be built that would help to diminish these differences, to create a bridge across these differences through a shared sense of human connection.

In order to participate in this study, a woman had to be at least eighteen years old, have a history of incarceration and presently be living outside of jail or prison. I purposely chose to keep the criteria for inclusion broad because I anticipated difficulty recruiting women for the study. Several years before actually undertaking this study, I had attempted to make contact with a number of agencies providing programs and services for formerly incarcerated individuals. In addition, I had contacted several individuals who had statewide responsibility for program planning and policy implementation for the criminal justice system. Some of these calls were never returned and with others, the reception I received
was professional, but guarded and suspect. Because I was making “cold calls,” I clearly sensed suspicion about who I was and what my “agenda” was in undertaking a study with people who had been incarcerated. These experiences gave me a sense of the difficulty I might encounter in making contacts and trying to recruit women for this study.

**The Original Study Design**

Initially, I had hoped to interview women while they were incarcerated and then to interview them again after their release. I hypothesized that beginning the process of relationship building with women while they were incarcerated would make it easier to “follow” them once they were released. In addition, I envisioned the interviews while incarcerated as a time to learn how each woman understood the progression of life events leading up to her incarceration, as well as learning about what each hoped for upon release. However, gaining all the necessary approvals in order to conduct interviews with women while they were incarcerated proved unfeasible. This problem occurred because of difficulties involved in the process of securing approval from the institutional review board because the review board, at the time, was not set up to review in-prison study proposals.
The Revised Study Design

Hence, I redesigned the study to eliminate the necessity of doing any interviews with the women while they were incarcerated. My revised research design called for fourteen study volunteers, a number in line with what Boyd (2001) and Creswell (1998) identify as within an appropriate range for a phenomenological study. Each woman participating in the study had to have a history of incarceration and had to be living in the community.

In addition, I redesigned the study to include multiple interviews with each woman. Doing multiple interviews had several advantages: first, it would enable me to build upon the relationship begun in the first meeting with the study volunteer; second, it would enable me to look at reentry as a process, as opposed to a single point in time; and, third, doing multiple interviews would give me the opportunity to better understand each woman’s experience of reentering the community.

Committee on Research Involving Human Subjects

I submitted the redesigned study with all of the required documents to the Committee on Research Involving Human Subjects (CORIHS). Because the study did not involve the use of drugs or any invasive procedures, it qualified for expedited review. The application to commence the study was approved with one change: the review committee felt that because of the vulnerable nature of the
study population, there needed to be additional protections around confidentiality. The committee suggested and approved a waiver of signed consent. Though the study protocol called for warning the participants against self-incrimination, by waiving the necessity of signed consent, I could now assure the women who volunteered to be interviewed that there would be no record of their identities.

**Revising the Study Design Again**

With CORIHS approval in hand, I began the process of identifying sites where I might be able to recruit women for the study. Almost immediately, I began encountering problems. There were time delays in securing permission to recruit and interview women. At one of the agencies where I planned to recruit study participants and to gather data, it took five months for my request to travel through all of the “channels” and for permission to be granted. At another location, the key staff member with whom I had been dealing left to take another job. Then the program changed auspices, as the original agency running the program withdrew and an entirely new agency took over the running of the program. At another location where I had been welcomed to recruit women for this study, I arrived one day to find that the director had suddenly quit the day before and the staff had no idea who would be taking over.

There were other issues related to participant attrition for which I had not planned. While I did expect to “lose” some of the women before we had
completed three interviews, it quickly became clear that the transient nature of the study population made completing three interviews with each woman nearly impossible. I made a decision, therefore, to modify the study design again, this time requesting permission to interview more women. I was making the assumption, based upon the difficulties I had experienced, that I would be completing fewer interviews with each individual participant. I, therefore, submitted a request to CORIHS for an amendment to the study, asking that I be permitted to change the number of women interviewed from fourteen to twenty. I still attempted to complete three interviews per study participant when possible, but recognized that many of the study participants might only be available for two or even just one interview.

As it turned out, I was able to interview fifteen of the twenty study participants at least twice. Of these fifteen women, I was able to interview six a third time. The five remaining women were interviewed only once due to a variety of circumstances. These circumstances included situations in which individual study participants relocated out of the area, traveled outside of the country or graduated from and were no longer attending the drug and alcohol programs where I had initially met them.
Payment as an Interview Incentive

As an incentive to attract formerly incarcerated women for this study, I made a decision to offer a $25.00 gratuity for each interview completed. I opted to offer this gratuity in spite of some of the potentially problematic aspects of paying interviewees. I knew from my research that most women coming out of prison or jail, particularly those recently released, are in precarious financial situations. To ask them to make themselves available for up to three hours of interviews without some remuneration, particularly given their financial situations, seemed to me exploitative. I felt that not offering some sort of remuneration would be “sending a message” to the women that their time was not only not valuable, but also was not worth anything. In addition, I also felt that not offering some sort of a gratuity would probably replicate situations that many of these women had experienced throughout their lives, that is, being in situations where those with power take what they want from those with less power, without regard for the needs or well-being of those less powerful.

Limitations of Study Design

With hindsight, there are a number of changes which could have made this study stronger. These changes fall into two general areas: diversity of the study sample and number of interviews for each study participant. The diversity issues include the following:
1. The study sample was made up predominantly of women who identified as black, African-American or Afro-American. An additional woman identified as mixed heritage African-American/Caucasian. Only one woman identified as Latina and one woman identified as Native American. Four women identified as Caucasian. The study would have benefitted by the inclusion of more Latinas, more Caucasians and the inclusion of women from other underrepresented racial and ethnic groups. A broader, more racially and ethnically diverse study sample would have provided better data about the “fit” of the concept of “enduring violence” across racial and ethnic groups.

2. This study would have been stronger had there been greater variation in the ages of the women who participated in the study. The majority of women in this study were in their forties, an age older than the median age of women who are incarcerated in local jails (median age is 31 years), state prisons (median age is 33 years) and federal prisons (median age is 36 years) (Greenfeld and Snell, 2000). Greater variation in age among the participants would have provided more opportunity to see if the concept of enduring violence, as I have delineated it, holds true across different age spans.

3. A third limitation of the study was my lack of access to and, therefore, inability to recruit formerly incarcerated women who were not
participating in or connected in some way to a substance abuse or a mental health program. Without interviewing formerly incarcerated women who were not participating in these kinds of treatment programs, I could not determine if the prevalence of violence I found was specific to formerly incarcerated women who have drug or mental health problems. This is an area that should be pursued in future research.

The limitation of the study design with regard to the number of interviews completed with each study participant is the following:

1. The study design did not require that each woman be interviewed an equal number of times. Therefore, the data obtained from the study participants is uneven. In general, the data obtained from those women who were able to be interviewed two or three times was, as Geertz (1994) described, “thicker description” and provided more of a sense of their world and of their “lived experience.”

**Data Collection: Gaining Access to and Recruiting Participants:**

A large percentage of women who are incarcerated have histories of drug and/or alcohol abuse (James & Glaze, 2006). Some women are offered the opportunity to participate in diversion programs where instead of spending all or part of their sentence incarcerated, they are able to serve some part of their
sentence in a drug or alcohol program. In addition, many women released from jail or prison are referred to programs and agencies for drug and alcohol treatment. Some are referred to halfway houses or sober houses that require participation in substance abuse counseling programs.

In addition, many women released from jail or prison have mental health problems including depression, bi-polar disorder, personality disorders and even schizophrenia (James & Glaze, 2006). Attempts are usually made to refer these women upon their release to programs providing mental health services. There are other incarcerated women who, upon their release, have nowhere to go. They may have been undomiciled at the time of incarceration, their previous living quarters may have been lost during their incarceration or their family members may no longer be willing to house them. These women frequently end up in shelters or other housing programs willing to work with formerly incarcerated people. All of the aforementioned sites, that is, drug and alcohol programs, halfway houses, mental health programs, shelters and programs providing housing for formerly incarcerated women, became potential sites from which to recruit women for this study.

**Halfway House for Drug-Involved Women Released From Prison/Jail**

The first program that I contacted in order to recruit women for this study was a six-bed temporary residence for women coming out of jail or prison who
have substance abuse problems. This program works in conjunction with a substance abuse clinic located across the street from the residence and, as a condition of housing, every woman residing in the halfway house must be willing to receive substance abuse services from this clinic. According to the Program Director, women stay at this residence anywhere from several weeks up to a year.

A colleague who knew of this program suggested that I contact the Director to see if she would be willing to let me recruit women from her program for this study. I phoned the Director, scheduled a meeting and met with her to explain the purpose and goals of the study. She was very interested in the study and very willing to let me recruit from among the women living in the house. While I was there, the Director introduced me to several of the women, told them that I was doing a study about women who had been in prison or jail and said that I would be looking for volunteers to participate in the study. Two women expressed interest in participating.

Unfortunately, between the time of this meeting and starting the process of recruitment for this study, the Director of this program left to take another job. In addition and posing even more of an obstacle, the program itself was taken over by another agency. This unexpected event meant that I would have to deal with a whole new set of gatekeepers in order to gain access to the women residing in this house. While I was attempting to contact the new agency running the halfway
house, I met, serendipitously, two people who helped me to gain access to two other settings housing formerly incarcerated women.

**A Not-For-Profit Shelter Program**

Because I had had difficulties early on in this study getting leads about programs working with formerly incarcerated women and introductions to the people who would be able to grant me access to these women, I did not want to make a “cold call” to someone at the new agency running the halfway house. I decided instead to try to track down the former Director in hopes that she would know who took over and be able to give me an introduction. Through a mutual friend, I sent a message to the former Director asking for her assistance in helping me to gain access to the women at the halfway house. Unfortunately, the former Director did not know the person who took her place, but she did provide me with an introduction to the person in charge of a shelter for women run by a not-for-profit agency in the area. While not a homeless shelter for formerly incarcerated women per se, the shelter often has women referred who have histories of incarceration.

Thanks to the intervention of the former Director of the halfway house, I was able to set up a meeting almost immediately with the woman who ran the shelter. I explained the study I was doing and she identified two women who might be interested in participating. I was able to interview one of the women within
several days of our meeting. Almost as important as identifying two women for the study,\(^2\) this meeting produced another potential lead for identifying women who might want to participate in this study. The shelter director gave me the name of a woman developing a new program targeting women coming out of jail and prison. This new program was under the auspice of a large drug and alcohol treatment program.

**Not-For-Profit Drug and Alcohol Program**

With the lead given to me by the shelter director, I phoned the woman at the drug and alcohol treatment program who was in the process of developing a program designed to assist women coming out of jail and prison. She was very happy to talk with me, was very interested in this study and disclosed to me that she herself was an ex-felon who had been incarcerated. She asked if I would like to interview her, to which I responded affirmatively. We scheduled a time to meet and to do the interview. Afterwards, she introduced me to several formerly incarcerated women residing in a sober house that she managed. Two of these women indicated their interest in volunteering for the study.

\(^2\) One of the women turned out not to meet the study criteria.
A Consumer-Run Mental Health Agency

One of the programs where I recruited women for this study is a consumer run, mental health agency\(^3\) providing a wide range of services for people recovering from mental illness. These services and programs include advocacy, counseling, self-help groups, housing, recreational groups and activities, educational programs and a drop-in center. Over the past decade, as more and more individuals with mental illness have found themselves incarcerated, not in mental health institutions, but in prisons and jails, this agency has taken a proactive stance in providing services to these individuals. Currently, staff members lead several anger management groups for both men and women incarcerated at the County Correctional Center. They also provide pre-discharge services for soon-to-be released men at the Ossining Correctional Institution\(^4\) located in Ossining, New York. Many of the men and women, who receive services from this agency while incarcerated, also look to them for services when they are released. Thus this agency has developed programs and services, as well as housing, specifically for formerly incarcerated individuals who also have a mental health diagnosis.

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\(^3\) “consumer run agency” is defined as one in which at least 51% of the Board of Directors has a mental health diagnosis.

\(^4\) Ossining Correctional Institution may be better known by its former name, Sing Sing Prison.
The process of gaining access to this particular agency in order to recruit potential study participants was facilitated by my prior professional relationship with the Executive Director. A number of years ago, I was the director of an outpatient mental health program providing case management services to individuals with serious mental illness. During that period, our case management program collaborated a number of times with this agency to develop programs and provide services for individuals recovering from mental illness. This prior professional relationship benefitted me greatly when I approached the Executive Director about the possibility of recruiting study participants from her agency. Because the Executive Director not only knew me, but also was comfortable with my approach to working with stigmatized populations\(^5\), she asked the staff member responsible for running their forensic programs to work with me to identify women who might be interested in being interviewed for this study. I did not encounter any distrust of who I was, how I would interact with women who agreed to be interviewed or whether I was coming in with a preconceived negative bias toward people with mental illness or women who had been

\(^{5}\) My approach whether doing clinical practice, advocacy work or research is to respect the dignity of each individual and to help give voice to the experiences which have contoured and defined the person’s life.
incarcerated. All of these factors contributed to an easy working relationship with this agency and led to the identification of several additional potential interviewees known to staff members at this agency.

**A Drug and Alcohol Program for Formerly Incarcerated Individuals**

I was also able to recruit study volunteers at another not-for-profit drug and alcohol program providing substance abuse services for large numbers of formerly incarcerated men and women. My entry to this site was facilitated by a prior professional acquaintance with the executive director. I phoned her; described to her my study and she indicated that her agency would be glad to cooperate. She put me in touch with one of the Assistant Directors who, she indicated, would help to identify women who were willing to be interviewed. I met, then, with the Assistant Director, explained the goals of the study to her, and she promised to talk with staff working directly with clients to identify women interested in being interviewed.

Many of the participants in this program are individuals who have been offered the opportunity to complete their criminal sentences in this program rather than in

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6 Early on when this study was in the formative stages, I did encounter this type of mistrust and protectiveness, particularly of the population of incarcerated women, from several individuals and administrators I approached about gaining access to women with histories of incarceration.
prison or jail. When first starting the program, individuals must attend six days a week. After they have made good progress in their treatment, they are allowed to gradually “step down,” first by attending only five days per week and then gradually working their way down to four and three days. All of the participants live in affiliated sober houses while in this program. Transportation is provided several times a day from the sober houses to the drug and alcohol program so the women and men in the program can get to their individual and group counseling sessions, and to their appointments with the staff psychiatrist and with the nurse. The structure of this program, that is, required attendance on particular days, transportation provided and mandatory participation in group meetings provided a relatively large “pool” of potential study recruits.

A Case Management Program Serving Formerly Incarcerated Individuals

The final site where I recruited participants for this study was a mental health program providing case management services for formerly incarcerated individuals. As previously mentioned, increasing numbers of individuals with psychiatric diagnoses end up incarcerated in prisons and jails. As a result, in New York State, monies have been allocated to mental health agencies and programs to enable them to set up programs designed specifically to provide services for this population. Some of this money has gone to fund case management services for
individuals upon their release from incarceration. By helping newly released individuals to access necessary and appropriate services and entitlements, the goal is to ease the reentry process, to help them become stabilized in the community and to reduce the rate of recidivism.

The identification of study participants proved to be the most difficult at this agency. Obtaining necessary approvals from agency administrators was a lengthy process. In addition, the program director asked individual case managers to identify and speak with any clients they thought might want to participate. Essentially, then, the case managers became the gatekeepers; if they did not want to be bothered or felt too busy to work out the logistics in order for me to interview one of their clients, they may never have asked if any of the clients they worked with wanted to participate. Ultimately, I was able to gain one interviewee through this process.

**Limitations of the Recruitment Strategy**

There are a number of limitations to the recruitment strategy employed for this study. These include not having a role in the participant recruitment, not being able to recruit more Latinas nor any Asian women, not being able to recruit many younger women and not being able to recruit women who are still “in the life.” When I conceptualized this study, my expectation was that I would make an initial contact with the directors of the various programs where I wanted to recruit
formerly incarcerated women. After this initial contact, I expected that I would meet with the women in the programs, explain the study, answer any questions and then “sign up” any women who were interested in participating. I expected that my enthusiasm for doing this particular research and my ability to convey what I feel is its importance would help attract study volunteers. Instead, at every agency I contacted, the program director or designee took on the recruitment task and asked staff to identify women for me to interview.

It is hard to know whether or not my non-involvement in participant recruitment was a negative factor. One could hypothesize that the clients recruited were those able to develop positive relationships with staff, those who were treatment-compliant and/or those who felt positively about the program they were attending. Clients with poor interpersonal skills or clients who challenged the policies and procedures of the program probably would not be referred. Therefore, it is possible that the clients deemed by program staff to be doing the best, that is, making the most progress toward community reentry, were the ones referred. Thus, I may not have had access to those women with the greatest likelihood of returning to a life of drug or alcohol abuse and/or with the greatest likelihood of recidivating.

In contrast to my recruitment experiences with agencies, I did have several women referred through snowball sampling. In spite of the concerns noted above, I did not find any noticeable differences between these women and those
selected by agency staff with regard to the issues they discussed. All were worried about finding a job, finding housing and resisting the lure of the “people, places and things” that were part of their “criminal identities.” All worried about returning again to jail or prison, a situation that many said they could no longer handle. But most of all, all talked of the violence and trauma which has marked their lives since childhood and which has contoured the adults they have become.

Description of the Sample

Age

Twenty women were interviewed for this study. The women ranged in age from 27 to 55. Twelve of the twenty women interviewed were in their forties. The mean age was 41.6 and the median age was 42.5

Race/Ethnicity

Thirteen of the women identified as African-American, Afro-American or Black. Four women identified as Caucasian. One woman identified as Latina, one woman identified as Native American and one woman identified as mixed heritage/African-American-Caucasian.
Marital Status/Children

Eleven of the women identified as single/never married. Three identified as married. Two identified as separated. Three identified as divorced and one identified as a widow.

Four of the women have never had children. Sixteen of the women are or have been mothers. Three of these women have lost sons to street violence. One woman lost a child to Sudden Infant Death Syndrome (SIDS). The number of children per mother ranges from one to seven. The mean number of children per mother is 2.75 and the mean number of children including those women with no children is 2.2. The median number of children for all of the women is 2.

Education

The level of education completed by the women in this study ranged from 8th grade to some college. Thirteen of the twenty women dropped out of high school before earning their high school diplomas. Four of these women did go on at some point to earn General Education Diplomas (GED). Seven of the women stayed in school through the twelfth grade and did complete high school. Four of the women had completed some college courses. One of the women had almost enough credits to complete her Bachelors degree.
Number of Incarcerations and Time Spent Incarcerated

The number of incarcerations experienced by the women in this study ranged from one to eighty. The amount of time spent incarcerated ranged from one day to what one interviewee estimated was approximately twelve years of her life spent incarcerated.

Crimes Committed

The crimes for which the women in this study were convicted include the following: drug sales/ drug paraphernalia, shoplifting, grand larceny, burglary, forgery, armed robbery, check forgery, pickpocketing, assault and murder. Five of the women interviewed have been convicted of violent crimes, including murder and assault with a deadly weapon.

History of Violent Victimization

All of the women in this study reported victimization by some type of violence. The most prevalent type of violence experienced by the women in this study was childhood sexual abuse. Thirteen (65%) of the women participating in the study reported histories of childhood sexual abuse. Other types of violence experienced by the women included physical abuse, both as a child and as an adult; neglect; intimate partner violence; rape and sexual assault; and witnessing the infliction of serious harm or death upon another.
Profiles of the Women Who Participated in the Study

Asa

Asa is a 44 year old African American woman with a 12\textsuperscript{th} grade education. At the time of her interview, Asa had been recently released from prison and was living in a homeless shelter. Asa is separated from her husband and does not know if he filed for divorced while she was in prison. Asa had one child, a son, who was shot and killed on the streets when he was 18 years old. Asa grew up in a family with her mother, father and 4 sisters. Her father was a major drug dealer and this is how he provided for the family. Asa has been incarcerated and served time twice, each time for a drug-related offense. Her first imprisonment was at Rikers Island jail (NYC) and her second was at a New York State prison where she was sentenced to 2 to 4 years and served 16 months. The major theme in Asa’s life has been dealing with violence and loss: her father was killed in their home when Asa was age 11; her son was shot to death on the streets when he was age 18; her mother burned to death in a fire; and her nephew, who was very close to her son, committed suicide because he could not deal with the death of Asa’s son. Asa’s main concern currently is getting a job so that she can find independent housing. Formerly, she had a Certified Nurse’s Assistant (CNA) license and worked as a CNA in a nursing home and with private patients. When Asa went to prison, her CNA license was revoked. She wants to work on getting her license back with the hope of working again as a CNA.
Dolores

Dolores is a 46 year old Caucasian woman with a 12th grade education. She grew up with her mother, father and 5 siblings in a middle class family. At the time of the interview, Dolores lived in a sober house for women where she worked as the house manager. She is also employed at an alcohol and substance abuse treatment program. Dolores has been incarcerated only once; she was convicted of selling drugs and was sentenced to 1 to 3 years in State prison. She was released after serving 1 year and put on parole. Prior to her arrest and conviction, Dolores worked as a corrections officer in a County jail where she earned $85,000 a year. Dolores is currently separated from her husband and they are in the process of filing for divorce. She and her husband have two adult children. Dolores has a history of childhood sexual abuse and a history of being in violent and abusive relationships. Her time in prison took a tremendous toll on her mentally and emotionally; for awhile, she was suicidal because of the realization that she had ruined her life. Dolores developed symptoms of post traumatic stress disorder (PTSD) and anxiety while in prison. She continues to work on rebuilding her self-esteem and self-confidence and on reducing her symptoms of post traumatic stress. Dolores would like to go back to school, but is not sure what she would like to study. She is currently in a relationship with a man who recently completed a twenty year prison sentence.
Latoya

Latoya is a 43 year old African American woman with an 11th grade education. At the time of the interview, she resided in a sober house for women where she had lived for approximately nine months. She is married to a man currently on probation. Latoya has three living children, all of whom were taken away from her because of her drug addiction. Eventually, her parental rights were terminated. A fourth child died of Sudden Infant Death Syndrome (SIDS) just prior to her one month birthday. Latoya only recently established contact with one of the children, her oldest daughter. They have exchanged letters and Latoya is hoping at some point to be able to visit her daughter. Latoya has had no contact with the other two children. Latoya has been incarcerated in County jail 9 times and has been incarcerated once in State prison. The charges for which she has been convicted include petty larceny, possession of a controlled substance, sale of a controlled substance, paraphernalia charges and assault under the influence. Her longest sentence was 4 to 8 years for selling drugs. Latoya has a long history of being a crack cocaine user. Latoya grew up with her mother and six siblings. Her mother was an alcoholic and was extremely physically and emotionally abusive. Latoya also has a history of being raped, once by her uncle and once by a corrections officer while she was in prison. Latoya suffers from chronic asthma and hypertension. She takes medication for both of these conditions. Latoya’s main concern now is finding housing because, in several months, she will have
reached the maximum amount of time allowed at the sober house. She also wants
to “give back” by running a group for teenagers who have or have had a parent in
cell. She has contacted and met with several County officials about her idea and
they are supportive.

Bonnie

Bonnie is a 27 year old Caucasian woman who dropped out of school after
completing 9th grade. She has been using drugs since she was 10 years old and
states that she has never been “clean” since she was age 11. She grew up in a
household with her mother who was an alcoholic, cocaine user and had a
gambling addiction; her father who also used drugs; and two siblings, one of
whom is also an alcoholic. Bonnie lived on the streets for two years, a time that
she describes as terrifying. She has been in drug rehabilitation programs
approximately half a dozen times. At the time of the interview, she resided in a
sober house for women where she has lived for several months. Bonnie has a
history of sexual assault. She reports being raped three times, the first time when
she was age 14. Bonnie has been incarcerated twice in the County jail, each time
for a drug-related offense. She never served more than four months. Bonnie’s
main concern right now is being able to change the way she thinks about herself:
“all I know of me is doing drugs.” Bonnie has never been married and does not
have children. She identifies herself as bisexual.
Tayanda

Tayanda is a 55 year old African American woman who has 116 college credits toward her Bachelors Degree. She is currently divorced, has been married three times and is again engaged to be married. She has two adult children. Tayanda has a long history of incarcerations (“I have an album, not a record”) and an equally long history of drug abuse. Tayanda believes that she has been incarcerated approximately thirty times for crimes including prostitution, grand larceny and drug-related crimes. She has served time both in county facilities and in State prison. Tayanda describes herself as “always doing bad things.” She started stealing as a child and kept doing it because she found she could get away with it. By the time she was in the eighth grade, she was smoking marijuana and drinking wine and beer. Tayanda states that one of the things she learned growing up is that everyone likes “tough girls” and that is what she was. By the time she graduated from high school, Tayanda was sniffing heroin, taking pills, dropping acid, smoking pot and drinking. Whatever the newest drug was, Tayanda did it because she thought it was “cool.” By this time, Tayanda also had a 2 year old daughter. Tayanda got married, had several “legitimate” jobs, but found her drug use made it hard for her to do her job so she always ended up quitting. When Tayanda was age 20, her husband was arrested and allowed to enlist in the military rather than go to jail. After about a year of service, Tayanda was notified that he had gone AWOL. After a lengthy investigation, the army discovered his
decapitated body buried on the base. Apparently he had been running some kind of a “con” on the base and was murdered because of his actions. Shortly thereafter, Tayanda gave birth to her second child. Tayanda’s own criminal career continued. She met a man who taught her how to pick people’s pockets, a “skill” that Tayanda apparently learned very quickly and very successfully. Tayanda “teamed up” with this man and the two of them traveled all over the country picking pockets and stealing credit cards. She was arrested many times during the course of their travels, but she was usually able to avoid long jail sentences by using fake names. Eventually, Tayanda found herself being arrested more frequently and serving longer periods of incarceration. These incarcerations began to take their toll and helped Tayanda to decide that she wanted to turn her life around. At the time of the interviews, Tayanda had a good job working at a program that assists people with mental illness and substance abuse problems. Her main concern now is maintaining the gains she has made in turning her life around.

**Renata**

Renata is a 34 year old African-American woman who dropped out of school after the 8th grade. She is single and has no children. Renata grew up in a family where everyone was involved with gangs and crime. Her mother, who had 26 children, was head-of-household. Renata describes digging graves, hiding
evidence of crimes and taking guns apart since she was 6 years old. Renata was sexually abused by her grandfather from ages 6 to 10. She shot and killed him in order to get the abuse to stop. Renata was sent to juvenile detention and eventually ran away from this facility. Ultimately, she ended up living in the street and participating in a gang made up of members of her family. The gang made money by doing contract killings for individuals and other gangs. Renata has been incarcerated five times, once in jail and four times in prison. She has been convicted of drug-related and gang-related crimes, including racketeering, conspiracy, kidnapping and transporting stolen goods across state lines. The conviction for which she received the longest sentence, 7 ½ years to life, was for gang-related activity, but also included a murder charge for killing her grandfather. Renata served only 7 ½ years of her sentence because, while in prison, she suffered a psychotic break. She was granted a conditional release because of her mental condition and ultimately was referred to the drug and alcohol rehabilitation program where the interviews took place. Renata feels very fortunate to be able to attend this rehabilitation program because, in the past, she was denied the opportunity to attend any programs because of her violent history. In addition to the psychological and emotional scars she bears, Renata also is dealing with physical health issues. Renata has been diagnosed with fallopian tube cancer, which currently is in remission. Recently, a “fill-in” doctor told her that her cancer had returned and this caused Renata to relapse and to start using
drugs again. She was able, after a short period of time, to realize that using drugs was not what she wanted to be doing and so she returned to the rehab program. When her regular doctor returned, he told her that the doctor filling in had been wrong, that her cancer was still in remission and had not returned. Renata was both relieved and angry that the covering doctor had been so careless and uncaring about the impact of the news he was delivering. Renata is very hopeful about being able to turn her life around. She loves to cook and through a government run educational and vocational program, she has just been offered a job as a cook in a program for the mentally retarded.

**Earline**

Earline is a 45 year old African American woman with three children, one of whom is an adult and two who are teenagers. Earline dropped out of school in the 10th grade, but subsequently got a General Education Diploma (GED). Earline grew up in a household with her mother, stepfather and three younger siblings. Two older siblings were surrendered to the foster care system. Earline started getting in trouble at an early age. She got in many fights, in school and out, because, as she states, she thought she was better than everyone else. By the time she was age 17, Earline was using cocaine and working as a barmaid. Soon she was working as an “escort” for older men and starting to attract the attention of “not so nice men.” This was the beginning of Earline’s entre in to criminal
activity. By the time she was age 21, she was “freebasing” cocaine and selling
 drugs. On several occasions, Earline’s drug use caused her to be in situations
where she was almost killed. Earline has been incarcerated six times, all for sales
and possession of controlled substances. She has served time in both the county
jail and the state prison. Her longest sentence was 2 to 4 years, a term for which
she served 2 years. At the time of the interview, Earline was attending a drug and
alcohol rehabilitation program and living in a sober house. This was the first time
she had ever participated in a drug treatment program. Earlier in her criminal
career, she had been offered a chance to attend a program, but refused. Earline
has a history of childhood sexual abuse which continues to affect her deeply and
for which she has never received treatment. Earline has been diagnosed with
bipolar disorder and post traumatic stress disorder (PTSD) as a result of the abuse
she sustained. When looking toward the future, Earline states that she is most
concerned about being able to “stay clean,” that is, not start using drugs again and
about being able to get a job. She understands how hard it will be to secure
employment with several felony convictions on her record.

Tanisha

Tanisha is a 50 year old African American woman who is single and has no
children. Tanisha has been on her own since she was 14 years old. She was first
arrested when she was age 12, was sent to juvenile detention and then to a
psychiatric facility and a group home. It is unclear why, at age 14, she was
declared an “emancipated minor” rather than being returned home. Even though she had dropped out of school, Tanisha earned a General Education Diploma (GED) and attended college for 1 ½ years. Then she started selling drugs to make money. Tanisha has been incarcerated five times, each time for sale of a controlled substance. She served sentences ranging from 1 ½ to 3 years to 2 to 4 years. During one of her incarcerations, she was severely beaten by a corrections officer because she lodged a complaint outside of the prison system about abuse she suffered at the hands of male officers. She has a lawsuit pending as a result of this experience. At the time of her interview, Tanisha was attending a drug rehabilitation program and living in a sober house. Upon completion of the program, she hoped to be able to land a job with an agency like The Salvation Army where she had worked previously as a volunteer helping people complete the paperwork necessary to receive government disability benefits. Tanisha describes her family (her mom and 5 siblings) as very supportive of her. None of her siblings has ever been incarcerated.

Delia

Delia is a 41 year old African American woman who dropped out of school after the 11th grade. She has two living children, both of whom are teenagers. A third child, her son, was killed when he was age 19. Delia can’t remember exactly how many times she has been incarcerated, but can provide the details of
approximately ten times she served time in either jail or prison. Most of her time served was for drug-related crimes and parole violations. At the time of the interviews, Delia was participating in a drug rehabilitation program and living in a sober house in lieu of serving the second half of a five year prison sentence. If she fails to complete the rehab program, she will be sent back to prison to complete her five year sentence. Delia had a particularly difficult childhood and adolescence. Her mother gave her up to the foster care system when she was eight years old. From that point on, Delia lived in a number of group homes and foster homes until she was age 21. Delia describes not being able to stand up for herself, of being taken advantage of and of being abused. While in foster care, she got pregnant and had her first child, a son, at age 17. Her son’s grandmother took him in and agreed to raise him. When Delia “aged out” of the foster care system at age 21, she went to live with her son’s father, then with her brother. When neither of these situations worked out, Delia ended up in the shelter system. When Delia got pregnant again, five and seven years later, she was still living on the streets, using drugs and in and out of welfare hotels. After she gave birth to her daughters, these children, too, were removed from her custody and placed in foster care. Her son’s grandmother, however, was able to get the girls out of the system so they could be raised with their brother. Delia currently is focused on being able to maintain her sobriety once she finishes the rehab program. In the past, she has had trouble staying away from drugs when she has been released.
from incarceration. Delia is also concerned about health-related issues: she suffered a heart attack when she was age 37, something she attributes to her extensive drug use. She also has been diagnosed with bipolar disorder.

**Jaquin**

Jaquin is a 38 year old African American woman with a high school diploma. At the time of the interviews, Jaquin had been married for 21 years, but had not seen her husband for 19 of those years. It was a “marriage of convenience” so he would be able to stay in this country. Jaquin does not have any children, but may want to adopt because she wants to raise a child. Jaquin grew up in a household with a single mother who worked as a nurse’s aide, two brothers and a sister. Starting when Jaquin was age 5, her older brother started raping her, first vaginally and then anally. He threatened her that if she told their mother, their mother would get sick and die or the authorities would come to the house and take Jaquin away from her mother. So, Jaquin never told anyone about what was happening. The abuse by her brother continued and, when she was a little older, her brother started bringing his friends home and charging them money to have sex with Jaquin. Her brother would also give Jaquin a couple of dollars for each boy she had sex with, as an additional inducement for her silence. This activity went on for years and, as Jaquin states, everyone started to call her “puta,” the Spanish word for whore. But, according to Jaquin, because the abuse started so
early and continued for so many years, she grew up thinking that this was what she was supposed to be. Abuse continued to be part of Jaquin’s life as an adult. She had a fifteen year relationship with a man whom she describes as extremely physically abusive, a relationship she stayed in order to have security and a place to live. This man was the person who introduced her to crack cocaine, an addiction that she continues to struggle with to this day. Jaquin has been incarcerated approximately seven times. Most of her convictions have been for drug-related crimes and for prostitution. At the time of the interviews, Jaquin was attending a drug rehabilitation program and living in a sober house. She was feeling very hopeful about the future because she was in a relationship with a wonderful man with a good job who had four years sobriety. In addition, Jaquin had just been offered the chance to manage a sober house for a drug and alcohol rehabilitation program, an opportunity that she was very excited about.

**Quintessa**

Quintessa is a 44 year old African American woman with a 10th grade education. She had one son who was shot to death seven years ago, at age 22. Losing her son has been devastating for Quintessa. Quintessa estimates that she has been incarcerated eight or nine times, all for drug-related crimes. At the time of the interviews, Quintessa was living in a sober house and attending a drug rehabilitation program. Quintessa grew up in a household with her mother and six
siblings. Even though her father did not live in the household, he had regular contact with the family. Growing up, Quintessa suffered physical abuse at the hands of her mother, who was an alcoholic, and sexual abuse at the hands of her father. Quintessa told her mother about the sexual abuse, but her mother refused to believe her and continued to force Quintessa to have regular visits with her father. At age 17, Quintessa got pregnant and moved in with her boyfriend. He was a drug addict and introduced her to crack/cocaine and “free-basing.” Her boyfriend was a very violent man who physically assaulted her every day. Quintessa was hospitalized after one particularly horrific incident when he cut her with a box cutter. Over time, Quintessa’s crack addiction grew worse and she started neglecting her son. She eventually ran away from home, leaving her son in the care of his father and his aunt. Quintessa spent the next fifteen years living on the streets, in shelters and prostituting to get money for drugs. She also was in and out of psychiatric hospitals, suffering from depression and wanting to kill herself because she could not stop using crack. It was as a result of one of these psychiatric hospital stays that she learned of the drug rehabilitation program she currently attends. Quintessa is working on learning to “do for myself.” In the past, she has always relied on others to take care of her. Quintessa feels that finally she has a chance to grow up and to learn to be a better person. Quintessa suffers from serious health problems. She is a diabetic and has started to have problems with her vision. She also suffers with chronic asthma and bronchitis.
Marion

Marion is a 40 year old African American woman who has a General Education Diploma (GED) and has completed two years of college. She currently is in default on her student loans so must clear that up so that she can resume her studies. Marion has one child, a teenager who currently lives with her mother in another state. Marion has lost track of the exact number of times she has been incarcerated: she estimates the number to be somewhere between twenty and thirty times. She has been convicted of grand larceny, petty larceny, forgery, attempted burglary, prostitution and drug sales. She has done time in both jail and prison. Marion estimates that she has spent between ten and fifteen years of her life incarcerated. Marion grew up in a household with her mother, father and three siblings. Marion was adopted when she was eight years old by this family, but lived with them since birth. She describes a very middle class upbringing, including doing many typical activities with her family, for example, going to the circus, to plays and on vacation. Marion describes herself as a very precocious child who loved to read. In high school, she was very bored, started hanging out, cutting school and doing drugs. When she was age sixteen or seventeen, she dropped out of school. By the time she was age nineteen, she had begun to be arrested and incarcerated. Her son was born prematurely during one of her incarcerations. When Marion was released from jail, she did not feel prepared to care for her son so started leaving him more and more in the care of her mother.
and sister. Marion continued to use drugs and after several more times in and out of jail, her mother refused to let her return home. Marion lived in shelters, continued to go in and out of jail and saw her son only occasionally. She never told her son about her drug use, going in and out of jail or why she did not see him more often until he was age sixteen. While incarcerated, Marion was diagnosed with bipolar disorder with severe depression. Her psychiatrist told her that her continuous abuse of drugs was probably an attempt to self-medicate in order to feel better. At the time of the interviews, Marion was living in a sober house and attending a drug rehabilitation program. Her main concern is being able to get a job when she completes the rehab program, not just any job, but one that would give her a pension. She worries about how she will support herself when she is older. In addition, Marion worries that when she completes the program, she will stop taking her prescribed medications and start drugging again, a pattern that she has followed many times in the past.

**Karla**

Karla is a 45 year old Caucasian woman with an 11\(^{th}\) grade education. She is a widow, her husband having died of a heroin overdose thirteen years ago. She has a teenage daughter who has been raised primarily by her elderly parents. Karla has been incarcerated fifteen times. She has been on her own since she left home at age 16 and went to Florida to get away from a family member who had
sexually abused her. Her first incarceration also occurred at age 16 for marijuana possession. Karla has been incarcerated for armed robbery, drug-related crimes, forgery and grand theft. Karla estimates that she has spent twelve years of her life incarcerated. Over time, Karla’s drug use progressed from marijuana to cocaine, which Karla describes using to numb the emotional pain of having been sexually abused. She was told that she was ineligible to attend a drug rehabilitation program because her “rap sheet was too severe.” Karla is currently living back at home with her parents and her daughter. She is battling invasive breast cancer which has spread to her spine. At the time of the interview, Karla had lawsuits pending against the County and the State for negligence with regard to her breast cancer treatment. During her last incarceration in the county jail, she noticed an abnormality with one of her breasts. She reported this and was put on a list to get a mammogram. During the four months that she was in this facility, she was never taken for the mammography. She was then transferred upstate, first to one prison and then to a second prison. It was not until she got to the second prison that they took her for the mammography, eight months after her initial identification of a problem. As a result of the mammography and biopsies, she was diagnosed with invasive breast cancer. The prison did not schedule her for a mastectomy until four months after her diagnosis. By this time, the cancer had spread to her spine. After the surgery, Karla was scheduled to have chemotherapy which she refused because she had only two weeks remaining of her prison
sentence. Once Karla was released, she sought treatment at Memorial Sloan Kettering Cancer Center where they told her that chemotherapy was the incorrect treatment for her type of cancer. At the time of the interview, Karla was getting ready to go for radiation treatments. Her spine continues to deteriorate and she describes being in pain twenty-four hours a day. Karla’s hope is that the radiation will be able to stop the spread of the cancer and that she will be alive to see her daughter graduate from high school and grow to be an adult. Her vision for the future is to buy her parents’ house and to turn it into a place where unwanted newborns, newborns born to addicted parents or newborns born with an addiction will be cared for.

Maya

Maya is a 46 year old Caucasian woman who has completed some college. She is divorced and has three grown children. She has been incarcerated three times, each time for one day only. Her first incarceration was for domestic violence; her second for violating an Order of Protection and her third for check forgery. She characterizes her incarcerations as “ridiculous” and “stupid” and as something that should not have happened. Maya believes that alcohol played a part in her decision to forge a check. She believes that after this last arrest, she has learned her lesson and will be able to stay out of trouble. She feels that her family would be mortified if they knew of her arrest for forgery.
Carmella

Carmella is a 44 year old Latina woman who dropped out of school after 9th grade, but who subsequently earned her General Education Diploma (GED). Carmella is married and has 2 children. Her oldest child is in college and lives on his own. Her youngest child is being raised by her half-sister. Carmella has had several psychiatric hospitalizations beginning at age 7 when her mother died of cancer. She was psychiatrically hospitalized again at age 12, after her father learned that she was shooting up heroin. When she was age 15, she shot and killed her abusive boyfriend. She was sentenced to time in a psychiatric facility rather than prison because of her family’s police department connections. Carmella has been arrested numerous times, but has only been incarcerated four times, three times in prison and once in jail. Her convictions have all been drug-related and one included violent crime. At the time of the interview, Carmella attended a drug rehabilitation program, the first rehabilitation program she had ever been offered, and she was living in a sober house. She feels the program is helping her learn how to open up, to express her feelings and to learn how to think about things differently.

Belinda

Belinda is a 37 year old Native American woman who dropped out of school after completing 9th grade. Belinda has six children, all of whom have been given
up for adoption or are currently being raised by someone else. Belinda has been an active alcoholic since she was a teenager and, during the past several years, she has also developed a heroin habit. Belinda has a history of involvement in abusive relationships and she herself has served time for inflicting serious harm on a several boyfriends. Belinda estimates that she has been incarcerated more than 80 times. All of her incarcerations have been drug or alcohol related. At the time of the interview, Belinda resided in a sober house and attended a drug rehabilitation program. She fears relapsing, but tries to keep focused on how much she wants to reconnect with her children and to use this thought to help her stay clean and sober. She has tremendous guilt and shame about some of the things she did while using drugs and alcohol and does not want her children to remember her as “the town drunk.” Belinda is also motivated by the realization that emotionally she cannot handle going to jail again.

**Cynthia**

Cynthia is a 40 year old African American woman who dropped out of school after 10th grade, but who subsequently went on to earn a General Education Diploma (GED). Cynthia was taken from her biological parents at age 3 after being sexually abused by her father and set on fire by her mother. Cynthia continued to be sexually abused while in foster care. Her first incarceration was for armed robbery when she was age 19. She has had four other periods of
incarceration, all for crimes that were drug-related. Cynthia has three children who are young adults. Cynthia was devastated when her son, who is gay, was diagnosed with HIV. His diagnosis prompted her to start using drugs again. As a result, Cynthia lost her job and her apartment and was arrested and incarcerated for drug sales. Cynthia just completed and “graduated” from a drug rehabilitation program and was preparing to leave the sober house where she had been living at the time of her interview. Her plan was to move back to the city, be near her children and try to be a good example and role model for them from this point onward.

Neisha

Neisha is a 42 year old woman of mixed racial heritage: her father was African-American and her mother was Caucasian. She was abandoned at birth and grew up in the foster care system. She never knew her biological parents. Neisha lived in eight different foster homes and was never adopted. Neisha was sexually abused in nearly every foster home in which she lived, either by a foster parent, their friends or by another child living in the home. When she was age 17, she ran away from her foster home and became involved with a man who seemed to offer her love, attention and acceptance. Unbeknownst to Neisha, he was a pimp whose intention was to involve her in the world of prostitution. Before she knew it, she was dancing in strip clubs, being given expensive jewelry and clothes
and making lots of money. However, before long Neisha began to experience “flashbacks” related to all of the sexual abuse she experienced growing up. She began using drugs to dull the emotional pain she was experiencing daily. Neisha was eventually “saved” from a lifetime of prostitution by a man who fell in love with her. They married, had a child and lived happily for about 11 years. Then her husband was incarcerated for income tax evasion and Neisha’s whole life fell apart. There were financial problems and this became a point of contention between Neisha and her mother-in-law, with whom she lived. Neisha’s relationship with her mother-in-law continued to deteriorate and soon Neisha began using drugs again. Eventually, she ran away from home, leaving her daughter in the care of her mother-in-law. Neisha continued to get more and more involved in the world of drugs and prostitution. She was arrested 79 times. She seldom had contact with her daughter. During Neisha’s last incarceration, she was offered the opportunity to finish out her sentence at a drug rehabilitation program. Prior to this time, Neisha had never been in treatment. She accepted the offer and believes that the program has helped her to gain important insights about herself and her addiction.

Sharell

Sharell is a 30 year old African American woman with a 12th grade education. She has seven children ranging in age from 1 ½ years to 12 years old.
The youngest child is currently in foster care, while the others are living with her mother and their father. At the time of the interview, Sharell had not seen any of the children in a year. Sharell has been incarcerated three times, once for assault, a second time for violating an Order of Protection and a third time for drug sales. She spent two months incarcerated on the drug charge and then was offered the opportunity to serve out the remainder of her sentence at a drug rehabilitation program. At the time of the interview, she was living in a sober house and had started the drug rehab program two weeks prior. Sharell grew up in a household that she described as a “hell-hole.” Her mother was always drunk and very physically abusive. Her father was a crack-head who showed up about once a year. Sharell was sexually abused from the ages of five to twelve by her cousins. She told her mother about the abuse, but her mother refused to believe her. Eventually, Sharell told a teacher what was going on at home and she was removed from the house and placed in a group home. Surprisingly, her siblings were not removed from the household. Sharell spent her childhood going back and forth between group homes and her family, even though her mother continued to drink and to be physically abusive. Sharell was happiest when she was in a group home. During the times when Sharell was returned to her family, she did anything she could to try to get sent back to the group home: she ran away, she stayed out and never came home and she attempted suicide. Sharell started to drink when she was 7 years old and started doing cocaine at age 14. By the time
she was a young adult, she had developed a very serious crack cocaine habit. Sharell continued to suffer from depression and used drugs and food to “bury” her feelings. At one point, she weighed almost 700 pounds and was spending her days in bed, not showering and isolated from everyone. It took several psychiatric hospitalizations to help her deal with her depression and begin to lose the weight. Sharell continues to work on her addiction, to battle her depression and to work on learning to care about herself.

Jenele

Jenele is a 40 year old African American woman who dropped out of school in the 10th grade. She has four children, a set of twin boys and a set of twin girls. Jenele grew up in a household with her mother, stepfather and three siblings. She describes her stepfather as a pedophile who sexually abused her from the time she was age 3 until she was age 11. Jenele told her mother about the abuse, but her mother did nothing about it. Her mother’s inaction was devastating to Jenele and left her feeling worthless and unloved. Jenele has been arrested twenty-two times and has eighteen convictions. The longest sentence she has ever served was eight months for a drug sale. She has been arrested for grand larceny, shoplifting, drug sales, prostitution, burglary, assault, harassment, petty larceny and driving without a license. Jenele started smoking crack cocaine as a teenager and continued smoking when she was pregnant with her sons. She feels tremendous guilt about

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her actions because she feels her drug use during pregnancy could have contributed to the emotional problems suffered by one of her sons. She describes this son as being on “the fast track to being a loser.” At the time of the interviews, Jenele was living at home with her mother and three of her (Jenele’s) children. She was receiving mental health case management services and attending a substance abuse treatment program three days a week. One of Jenele’s priorities at this point is finding a job. She contacted an agency that helps with vocational training, hoping they would send her to school for medical assistance training. However, they have told her that she must first complete her General Education Diploma (GED). Another of Jenele’s priorities now is to seek out individual counseling. She wants to work on getting stronger emotionally so that she can begin to rebuild her relationships with her children and make amends for all of the harm her drug use and criminal behavior has caused them.

**Data Gathering Instruments**

Because the goal of the study was to better understand the experiences of the women and the process by which they created and attributed meanings to these experiences as they faced reentry and reintegration into the community, I used an open-ended, semi-structured interview format. This process enabled me to identify broad topic areas around which to frame my interview questions, while at the same time leaving the discussion open-ended enough that each interviewee
could take the interview in any direction she chose. Since I was able to interview
most women in the study at least twice, I had the opportunity to return to issues
and themes identified in the initial interviews and to try to understand how these
issues were impacting the process of reentry and reintegration for each woman.

In addition to these semi-structured, open-ended interviews, each woman also
responded to a series of questions designed to provide a profile of each
interviewee. These demographic questions included information about the age of
each woman, her marital status, number and ages of children, educational level
and work history, as well as the number of times each was incarcerated, the age of
each woman when first incarcerated, the crime(s) committed and the sentence(s)
served. Though the main focus of this research was to gather data about women
coming out of jail or prison and the process of reentering the community and
rebuilding their lives, a secondary focus was to understand from the women
themselves more about their pathways to prison and the impact, if any, of these
experiences on their attempts to avoid re-incarceration. My assumption was that
the issues and circumstances which led to their incarceration might continue to
pose problems for the women in their efforts to rebuild their lives and avoid
reincarceration. The demographic questions helped to create a natural structure
within which to explore the circumstances which each woman identified as
contributing to her participation in criminal activity and eventually to
incarceration. The question I asked to elicit this information was, “What went on in your life that you ended up in jail (or prison)?”

**Impact of the Interview Environment**

As described above, the participants in this study were recruited from a number of different settings and therefore the interviews took place in a variety of settings. These settings included empty offices at a drug rehabilitation program and at a drop-in center and a television room at a shelter and at a sober house. I also conducted a number of the interviews in my car, some parked around the corner from one of the sober houses and others parked in a library parking lot. Some of the “automotive interviews” were necessitated by the lack of available interview space at the local library. Others were necessary because the sober house where some of the interviewees lived refused to allow “outsiders” into the house. In fact, each woman I interviewed from this particular sober house feared that the manager of the house would be upset if she knew the women were talking to me. Apparently, keeping a “low profile” in the neighborhood was of utmost importance and included not having any non-agency personnel show up and ask to speak with the women.

Each of these interview locations had positive and negative aspects. The offices that were made available to me for interviewing were functional, but they were offices used by the program’s psychiatrists. Therefore, in these interviews, I
had to be conscious of the “formality” and atmosphere of “social/professional
distance” associated by the women with being in these offices. I had to work
actively to create a more informal atmosphere and work to bridge some of the
interviewer-interviewee distance that the space conveyed.

The interviews conducted in the television/living room spaces at the shelter
and at one of the sober houses were very comfortable and helped to put the
interviewees at ease. These interviews were on their “home territory” and in
spaces where they were used to acting informally. Each of these factors
facilitated my ability to “connect” with the women interviewed in these spaces
and, I believe, with their ability to feel at ease in talking with me. The drawback
to using these “public spaces” was just that: they were public spaces.
Consequently, there were interruptions when women, unaware that an interview
was going on, came into the room. In addition, the women being interviewed in
these spaces were aware that we might experience this type of interruption and,
therefore, that their confidentiality might be compromised, even if momentarily.
Fortunately, the interviews conducted in these public living areas were done when
most or all of the other women living there were out of the house at regularly
scheduled activities. Thus, the actual number of interrupted interviews was very
small.

When I began this research study, I had not anticipated that there might be
situations in which available interview space would not be available. Initially,
when scheduling the women from the sober house that did not allow visitors, I looked into the feasibility of doing the interviews in a local library. Unfortunately, the library did not have available space for doing the interviews, nor were there other nearby, available public spaces where the interviews could have been conducted. Therefore, doing these interviews in my car became a plan borne out of necessity.

There were two main positive aspects of doing these interviews in my car: the first, that I was able to do these interviews at all; and, the second, that there was no concern about compromised confidentiality. All of the women that I interviewed in my car expressed happiness that they did not have to worry about either the house manager or other residents of the house hearing what we were discussing. In addition, because we did not have to work around anyone else’s schedule, as I did when I used someone’s office, working out the scheduling of these interviews proved to be relatively easy.

There were, also, negative aspects of interviewing in my car. First, there was no guarantee that I would be able to make eye contact with the woman I was interviewing. Often, when a woman got into the car, she sat, as most passengers do, staring straight ahead and began talking as she stared out the windshield. Some of the time, the woman would respond to my body posture (I turned in my seat so that I could face the interviewee) and we were able to make eye contact. As many have noted, eye contact is a means of connection between interviewer
and interviewee and can help put the interviewee at ease. Eye contact allows the interviewer to “pick up on” non-verbal cues, for example, non-verbal indications that a particular line of questioning should be followed-up on further.

On the other hand, some have noted that it may be easier for a person to discuss difficult or sensitive topics when they are not making eye contact.

Clearly, much of the material that we discussed during these interviews touched on issues that were likely to elicit feelings of sadness, pain and anger, as well as the possibility of triggering feelings of guilt and shame. So, ironically, it may have been easier for the women I interviewed in my car to talk about some of these painful and difficult issues.

The biggest problem I worried about when doing interviews in my car had to do with trying to be aware of who might be watching the two of us sitting in a car for an extended period of time and what they might assume we were doing. Specifically, I was aware that it could look as if we were transacting a drug deal, especially since I was paying the women for doing the interviews. I also worried, since we were in a residential neighborhood, that it could look as if we were “casing out” houses to rob. I was not sure if it would “look better” to an observer if we stayed parked in front of one house for the duration of the interview or if we would look less suspicious if we changed locations several times during an interview. I tried both of these things and neither really allayed my concerns, although the women I was interviewing seemed not to have these same concerns.
What was of most concern to the women I interviewed was that the house manager not see them talking to me and that they returned home, back to the sober house, in time to catch the bus which picked them up and transported them to their drug and alcohol rehabilitation program. Fortunately, everything worked out fine: no vigilant neighbors calling the police; no encounters with the manager of the sober house; and no missed transportation to the drug and alcohol rehab program.

**Data Analysis**

Using grounded theory methodology, each interview was transcribed and the content coded according to categories which emerged from the data. I looked for patterns of experiences and perceptions as I read through the stories that the women told of their lives. Initially, my codes focused on the descriptive facts of the women’s stories. From these, I developed a coding structure while attempting to understand the relationships between the patterns that I found. Following the approach recommended by Maietta (2006), new codes were created, existing codes modified and ultimately codes were collapsed into larger, more inclusive categories as the data continued to be “sifted and sorted (p.8).” From these categories, themes emerged. I sought to compare and contrast the emerging themes in order to determine the similarities and differences that existed among the women. Identifying these emergent themes allowed me to develop analytic
codes which I tested by re-reading and applying the concepts to the text of the women’s stories. Using MAXqda, a qualitative data analysis software program, I continued to collapse codes and develop new codes based upon the generative themes I derived from multiple readings of the interviews and field notes. Ultimately, it was this process of analysis and constant immersion in the women’s interviews, along with memos written throughout, that led to the development of the concept of “enduring violence.” The unifying analytic concept of “enduring violence” became a conceptual means of grasping the meaning that the women attributed to the overwhelming and ubiquitous nature of the violence in their lives.
CHAPTER 3

RESULTS: “GROWING UP IN HELL”

R: …Because I wasn’t born an addict. No, I wasn’t born to be bad—I might have it in my genes and stuff like that, but, you know, I didn’t know about the choices I had. But today, I know about choices, you know? And I lived a hard [life]---I never had a childhood. My brothers [they had me] after ages 7 and 8, I was learnin’ how to break down a gun and clean it. I wasn’t playin’ with dolls…
I: You mean when you were little?
R: Yeah. I wasn’t playin’ with dolls. We was in the back yard…and the backyard, I was supposed to be [there] playin’ with dolls and [playin’] double dutch, but I’m in the back yard diggin’ graves…

Renata, a 34 year old black woman

Introduction and Overview

The predominant finding of this research study is the following: the amount and degree of violence, abuse and trauma experienced by the formerly incarcerated women participating in this study is almost unimaginable and continues to affect their lives today. What Renata describes above, a childhood characterized by learning how to take apart guns and clean them, digging graves in the back yard to bury the victims of the gang-related violence in which her
brothers were involved, is unfathomable to those of us who have not grown up in families where violence is a daily occurrence. And yet, for most women who end up incarcerated, violence in some form is part of what they have had to deal with for most of their lives. The results of the forty-one interviews done with the twenty women who participated in this study reveal the incredible amount of violence and the severe level of violence that has permeated most of their lives since childhood. The data suggest that the after effects of these violent experiences continue to affect the women during this period of transition from incarceration to living free in the community.

In this chapter, I will discuss the violent and traumatic experiences of the women in the study prior to their reaching age 18. I will explore the ways in which these experiences have impacted the development of their identities, particularly their sense of self-worthiness. Furthermore, I will contrast these experiences with the developmental tasks identified by researchers as necessary for individuals to grow and thrive. In addition, I will explore the ways in which these early experiences of violence and trauma have set the stage for an adulthood marked by a diminished sense of hope and possibilities.

All 20 women interviewed for this study indicated that they had experienced some type of violence in their lives and most of the women detailed multiple experiences of violence. Many of the violent “events” were not singular occurrences, but were, in fact, ongoing experiences, some lasting many years.
The experiences of violence and trauma identified and described by the interviewees include instances of childhood sexual abuse, childhood physical abuse, neglect and witnessing acts of violence toward friends and family members. In addition, for some of the women, their experiences of violence included perpetrating violence against others.

Each of these occurrences left some type of “scar” on the woman victimized. Many of the women, in telling their stories, identified directly the way(s) in which they were negatively impacted by the experiences of violence and abuse they described. Others did not identify directly the harm done to their physical and emotional well-being by these experiences. However, trauma literature suggests that we can make this inference from things such as negative behavior changes, increased difficulties in relationships, both within and outside the family, and in the connections the women make between the violence they experienced and subsequent events such as leaving home and getting involved in gang activity (Thompson & Braaten-Antrim, 1998).

The Experiences of Renata: A Mini Case Study of Growing Up With Violence

The experiences of Renata, a 34 year old black woman, provide a “mini case study” of the pervasive violence experienced by formerly incarcerated women during their childhoods. In Renata’s family, the whole family was involved in
criminal activity and being a child in this family meant being socialized into a
criminal lifestyle. Renata is the eighth girl born to her mother, one of 26 children
to whom her mother gave birth. Renata grew up with fourteen of her siblings, the
children that her mother actually raised. At the time of our interview, Renata
indicated that none of her older brothers are still living: all were killed in the
streets in gang-related activities. Here is how Renata described witnessing the
death of two of her older brothers:

R: Do you know what it’s like to watch my
momma shove two of my brothers’ brains back in
their head? [unintelligible] had to protest when the
housing authority shot my brother, said he had a life
just like me, havin’ no (future) [unintelligible] and
they shot everybody. And I was like, about, no
more than 10. And (about the time), I seen my
mother, they called her. She was runnin’ down the
street. And I watched, you know, she’s tryin’ to
shove my brothers’ brains back in.
I: Oh, my God.
R: …All that…I didn’t acknowledge it. All that
took a toll on me.

It is hard to imagine a more horrific scene than the one Renata describes, her
two brothers shot and lying dying in the street, her mother totally distraught at the
sight of her two sons, desperately trying to save them. For Renata, witnessing this
scene was clearly traumatic, but as she states, it was not until many years later
that she began to realize just how much she had been affected, not only by
witnessing the deaths of her brothers, but also by many other acts of violence that were a part of her childhood and adolescent years.

Renata described experiencing psychiatric problems starting at age 6. She was diagnosed with hyperactivity disorder, a condition that she feels was inevitable given everything that was going on in her house. Here is her description of that time in her life:

**I:** So, when you were growing up, did you get medical care from anybody

**R:** For what? Like what?

**I:** I don’t know. Were you sick at all?

**R:** Hell, yeah! They had me diagnosed with hyperactive.

**I:** Oh, they did? Tell me about it.

**R:** I’ve been seein’ a psychiatrist since I was 6. They said I was hyper. Well, what else could I be with havin’ all them kids around me and shit.

**I:** You mean your brothers and sisters?

**R:** Yeah. Cousins and stuff like that, you know? I was seekin’ psychiatric help from the age of 6. From all the shit my brothers and them showed me. The bodies I used to see, I needed help. There was no understanding. I didn’t have no childhood, I told you before.

**I:** Right. No, I know you didn’t.

**R:** So, that’s something…that’s shellshock at a young age.

**I:** Yeah. Right, right…

**R:** I was in Special Ed for being hyperactive, but they didn’t know what the shit I was going through in my house.
The “shit” Renata was going through in her house would have been traumatizing for anyone. Here she describes one of the times she stumbled across a body in the course of one of her regular cleaning chores:

I: Yeah. So your brother would bring the bodies home?
R: Not-no, not-no. I used to hang, you know, I was a tomboy.
I: Yeah.
R: I wanted to be with the boys. So I used to stumble over to the backyard and see things I wasn’t supposed to see. Go on the roof where they fly the bird coop, I used to clean the bird coop.
I: Oh yeah? What, pigeons?
R: Pigeons. Yeah…
I: Did they do that to communicate?
R: Yeah. I (come up) with games and shit like that.
I: Oh, no kidding.
R: Yeah. I remember there was a lot--I guess I was about 10 years old, and one of the guys that was out with my brothers stole some guns from my brother and sold it to these guys. And he (fell down), ‘cause the guys that he sold ‘em to, he [my brother] knew them. And they brought the guns back [to my brother].
I: So he [her brother] knew the guy that, um…
R: Yeah. Followed the guys brother back and told ‘em he sold ‘em, the guys, and you know, they locked him in the bird coop.
I: They locked him in the bird coop?
R: Yeah. And I saw (what happened)… it was my turn to clean the bird coop. And you know, take ‘em out, clean the eggs. And he was in there. They was just flyin’ around. They got all type of--and I said, “Ahh!”
I: You screamed?
R: Yeah. I closed that shit right back. And I cleaned around him. He ain’t move or nothin’.
That’s how [unintelligible] he was. I don’t know what happened to that guy. I ain’t see that guy since then

I: Yeah. Yeah, I don’t blame you for running away.

R: I didn’t run, I screamed. When I see all the birds… like, I screamed, “Ahh!” I still continued.

I: Still cleaned it up?

R: It was my chore. I wasn’t gonna bother my brothers, and I wanted my money.

So, Renata’s life from the time she was age 6 was about guns, graves and bodies. And it was about doing what her brothers told her to do. Even when she discovers a body in the pigeon coop, there is no thought that she will abandon her assigned task. She screams in horror, but then goes back into the coop to finish her cleaning chore. This was her job, assigned to her by her brothers and there is no question of not completing her task. She says, “It was my chore. I wasn’t gonna bother my brothers and I wanted my money.”

It is no surprise, then, that the pigeon coop incident was not the end of the violence that was a part of Renata’s childhood. She reports, also around the age of 6, the beginning of sexual molestation by her grandfather. According to Renata, she tried to tell her mother and her brothers about the abuse, but no one would listen. Finally after years of abuse and intense physical pain, Renata took matters into her own hands:

I: And, um, so, [name], tell me… if it’s okay, tell me about, you know, how old were you when you murdered your grandfather?
R: I was 10 years old.
I: You were 10? And had you been thinking about it? Or...
R: Um, yeah. Every time he came up close, I wanted to stab him. But I never had the opportunity... I mean, I was bleeding so bad. I was in so much pain. It's like my mother made me go out again to the club every night, to sell dinners and stuff [where she saw her grandfather]. We would come upstairs, and my brother kept his gun [there]. You know, I was cleaning it and stuff. I [knew it was a] 357, pretty little fucker, too. It was beautiful...
I: Yeah. So you had it right there.
R: I got tired. After [he] finished getting off me, and this and that, and smoke his pipe tobacco... but yeah, no doubt, smokin’ the pipe like he was “the man.” I got right up on that bed and he took my arm, “You comin’ for some more?” And he pinched my chest real hard. I didn’t really have nothin’ there, it’s just so hard. I said, “Yeah, I come for more. And it’s gonna last me for a lifetime.” And I remember the moment, I shot him. I shot him 3 damn times. Yep.
I: So, what happened then, after this?
R: Well, they covered it up.
I: Who did? Your family?
R: Yeah. Cleaned, too much wasn’t said [except] “Oh, she’s bad. She’s gonna be crazy”...‘cause I was seein’ a psychiatrist since I was 6. ‘Cause I was rebellin’ in school, ‘cause I burnt the kids [coats]...’cause there’s no other way.

Renata had tried to get someone to help her, to listen to her, to stop her grandfather from sexually abusing her for a long time. When she finally gets so desperate and tired that no one is coming to her aid to stop the abuse, she takes her brother’s gun and shoots her grandfather to death. The reaction that she gets
from her family is not remorse for their lack of action on her behalf or even
remorse for not believing her when she told of the abuse. Their reaction, instead,
is that Renata is “bad” and “crazy.” After all, she had been seeing a psychiatrist
for several years and had a history of acting up in school. So, as a result of her
actions to protect herself when no one else would, Renata finds herself labeled as
the “crazy one” in the family, someone mentally unstable around whom everyone
must be careful.

On one hand, this family reaction must have been very bewildering to
Renata, given that violence was the way her family “fixed” things. By age 10, she
already had spent four years watching her brothers and cousins use violence and
deadly violence to punish those who “did them wrong.” This was the “family
way.” On the other hand, Renata clearly had learned that her mother and her
brothers were in charge. They were the ones who told her what she was going to
do. In her family, there was not room for one who took independent action. Here
is how she responded to a question about having choices:

**I:** …So, when you were a little girl growing up, did
you ever feel like you had choices?
**R:** I didn’t know what “choices” meant…I never
heard the word.

After she murdered her grandfather, Renata was sent to a juvenile detention
facility because she was a minor. She ran away from this facility and several
others in which she was placed. She describes this period in her life this way, “I was just upset, I just be runnin’.” Eventually, Renata found her “home” in the gang world and it was at this point that her participation in criminal activity, violence and drugs became her way of life.

Renata’s childhood experiences illustrate the themes which emerged from the interviews of most of the formerly incarcerated women participating in this study. 

(1) Most grew up in families where there was involvement in criminal activity by at least one other family member. For several, like Renata, many family members were involved in criminal activity.

(2) Nearly all experienced the loss of someone close to them due to violence.

(3) Nearly all experienced some form of abuse during childhood: sexual abuse, physical abuse, verbal abuse, emotional abuse and/or neglect. Many experienced multiple forms of abuse.

(4) Most were not able to get help to stop the abuse, either from family members or from outside sources.

(5) The experience of not being protected when victimized and/or not being believed when reporting the victimization to a family member left the child/adolescent feeling angry, powerless, alienated and worthless.

(6) The child/adolescent who has been victimized is blamed for what has/is happening and labeled as “the black sheep” or “the crazy one” in the family.
In the next section, I will present Bureau of Justice Statistics data illustrating the prevalence of violence and trauma in the lives of women who end up incarcerated. I will follow this with a discussion of what Maslow’s Hierarchy of Needs tells us about the inability of distressed families to meet more than basic survival needs of family members. I will then relate this discussion to the experiences of many women who participated in this study.

**Violence in the Lives of Women with Histories of Incarceration: Bureau of Justice Statistics Data**

Sadly, Renata’s experiences are not unique among the population of formerly incarcerated women. Studies by the Bureau of Justice Statistics indicate the high level of violence and abuse experienced by both women and men with histories of incarceration. As a group, women who have been incarcerated have a very high rate of exposure to violence and violent victimization. According to the Bureau of Justice Statistics, 57% of state prison inmates, 40% of federal prison inmates, 48% of jail inmates and 40% of probationers report histories of abuse prior to being incarcerated (Harlow, 1999).

Like the women in this study, many incarcerated women report experiences of violence prior to the age of 18. According to a Bureau of Justice Statistics report done in 1999, 37% of female State prison inmates and 37% of female jail inmates reported histories of physical and/or sexual abuse prior to age 18. The
statistics for women on probation and women serving time in federal prisons are somewhat lower: 28% of women on probation reported histories of physical or sexual abuse prior to age 18, while 23% of women in federal prisons reported having been physically or sexually abused prior to age 18 (Harlow, 1999).

For comparison purposes, the Bureau of Justice Statistics uses Gallop Poll data\(^7\) of abuse rates for women under age 18 in the general population. The comparison between abuse rates for women with histories of incarceration and women in the general population indicates that the rates of violence experienced by female offenders are substantially above the norm (Harlow, 1999). For example, Gallop Poll data for the year 1990, cited in Harlow (1999), indicates that 10% of the women report having been physically abused by their parents, while 25% report histories of childhood sexual abuse (Department of Health and Human Services, 2008).

As noted previously, the women who participated in this study identified themselves as survivors of multiple types of childhood abuse. Each experience, no matter the type of abuse, left its mark. In the next section, I will draw on the data from the interviews to illustrate the amount and severity of the violence and

\(^7\) Because there is such variation in the type of questions and methodologies used to assess rates of abuse, the Bureau of Justice Statistics uses Gallop Poll data when drawing comparisons because of the similarities in how they each gather data about experiences of abuse.
abuse which they experienced. In addition, I will draw on the women’s words to describe the after effects of these traumatic experiences.

**Childhood Sexual Abuse Experiences of Study Participants**

Of all the types of violence experienced by the women in this study prior to age 18, the most prevalent form was sexual abuse. 65% of the women I interviewed identified themselves as having a history of childhood sexual abuse. Here is how Earline described the impact of the sexual abuse she experienced at the hands of her cousin when she was age 11:

**I:** And [name], tell me why you applied for SSI\(^8\).
**R:** Because I have disability.
**I:** Okay. What’s your diagnosis?
**R:** Bipolar and PTSD [Post Traumatic Stress Disorder and Depression].
**I:** And the PTSD is from…
**R:** From being raped when I was little.
**I:** Oh… how little were you?
**R:** 11.
**I:** 11? Do you know who-
**R:** Yeah. It’s my cousin.
**I:** Oh.
**R:** …because it was a family affair so it was just like a…
**I:** And you were left with all the bad feelings-

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\(^8\) SSI stands for Supplemental Security Income, an entitlement program which provides disability benefits for individuals deemed unable to work, but who do not have enough of a work history to qualify for these benefits under the Social Security Disability program.
R: It [the abuse] made me… have a lot of strange feelings about sex, you know, after that. It was something bad. You know what I’m sayin’? And then… if something bad starts to feel very good, that means it’s too much of it.

So, as a result of her experiences of rape as an 11 year old child, Earline has been diagnosed with a psychiatric disorder called Post Traumatic Stress Disorder (PTSD). Originally used to describe the symptoms of Vietnam-era veterans returning from war⁹, this diagnosis is now often given to victims of violence and trauma who exhibit similar symptoms to those seen in veterans of war.

Symptoms seen in those diagnosed with PTSD can include hyperarousal, emotional numbing, intrusive thoughts, and flashbacks to the traumatic event, as well as avoidant behaviors (Filipas, & Ullman, 2006; Herman, 1992b; Putnam, 1996). In addition, these symptoms of psychological trauma can be so severe that individuals suffering from these trauma after effects may be judged unable to work and labeled as “disabled.” Such was the case for Earline.

In her description of her childhood abuse by her cousin, Earline indicates another way these experiences have negatively impacted her. As she states, the abuse caused her to have “strange feelings about sex.” When something we know

⁹ Though not adopted as an “official” diagnosis by the American Psychiatric Association until 1980, the type of psychological trauma described by the Post-Traumatic Stress Disorder diagnosis was observed in soldiers who fought in World War I and World War II. See Judith Herman (1992) for a more thorough description of the evolution of this diagnosis.
is “bad” starts to feel good, how does that leave us feeling about ourselves? Researchers (Briere, 1992; Courtois, 1999; Deblinger, Mannarino, Cohen, & Steer, 2006) have documented how, in situations such as these, the victim is not only confused by the “good” feelings associated with the “bad” event, but also will often incorporate feelings of being a “bad” or “terrible” person for having these feelings. When this type of experience happens to a child, these feelings of being “a bad person” become part of the identity formation process (Herman, 1992a).

**Not Being Believed**

The experience that Quintessa, a 44 year old African American woman, describes, illustrates another aspect of sexual abuse and sexual assault which leaves deep scars. This is the experience of not being believed when one reports the abuse experience to a parent or someone who is supposed to protect you.

**I:** Okay. And… you said growing up, your father wasn’t in the house?

**R:** No. I used to go to his house where he used to molest me. And then when I didn’t wanna go back, my mother still sent me back.

**I:** She did?

**R:** Mmhmm. And I told her, but she didn’t believe me.

**I:** She didn’t believe that he was molesting you?

**R:** Yeah. She did not believe that…

**I:** So the abuse… the sexual abuse with your father went on then for awhile?
R: Yeah, until I was like 19. Then I told my sister [name], and she--we beat him up...She didn’t like that. She’s older. ‘Cause she didn’t know why I didn’t wanna go with my father. And one day we was in a car with my father, and he was like, “[Quintessa], go to your room. I’ll be there in a minute.” And [my sister] picked up, somehow, somethin’ wasn’t right.

I: Yeah.

R: And then when she asked me, I just bust out cryin’, then I told her. Then she picked up a lamp and started bustin’ him upside his head. And I just picked up a stick--his cane--and started beatin’ him with it. And then we left and we went home and my mother was like, “What y’all doin’ home?” [My sister] told her, and she’s like, “Oh, boy. We’re gonna call the cops.” So they call the cops. But I was 19 at the time, and he [her father] was like, he didn’t do it. It was just my word against his.

I:... Okay. And the cops...

R: They didn’t do anything...They said it was my word against his. So I just left it alone and never went back.

Quintessa attempted for years to have her mother protect her from her father’s ongoing sexual abuse, but to no avail. Her mother refused to believe what Quintessa was telling her and so forced her to continue the visits with her father. The fact that Quintessa’s mother was an alcoholic and very physically abusive to Quintessa must have made the task of trying to convince her mother that she needed protection that much more difficult. The sense one gets as Quintessa describes the ongoing nature of the abuse is of a child/adolescent who has resigned herself to knowing that she will have to find a way to endure her
father’s abuse because no one will help her. Finally, when her much older sister who did not live in the household asks Quintessa what is going on, Quintessa “bust[s] out cryin” because finally someone is coming to her aid. Compounding the harm of enduring years of abuse and being unable to get anyone to help is the reaction of the police when Quintessa accuses her father of sexual assault. “It’s your word against his,” they tell her and they, too, do nothing.

**Impacts of Experiencing Violence**

Researchers continue to identify the negative and harmful effects suffered by those who have been victimized by or witness to violence in their lives (Dube, Anda, Whitfield, Brown, Felitti, Dong, 2005; Fairbank, Putnam, & Harris, 2007; Herman, 1992a, 1992b). The effects of experiencing violence directly (as a victim) or indirectly (as a witness) are particularly acute for children (Groves, 2002). The after effects of violent experiences are not only short-term, but often are long-term as well. They include psychological, social and environmental impacts, many of which can produce changes in an individual’s sense of her/himself, as well as changes in how one perceives the world around her/him. (Herman, 1992a).

Among women who have been the victims of violence, the psychological after effects experienced by many include depression, anxiety, self-doubt, self-blame, low self-esteem, feelings of worthlessness, a foreshortened sense of one’s
future and emotional development “frozen” at the age of the traumatic experience. (Roesler, & McKenzie, 1994; Stuewig, & McCloskey, 2005). These psychological after effects are often expressed behaviorally in actions such as sexual promiscuity, drug and alcohol abuse, suicidal thoughts and actions and other self-injurious behaviors (Dube, Anda, Felitti, Chapman, Williamson, & Giles, 2001; Dube, Felitti, Dong, Chapman, Giles & Anda, 2003; Russ, Shearin, Clarkin, Harrison, & Hull, 1993).

The social impacts experienced as a result of violent victimization include difficulty trusting others, difficulty forming relationships, etc. (Hermann, 1998) The environmental impacts experienced by victims of violence center around one’s view of the world. Most individuals who have experienced some sort of violence report that they can never view the world in the same way again. The world no longer is seen as a “safe place,” but now is viewed as a place where danger lurks, where one must be ever vigilant to protect oneself from harm (Groves, 2002)

**Violence and Trauma: Contraindications for Positive Human Development**

In contrast to the experiences of abuse and violence described by the women in this study, we need only look as far as human development research to understand what infants and children need from their caregiver(s) and from their
environment, not only to survive, but to grow and to thrive. These elements include love, nurturing, acceptance, unconditional positive regard and trust in one’s caretaker(s) to provide for the child’s basic needs and to protect the child from harm (Ashford, LeCroy, & Lortie, 2006). Humanist psychologist Abraham Maslow (1943, 1970, 1971) reminds us that there are two levels of needs which must be met before one is able to focus on the need for love and belonging. According to Maslow, the most basic human needs which must be met before all others are those things we all need for survival. These physiological needs include things such as the need for oxygen, for water, food, warmth and for sleep. According to Maslow’s schema, only when one’s lower level needs are met can one focus on meeting the next level of needs. When a person is worried about her/his basic survival, for example, having sufficient food, water and adequate shelter, s/he cannot focus on or devote resources to meeting any other needs until these needs are met.

At the point when an individual has secured what is needed for basic survival, Maslow’s theory tells us that s/he can then begin to think about providing for those needs having to do with safety, security and protection. According to Maslow’s theory, it is only when lower-level needs are met that one can focus on meeting needs at the next level. Thus, according to Maslow’s Hierarchy of Needs, the need for love, acceptance and belonging can only be attended to after one has those things needed for basic survival and has been able
to provide those things necessary to feel safe and secure (Maslow, 1943, 1970, 1971).

The reality for many formerly incarcerated women is that they have grown up in families barely able to meet more than their basic survival needs. Research has demonstrated that female offenders come disproportionately from families living on the economic and social margins (Steffensmeier & Allan, 1996). A Bureau of Justice Statistics report profiling jail inmates in 2002 indicates that 56% grew up in single parent households or were raised by a guardian or a non-relative (James, 2004). 31% reported that their primary caretaker abused alcohol or drugs (James, 2004). 46% of jail inmates reported having a family member who had been incarcerated (James, 2004). 55% of women in jail indicated experiences of physical and/or sexual abuse prior to their most recent incarceration (James, 2004). 45% reported experiencing physical abuse, while 36% indicated they had been sexually abused. 20% of these women reported experiences of abuse prior to age 18 (James, 2004). These are truly families under stress.

The result of growing up in a severely stressed or dysfunctional family for many women with histories of incarceration is that they grew up in the care of and dependent upon adults who, at best, did not protect them from harm. One of the significantly developmentally disruptive “messages” of victimization is that the world is not a safe place. Furthermore, if one’s victimizer is a family member, then the feeling of living in an unsafe environment is exacerbated: it is not only
the world at large which is unsafe, but it is also one’s own world which is unsafe. Being abused either sexually or physically by a family member instills in a child a constant sense of fear and anxiety about her/his ongoing safety and fear and apprehension about who will protect her/him. When the abuser is a person who is the child’s primary caretaker or parent, the child’s sense of being able to stay safe from harm is shattered (Freyd. 2005, 2008; Janoff-Bulman, 1992). When the child’s parent or primary caretaker knows of the abuse and does nothing to stop it or when the parent or caretaker learns of the abuse and does nothing to protect the child from further abuse, the child is devastated (Freyd. 2005, 2008; Janoff-Bulman, 1992).

We saw previously in this chapter that both Renata and Quintessa described being sexually abused by a family member and no one paid any attention when they tried to tell others about the abuse. In both cases, the abuse went on for years, leaving each feeling helpless and totally at the mercy of her abuser. In Renata’s case, she finally decides to take matters into her own hands when she realizes that there was no one else who would protect her. The result, as we saw, was the commission of murder in order to end the abuse. Quintessa’s emotional reaction is different from Renata’s. She is figuratively “beaten down” by the years of abuse and “abandonment” by her mother and so has to find a way to accept that “this is just the way it is.”
Latoya, a forty-three year old African American woman described a similarly horrific situation of non-protection:

R: I blame my mom for a lot of things that went wrong in my life, you know, I uhm I really started, I really hated her at the age of 12, when she allowed her brother to come home from prison and live with us, and uhm he just decided to rape me, and for her not to do nothing about it, and tell me if I tell, she would kill me.
I: She would kill you, that’s what she said?
R: Yea, and than uhm 2 weeks after I came home from the Hospital, they had to fly in a specialist from John Hopkins Hospital to fix me.
I: You kidding, do you mind if I asked like what happened?
R: He ripped me up so bad inside, they ended up telling my mom that I wouldn't never have kids, and I know it was the grace of God that I have kids, you know?
I: Yea, right, right.
R: And uh, for her not to believe me at first, and then uhm, that was a hurtful thing, you know, you’re my mom, you know?
I: Right exactly your mom, yeah.
R: Then when uhm, it finally came that time like 2 o'clock that morning, that uhm, he did it, then she was like don't tell, if they asked you who did it, you don’t know, if they black, white, tall or short, fat you don’t know, but I do know she said, if you tell I'm gonna kill you.
I: Ohh, my God Van, Huh, uhm.
R: And so in the hospital they asked my mom did she feel I need therapy, she told them no she'll get over it.
I: Just like that you'll just get over it right?
R: And I didn't…

As Latoya describes, not only did her mother fail to protect her from a violent
sexual assault by her uncle, she also did not believe Latoya when she told her mother that her uncle was the one who raped her. Then, when her mother realizes that Latoya has been telling her the truth about being raped by her uncle, her mother threatens Latoya to make sure that she does not disclose any information which would implicate her uncle. She will not even let Latoya talk to a therapist. Does she believe, as she stated, that Latoya “will get over it,” or is this also an act to ensure that no one will identify her (the mother’s) brother as the rapist? Latoya’s experience of these events is that her mother cared very little about what she had just gone through or the impact of this brutal assault on her daughter (“She’ll get over it.”) In Latoya’s eyes, the only thing her mother cared about was protecting her brother from being charged with rape.

As Latoya describes, this horrific experience was a turning point for her: this is when she began to hate her mother for her betrayal and abandonment of her. The irony is that in spite of her mother’s failure to protect her from her uncle and her mother’s betrayal of her after the attack, Latoya realizes how much of her life she has spent trying to please her mother and to win her favor. Here is how Latoya describes her efforts:

**R:** Out of 8 kids, it’s only me and my brother that she really mistreated and…
**I:** What kinds of things did she do to you?
**R:** Oh, God, whatever she had in her hand, I got hit with it. It wasn’t a day that went by that I didn’t get beat. Whenever she was home, she was drinking and she had a way with words that really hurt too,
you know?
R: Being told I hate you so much and I wish you were dead…and it just was like I wanted my mom to accept me. I didn’t care about anybody else…
I: But she never did?
R: No.

All Latoya ever wanted was for her mother to accept her. Instead, what she got over and over were words and actions attesting to her mother’s total lack of caring and concern for her and her well-being.

**Verbal and Emotional Abuse Experiences of the Women in the Study**

Like Latoya, many of the women interviewed for this study talked about experiencing verbal and emotionally abusive treatment growing up. Most often, the perpetrator of this type of abuse was a parent or primary caretaker. The impact of verbal and/or emotional abuse on a child can be devastating, often as devastating or more devastating than acts of physical assault (Claussen & Crittenden, 1991; Hagele, 2005; Kaplan, Pelcovitz, & Labruna, 1999). For unlike those instances of abuse where a child feels unprotected or betrayed by a parent and is left to attribute her/his own meaning to these events, with verbal and emotional abuse there is no “gray area.” When a parent or caretaker demeans a child or tells the child that s/he is “bad” or “stupid” or should never have been born, there is no question about the meaning of the words. The child understands very clearly what the parent thinks of her/him. When a parent or caretaker singles
out a child for abusive treatment and does not inflict this same treatment on the other children, the child understands that the abusive treatment must be related to who s/he is. When verbal or emotional abuse is coupled with physical abuse, the message about the child’s innate “badness” is further reinforced. This type of abuse wounds the child very deeply, for what is being attacked is the very essence of the child’s being.

Sharell, a thirty year old African-American woman with seven children experienced just such a childhood. She describes growing up in her household as growing up in “a hell-hole.” Her mother was an alcoholic who was always drunk, her father was a “crackhead” and her stepfather, with whom she grew up, was also an alcoholic who regularly physically abused her mother. Sharell describes always being afraid of her mother because she never knew when she was going to “lash out and hit and curse.” In discussing what it was like for her growing up in this family, Sharell stated, “I’m the black sheep anyway, it seem like.” She, out of all her siblings, was the one targeted by her mother for abusive treatment. “It’s like she didn’t really go and hit them, she used to always hit me.” Sharell believes the abuse she suffered at the hands of her mother was because she looks just like her father, the very same man who at one point had tried to kill her mother:

You know, yeah, he tried to kill her. And I’m a spittin’ image of my dad. And she used to just beat me, I mean, and used to let my family members touch
[abuse] me. And she said it was my fault and stuff. And for a long time, I used to believe it was my fault till I got into [a program] and they told me it wasn’t my fault.

So, Sharell grows up believing that the physical abuse she suffered at the hands of her mother and the sexual abuse she suffered at the hands of other family members was her own fault. She was told that it was her behaviors, the behaviors of a girl who was the “black sheep” that caused the ongoing abuse she experienced. Not surprisingly, Sharell began to live up to her label. She began drinking and going to school drunk. She describes herself as an alcoholic before she reached adolescence. By age 14 she was using cocaine. She tried to commit suicide which led to numerous psychiatric hospitalizations. She ran away from home. Eventually Sharell was placed in residential treatment where she describes being happy. However, each time she was released back home; she would try again to commit suicide. Home remained the “hell-hole” it had always been.

Summary

The interviews with the twenty women who participated in this study indicate in very graphic fashion the extent, the severity and the ongoing nature of the violence that characterized their lives beginning in childhood. Just as alarming is the degree to which the violence was accepted as “just the way things are.” In the next two chapters, I will show how these early episodes of physical, sexual and
emotional violence continue to impact the lives of these women today and how these experiences of violent victimization and abuse have systematically undermined the ability of the women to experience themselves as “worthy” human beings.
CHAPTER 4
RESULTS: “IN THE LIFE”

R: It’s like I said, me coming back and forth to jail, me having a record…it all stems from me getting high. Even back in the early days, you understand what I’m saying? My scheming, everything to some end was to have money for cocaine. I: So it wasn’t about committing crimes for the hell of it or because whatever?
R: No, it was to get money so I could be popular and buy cocaine…It was to show off and buy cocaine.

_Marion, a 40 year old African-American woman_

I: Tell me a little bit about that, about that lifestyle. R: … it was just this group of people that seemed to always have loads and loads of money. You know what I’m saying? They pinched [wallets] turning tricks. And, uh, the players…doing just about any—everything. You know, playin’ card games, short and long. Uh… boosting. You know what I’m saying? Just a whole world of criminal activity was played before me. And I was mesmerized. ‘Cause even now, you know, I was brought up having everything. Now here’s a way for me to get everything for myself.

_Earline, a 45 year old African-American woman_

R: I got grown on the streets, well, got myself in that situation, but I learned the hard way…And a lot of fucked up shit happen, you know, and that’s when I grew up. I went from being a fucking teenager to fucking being an adult in about 10 minutes out here.

_Bonnie, a 27 year old Caucasian woman_
R: I was popular in school. I loved school. Very scholastic. Um, but that wasn’t enough, okay. Because after 3 o’clock when I had to leave school, there was my real life. And there was nothing in it. I had no role models whatsoever. Nothin’. I was never taught how to live. I was never taught how to be productive, how to be responsible. I was never taught how to be a lady, how to be a mother, how to be a friend. I wasn’t taught anything. I was like fending for myself. And I was like a flag flapping in the wind. I was just, it was just a matter of time before someone came along and it happened to be a pimp, okay.

Neisha, a 42 year old Bi-racial woman

Introduction and Overview

As previously delineated, the major finding of this study is the ubiquity and severity of the violence experienced by women who have histories of incarceration and, I argue, the centrality of the aftereffects of these experiences of violence throughout the life course of these women. This finding is particularly relevant to the issue of recidivism, especially as it relates to the formulation of policies and programs to assist formerly incarcerated women as they reenter the community.

In the previous chapter, I described the ways in which violence permeated the childhood/growing up experiences of nearly every woman who participated in this study. The severity and horror of what many of the women described certainly implies the question, “How could anyone survive these experiences unscathed?” For many of the women participating in this study, these early experiences of
violence were often just a prelude to what was to come, that is, lives filled with more violence, more harm and more degradation. In this chapter, I turn to the time in their lives when the women interviewed began to get involved in criminal activity. The lens through which I examine this period of their lives continues to be the subjective and objective impact of violence on their sense of themselves and on their sense of the world around them. Specifically, I examine the ways their violence-filled lives continue to create the sense of a life from which there is no exit\textsuperscript{10}, a life of continued dehumanization, degradation, dashed hopes and dreams.

**Women’s Pathways to Prison**

There are numerous pathways to prison for women who end up incarcerated. Some start committing crimes to support a drug habit (Owen, 1998; Anglin & Hser, 1987) Others see a criminal lifestyle as glamorous and exciting, a way to have “the things” they want and may never have had. Others are exposed to criminal activity through family members or friends. Some women join gangs and this becomes their entre into the world of crime. Others are lured into criminal activity by those who prey on vulnerable young women. However, no

\textsuperscript{10} See Freire, Pedagogy of the Oppressed, for a more complete discussion of the concept of living in a world from which the oppressed perceive there to be no exit.
matter what one’s path into criminal activity, there is one thing that is almost surely guaranteed, that is, that one’s life will be touched, if not severely impacted by violence.

The quotes from Marion, Earline, Neisha and Bonnie, which begin this chapter, illustrate some of the ways the women interviewed for this study got involved “in the life” and were immediately affected by its harshness and brutality. For Marion, getting involved in drugs was, she thought, a way to gain popularity. If she had cocaine, she would be seen as “cool” (check this) and as someone others would want to be with. Marion had no idea how much her drug involvement would take over her life.

Earline’s story is somewhat similar to Marion’s, although what “mesmerized” her was what she perceived as the glamour of the street life. There was lots of action, everyone seemed to have plenty of money and there seemed to be no end to the ways that people could devise to get the money and things they wanted. While drugs were also a part of the lure for Earline, what really “hooked her” was her belief that participating in a criminal lifestyle would allow her to continue to have all of the material things she had always had. What she did not count on was the degree of violence that came along with all of that perceived action, excitement and glamour.

Neisha’s experience, as seen in the quote above, is somewhat different. She was a perfect target for anyone looking to prey upon vulnerable young women.
As she describes, she was a young woman who felt lost and very alone. Her childhood and years growing up were spent in a series of foster homes where she experienced multiple episodes of abuse and neglect. Unlike many of the other women interviewed, she liked school and did well. However, as she explains, once the school day ended and she was at home, she was ignored and on her own. Her description of her situation is so telling: she was like “a flag flapping in the wind,” a young woman, uncared for and alone, who ultimately responds to the strongest “force” in her immediate environment. Clearly, she was an easy target to be preyed upon by anyone who showed an interest in her. Unfortunately, the person who came along happened to be a pimp.

Bonnie’s story illustrates an experience common to many women choosing or lured into criminal activity. As her quote at the beginning of the chapter illustrates, Bonnie learned very quickly how dangerous life on the streets can be, particularly for women. As she states, if you want to survive in this environment, you grow up very quickly. Fear, threats of physical and sexual assault and near-death encounters are what characterized her experience and are what characterize the day–to–day experiences of most women living life on the street. Many women, in an attempt to survive the harshness of the streets and the threat of harm, hook up with men who promise to protect and look out for them. Unfortunately, women often find themselves brutalized and exploited by these very same men.
Violence and Criminal Activity

As the data from this study show, violence impacts and is interwoven in the lives of women involved in criminal activity in many ways. In the previous chapter, I identified examples of the types of physical, sexual and emotional abuse experienced by many of the women interviewed in their families of origin. In this chapter, I will discuss the ways in which the women in this study continued to be affected by violence in their adult lives.

The findings reveal four ways that violence continued to affect the lives of the women I interviewed: through prostitution, drug use and sales, abusive intimate relationships and the loss of family members to violence. It is important to remember that my objective is not to prove the obvious, that is, that engaging in criminal activity is dangerous and carries a risk of violence. Rather, the argument I am making is that for the women in this study, their earlier experiences of violence and the lasting effects of those experiences, coupled with continuing experiences of violence in their adult lives, has served to create a sense for them of a life from which there is no exit. They continue to be victimized not only by the abusive individuals in their lives, but also by the intersection of racism, sexism and classism which creates and supports an environment in which those with the least power are preyed upon by those with more.

Prostitution
Neisha, a 42 year old biracial woman was, as she states, an easy target for someone wanting to lure her into the world of prostitution. Abandoned at birth and never adopted, Neisha grew up in a series of foster homes where she was alternately abused and neglected. The thing Neisha craved the most was a home and a family where she would be cared for and cared about, people with whom she could forge a connection. Unfortunately, her experience with foster care did not afford her this opportunity. By the time she was in high school, Neisha was living in her eighth foster home, having been removed from the seven previous placements because of the abuse and/or neglect experienced by her and the other children placed in these homes. It was from this eighth and last home that Neisha was lured into the world of criminal activity.

At the age of 17, Neisha found herself in the home of a foster mother whom she describes as “detached” and “uninterested” in her. This disinterest/neglect on the part of her foster mother was so pronounced that the first time Neisha “disappeared” for an entire weekend, her foster mother never even inquired where she’d been, even though Neisha returned bearing expensive gifts for her foster mother. For Neisha, this action merely reinforced her feeling that she was “just a paycheck” to this woman. It is not surprising, then, that Neisha ran away from this foster home and ran, literally and figuratively, into the arms of the only people whom she felt cared about her, her “older gentleman” friend and his “other girls:”
R: I got lost to the streets when I was 17. I ran away from the foster home. That was the beginning for me of the whole roller coaster ride...
I: What made you decide that you were going to run away?
R: It wasn’t a decision.
I: It wasn’t a decision?
R: It was an impulse and looking for love, looking for acceptance.

What Neisha succumbed to was the attention paid to her by a 32 year old pimp who had no trouble winning the affections of this emotionally neglected and attention-starved 17 year old. As Neisha states, “I must have had a sign on me [that said] ‘Available / Take Me.’” Here is how she describes her initial feelings about her “new” life:

R: Now I’m feeling connected with the other girls. And they’re all part of breakin’ you in. They made me feel like I had a family, ya know what I’m saying? They made me feel like I belonged somewhere. And he made me feel love. He was older. Then of course the flashy things, the cars, the jewelry. Ya know what I’m saying…so that roped me in.

At first Neisha was dancing in clubs, places she remembers as “dark, fast-paced and flashy.” It wasn’t long before she was caught up in the excitement of the money, the trips, the glitz and the glamour. But she had no idea what she was getting herself into. As she states, all she knew was that she had a new family, a
man whom she thought loved her and, as she says, “I [am] looking good and I’m feeling good.”

Gradually, her glamorous new life began to change and Neisha discovered that the abuse she’d been inured to as a child and a teenager now was also part of her daily life as an adult. Neisha was now on the streets working as a prostitute and getting arrested on a regular basis for prostitution/loitering. Soon the arrests included drug charges. Here is how she describes what was happening to her:

I: How did you end up in jail the first time?
R: It was mostly, it was prostitution, loitering, ya know. And at the beginning, there were no drug charges. But it progressed to that. I was wanting to change what I was doing because, ya know, that line of work was very painful because of my sexual abuse and my past. So I felt abuse over and over and over, day in and day out, all day long. All night long. Ya know, it was ongoing. And, and it just widened the wounds. Deepened the pain.

So, in short order, Neisha discovered that the abuse, the violence and the pain she thought she’d left behind when she ran away from that last foster home, had, ironically, followed her into adult life and become a part of her daily existence.

In addition, as a way of coping with the constant emotional pain of being abused, she developed a drug habit, something she hadn’t had before:

R: And that [the emotional pain of abuse] kept me using because the drugs they helped me, it helped me to cope with what I was doing, where I was going, nobody in my
life. The loneliness was, it was rampant in my life. And I started the jail thing, like I said, [at] 17.

As Neisha’s story so poignantly illustrates, the residual effects of the abuse and neglect she experienced in childhood and as a young adult, left her vulnerable to further exploitation and unable to cope emotionally or psychologically with what her life had become. Moreover, her previous victimization served to magnify the trauma of her adult exploitation.

Neisha’s experiences are not unique. For many women, prostitution and drugs become their entre into the criminal justice system and the beginning of a revolving door in and out of jail (McClanahan, McClelland, Abram, & Teplin, 1999; Potterat, Rothenberg, Muth, Darrow, & Phillips-Plummer, 1998). Researchers have documented the ways in which pimps often prey upon vulnerable, “lost” young women, plying them with gifts, money, drugs and most seductively, promises of love and a “family” that cares about them (Dalla, 2006; O’Connor, & Healy, 2006). In short order, most of these women find themselves on the street prostituting to earn money for their “man.” It usually is not too long before a woman’s first arrest. For Neisha, this happened in a matter of months. And sadly for many of these young women, it also is not long before the residue of their earlier experiences of victimization gets triggered and creates an ongoing, daily scenario of re-traumatization.
Drugs

None of the women I interviewed expressed an intention of becoming addicted to drugs. Nonetheless, drug use that began for many of these women as a way to “fit in,” a means to earn money or a way to detach from the pain of a life filled with abuse and violence became, for most, a cycle of addiction, dependence and criminal activity from which there was no obvious exit.

Many women with histories of incarceration report that their earliest arrests involved a drug charge, usually possession of a controlled substance and/or drug paraphernalia. There are many women, however, whose initial involvement in the world of drugs began long before their first arrest. Some women learned at an early age that there was money to be made by helping out the drug dealers. For example, some reported that it is not uncommon for dealers to use innocent looking children to hold their stash of drugs, thereby avoiding the threat of a lengthy prison sentence for possession/intent to sell a large amount of drugs. Here is how Asa, a 44 year old African American, described discovering that her youngest sister was making money holding drugs:

R: You know, she [her sister] grew up really fast into the drug life...[S]he was young, she used to sneak out and just do things and come back with a lot of money. Because she was such a tomboy, the guys loved her. She had that talent of making money, you know what I’m saying?
I: So she just went right down that path and got into it before you did?
R: Yes, oh yeah, and getting high, too, smoking weed...I caught her one time coming down the steps in my building, I smelled it [the marijuana]...and I crept down the stairs and she’s in the back smoking weed and I caught her...And I said, “You little rat, what are you doing back here? I’m gonna tell Ma on you.” [And she said], “Please, don’t.” So I say, “What you got, got some money for me?” Yeah, I used to bribe her. She’d come out with all of this money and I’d say, “Where did you get this from?”...
R: I used to say to her, “What are you doing? Are you gonna spend [all] that on weed?” And she told me that she goes uptown and she holds dope for these guys.
I: So these guys do that so they are not going to get caught with the drugs on them?
R: Right, right, she’s young, they [anyone looking for the drugs] wouldn’t even mess with her, they wouldn’t even know, you know what I’m saying, she’s a kid...

While Asa, herself, was not working for these drug dealers, she indeed was benefitting from her sister’s involvement. As Asa said, “[M]y mom, she’s thinking [my sister] is going out riding with the guys, that they’re taking her riding...and that they’re buying her things, all types of nice things...Yeah, I didn’t tell on her, I didn’t tell [because] she was paying me off...” So, Asa, had figured out a way to accrue secondary gain from her sister’s involvement with drug dealing.
Being involved with drugs was not a new or unknown situation for Asa or any of her siblings. Asa’s father was a major drug dealer who used the proceeds of his criminal activity to provide his family with a fairly lavish lifestyle, a lifestyle that Asa wished to continue:

R: I guess I had a money addiction because of all the things that we had (in family of origin) growing up. My father was into drugs, selling, etc., and he always had lots of money. We had nice cars, nice things, anything we wanted. I remember going to school when I was in the 3rd grade with $30.00 in my pocket—that was a lot of money for a 3rd grader. We never brought lunch to school. My father would just tell us to take money out of his drawer. He had big stacks of money so we just took some. We never ate in school. We went out and got pizza or some other food for lunch. I got my father in trouble because the teachers wanted to know where all of this money was coming from.

R: We had a really good life—no abuse or anything like that—and there was plenty of money.

I: What turned things around for you? How did you end up getting arrested?

R: It was drugs—I was used to all of the things that we had because of my father—the cars and everything—and I didn’t want to give it up.

Participating in the drug trade seemed to be a reasonable choice for Asa, a choice role modeled for her by her father. For Asa, growing up in her household with her mother, father and siblings, life was good. She learned at an early age
that because of her father’s drug dealing, there was plenty of money to acquire fancy things and, as she says, they could have anything they wanted. Asa also learned that the money her father brought into the household and shared freely with his children allowed Asa and her siblings to win favor and status among their schoolmates.

When Asa was age 11, everything changed for the family. Asa’s father was shot and killed in their home by two intruders, a crime Asa assumes was related to his drug dealing business. Asa and one of her sisters were home at the time and although they were not eyewitnesses to the murder, they were severely traumatized nonetheless. Less than a year later, when Asa was twelve, she moved in with her grandmother who lived in a different part of the city and she joined a gang.

When Asa’s father was murdered, life for her, her siblings and her mother was turned upside down. According to Asa, her father’s death caused her mother to have a nervous breakdown. Her mother could not deal with the loss of her husband and started to drink heavily. She was in and out of detox programs, but her drinking continued. The family’s economic situation changed dramatically. All of the “things” they had grown used to having and had come to take for granted disappeared. The family went from prosperous living to a subsistence level existence. Everything was different, including Asa’s behavior. Within a
year, she had moved out of her mother’s home and found her “new home,” albeit one characterized by domination and violence, in a gang in the South Bronx.

For Earline, a 45 year old African American woman, being “in the life” was more than easy money and the things that this money could buy: being a part of the drug life and life on the street was a chance “to be somebody.” Earline had spent her adolescence trying to prove that she was someone to be reckoned with. Before the end of her time in junior high school, she had been banned from every school in her district for fighting. According to Earline, it was “exciting” to have a reputation as a fighter, as a person not to be messed with.

Adding fuel to Earline’s desire to be regarded as “someone,” was her belief that because of her parents’ socio-economic status, she was superior to her peers. Earline states, “I thought I was better than everybody. That got me into trouble”. Most of her classmates were from the projects and, as she says, “We didn’t do projects, you know what I’m saying?”

Unlike many women who find their way into the criminal justice system, Earline grew up in a two income family in what appeared to be a fairly stable home. Both her mother and stepfather worked as social workers. Their economic status, according to Earline, was neither rich, nor poor, but was a lifestyle that enabled Earline to have most everything she wanted, a situation that clearly set her apart from many of her classmates. Earline describes developing an “air of
grandiosity,” something that made her vulnerable to the apparent glamour of the
criminal lifestyle.

Earline was eventually sent to a school in Harlem set up for kids whose
emotional and behavioral problems kept them out of other schools. She lasted
only through the 10th grade, but she did succeed in getting her General Education
Diploma. In addition, as Earline reports, it was here that she had her first
introduction to drugs and her first introduction to street life. At age 17, Earline
got a job as a bartender and it was then that she started experimenting with
cocaine. Here is how she describes this time in her life:

**R:** So I had just started experimenting. Everybody had it (cocaine). We used to drink champagne,
spirits and everybody had an experience with coke. So being a bartender, you know, if somebody
asked me to take a sniff, I would do that. I would drink, you know, I would do that… Once I got on
coke, that was it. I really didn’t care for anything else. No marijuana, no drinking. I just wanted my
coke. And it’s the thing, you know, all the ritzy people did. You know, all the players and pimps
and hustlers, you know what I’m sayin’…Everybody that was somebody was using coke…[and] I definitely wanted to be somebody…

It wasn’t long before Earline was so involved in drugs that she stopped
showing up at the bar for work. As she says, “The job was a big joke to me,
anyway. It was just a way for me to meet people. I know it was illegal, you know
what I’m saying, to have me work there. I wasn’t 18.”
Earline had had her first taste of Harlem and street life. Here is how she described her mesmerization: “The glitter, the glamour and, you know what I’m sayin’, the diamond rings, the fur coats, the Chanel boots…[I saw that] all that could be obtained with illegal activities, so at that time, I was gone.”

Interestingly, what Earline was referring to when she described herself as “gone” was letting go of any thoughts of committing herself to the pursuit of a legitimate (legal) career. She, like many of the women interviewed for this study, had a childhood dream about what she would do when she grew up. Earline’s dream had always been to be an airline stewardess, a dream that no longer seemed important once she had her first taste of what she perceived to be the glamour and excitement of life in the street. Here is how Earline describes the start of her participation in life in the streets and criminal activity:

R: First, I started out just being an escort for different older men, you know what I’m sayin’? His showpiece, you know, sittin’ around at the bar, “my babies,” you know…ordering anything you want. [Him saying], “Look, this is what I bought for you…After awhile, I think what I did, I just had too many “old friends,” not knowin’ that…eventually it would get around, so, you know, I kinda got a label for myself at that particular point.
I: What was the label?
R: I was a “ho,” you know what I’m saying?
I: Because you had these different older men that you were with?
R: Exactly. So, now I’m starting to attract attention, attention from the not-so-nice men. You know, the ones that say, “This is what I’m gonna do for you, but this is what you’re gonna do for me.”
And I was never willing to go on the street and sell that for a man, you know what I’m sayin?’” So, I started sellin’ drugs.

Earline very quickly learned about the reality of life in the street. She learned that behind the flashy cars, money and jewelry used to lure young women into the lifestyle were men with expectations, expectations that these women would earn their keep through prostitution and selling drugs. Part and parcel of these activities was experiencing violence, as a victim, as a perpetrator and/or as a witness to violence done to others. For Earline, who by age 21 was freebasing cocaine, the violence connected with the drug trade led her on several occasions almost to be killed. Here is how she relates one instance when she had just come out of jail or a drug rehab program (she can’t remember which) and had her first introduction to crack cocaine:

R: So I smoked it [crack] and I really liked it. You know what I’m sayin’? It was better than any cocaine I ever had. So I wanted to know where she [the woman who sold it to her] got it from. And I went down there and the guy that was the manager of the spot took a liking to me. So I stayed down there with him for a couple days, you know, [and then] I really had to go home...[When I came back, the manager of the spot was gone but] the owner [of the spot] came and said, “Who is this girl?” To make a long story short, this manager guy had stolen like maybe $10,000 worth of stuff from these people.
People told the owner of the spot that Earline was the last person to see the missing manager, so they handcuffed her to a chair and told her that they were going to kill her:

**R:** No, they were gonna shoot me…so I remember asking him, Listen, if you’re gonna kill me, can I please smoke my stuff before—you know—let me go high.” So they laughed at that. They thought because I couldn’t tell ‘em anything, I didn’t know where he was at…So I remember..he said, “Don’t shoot her now…We gonna wait and see if this [guy] ever come back.

**I:** Did he come back?

**R:** He eventually came back 2 or 3 days later asking for a cigarette…and the only thing I could think of to do was to pick up the ashtray, glass ashtray and hit him in the nether regions. ‘Cause, I mean, you just took $10,000 worth of stuff and just jeopardized my life…now you want a cigarette from me?

According to Earline, this experience was how she started to sell drugs: “So when they killed him [the manager who had stolen their money]—because they did…they gave me his job as the manager of the spot. And this is where it all started. This is where I started selling drugs.”

Earline continued working for them for awhile, but then stopped when the group controlling this drug spot went on a killing spree, randomly murdering people. She knew she risked being arrested if she hung around:

**R:** So…I went up [where] my mother [was living] ‘cause after that situation, all the killing and stuff, I figured, you know, this is…you playin’ hardball. You see what I’m sayin’? And you really just need
to lay low for a little while...Cops are around looking for everybody, they know you’re affiliated with this crew...sooner or later, they gonna bring you in. But they never did.

Earline felt lucky to have avoided either being killed or getting arrested. However, neither of these threats caused her to think about changing her life. In fact, this incident was not the first near death experience for Earline. In her interviews, she described experiencing a number of violent incidents, any one of which could easily have resulted in her death. Here is her account of an incident that occurred when she was in her mid-teens:

**R:** I was 14, 15 years old and I started goin’ with this Jamaican dude. You know, dreadlocks, had an apartment where he sell the reefer through the door, stuff like that. And, I remember I was in the bedroom...and he said to me, “Stay in here because some guys I don’t really trust...” Well, he let them in and they tied his feet with the telephone wire and handcuffed him and shot him in the head. And then they came in the room where I was which was darker. And they took a shot at me and I just fell behind the bed...and I stayed there. So I guess they thought they shot me. But when the police came—I had fled the scene—but they found out I was there ‘cause...I left my identification and stuff there...they came to my house maybe 2 days later and [said] to me, “Listen, we know you were in the apartment...But, [they said] this particular band of thieves...usually doesn’t leave any witnesses...We always find people strung up, execution-style...so consider yourself lucky.”
Earline did consider herself lucky, especially when the police took her back to the apartment to do a reenactment of the crime and they saw the bullet hole in the pillow Earline had been holding. They said to her, “God was definitely with you because there is no way that you did not get hit with that bullet.”

Earline’s drug use continued to put her in harm’s way. She recounted the time when she was sitting on a park bench with another person smoking crack. Suddenly shots were fired and the man sitting next to her had his brains blown out. Earline describes another time when she was in a crack house, went to use the bathroom and while she was in there, everyone else in the house was shot and killed by a rival drug gang:

R:  And when I think about the dangers, sometimes, that I subjected myself to, you know what I’m sayin’…places where they’d come and rob you…rob the place, different coke spots. Just by me going to half of [these]…I was the only one alive [because] nobody come look in the bathroom
I:  So they killed everybody?
R:  Everybody else. Everybody else. Now you have to walk out of this door…You understand what I’m sayin’? You got all this paraphernalia, whatever else you may have on you. And you don’t know if these people that have committed this massacre is still around. You understand what I’m sayin’? Waitin’ for you. It was just tough to get out of there…

Reflecting on how lucky, again, she had been to avoid being killed, Earline stated, “Even after that, I went back to doing the same thing.” This is what she
knew, this is what she did, this was her life. Ironically, as we shall see in the next chapter, it was not the constant danger or the violence that enabled her to think about her life differently. These things were the “givens” of her life. What she did not experience as a “given” was the cycling in and out of jail and prison. For Earline and many of the women in this study, having to find one’s place and establish one’s identity anew during each period of incarceration were what finally wore them down and ultimately allowed them to accept help to change lives that, up until this point, seemed to have no exit.

The “given” for Karla, a 45 year old Caucasian woman, was that she lived every day with the pain of having been sexually abused as a child. When she was age 16, Karla and a friend ran away from their homes in New York and managed to get to Florida. Almost immediately, they were arrested for possession of marijuana and put on probation for two years. Not too long afterwards, Karla and her fellow runaway were befriended by a man who wanted to “turn them out on the street” to prostitute to make money. They refused and subsequently decided to rob this man. They enlisted the help of an older friend and the three committed armed robbery. Karla and her two friends were caught and sentenced. Because Karla and her girlfriend were under age 18, they were sent to a juvenile facility to serve their sentence. Their accomplice, who was 18 years old, was tried as an adult and sentenced to 30 years in prison.
Upon her release, Karla continued living on her own. She got a job waitressing and did well for awhile. She avoided using drugs. However, by age 21, she was married to a hardcore drug user and, at this point, she began to use cocaine. For Karla, drugs helped to numb the physical, psychological and emotional pain she lived with as a result of her childhood abuse. Here is how she describes her drug use with her husband and this numbing process:

**R:** I never used really anything hard until I met him. He was on heroin and then I got into the cocaine and that was…crazy…

**I:** And that hooked you?

**R:** Cocaine? That was my drug of choice, definitely. It would ease out all the pain. Mentally, physically, emotionally. You didn’t feel nothing.

**I:** Do you remember how you were thinking about your life at that time?

**R:** I just more or less lived day-by-day. Because of circumstances that happened when I was a child, I just had a built-in survival kit, I think. And I was gonna survive regardless…I really didn’t worry about tomorrow. I really worried about what was going on right at the moment. I didn’t really look towards the future. You know, I just had to make it through each day.

**I:** What happened to you as a child?

**R:** I was sexually abused by someone in the family.

**I:** Was it something that went on for awhile?

**R:** Yeah.

**I:** Did anybody else know about it?

**R:** Yeah, my older sister. She was being abused, too. And she’s never been in jail. But… she went through other stuff where they had to put her on medication for depression…
Clearly, the residue of Karla’s childhood sexual abuse experiences haunted her daily and impacted her sense of who she was and what life held for her. She reflected on the path her life had taken and wondered about the relationship between surviving childhood sexual abuse and subsequently committing crimes. Drawing on her experience and that of her sister, Karla concludes that childhood abuse does not automatically cause one to commit criminal acts, but having a history of abuse, she believes, does cause some type of psychological or behavioral dysfunction.

There is another after effect of Karla’s abuse that is very telling, that is her foreshortened view of her life and her future: “I didn’t really look towards the future. You know, I just had to make it through each day.” From her description, there is no sense that the future could or would hold something good or positive for her. Indeed, each day was simply to be gotten through. There was no sense of hopefulness that life could be enjoyed or even that her pain could be diminished.

When Karla discovered cocaine, however, she did indeed find a way to numb her ongoing physical and psychic pain. But, this discovery was not without costs, both literally and figuratively. Karla’s reliance on street drugs kept her locked into the necessity of finding ways to financially support her habit which, not surprisingly, kept her locked into a life of criminal activity. By the time she was age 23, she was back in jail again, serving two and a half years for grand theft.
Karla’s was a criminal career that would be marked by many more arrests and time served in prison and jail.

**Abusive Intimate Relationships**

Many women with histories of incarceration also have histories of victimization by abusive intimate partners. The Bureau of Justice Statistics (2004) reports that 61% of women with abuse histories serving time in State prison report having been abused by current or former husbands or boyfriends. Similarly, the statistics for intimate partner violence for women in Federal prison is 66%; for those in local jails, it is 43%; and for those women on probation, the percent of abused women experiencing intimate partner violence is 57% (Harlow, 1999).

For those women who have suffered childhood sexual and/or physical abuse or for those who have grown up witnessing a family member being physically abused, the impact of being in an abusive relationship as an adult can be devastating. Researchers have documented not only the physical harm, but also the psychological and emotional harm experienced by women who are in abusive relationships (Barnett, Miller-Perrin, & Perrin. 2004; West, 2004). After effects can include severe stress and anxiety-related symptoms such as difficulty concentrating, fearfulness and sleep disturbance. Often the sequelae of symptoms is such that a diagnosis of posttraumatic stress disorder (PTSD) is made.
Symptoms of PTSD include re-experiencing the trauma through painful “flashbacks”, a heightened startle response, feelings of numbing and detachment, and difficulty with concentration and memory (Barnett, et al., 2004). When a woman with a history of childhood abuse or exposure to violence finds herself in an abusive intimate relationship as an adult, the possibility of negative psychological and emotional damage is even greater (West, 2004).

For Quintessa, a 44 year old African American woman, dealing with violence was nothing new. Starting at age 12, she was repeatedly sexually abused by her father (see Chapter III: “Growing Up in Hell”). Quintessa’s mother, who was an alcoholic, beat her children regularly with whatever implements she could get her hands on. Here is Quintessa’s description of the type of abuse that went on:

I: In your family growing up, were your mother and father together? Or was it just your mom?
R: No. Just my mom. She was very abusive.
I: She was very abusive?
R: Yeah. She used to drink, and she used to snatch her wig off and come after me because I look like my father.
I: So that used to get her angry?
R: Yeah, it used to really get her angry.
I: Was your mom physically abusive?
R: Yes. Extension cords, ropes… and burnin’ my hands on the fire…My mother was really mean.

One of the ways Quintessa dealt with her mother’s abuse and her drunken rages was to run away from home:
R: Yeah. I used to be a runaway.
I: You did?
R: Yeah, I always ran away. My mom used to beat me with extension cords. She used to put me in the tub, right, and said, “Don’t dry off. Mommy come in to dry you off.” I’d stand up in the tub soaking wet, here go the extension cord. She’d be whoopin’ my ass. And I (had) cuts and bruises everywhere.
I: Why would she be doing that?
R: ‘Cause she be drunk…And she’s violent when she’s drunk.

Quintessa learned early on that violence was a part of everyday life, not only at home, but also with her peers. She describes herself as a quiet kid who was always picked on until, forced by her mother, she had to fight back:

I: Why do you think you got picked on all the time when you were a kid? R: Because I was quiet. I didn’t bother nobody. I was smart. And kids didn’t like that. They used to call me the teacher’s pet.
I: ‘Cause you were smart?
R: Yeah. They used to say, “You the teacher’s pet.” And they used to cut up my clothes, pull my hair out. And I used to go home and get a whoopin’, because I didn’t fight back.
I: And who said that? Your mother?
R: Yeah. She said, “Pick up anything you can, and hit them with it.” But I was too scared. Until one time they came to my house, the girls that was beating me up all the time, they came to my house to beat me up. And I was hiding underneath the mattress. And my mother pulled the mattress out and said, “You gonna get out there, and you gonna fight. And if you don’t win, I’m’a beat your ass.” But I won. ‘Cause of the fear…
I: That’s right, the fear factor…
R: When you have fear, fear kills…Because I almost killed her. I threw her down a flight of steps and everything.
I: The one that came to beat you up?
R: Yeah. And then they made me the leader.

Even though she tried to avoid it, Quintessa’s experiences taught her that learning how to fight and using violence were ways to protect herself from the threat of physical harm and a way to gain respect. She began hanging around with a crowd she describes as “bad” who taught her how to fight and taught her the consequences of using violence:

R: When you have to be out there, you have to fight. You know, it’s every man goes for himself. There are no rules for fightin’. You know, so if I cut somebody, I gotta face goin’ to jail. You know what I’m sayin’? ‘Cause they not gonna let me get away with cuttin’ ‘em, regardless of if they started it or not.
I: And is that something you’ve done?
R: Yes, I have. I used to carry razors in my hair, and I used to carry razors right here, in my mouth… And I spit razors. You know and I’d cut you as fast… before you finished arguin’ with me, you cut. Then I’d run. And then I’d come back and face the charges.

Quintessa was charged with assault, but because she had not yet reached the legal age to be tried as an adult, she was treated as a juvenile offender. Though the record of these charges was sealed by the Court, this would not be Quintessa’s only arrest. By the time she participated in this study, she had been arrested and incarcerated 8 or 9 more times.

By the time Quintessa was 17 years old, she was pregnant with her son. Not surprisingly, the baby’s father was a violent man who used to beat Quintessa.
regularly. He was a drug addict who introduced Quintessa to crack cocaine. Here is how she describes her experience being in a violent intimate relationship:

**R:** I moved out to Staten Island with my baby’s father, and he was doin’ dope.

**I:** He was?

**R:** And he introduced me to crack cocaine, which was called freebase at the time... And I smoked it and fell in love. I fell in love. I started neglectin’ my son, leavin’ him with his aunt and his father. And I ran away, because he was very abusive and I couldn’t take the beatings anymore. And I knew he wasn’t gonna beat his son. So I left him in his care, you know. And he took good care of him. I’m not gonna lie. And he passed away in ’89 from a drug overdose.

**I:** He did?

**R:** Yes. He was evil... He was an evil man. He used to beat me for nothing. Rip off all my clothes in the middle of the street, in the summertime. And you know it was crowded... I was so embarrassed. And then this guy beat him up for me, but it just made it worse for me. Because when we got inside, he was like, “Oh, you got somebody fightin’ your battles, huh? Well take this.” He gave me two black eyes and a busted lip...

**I:** So it sounds like it was pretty constant. Was it every day?

**R:** Yeah. Every day. Yeah. Every day.

**I:** And were you ever hospitalized?

**R:** Yeah, for a cut that I have right here. He cut me.

**I:** Oh, what did he cut you with?

**R:** A box cutter... And then I started goin’ to psych hospitals, because I was depressed... I was very depressed.

So Quintessa, who described herself as a smart and quiet girl growing up, a girl who did not bother anyone, finds her life as a child and as an adult permeated
by violence and abuse. Physically abused by her mother, sexually abused by her father, picked on by her peers, Quintessa becomes inured to the violence in her life. When, as an adult, she finds herself in a relationship with a physically abusive man who beats and humiliates her, she reaches the limits of her resilience and flees the relationship even though it means leaving her child behind. As Quintessa describes, her subsequent bouts with depression start a cycle that will eventually result in more than 30 psychiatric hospitalizations.

**Responding to Violence with Violence**

Women who find themselves in abusive intimate relationships react in a variety of ways. Some, like Quintessa, finally reach a point where they cannot cope anymore, physically, psychologically or emotionally, and are able to muster the strength and resources needed to leave these abusive relationships. Research indicates, however, that many women in abusive intimate relationships are literally and figuratively so beaten down that they are not able to extricate themselves (Felson, Messner, Hoskin, & Deane, G. 2006; Unger, 2004). Many of these women become the most severe casualties of battering relationships. These are among the more than 1200 women killed every year at the hands of batterers. (American Institute on Domestic Violence, 2001). The Bureau of Justice Statistics reports that in the year 2000, 1247 women were killed by an intimate partner (Rennison 20030). Additional research indicates that if an abuser has
access to firearms, the risk of intimate partner homicide is five times greater than situations where there was no access to guns (Campbell, J., Webster, Koziol-McLain, Block, Campbell, D. Curry, Gary, McFarlane, Sachs, Sharps, Ulrich, & Wilt, 2003).

An overwhelming number of studies of women's violence have found that women who are arrested for the use of violence are themselves victims of intimate abuse and are violent in self defense (Dobash & Dobash, 1992; Saunders, 1986, 1988; Hamberger & Potente, 1994; Barnett et al., 1997; Straus, 1999; Dasgupta, 1999). As we shall see from the words of several women in this study, women who violently lash out at their abusive partners often have reached a point where they can no longer cope with their partners’ abusive behavior. Their rage comes pouring out and they now are the aggressors seeking to inflict harm upon their abuser.

Four of the twenty women interviewed for this study talked about fighting back against a boyfriend who was abusing them in an intimate relationship. Sharell, a 30 year old African American woman with seven children, describes succinctly her experience with an abusive boyfriend:

**I:** How many times have you been incarcerated?

**R:** Twice.

**I:** OK. The 1st time, what was the charge?

**R:** Assault.

**I:** Assault. OK. Tell me a little bit about what happened.
R: It was with my ex-boyfriend. He used to abuse me.
I: Oh, physically abuse you?
R: Yeah. And I got sick and tired of it. So I tried to chop his fingers off...And he was bleeding, so they arrested me because I didn’t have no scars on me.

Sharell, a physically imposing woman, had had enough of being physically abused by her boyfriend. One day she decided that she was not going to allow herself to be victimized by him any longer. Taking advantage of her size, she responded to her boyfriend’s abuse by fighting back and inflicting physical harm upon him.

In hearing this story, many of us might secretly be cheering Sharell on, saying to ourselves that her physically abusive boyfriend caused Sharell to respond in a violent manner and he deserves what he gets. However, there are problematic aspects raised by situations like these. First, the law regards Sharell as much at fault for her perpetration of violence as it does her boyfriend. The onus, therefore, is on Sharell to mount a domestic violence defense in order to avoid a conviction for assault. In addition, the larger lesson which gets reinforced for Sharell and all women in physically abusive relationships is that the system that does not seem to care to protect them from violence will nonetheless hold them accountable for violence they may finally resort to in an effort to protect themselves.
Asa, a 44 year old African American woman, also described reaching a point in her relationship with her physically and mentally abusive husband where she reacted violently. When she told her husband that she was leaving him, he provoked an argument which turned violent. Asa stabbed him. He was not seriously hurt. Asa was charged and arrested. She hired an attorney who was able to argue a domestic violence defense so the charge against her was reduced to disorderly conduct.

Carmella, a 44 year old woman who identifies herself as Hispanic, related an incident that occurred when she was a teenager. When she was 15 years old, she had her first relationship. He was someone she met at school, one of the “popular guys.” He was two years older than Carmella and was selling drugs. Carmella describes him as “the sweetest guy” at the beginning of their relationship. However, almost in textbook fashion, he became, over time, very jealous and more and more controlling of everything Carmella did. He became physically abusive. Here is how she describes the day she decided that she had put up with enough abuse:

I: Okay. So tell me what happened when you were 15.
R: I was in a relationship, my first relationship. And he was abusive and he had just beat me up one too many times. And he went in the bedroom, loaded the gun, and I thought he was going to shoot me. And he came out, gave me the gun, and told me that when I hear him call for me, to bring the gun outside to him. And, when he called for me, when I went outside, I didn’t pass him the gun. I just shot him four times.
I: Was he going to shoot you with the gun?
R: No, he had a drug spot. Somebody was going to rob him. I learned
later [that] somebody was going to rob it. So he was watching and when he saw the guys, he called me to bring the gun to him.

**I:** I see. Okay. So, he used to beat you on a regular basis?

**R:** I had nineteen police reports…One of them they had to break the kitchen window to get in, cause he wouldn’t get off of me to answer the door.

**I:** Oh my god, [Name].

**R:** Yeah.

Carmella was arrested and charged with manslaughter. This incident happened in the 1970s, and as Carmella pointed out, at that time there was no self defense law on the books in New York State. Therefore, she could have received a lengthy sentence in a juvenile detention facility. However, because of her age and because of the advocacy of several family members who were on the police force, she was remanded to a psychiatric ward for ten months and then to outpatient counseling to serve out her sentence. Unfortunately, however, this incident was not the last time that Carmella was charged and convicted of a violent crime. A number of years later she was convicted of armed robbery and sentenced to 4 ½ to 9 years at a prison in upstate New York.

Belinda, a 37 year old Native American mother of six children, has a long history of being in abusive intimate relationships. Beginning as a teenager and continuing into her twenties and thirties, Belinda has had a succession of abusive relationships. At age eighteen, Belinda was in an intimate relationship with a man who fathered two of her children, a man she describes as a “biker type person.” According to Belinda, this man was “extremely abusive,” so much so that she
kept winding up in the hospital with her injuries. When she was 23, Belinda got into serious trouble. Tired of years of abuse and, under the influence of alcohol, Belinda stabbed her abusive boyfriend. As a result, she was sentenced to six months in jail.

When Belinda got out of jail, she began a relationship with a man whom she describes as “mentally abusive.” One day she and her mother overheard this man threatening her youngest child. Here is how Belinda described what happened next:

R: And he told my son, ‘If you tell your mother,’ but I couldn’t hear what. But he said, ‘I’ll break your legs and beat you with them.’ And I went in, and told my son to go in with [his grandmother] and I flipped out. Flipped out… Cause I looked at it like this, you could abuse me, but don’t you abuse my children.
I: Right. Right…
R: And he wound up getting stabbed, too… He had hit me in the head with something. Then it had to have…whatever it was, it wasn’t an empty glass, it had to have been something with liquid in it, cause it busted my head wide open.
I: Oh my god.
R: So when he did that, my reaction was to defend myself. And I stabbed him. But I stabbed him pretty bad. And…his guts were hanging out. And so my mother, of course, called the ambulance, which of course is gonna bring the police when they hear stabbing. So they stitched my head up,[and] they took him to the hospital… And I went in, and I had this great, great defense lawyer, cause I was looking at 10 years, and my lawyer said, ‘you would have gotten less time if you killed him.’ But
I didn’t want to kill nobody. I’m not a person who wants to hurt people.

I: It sounds like you were defending yourself.
R: I was and that’s what the defense became…that I was defending myself. There was no drinking involved. Thank god I wasn’t drinking that night.

Belinda was arrested, could not raise the money for bail and so spent three months in jail while awaiting her trial. When her case went to court, the judge sentenced her to a treatment program for abused women. According to Belinda, this was when she learned about “battered woman syndrome.” She credits what she learned in helping her to leave this abusive relationship.

Experiencing the Loss of Family Members to Violence

The discussion so far has identified various ways that the women in this study experienced violence first-hand during the time period they were involved in criminal activity. As I have described, the lives of many of the women interviewed were impacted by violence related to their participation in prostitution, the drug trade and by their victimization in abusive intimate relationships. There is yet another way that many formerly incarcerated women experience violence in their lives, that is, by having a family member die as a result of a violent act. While not perpetrated against the women directly, it is clear from the data in this study that the impact of losing a family member and, in particular, a child to violence is devastating.
In the previous chapter, I described the experiences of Renata and Asa, each of whom experienced the loss of family members to violence. Renata described poignantly the death of all of her older brothers to violence in the streets, while Asa spoke about the murder of her father in their apartment while she and her sister were home. By their telling, these were horrifying and horrible experiences.

There are three women interviewed for this study who experienced the devastating loss of children to violence. Each of these women had a son who was killed as a teenager or young adult. Each woman spoke of the enormity of her loss and of a grieving process that never ends.

Quintessa’s son, a 22 year old musician, was shot and killed in 2002 at the airport as he was travelling with some well-known hip-hop musicians. Quintessa was told that the bullet that killed her son was meant for Method Man, one of the musicians, and that her son jumped out in front to try to protect him. Knowing this fact has not brought Quintessa solace. She has continued to struggle with the mental health and drug addiction issues which have plagued her since her son was young. Here is how she describes her ongoing battles with drug addiction and unresolved grief:

**I:** Why do you think when you came out of the hospital you started using [drugs] again?

**R:** Because it was soothing. It was like I didn’t have to really think about my son. ‘Cause I haven’t grieved him. And my mother, my father—it’s like I’m only alone—I’m always alone. And also, it’s like, drugs take away the pain, because I escape
from reality. You know?
I: Yes.
R: But now I’m learnin’ how to face my fears.
I: Good. Good.
R: And I’m learnin’ how to let go and realize my son is not comin’ back... You know, it’s really been hard. May 5th is his birthday... so I might go up to the gravesite.
I: Where is he buried?
R: In Staten Island... I forgot the name, but I know how to get there.

In response to a question about her process of grieving for her son, Quintessa describes how the loss of her son has impacted her ability to have a relationship with her granddaughter:

I: It seems as if you’ve never grieved for your son, that obviously you were sad and upset, but you never went through the whole grieving process...
R: It continues, like it just goes on.
I: Were you and he close?
R: ... He was my buddy. He used to bring my granddaughter. I have a granddaughter that’s 5... And he used to bring her. And she’s light like you... He told me don’t give her no candy. But you know how grandmas are. So I gave her some chocolate bars, her face was messy! She’s—I love my granddaughter, but I haven’t seen her in 2 years.
I: Oh, you haven’t?
R: Because she looks exactly like my son.
I: Right, right.
R: And I’m just not ready to look at him right now.
So for Quintessa, the pain of losing her only child to violence has been devastating and ongoing, affecting her ability even now of having a relationship with her son’s child, her granddaughter. This loss has also made it very difficult for Quintessa to end her drug dependency because, as she notes, drugs have always been her way of taking away the pain. Even more jeopardizing to Quintessa’s well-being have been those times when the pain of her drug addiction and the pain of losing her son have led her to try to kill herself.

Asa’s story of losing her son, her only child, to violence has many similarities to what Quintessa went through. Asa’s son was born to her at age 14, a birth so difficult that Asa prayed she would never again become pregnant. As Asa tells the story, her son was very sociable and very lovable and everything in the household revolved around him. He was doted on by his grandmother, as well as by Asa, and he was very spoiled. As he grew to be a teenager, he had a group of friends that he regularly hung out with, but Asa does not believe that he was involved in any gang activity. When he was 17, he was shot and killed by someone who had just had a fight with one of his friends and was angry. Here is Asa’s description of what happened:

R: Well, like what we heard is that in front of a building …one of his friends got into an argument with one of the guys about his girlfriend and…whatever happened…I don’t know if they fought or whatever. The guy got mad and I guess he [was thinking] retaliation…[He] went to his house, got him a gun…what type I don’t
know…but it was like a 45, I think, and [he] just came down and started spraying everything that was around him and my son got hit.

**I:** How many were killed, your son and…

**R:** Two were killed and one was in critical condition. We had their funerals back-to-back. The boy’s was first and my son had his the next day.

For Asa, the death of her son is one of a series of devastating losses which have filled her life. As described previously, Asa’s father was shot to death when she was just eleven years old. About a year after her son was killed, Asa’s nephew shot and killed himself. He and her son had been very close and he was unable to cope with the death of his cousin.

Asa’s mother also died in a particularly horrible way. She had a little candy store that she ran in Manhattan. One year just after Christmas, there was, unbeknownst to anyone, a gas leak outside her store. When she turned on the heater in the store, the whole place went up in flames. The people in the shops next door attempted to rescue her, but the heat of the fire made rescue impossible. The horrific image that Asa has been left with, of her mother dying in the fire, has made this loss even harder:

**R:** The man [in the shop next door] said he tried to open that door up [to her mother’s shop], he tried and they heard her saying, “help me, just help me, get me up.” The man said the door knob was so red hot [that] it took the skin off his hands trying to, you know, he couldn’t do it. They said they heard my mother in there just going slowly, dying and the body, you can hear it.
The impact of so many tragic losses for Asa, as it has been for Quintessa, has left her feeling very much alone and very vulnerable. She describes feeling as if the family members that “are her life,” the family members who have been the focus of her life, are gone. These are the family members she knew she could go to if she needed anything. Unlike Quintessa, however, Asa has fought against the temptation to use drugs or any substance to mediate her emotional pain. She says that she knows drugs will just “deteriorate” her and she is at a point in her life where she recognizes how much she has lost because of her involvement with drugs, alcohol and criminal activity.

Delia, a 41 year old African-American woman, lost her son to street violence. He was 19 years old at the time of his death. Delia has a long history of arrests and incarcerations and was serving time in a prison upstate when her son was killed. As she describes his murder, he was in the middle of a fight, breaking it up and he was shot twice in the back. Even though her son was killed five years ago, Delia, like Quintessa and Asa, continues to feel the pain of his loss.

Delia did not raise her son because of her frequent incarcerations. Her son was raised by his father and his father’s mother, a situation that Delia describes as, “wherever he felt like laying his head.” When she thinks about her son, Delia talks about feeling bad because she saw him following in her footsteps:

R: He was doing, you know, going to jail. He…dropped out of school at sixteen. He was, you know, living the street life. But it’s different
between me and him because he was raised with a family. I wasn’t raised with a family.
I: You weren’t raised with a family?
R: No, I was raised in an institution…in a group home.

The loss of her son is particularly devastating to Delia because she realizes that it was her frequent incarcerations which prevented her from really being able to have a relationship with her son. With his death, that opportunity is, obviously, forever gone.

**Summary**

The violence that characterized the lives of most of the women in this study during their childhoods and adolescence foreshadowed what they would experience as they began to get involved in criminal activity. For those women involved in prostitution, drug-related crimes and gang-related activities, the experience of violence and the threat of violence were omnipresent. Going hand-in-hand with drug and gang involvement was the likelihood that one would be witness to or a participant in the infliction of violence on others.

In addition, as the data from this study indicate, many of the study participants experienced abusive intimate relationships, relationships which mirrored the violence and abuse they had experienced earlier in their lives. As I argue in Chapter 6, the residue of such “soul scarring” experiences of violence
beginning, for many, at such an early age, set the stage for the “normalization” of violence in these women’s lives, including the acceptance of violence in their intimate relationships.

In sum, for most of the women who participated in this study, the violence they experienced while participating “in the life” triggered feelings and memories of past episodes of abuse and violence, exacerbating their feelings of worthlessness, degradation and shame. Thus, each new instance of violence reinforced for these women not only the normalcy of violence in their lives, but also reinforced the belief that relationships filled with violence were all that they had a right to expect. In the next chapter, I will explore the ways in which the women’s experiences in the criminal justice system, almost always demeaning and dehumanizing and often marked by violence, served to continue and to reinforce the same messages of unworthiness and unworthiness.
CHAPTER 5

RESULTS: “DOING TIME”

…In one breath, I have faith in myself and in another breath, I can lose all confidence. And I think that comes from prison. ‘Cause prison took a lot out of me. It gave me…I would say it gave me, like PTSD” (Dolores)

Everyone is thrown in together and…it’s negative in there. I can’t tell you one positive [thing] …O.K….you have a roof over your head. (Neisha)

…it (going to jail) was a norm. It was like, ‘well, hey, that’s how you pay your taxes.’ You’re doing illegal activity. You’re going to jail, you pay a fine, ya know, you pay a little [to] a lawyer. That’s how you’re paying your taxes. (Neisha)

In the previous two chapters, I have described the data indicating the pernicious effects of violence and victimization suffered by the women interviewed for this study during two periods of their lives. Consistent with trauma theory as explicated by Judith Herman, (1992a) the after effects of these
incidents can be long-term and can continue to affect one’s physical, psychological and emotional well-being years after the violent event itself. I have also argued that consistent with Paulo Freire’s (2000) pedagogy of the oppressed, the dehumanization experienced as a result of a lifetime of violent victimization can create a sense of living in a world from which there is no exit. The intersection of Herman’s theory and Freire’s pedagogy, I argue, is borne out in the data from this study and, along with the work done by Carolyn West (2002) on the intersection of issues of race, class and gender in the lives of incarcerated women of color, makes a strong case for how we need to conceptualize the problem of recidivism and the challenge of supporting formerly incarcerated women’s successful reentry into the community.

In this chapter, I move on to discuss another period in the life course of the interviewees, the time spent imprisoned for crimes they committed. I argue that the data from this study indicate the ways in which these experiences of incarceration have reinforced for these women their sense of unworthiness, powerlessness and inability to change oppressive situations. In so doing, I argue, the time spent behind bars for many of the women in this study has compounded

11 Interestingly, only one of the twenty women interviewed claimed to have ever served time for a crime she did not commit. In this case, the interviewee alleges that a policeman holding a grudge from a prior encounter planted drugs on her and then arrested her.
and exacerbated the after effects of their earlier experiences of violence and victimization and continues to leave them vulnerable to pressures to rejoin the world of criminal activity. The end result is the reinforcement of their negative self-images, a sense of being overwhelmed by the difficulties entailed in “making it” in the mainstream world and a sense of vulnerability to the lure of a return to a criminal lifestyle.

All of the women participating in this study have served time in jail and more than half have also served time in prison. Most of the women have been arrested multiple times and all but one woman have been incarcerated at least twice. These experiences, like their experiences growing up and like their experiences participating in criminal activity, have left an impact. The impact for many of the women has been the toll taken on their physical, emotional and psychological well-beings as a result of repeated periods of incarceration and the treatment they experienced while imprisoned.

For a number of the women in this study, the violence that characterized their lives in their families of origin and on the street followed them into jail and/or prison. Some of the violence they experienced while incarcerated was overt, for example, assault by fellow inmates or by corrections officers. Other forms of violence were more covert, for example, threats and intimidation by other inmates or by corrections officers. For many of the women, however, the violence and victimization they experienced while incarcerated was more psychological in
nature. For example, having to live in an environment with no privacy, under constant scrutiny, having to endure “pat downs” and strip searches were experiences that were, at the very least, stressful and humiliating and, more often, psychologically traumatizing and dehumanizing.

As the Bureau of Justice Statistics has documented, (Harlow, 1999) 39% of female State prison inmates report having been sexually abused ever in their lives, and 46.5% of female state prison inmates have histories of physical abuse ever in their lives. For these women, losing the ability to control who has access to one’s physical space, as well as to one’s physical body can be devastating and can “trigger” memories and feelings of past episodes of violence and abuse. The after effects of these experiences can range from exacerbated feelings of humiliation and shame to full blown episodes of psychosis (Gaes, & Goldberg, 2004; Girshick, 2000; Human Rights Watch, 1996). Underlying all of these feelings is fear, fear of physical and psychological harm and even death (Bradley, & Davino, 2003; Tewksbury, 1989).

Experiences of Incarceration in Jail

Of the twenty women interviewed for this study, all had at least one period of incarceration in jail. Jail is where most women in the criminal justice system experience their initial confinement. Sentences tend to be shorter and the crimes committed less serious than those committed by women sentenced to prison. Jails
are also more local, meaning that there is more of an opportunity for the person incarcerated to stay connected with friends and family. There is also more of a possibility that the person imprisoned will know some of her fellow incarcerees.

For the reasons indicated above, many people have an easier time when incarcerated in jail than in prison. The data from this study indicate that the most difficult periods of imprisonment for most of the women were not those in jail, but were those spent in prison. The worst of the violence, intimidation and psychological trauma described by the women in this study occurred when they were serving time in prison. However, that said, serving time in jail still meant a loss of freedom, a loss of control over one’s activities and it meant having to find or establish one’s “place” among the prison population. Here is how Neisha, a 42 year old biracial woman with a history of 79 arrests and many incarcerations, describes what she worried about during her initial incarcerations:

At the beginning of going to jail, I was so brainwashed, ‘street and street knowledge’…what’s the dos, don’ts, what’s cool… you know what I’m saying (Neisha)

What Neisha deemed most important, like in the street, was learning the “rules,” the informal code of behavior that she would be wise to follow in order to keep safe and to survive in the jail environment. Knowing these rules was, as the saying goes, like having the keys to the kingdom.
Renata, a 34 year old African American woman incarcerated four times, talks about her time in jail in ways similar to what Neisha described. According to Renata, what was important was being able to replicate the culture of “the street” inside the walls of the jail. Because this was a culture that Renata was a part of and knew very well, she describes her early experiences in jail as “fun:”

You know, so when you went to Rikers (jail), it was fun back then. It was like, drugs in the hall, it was like the corner, sittin’ on walls, walkin’ by high and stuff. As long as you got a pass. We’d get a pass at 8:00 in the morning. You know, we’re back into the dorms at chow time and that ain’t till 3 p.m. So I’m hangin’ out in the hallway, like it’s …the corner, like, you know, it’s a corner.” (Renata)

For Renata, as well as for some of the other of the women interviewed for this study, to be incarcerated in jail “back then” afforded her the opportunity to continue doing what she had always done, that is, hanging out, “meeting and greeting,” wheeling and dealing, doing drugs. The venue might be different, but the activities they engaged in were the same.

Belinda, a 37 year old Native American woman, also experienced the “street-like” environment of imprisonment in jail. However, for Belinda, her incarcerations were far from “fun.” Belinda started getting arrested and incarcerated when she was 18 years old. Belinda estimates she has been incarcerated more than 80 times, all for alcohol and drug-related offenses. Unlike many of the other women in this study who have spent time in both jail and
prison, all of Belinda’s incarcerations have been in jail. When she first started
going to jail, Belinda was surprised by how many women knew each other. As
she describes, these women seemed to treat being in jail as a time to see old
friends and catch up on the “goings on,” much like seeing your friends at the local
hangout:

And I see women that was in there who were like,
‘Oh hey, how’s it going? I haven’t seen you in
such a long time.’ [Just] like, they were there
visiting each other. And I was like, wow, you
know.” (Belinda)

This apparently blasé attitude at being incarcerated was very hard for Belinda
to understand because she was someone who had a very hard time tolerating the
confinement of jail:

And for me, that’s what it was in the beginning
[going in and out of jail constantly]. Was in and out,
in and out…and…I think I just realized, I don’t like
jail, I don’t like to be locked up, whether it’s in the
hospital, at home, or anywhere. I just feel like I’m a
caged animal. And that’s how that place always
made me feel.” (Belinda)

Not only does Belinda have a hard time with confinement in jail, but she also
fears that if she continues to get arrested, a judge will decide to sentence her to
prison rather than to jail. As she describes, she grew up watching her father and
brother go in and out of jail and now she fears that she, too, suffers from the
“family disease of jail.” Here is how she describes this fear:
And um, with my record, I’ll be looking at time. And I just, it scares me. I’ve seen my brother go in and out of jail, his whole life. I’ve seen my father, go in and out of jail my whole childhood, I hardly knew my father. And here I’m doing it…So, it’s just a family disease of jail…I have a sister right now, who’s doing ten years right now for drug charges (Belinda)

In spite of all her incarcerations and her familiarity with the jail environment, Belinda is terrified of being sent to prison and having to do “hard time.” She is all too familiar with the toll prison takes, not only on the person incarcerated, but also on those left behind. Belinda grew up as “one of those left behind” and, as a result, had a childhood and adolescence marked by turmoil, lack of stability and the absence of nurturance and caring. For Belinda, growing up was a time spent dealing with a mentally ill mother, an imprisoned father, living for several years in foster care and having to cope with a pregnancy at age 15. By the time she was age 17 she had two children and was, as she describes, “a full-blown alcoholic.” By age 18, she had had her first incarceration. Here is how Belinda describes those first few times she was arrested:

R: Because anytime I got into any kind of legal bind, it had to do with my drinking… And the courts would take that into consideration, they started telling me to go into programs. And it shocks me, how quick they are to tell people that you won’t do jail time if you go into a 28 day program. So of course I’m going to take the 28 day program over the jail time. And I think they hope that it works, but it never worked for me.
I: It didn’t?
R: Not when I was younger. I thought I was invincible. And I could do whatever I wanted. (Belinda)

Belinda, like so many people with addictions, still had the false sense that she could control her drinking and that nothing bad would or could happen to her. In her mind, this belief was borne out by the very fact that she was permitted to serve her sentence in an alcohol and drug rehabilitation program, rather than have to go to jail.

Unfortunately, Belinda’s “invincibility” was only an illusion and her story gets worse from this point on. By the time she was interviewed for this study, Belinda was 37 years old, had graduated from alcohol to heroin and had been incarcerated more than 80 times. Most of these incarcerations were for public drunkenness, but two were for assault with a deadly weapon: separate incidents when, during arguments, Belinda stabbed two ex-husbands.

Belinda, also, by the time of our interviews, had given birth to 6 children, had given up her two oldest children for adoption and had given three of her remaining four children to her brother and sister-in-law to raise. Shortly after giving up custody of these three children, her brother and sister-in-law decided to relocate to a town hundreds of miles away from Belinda, forbidding her to have contact with the children. Belinda also does not have contact with her youngest
child who is in the custody of the child’s father, living in another state. Here is how Belinda describes her decision to give her first two children up for adoption:

**R:** It was chaotic. It was—my sister and her husband were fightin’ all the time, they were doing drugs. They weren’t taking care of their own child. Here I was trying to take care of my two. I was only, like, seventeen, no, I was eighteen, nineteen years old. And then I felt like I was taking care of him (her husband) [and] my mother was like, just… out of it a lot of the times. And it got very stressful, for somebody my age. I was just like, ‘I can’t do this anymore.’ I wasn’t able to go out with my friends when they went out. And I missed that, and my mother was always telling me, you know, ‘You ruined your childhood,’ ‘You know, you’ll never do this, you’ll never do that.’ And I started feeling she was right…but I did go to her, when I dec[ided],[when] I says, ‘I don’t want to have these children no more.’ And we sat down and we talked about it. And she was like… ‘I’m with you a hundred percent, behind you.’ And that made it easier…to give them up”

**R:** …I think I was having a nervous breakdown. And I think that my own mental illness, ‘cause I—I suffer from that too, just not on like [the] surface. I was getting very short with my children…when they wanted me up in the morning, I didn’t want to get [up]—I wanted to sleep all the time. I was getting very depressed…probably suicidal…I just felt like… when I started looking at things and stuff, and I had to write these two children a letter [the two she gave up for adoption], I feel like they’re my lucky children…because I was able to come to the conclusion while they were still young to give them up. To somebody that was able to take care of ‘em better than I could. Where, as far as my other children, I held on to… because I didn’t want that pain of lettin’ them go. And they went through so much abuse. So much. Between my
mother and me, my sister who’s schizophrenic. They really suffered a lot of abuse.”
(Belinda)

Belinda’s story is particularly sad because hers is a story of someone totally controlled by her addiction, someone for whom initial treatment efforts in drug and alcohol programs were unsuccessful and, as a result, has spent the bulk of the last twenty years involved with the criminal justice system. Instead of being treated in drug and alcohol rehabilitation programs, Belinda has continuously cycled in and out of jail, a place where her alcoholism is not treated. Sadder still is the impact Belinda’s addiction and constant incarcerations have had on her children and on her ability to assume the role of parent.

**The Prison Experience**

More than half of the women interviewed for this study have served time not only in jail, but also have served time in prison. The data from the interviews indicate that for most of the women, the experience of incarceration in prison is substantially different from the experiences of most women when incarcerated in jail. All of the women who had done time in prison described the overall experience as much harder and more difficult than time served in jail. The women identified a number of factors which made their time in prison emotionally and psychologically difficult. For example, something which took a toll on most of the women was being forced to serve at least part of their
sentences in prisons located in small, rural areas hundreds of miles from the urban neighborhoods where they had spent most, if not all, of their lives.

There are many reasons why the women experienced this arrangement as difficult. First and foremost, they were, so to speak, “out of their element.” They were now incarcerated so far away from family and friends that it became difficult for family members to visit. Lack of visits marked a big change for those who were used to seeing family and friends when they were serving time in jail. In addition, in prison, there was less likelihood that a woman would be incarcerated with those she knew from the neighborhood, not only exacerbating feelings of isolation and vulnerability, but also taking away the degree of safety and security one might feel in knowing or having had a prior relationship with at least some of one’s cellmates. Several of the women in this study described being in such psychological distress that they, in fact, experienced a mental breakdown.

Here is how Renata describes her experience of being sentenced to prison:

So…it still didn’t hit me that I was goin’ away for a very long time. So I was doin’ all of the above, just fightin’ in there just to block it out of my mind that I got time to face. But then when I think I wasn’t comfortable in my own skin, I have to ‘lock in’. That’s when everything hit me. You know, I just …breaked [sic] down. I didn’t know my asshole from my elbow…it was really hard for me because when they opened the door…I was incoherent. I spazzed out. I started getting flashbacks.

(Renata)
At first, it seems incongruous that Renata, a woman who could describe jail as “fun” and who, at age 10, had murdered her grandfather to put an end to years of sexual abuse, would “break” upon having to serve time in prison. However, as Renata makes clear, doing prison time was much harder and more traumatic than doing jail time. It wasn’t the “territory” or the rules that she knew. She could not conceptualize such a large amount of time that she would have to spend locked up and locked in under someone else’s control. She could not grasp psychologically and emotionally how she would “do that time.”

The experience in prison of Tanisha, a 50 year old African American woman, also illustrates another aspect of being out of one’s element. Tanisha had been living on her own since she was 14 years old. Tanisha was first arrested when she was age 12 or 13, was sent to juvenile detention and then to an adolescent unit in a psychiatric hospital. When she was 14, she was released from the hospital and sent to a group home. According to Tanisha, the group home was very difficult and she just wanted to get out of there. For reasons which are not clear, she did not return home, but with the help of the group home’s social worker was able to get herself declared an “emancipated minor.” The group home staff helped her to apply for public assistance and to find an apartment. Tanisha lived on her own and apparently managed quite well. She went back to school, got her GED, and enrolled in college.
Tanisha completed 1 ½ years of college before her life took a downward turn.

It was at this point, when she was in a financially precarious position, that someone suggested she begin selling drugs. Here is how Tanisha describes this period in her life:

R: … my friends were smoking and drinking but I wasn’t smoking and drinking. …I hung out with them, but it was okay, but it wasn’t for me. As I got older, I started going to college, like I said… financially I need money. So I was introduced how to make money.
I: Who introduced you?
R: Well, I can’t say a friend. But somebody introduced me to money and I seen the fast money and I decided to do that. But that’s here my mistake came in, then I took a leave of absence from school.
I: Is it okay if I ask you what you were doing to make the money?
R: I was selling cocaine. Then I was selling pills. Then I was selling heroin or whatever. And then I ended it.
I: And were you still thinking you were going to go back to school?
R: Yeah. Yes.
I: Okay, and the time that you were selling were you using?
R: No

(Tanisha)

Unfortunately, Tanisha did begin to use drugs and pretty quickly found herself growing more and more paranoid as she was drawn deeper and deeper into the drug underworld. Here is how she describes becoming an addict and the toll her drug use took on her physical and mental well-being:
The only time that I began to start using the drugs was... I was making so much money and then there wasn’t no more trust with the friend or the people... I had to stay up. I had to cut my own drugs, ‘cause I couldn’t trust nobody. So I got to tasting it but I never really enjoyed it. The high wasn’t... it wasn’t like I was out there enjoying the high. I was out there like, you know, I used to sniff cocaine. I had to stay up to sniff the coke to go from this place to that place. And my body was worn out. Then sniffing it... tissues in my nose started messing up and bleeding and then by me having a mental disorder, it wasn’t mixing together. Chemical imbalance was messing with the drugs.

(Tanisha)

Tanisha was now “twenty- something,” and aware of the negative interaction between the street drugs she was using and her chemical imbalance. More and more, she slipped into a world of her own creation, a world where everyone on the “outside” was seen as a threat to her safety and well-being. It was only a matter of time until her paranoia, her drug use and her drug sales led to her arrest. The charge was sale of a controlled substance and she was sentenced to one and one-half to three years in State prison. This was her first time incarcerated in prison, an experience she calls “my nightmare”:

I: Tell me what made this so horrible...
R: I got arrested and usually [when I got arrested], I was released from court. This time I got arrested and I wasn’t released. And, I was guilty and I took that. And I went upstate and I had it hard.
I: Tell me what made it so hard?
R: I didn’t understand what the State jail was like. I didn’t understand what it was. Back then, you didn’t have many black correction officers
in the State penitentiary. Back then, you didn’t know what AIDS was about. Back then a lot of things you didn’t know.

I: Right….right right.

R: And today it’s a little different… It’s more up-[to]-date. Back then you wasn’t allowed to walk in groups or talk in groups. Back then I was beaten up by correctional facility [staff].

I: You were?

R: Yeah. Beaten real bad.

I: And why did they go after you, do you think?

R: Well, back then I can’t see no particular reason because I’m not the type of person to look for trouble. But, when things were done to me I complained about it.

I: You complained to the correctional officer?

R: No, I wouldn’t say… [I went] outside the jail. And so retaliation was… I got beat up real bad.

I: Is it okay if I ask you these questions? And you’re free to say to me ‘I don’t want to talk about this or answer that.’ But, when you say you complained outside of the jail, who…


I: Okay. Did you send a letter or make a call?

R: Call, send a letter, write.

I: And so you ended up… getting beaten very badly because of that?

R: Yeah. Then they tried to charge me as being the assaultive person.

(Tanisha)

Tanisha found out the hard way just how dangerous it was to stand up for her rights. Prisoners might have rights, but one exercised those rights at one’s peril.

Tanisha, who was used to being treated with respect, would not tolerate being treated in any other manner, even by correction officers. Unfortunately, Tanisha
paid a high physical and psychological price for speaking up. Here is how

Tanisha describes the treatment which caused her to file a complaint:

R: I did one and a half to three years my first [State term]. ..That was enough for me ’cause I didn’t know what it was like…That was enough for me.
I: And that’s when you told me that you went outside the system and complained and then they retaliated and took it out on you…in terms of your experience [that you filed a complaint about], was it physical and/or sexual abuse? Is that the kind of thing? Or was it racial harassment or…
R: It was racial harassment. Not to brag, but I’m a very pretty intelligent woman……and anything that you wanna know about the system and or law, there’s not too much I really don’t know about it. And you’re not supposed to know it. And back then it wasn’t that many black C.O.s [Correction Officers]. And most of them, it was way upstate and most of them was white and cousins and uncles in small town…So, you know, it’s you get on the floor and they want you to scrub with toothbrushes and I wasn’t getting on my knees scrubbing with no toothbrush. So, it wasn’t happening…I had… I had morals and my dignity, you know. And, no matter what, they couldn’t crack me. So, I guess [they] crack my ass, excuse the expression. So, that’s more or less what it was. ..I have a problem that if I’m right, no matter what you do to me I’m not going to give up… and I have learn[ed] over the years that you can’t be right verbally. You have to [have] proof, black and white, paper-wise to show.

(Tanisha)

Tanisha is determined to bring the abuses of the penal system to light. She is angry, not only about the abuse she has suffered at the hands of correctional staff,
but also about the treatment she has observed of her fellow inmates. Here she talks about why she feels so strongly:

I: Obviously one thing that’s very important to you…[is] to fight back and fight the system.
R: No, it’s not to fight back. It’s to stop it happening for somebody [else]… You know how many girls died in their cell? Because the officers wanna sit or sleep on the job. Or [staff]… just ain’t gonna answer an inmate. Do you know how many girls died in their cell because of that? And those girls that are cracked out, they ain’t got no family, so they [the prison staff] ain’t answering no questions about what happened to them. They think it’s natural…But it ain’t.
I: Right.
R: Or they gonna beat some girl up and threw her in the cell and didn’t give her no medical attention. Or a girl is pregnant and she is hemorrhaging…
I: And they just leave her there?
R: And leave her there.
I: So there’s a lot of work to be done…
R: Yeah. And it’s not gonna happen just by me. But I’m gonna open the wound.

(Tanisha)

Dolores, a 46 year old Caucasian woman, also was out of her element in prison. Dolores had a particularly difficult time with incarceration because she was used to being on the other side of the cell bars. Prior to her arrest and conviction for drug dealing, Dolores was a Correction Officer earning $85,000 a year, a position she held for 16 years. She never envisioned that one day she, too, would be struggling to cope with the physical, psychological and emotional hardships of incarceration.
Dolores grew up, one of six children, in a middle-class, suburban family. She describes her father as “a functional alcoholic” who had his first heart attack at age 42. At that point, her mother had to work two jobs in order to help with the family’s deteriorating financial situation. Dolores describes the family environment as “chaotic,” with “lots of fighting among the older siblings.” (#1, pg.4) Part of the chaos that Dolores refers to was her sexual molestation at age 10 by her 16 year old brother. Here is her description of the after effects of being abused:

R: When I was 10, I had incidents…a period of time where my brother molested me…my older brother who was 16…and my mother caught him and it was put to an end, but I never pretty much got over it… and when I went through that period in my life… I guess I was sort of normal, but I never felt like I fit in You know what I mean… there were always issues with the other girls on the block and being a third wheel and I think it had a lot to do with that (being molested)

(Dolores)

By the time Dolores was age 13, she had discovered drugs, alcohol and boys. Her older brother was a drug dealer, so fairly quickly Dolores began smoking marijuana and taking pills. She, too, began selling marijuana. By the time Dolores was age 16, she was heavily into drugs, sex and stealing. Typical of her behavior at that time, she and a girlfriend, who was running away from her abusive family, decided to hitchhike to Florida. They managed to get to Florida by taking rides with truckers with whom they had sex. As Dolores states, “Just
the incredible chances that I took… I never really cared… I wasn’t afraid of anything.” During this time also, Dolores was raped by three guys:

**R:** … that summer… [I] was doing a lot of drugs, drinking heavily and one night I did a hit of acid and I ended up getting raped by 3 guys in Lake Ronkonkoma… I know there were 3 guys… the memory is still kind of cloudy… and when I came home… someone drove me… I was missing my shoes, half-dressed, my bra was gone and I had told my parents that I was raped… I don’t know if you consider it ‘raped’ because I was so high… I’m sure I had no control over what was going on… so my father… they didn’t know what to do with me… so he just slapped me and I remember that I was still tripping on the acid because the walls were breathing. I’ve repeated this story several times, if it seems like it comes easy... it’s just you come to a point where you just tell your story…

(Dolores)

Even after this horrific incident, and her father’s awful response, Dolores, along with her two younger (twin) brothers continued to engage in out-of-control behavior:

**R:** So, yeah, there were parties at the house… we used to steal my father’s car from the train station because we had a key made and we used to steal his car and drive it around all day… we were horrible… I used to give my brothers the car to get rid of them when we had parties at the house… because my parents worked in the city… Yeah… we used to have these parties all day long… (laughter)... we were horrible, absolutely horrible…

**I:** (laughing) You’re like a parent’s nightmare…

**R:** Oh yeah, I was a nightmare… I mean, we would take my father’s sleeping pills, fill them with flour and take the drugs out of them… and we would take
his heart medication…we didn’t know what we were taking…we would take all the liquor and put colored water… you know, do the colored water thing…

(Dolores)

While in some ways Dolores was engaging in behaviors typical of a rebellious teenager, still the extent of her actions could be viewed, with hindsight, as a sign of her propensity, or maybe addiction, to “living on the edge.” Her out-of-control behavior could also be seen as an aftereffect of the sexual abuse and sexual assault that she experienced.

The summer before her senior year in high school, when she had just turned age 17, Dolores became pregnant. The baby’s father was a 21 year old whom she had recently met. Dolores’s plan was to have the baby and to give it up for adoption. She went back to school, pregnant, and even though she found it hard socially, she was surprised to find that almost for the first time she did very well academically:

Actually, I did very well that year…I never realized how smart I was until that year because it was the only year that I really tried …[I] stopped hanging out, stopped the drugs, the drinking…the minute I knew I was pregnant, I didn’t do nothing …nothing…

(Dolores)
Dolores’s situation was not good at home, however. Her father refused to talk to her for eight months. It was not until almost the time that she had the baby that she and her father reconciled:

   R: …my father, a couple weeks prior, had come to me and he had told me that he loved me and that he was sorry…that was the first time my father had told me that he loved me…
   I: In your entire life?
   R: When I was 17…But that was because of the way they were brought up…. Well, that’s the whole thing about sleeping with the boys…”cause you’re trying to find that which you’re missing, you know,…and as I said, I’ve been in therapy long enough to know…on and off for 15, 20 years…to tell you that, you know, I know where a lot of that behavior stems from.

   (Dolores)

By the time Dolores gave birth to her daughter, she and the baby’s father had long since broken up so Dolores was very dependent upon her parents for help. Her parents told her that they would support any decision she made about the baby, but if she chose to keep her child, she must finish her education. Dolores agreed and not too long after her daughter was born, she took the GED exam and received her high school diploma.

The chaos that had marked much of Dolores’s life up to this point was not over. Dolores got a part-time job at Dunkin Donuts working the nightshift to help with her expenses. There she met a 17 year old guy who “worked sanitation” and, within nine weeks, they were married. Dolores was now 18 years old and her
daughter was less than 9 months old. In response to a question about what she was thinking and feeling at the time, Dolores replies that she told herself that she loved him, but probably this decision was more about wanting to be on her own taking care of her daughter and wanting to get out of her parents’ house. As she herself acknowledges, these reasons were not the best ones upon which to try to build the foundation for a successful marriage, especially given the age and immaturity of both she and her husband.

Within 18 months of her marriage, Dolores gave birth to a son. She and her husband struggled financially and emotionally. She often found herself overwhelmed and very depressed by the enormity of raising two young children and managing a household. In spite of these challenges, Dolores and her husband managed to function well for about 6 years. At that point, her husband had an affair with a woman he met on his garbage route (not your typical way of meeting someone and something that Dolores can laugh about now!). Her husband moved out and Dolores was left with two small children to support and not enough money to do so. Her brother-in-law who was a correction officer suggested that she take the correction officer civil service exam which she did. By the time she was age 27, she was employed as a correction officer.

By this time also, Dolores and her husband were into their pattern of reconciling, breaking up and then getting back together again. Dolores continued to have affairs with men she met at clubs. She also started to have affairs with
fellow correction officers, both male and female. All of these relationships involved the use of drugs. Dolores’ pattern was to live on the edge as she had done as a teenager. She continued to choose partners who were abusive, controlling, jealous, violent and drug abusing, many of whom had done time in prison or jail.

It was Dolores’ relationship with one of these men that eventually led to her arrest and incarceration. Dolores had recently ended a relationship with a man who had served time in prison for attempted murder. She and a friend went to Las Vegas to celebrate Dolores’ birthday and there she met Anthony (not his real name). They hit it off and within two months Anthony moved in with Dolores. In short order, Dolores learned that Anthony had not been truthful with her about a number of things: that he had a wife to whom he was still legally married; that he had been living with a girlfriend; that he had two children, not one; and, most important, that he was a drug dealer with a pending criminal charge against him. As a correction officer, Dolores knew that she was violating policy by being with him, but, as she states, she did not care:

R: …he had a pending criminal charge and, again [I] figured out that he was a drug dealer and [still I] used to ride in the car with him…didn’t care…Knowing full well I was crossing the line…In my mind, I wasn’t though…like I didn’t think I was doing anything wrong…

From this point, Dolores’s self-destructive behavior escalated:
R: So that’s how bizarre my reality was….and he had to go to prison and [in] 2003, February, he went to prison for 5 ½ months and I took over his business selling drugs…mind you, I never…and this is an issue because people will say this, [people] that think they know me, that I sold drugs in the jail…I never, ever, ever…and I’m being very honest with you through the whole thing…never brought anything into prison…into that jail…my whole thing was I had like a double life…I was a correction officer during the day…did my job…But at night, I went out and sold drugs…came home and changed and throughout this time period, I was a rebel at work…people used to call me the “n” word…”n” lover because I dated outside of my race…they would say things…I dealt with this my whole career…you know, from ’98, from dating outside my race…some very nice people that you wouldn’t believe the things that came out of their mouths…the racism that existed at my job was unbelievable, plus I never abused anybody…in all my years as a correction officer, I always did my job…So, that was a big thing for me… I always felt like I was on the defensive all the time…and Anthony went to jail and I pretty much didn’t make a secret out of it that he was in prison and [I] ran his business…

Dolores’ downfall came at the hands of the boyfriend of one of her drug clients. He had a pending criminal case and knowing that she was a correction officer, he saw a way to get the charges against him dropped. He called her job and reported that she was selling drugs. Unbeknownst to Dolores, her job was already watching her because someone had reported that her boyfriend was a drug
dealer serving prison time. Internal Affairs set up a sting operation and Dolores was caught. She was sentenced to one to three years in State prison.

This was a devastating period for Dolores. She describes being suicidal, as the reality of how she had ruined her life and what she had lost sunk in. Here is how she describes what incarceration was like for her:

**R:** When I was in, I was… by myself. I cried every day. Every day. And then as time went on, I cried every other day. But I pretty much cried all the time. Because each morning when I woke up and I had [to see]… For me, you know, prison was different because when I woke up, I saw myself across from me at a desk. What could—what, you know, that was me. And how I screwed up my whole life. So I was constantly beating myself up, didn’t know how to forgive myself. Still have issues [with] what I did…when am I gonna be able to forgive myself? I don’t know how to do it.

(Dolores)

Dolores’s prison experience was truly about loss, loss of her freedom, of her career, of her positive self image, of her self confidence, of what might have been. Compounding her self-flagellation were the degrading and demeaning attitudes and actions of prison staff toward the inmates. Here is Dolores’s recounting of some of these experiences:

**I:** Do you feel like you were targeted there by the CO’s because—

**R:** Some of them, I think, maybe in their own head, because, wow, that could… you know, “never say never” type of thing. The COs that were way up North were pretty ignorant, I have to say. Maybe less educated or less street smart. You know, a lot
of them were related— the ones that came from small towns. As you came down [from the northern part of the State to the southern part], ‘cause you go all the way up [north], and then your classification drops and you come down [south]...I’m not a big fan of law enforcement—and it’s pretty horrible ‘cause I worked there for 16 years—and I call it “law enforcement mentality.” I think that they think that these things could never happen to anybody in their family. And it’s so not true, because you run across COs [correction officers] and cops all the times that have kids that have been in trouble.

I: When you say that upstate, way up state, they’re more ignorant, how do—

R: I hate to use that word.

I: I mean, how did it play out for you?

R: Well, the CO’s were having sex with the inmates. You hear these stories. And it’s prevalent. I mean, I think Amy Fisher said it too, when she was having sex with a sergeant up in Albion. That was the worst prison I was in. They were awful up there. They threw a banana peel on the ground—a banana on the ground, and I watch the CO’s do it, and I guess they wanted to see who picked it up first. I watched them out the window. I watched. And I think that’s why they didn’t bother with me, ‘cause they also knew that I knew what they were and were not supposed to be doing.

I: Right, right.

R: And they would, when you first get there, they’re supposed to, like the guy was throwing buckets of water and just having people mop it up. And I was like, “Are you having a good time?” Like, that’s the way I talked to him, and he was looking at me like, “Who are you?” And I’m like, “Is there a point to this lesson?” I wanted to know, like you just keep throwing down a bucket of water and want it mopped up. Like, he was almost cruel.

I: Right.
But whatever. I say whatever don’t kill you makes you stronger. And some of them didn’t believe that I was a CO. I was like, “Okay, whatever.” “Then why aren’t you in PC?” I’m like, “Because I never had to be in there. I never treated people bad.”

(Dolores)

It is ironic that Dolores, who as a correction officer, treated inmates respectfully, now finds herself on the other side of the bars under the control of correction officers who regularly demean, humiliate and abuse those under their control. Clearly, these officers see their job as “breaking” the women under their jurisdiction. Here Dolores comments on her observations of this practice of being broken down:

R: So, I don’t know. I was reading that on the Internet the other day. I don’t know, you know. You meet women and men in prison, and it’s... it all depends on if they wanna change or not.
I: Okay.
R: That’s the bottom line. It’s gotta be within. And if it’s not, you know, ‘cause you—I hear these people say, you know, people in general, take away this and take away that, and don’t give ‘em nothing, they don’t deserve anything. But then, you want these people that are, you know, people that are eventually gonna come out of prison, do you want them to change? Do you want them to go back to the way they were?
I: Yes.
I: So you were saying that your experience has been there are people around who want to help, if you are willing to...
R: Yes. But, you know, it’s like the climate of the country. You get, sometimes you get people who
are into like helping people, and then you
have people that just want to punish everybody.
I: Right.
R: Punishment’s good, and you know, some people
need to be punished. And they—it’s like violent
felons, women that have committed murders
and are in prison for 25 years, I found working with
them and having a job and working side-by-side
with them, that, after a while, you don’t make a
point anymore. You just break them down. You
just kill their spirit. And after a while, they’re…
they’re just broken. You know, and after a while,
you’re just not making a point anymore. They get
hit [with more prison time] and they go, and they
get hit [with more time]. ‘Cause they’ll have a
“life” on the back of their sentence, so they’ll get hit
3, 4… 3 and 4 times.
(Dolores)

Here she describes her own experience:

As much as…you know I sound good and
everything [now], I go through my own thing with
jail, [it] just took a lot out of me. You know, it had
a lot of negative impact on my self-esteem. They
really break you down.
(Dolores)

They (the COs) talk to you like you’re ‘less than’

(Dolores)

What Dolores observed and experienced as an inmate were actions that went
beyond punishment for a crime committed, actions that were designed to
humiliate, demean and break the spirits of the incarcerated women. With each
and every one of these actions, the message of one’s powerlessness, vulnerability and aloneness was reinforced.

“I Can’t Do This Anymore”

All of the women participating in this study were interviewed after they had been released from prison or jail, some having completed their sentences and others finishing their sentences at drug and alcohol rehabilitation programs. As previously noted, eighteen of the women had been incarcerated multiple times, the range being two times to eighty times. Two of the women had only one period of incarceration. Almost to a person, the women stated, “I can’t do this anymore.” “I can’t keep going in and out of prison/jail.” What the women expressed was the physical, psychological and emotional toll taken on them and on family members as a result of cycling in and out of prison/jail. Here is how Belinda, the 37 year old mother of six children in the care of others, describes the effects of incarceration on her:

I struggle—I really, really struggle—I try to keep my kids in my mind… the stuff that I want to do. And like I said, I don’t want— I don’t think I—I don’t know if it’s my age—I can’t do jail no more. I—I really… I would ha—shoot me. ‘Cause I’m not going to jail. It scares me… Mentally, emotionally. I just can’t handle it. I couldn’t handle it…so I try to keep that[thought] in my [mind]—like, when I’m struggling, do I want to get high? Do I want to go home? I have to keep that in my mind. (Belinda)
Even though Belinda is not raising any of her children, still she hopes that one day she will be able to be a presence in their lives. This hope and the realization that she does not feel able to cope any longer, either mentally or emotionally, with being incarcerated has helped her in her struggle not to use drugs or alcohol.

Asa also feels that she is done with being incarcerated. At age 44, Asa says, “I [have] hung my gloves up.” Asa describes her last incarceration as being very hard on her. Asa lost everything as a result of her last imprisonment. Gone are her car, her clothes and all of her material possessions. Most devastating for Asa is the loss of sentimental things, things that cannot be replaced. Included among these items are pictures of her son and her grandparents, all now deceased.

Marion, too, states, that at age 40, she is ready to end her participation in criminal activity and with it, all of the time spent incarcerated. She estimates that she has been incarcerated between twenty and thirty times. She says, “I’ve been ready. I started when I was nineteen. I’m forty now. That’s twenty years of going back and forth, back and forth…[I’m ready to] leave it for the younger kids” That Marion would get to this point is telling because she, unlike most of the other women interviewed, described some positive experiences related to her incarcerations in jail. Marion was given a position as a Suicide Prevention Aide, a position that enabled her to get the respect she had never been able to get on the street. Here is how she describes her experience:
**R:** I was the one that went around and checked on the inmates, made sure everybody was all right, helped the officer. I was available to talk if you felt like getting high. I was supposed to be another pair of eyes. Like, inmate peer counselor. So, because of that, I worked closely with a lot of officers. And I was just thinking, I get so much respect from the officers and the inmates. When I go to jail, I walk down the hall before I can even say anything, I’ve got officers and inmates shouting me out saying, ‘What’s up, Marion?’ And that’s because I’ve been there so many times...A lot of the officers, I’ve done twenty years with them. I mean, I’m forty now. I first started going to jail when I was nineteen. I’ve been back and forth so many times that I did the officers’ whole twenty with them.

**I:** So, it’s kind of like you worked with them, almost...

**R:** Exactly. And its respect that they’re giving me, but that’s not the type of respect I want. I couldn’t get that respect on the streets. You know what I’m saying? I had to go to jail to get that respect. And now I want respect for me, for me being clean and sober...for me not being in jail.

(Marion)

So, even for Marion who describes jail as “kind of like my second home,” who was “comfortable” there, who knew the jail routine, even she has reached a point where she feels she cannot continue her cycle of reoffend-rearrest-reincarcerate. The toll taken on her by these actions is now too great. As she implies, getting high, committing crimes and imprisonment are handled best when you’re young, certainly younger than age forty. Now she wants a chance to have a crime-free life, a life where she can earn respect for the positive things she does, rather than the negative things.
Summary

In this chapter, I have used the interview data from this study to discuss the incarceration experiences of these particular formerly incarcerated women. While the experiences of each woman are unique, there is a common thread linking them all. That commonality is the negative impact each woman’s incarceration experiences have had on her sense of self, on her sense of self-efficacy and on her sense of locus of control. The cumulative effect on them of these experiences and those of earlier victimizations, has been to reinforce a sense of worthlessness, powerlessness and devaluation which each woman carries with her as she leaves confinement and attempts to resume and/or rebuild her life.
CHAPTER 6
DISCUSSION OF STUDY RESULTS

The American Psychiatric Association’s Diagnostic and Statistical Manual defines post-traumatic stress disorder, in part, as the result of ‘an event that is outside the range of usual human experience.’ Because the trauma is, to most people, inconceivable, it’s also unspeakable.

(Brison, 2002, p.15)

Remembering and telling the truth about terrible events are prerequisites both for the restoration of the social order and for the healing of individual victims.

(Herman, 1992a, p. 1)

I’m lookin’ at other people, listenin’ to their stories and they’ve been through stuff worse than what I have. But at the same token, we’ve all been in pain.

(Sharell, 30 year old African American woman)

Introduction and Overview

In the preceding three chapters, I have presented the findings from 41 interviews I conducted with twenty formerly incarcerated women. I have presented their experiences in the ways the women described them, graphically, profanely and painfully. The central, most consistently defining theme that emerged as the women described their lives was that of profound, “soul scarring”
violence experienced over the course of their lifetimes. In particular, three
different, yet overlapping periods of life emerged thematically as framing their
lives: childhood, adulthood and the time spent incarcerated. It was during each of
these periods that the interviewees conveyed a sense of the ubiquity, quantity and
severity of the violence they have experienced.

In this chapter, I will discuss how violence and the expectation of the
inevitability of violence have become the major organizing themes in the lives of
these women who once again are on the rebound from prison or jail. Deriving
from my analysis of the data and incorporating Patricia Hill Collins’ (2000)
notion of “controlling images,” I am proposing the creation of a new concept, the
concept of “enduring violence,” to help us understand how the women in this
study have “endured” the violence in their lives and how they have coped with
lives characterized by “enduring violence.” I will examine how this concept
explicates a seemingly paradoxical reality: the fact that the women can and do
endure such violence enables them to survive, while simultaneously, enduring
such violence subjects them to extreme “costs” in terms of their emotional,
psychological and physical well-being. In addition, I will use this concept of
“enduring violence” as a framework to examine and understand the feelings of
inevitability and resignation that permeate the women’s narratives, feelings
engendered by the ongoing nature of their experiences of violence. Finally, I will
suggest that recognition of enduring violence as a central driver of the women’s
controlling images is a prerequisite to the development of rehabilitation or community resettlement.

In building the concept of enduring violence, I am enhancing existing theories that have been developed as a means to understand the experience of trauma and violence. I start with Collins’ (2000) concept of “controlling images” and draw on this concept to add explanatory power to the concept of enduring violence. In addition, I draw from trauma theory, oppression theory, relational-cultural theory and the concept of intersectionality to examine not only how these theories elucidate a concept of enduring violence, but also how “enduring violence” can expand and deepen the contributions of these theories toward understanding the experiences of women whose lives have been contoured by the ubiquity of violence.

**Key Findings from This Study**

As discussed earlier, I expected to find rates of violence experienced by the women I interviewed somewhere within the range reported by the Bureau of Justice Statistics (41% - 57%) (Harlow, 1999) and the range reported by the Correctional Association of New York (82% - 90%) (2008, p.2). Instead, I found that fully 100% of the women participating in this study described personal histories that included violent victimization. Ninety percent (90%) of the women described experiencing multiple episodes and/or multiple types of violence over
The violence they described included childhood sexual abuse, physical abuse both as a child and as an adult, sexual assault, rape, intimate partner violence, abuse by corrections officers while incarcerated, threatened abuse by other inmates and witnessing episodes of violence directed toward family members and/or friends. Forty percent (40%) of the women also reported engaging in violent acts toward others.

However, the statistics tell only part of the story. The resounding message of the women’s stories was the seeming, never ending impact of and the expectation of traumatic violence in their lives. When I began this study, I did expect to hear the women speak about the violence they had experienced in their lives. However, I expected that whatever violence these women had experienced would, at this point, form the “backdrop” to their current struggles dealing with substance abuse, trying to find a job and/or trying to figure out how to afford decent housing. What I did not expect was the emergence of violence and its ongoing impact on the women interviewed as the single most important finding of this study. Simply stated, what the analysis of the interview data revealed is that violence is the single, predominant, common denominator pervading or saturating the lives of the women in this study. Moreover, I found that the impact of these experiences of violence is so deep and traumatic that it continues to negatively impact how the women view themselves, the world around them and the possibility of living a non-criminal life. Violence, clearly, pervades the
fundamental assumptions that the women make about themselves and their world. In short, in the lives of these formerly incarcerated women, violence has become the most powerful interpretive lens through which the women experience their lives and the foundation upon which any future planning for their lives is built.

What emerged through the data were chilling narratives of young girls and teenage women abused, exploited and demeaned for the gratification of men; narratives filled with frequent occurrences of life-threatening violence; and narratives filled with stories of women failed by the very institutions purporting to offer them protection against harm. The narratives depicted the lives of women whose experiences have demonstrated over and over that they are treated as “objects,” without intrinsic value, and therefore, not worthy of society’s time, attention or expenditure of resources. Furthermore, as I will discuss in the next section, the women I interviewed discovered that their survival required resistance strategies that often brought them into the sights of official authorities for rebuke or punishment, not intervention and safety.

**The Concept of “Enduring Violence”: An Overview**

In reflecting on the preeminent themes that emerged through my analysis of the data, I am proposing a concept I call “enduring violence” as a way to examine trauma and violence in the lives of these twenty formerly incarcerated women. A concept of “enduring violence” provides a means to examine the dimensions of violence that is so intrinsic in their lives: first, the concept of enduring violence
captures the feeling of ongoing, seemingly inevitable and ubiquitous violence in the lives of the women in this study; and, simultaneously, this concept gives us a framework within which to examine the “survival” actions and strategies used by the women to endure the violence they experienced.

Building on Patricia Hill Collins’ (2000) concept of “controlling images” and the concept of intersectionality, I suggest that a concept of “enduring violence” helps us to answer three questions: (1) why did these women put up with so much violence in their lives? (2) how did they survive such horrific violence? and (3) what is the impact of these experiences for women leaving prison and jail and reentering the community? By starting with an examination of the “controlling images” in the lives of the women in this study, we are able to develop a clearer understanding of those factors most salient in the reactions of the women to the violence in their lives. This knowledge is essential if we are to suggest answers to the aforementioned questions.

“Controlling Images”

Collins (2000) writes about the stereotypical, negative ways that Black women have been portrayed by the dominant group and how these caricature-like representations have for many become “controlling images.” What Collins is referring to is the way these particular images have been internalized both by the population at large and by the women themselves as the basis for their identities and relationships. The function of these images, notes Collins, is to promote an
“ideology of domination” with regard to Black women (2000, p. 69). Collins states, that “[t]hese controlling images are designed to make racism, sexism, poverty, and other forms of social injustice appear to be natural, normal, and inevitable parts of everyday life (2000, p. 69).” Thus, one of the functions of these negative stereotypes is to instill the notion that Black women and all women of color are inherently “less than” and, therefore, less deserving of loving, nurturing and positively affirming relationships.

**“Relational Images”**

Jean Baker Miller (2008) writes about the connection between controlling images and what she refers to as “relational images.” She defines “relational images” as the “inner constructions we each create out of our experience in relationships (2008, p. 110). Miller argues that not only is there an inevitable connection between our internalized “controlling images” and the types of relationships we participate in over the course of our lives, but also that the meanings we derive from these relationships influence our self conceptualization. Thus, relating Collins’ concept of controlling images and Miller’s concept of relational images to the women in this study, it is easy to understand how the internalization of negative feelings and constructions of self were continually reinforced by their experiences of violence and abuse, the cornerstones of the routine relationships the women experienced throughout their childhoods into
adulthood, including their time incarcerated. This negative self then became the “place” from which the women entered into relationships, most often relationships characterized by more violence and abuse. The nature of these relationships confirmed for the women their “unworthiness,” “undeservedness” and inherent “badness.” Thus, they have come full circle and without any countervailing force, will, as their narratives reveal, continue to participate in abusive, exploitative and demeaning relationships which will serve to reconfirm and keep intact their “damaged” sense of self. Miller (2008) refers to these self-defeating adaptive actions as “strategies of disconnection” – the survival mechanism available to people with controlling images permeated by self-contempt who participate in dominated, exploitative relationships as their daily lives unfold.

**Intersectionality**

My conceptualization of “enduring violence” builds also on the concept of intersectionality. Black feminist scholars such as Collins (1998), Crenshaw (1991), hooks (1981), Lorde (1984), Murphy et al. (2009), West (2002) and others have written about the concept of intersectionality. This concept refers to the reality that Black women live their lives at the “intersection” of multiple forms of oppression and this point of intersection shapes and informs all of their experiences (Crenshaw, 1991; Collins, 1998; Murphy et al; West, 2004). Intersectionality posits that no one form of oppression can be “privileged” above
any other. It is the “indivisibility of …multiple and contingent identities (Hulko, 2009, p.46)” that contour one’s life. Women of color who experience violence experience it in the context of other lived experiences of oppression, for example, in the context of racism and sexism. Poor women of color who experience violence do so in the context of socio-economic oppression, as well as in racial and gender oppression. It is not hard to understand, for women facing multiple oppressions, the difficulty of envisioning the possibility of a reality other than the one they are currently experiencing, that is, a reality without enduring violence. Freire refers to this contained universe of oppression as submergence within a “circle of certainty.”

Feminist scholars (Cortese, 2004; Douglas, 1994; Haskell, 1974; Lavine, Sweeney, & Wagner, 1999) have demonstrated the pervasiveness and powerful impact of stereotypical images of women through systematic analysis of the multiple forms of media. By and large, like those described by Collins, images of women in advertising, literature, film, television, magazines, video games etc. are typically demeaning, often over-sexualized, subject to the constant threat and vulnerability to physical and sexual violence. Combined with the objective realities of inequality faced by women in the political, economic and social realms, the subjective experience of women fostered by these depictions subjects women to diminished societal opportunity structures, socialization into
dehumanized roles and an increased likelihood of self-concepts shaped not by their authentic sensibilities but by the internalization of oppression.

**The Three Dimensions of “Enduring Violence”**

I conceptualize “enduring violence” as a concept having three dimensions. The first dimension speaks to the sense of violence as “ongoing” or “enduring” in the lives of the women I interviewed and helps us to understand the impact of living always with the specter of violence. This dimension of the concept provides a frame within which to examine the perception of the women that the violence in their lives is ubiquitous, “always there” and an intrinsic part of everything. I call this first dimension, “The Ubiquitous Persistence of Violence.”

The second dimension of enduring violence provides a lens through which to view the apparent “passive acceptance” by some of the women of the violence in their lives. This dimension provides a way to explore the question of whether “enduring” or tolerating ongoing violence indicates passive acceptance of a life characterized by the violence. By focusing on this apparent passivity, we can consider whether this method of enduring may, in fact, reflect an “action” strategy. I call this dimension, “Passive Endurance as a Means of Survival.”

The third dimension of “enduring violence” puts the focus on the overt actions taken by the women to survive the violence in their lives. This dimension gives us a way to observe and try to understand the women’s choice of actions and behaviors in the face of ongoing violent victimization, including self-
destructive actions and violence perpetrated on others. This dimension also gives us an opportunity to analyze the impact and "costs" of these "active" choices as means of enduring violence. I call this dimension, "Action as Resistance."

While each dimension of the enduring violence concept allows us to explore a different aspect of the experience, it is the concept taken as a whole that helps us to understand the "lived experiences" of violence and trauma experienced and spoken about so painfully by the women in this study.

In the next section, I will develop more fully each part of the concept of enduring violence. In addition, I will suggest how, for the women in this study, their "controlling images" provide the starting point for understanding enduring violence in their lives.

**Enduring Violence Dimension 1: The Ubiquitous Persistence of Violence**

The first part of the concept of enduring violence captures, as the phrase "enduring violence" implies, the objective and subjective sense that the violence in one’s life will be ongoing; that it will always be there. Beginning in childhood and continuing into adolescence and adulthood, violence has been a "constant" in the lives of many of the interviewees. Childhood and adolescent abuse and neglect set the stage for more episodes of sexual and physical assault as the women moved into adulthood. When the women began to get involved in criminal activity, the violence of life in the street and later in prison was simply
expected, a continuation of the violence which had permeated their lives up to this point..

As the women’s narratives illustrate, this belief in the inevitability and constancy of violence is a direct reflection of the objective circumstances of their lives. For example, some of the women, like Renata, were born into families where violence was an intrinsic part of what went on in the family. In an earlier chapter, we heard Renata describe a childhood not only characterized by violence, but one that revolved around the perpetration of violence and “cleaning up” the after effects of violence. Similarly, we heard Asa describe growing up in a family that revolved around her father’s criminal activity. When her father was shot and killed (at home), assumedly by other drug dealers, the reality of the ever present violence was brought home, both literally and figuratively.

For other women in this study, the enduring or ongoing nature of the violence in their lives centered on their victimization. For example, in an earlier chapter, we heard Neisha describe being abandoned at birth and raised in a succession of foster homes where she was regularly being sexually abused. We heard her describe how, as an adolescent, desperate for a relationship with someone who would care about her, she began a relationship with “an older gentleman” who used her vulnerability to lure her into the world of prostitution. We also heard Quintessa tell of ongoing victimization at the hands of both parents. She described years of having to endure sexual abuse by her father because her mother would
not intervene to stop it. In addition, Quintessa recounted stories of ongoing, severe physical abuse from her mother, the same mother who would not protect her from her father’s abuse. We listened as Quintessa described moving from the abuse in her family to an equally abusive intimate relationship with the father of her son. The ongoing abuse in this relationship was so bad that Quintessa felt the only way to survive was to run away from the relationship, even if that decision meant leaving her son behind.

**Oppression Theory and “Enduring Violence”**

Other theories address the issue of ongoing and inevitable violence. Iris Marion Young (1990), for example, identifies violence as one of the five faces of oppression and writes about the embeddedness of violence in our social structure. Young notes that the insidiousness of violence is not just in the actual harm inflicted, but also in knowing that one lives within a social structure that supports the existence of systemic violence. Young refers to violence as “a social practice” (p. 62). She states, “It is a social given that everyone knows happens and will happen again. It is always at the horizon of social imagination, even for those who do not perpetrate it” (p.62). Thus, as a member of a “targeted group,” one always lives with the expectation of violence, in the present and in the future.
**Trauma Theory and “Enduring Violence”**

Trauma theorists, too, have written extensively about the ways in which ongoing violence can affect those having to endure such violence. Herman (1992), Elkin et al. (1999), Terr (1991) and others have identified how violence and abuse, when experienced as a child, can leave one with a sense of ongoing and impending doom and an inability to envision a positive future for oneself. There is a sense of inevitability that one’s life will continue to be filled with bad and painful things, both presumed to be deserved:

Moreover, years after the event, the children retained a foreshortened sense of the future; when asked what they wanted to be when they grew up, many replied that they never fantasized or made plans for the future because they expected to die young.” (Herman, 1992a, p.47)

This realistically constructed view of themselves and their world constitute what Janoff-Bulman has identified as basic assumptions guiding everyday life.

This theme of a foreshortened sense of one’s future has also been identified by those doing research in the area of community violence. For example, Parsons (1994) and Eitle & Turner (2002) have documented the serious harm befalling children who grow up witnessing violence on a daily basis. Parson (1994) identifies how growing up surrounded by violence leaves a child feeling helpless and weak: “The sense of powerlessness over the traumatizing environment creates within the child a sense of insecurity and an experienced sense of
impotence (Parsons, 1994, p.161).” Thus, the impact of experiencing and witnessing violence sets the stage for continued expectations of the normative nature of perpetual insecurity. Perpetual insecurity, in turn, becomes embodied in the controlling and relational images pervasive among people with similar life trajectories. They are the paradigmatic trauma survivors so aptly described by Judith Herman’s work on trauma and recovery.

In sum, for the women I interviewed, the experience of violence felt inescapable. It was “just there,” a “constant” with no end in sight, perhaps the only certainty in lives otherwise marked by chaos and disorder. The inability to get away from or distance oneself from violence helped to obstruct any possibility for building a sense of self-efficacy or internal locus of control over one’s life; this, in turn, fostered for some of the women in this study experiences delineated in the second dimension of “enduring violence.”

Enduring Violence Dimension 2: Passive Endurance as a Means of Survival

The second dimension of the concept of enduring violence speaks to the notion that to survive violence, you just have to cope with it, endure it, get through it, that is, you just live with it. This dimension of the concept helps us to understand the seeming acceptance and passivity expressed by many of the women about their life circumstances. These feelings of resignation indicate how powerless many of the women felt in the past, and continue to feel, to change the
circumstances of their lives. This dimension – powerlessness expressed as the absence of self-efficacy - captures the belief expressed in the women’s narratives that coping and surviving one’s circumstance of violence and abuse means, to use the present day vernacular, “biting the bullet” and accepting “that’s just the way it is.” This aspect of the concept of enduring violence also gives us a way to understand the “actions” of women whose responses to experiences of violence and trauma appear to have been inaction. It helps us to see that what appears to be “passive acceptance” in fact, to them, may have constituted lifesaving agency.

There are several women in this study whose experiences of violence can be described by this dimension of enduring violence. I have previously described the experiences of Quintessa, a 44 year old African American woman who suffered abuse at the hands of both her mother and her father. Quintessa’s method of coping with all of this violence was to get through it and deal with it as best she could. She knew when her mother started drinking that she was “in for” a rough time, as her mother became extremely physically abusive:

**I:** In your family growing up, was it your mother and father together? Or just your mom?

**R:** No. Just my mom. She was very abusive.

**I:** Okay. She was very abusive?

**R:** Yeah. She used to drink, and she used to snatch her wig off and come after me, because I look like my father.

**I:** Oh, I think you told me that. So that used to get her angry?

**R:** Yeah, it used to really get her angry.

**I:** Yeah, and did your mom—was your mom
physically abusive?
R: Yes. Extension cords, ropes… and burnin’ my hands on the fire.
I: Oh, wow.
R: My mother was really mean.

(Quintessa)
When Quintessa could get out of the house in order to stay away from her mother she did that. However, when she was a young child, this was not possible. Therefore, many, many times she was left with no recourse except to endure the violence as best she could.

By the time she was age 12, Quintessa was also being sexually abused by her father. She told her mother about the abuse, but her mother did not believe her and continued to make Quintessa have regular visits with her father. Here is how Quintessa described this time in her life:

I: Okay. And… you said growing up your father wasn’t in the house?
R: No. I used to go to his house where he used to molest me. And then when I didn’t wanna go back, my mother still sent me back.
I: She did?
R: Mmhmm. And I told her, but she didn’t believe me.
I: She didn’t believe that he was molesting you?
R: Yeah. She did not believe that.
I: Was your mother mean and abusive to all the kids?
R: Yeah.
I: Okay, so she didn’t just single you out ’cause you look like your father?
R: She was abusive to everybody.
I: So the abuse, the sexual abuse with your father went on then for awhile?
R: Yeah, until I was like 19. Then I told my sister and she—we beat him up.
(Quintessa)

It is hard to know from Quintessa’s recounting of these experiences whether her mother just couldn’t be bothered to investigate Quintessa’s claims of abuse or whether, in fact, she really did not believe Quintessa. Either way, the effect of her mother’s lack of intercession on her behalf was to leave Quintessa, alone, to figure out how to survive the ongoing abuse by her father.

Turning to trauma theory for a moment, Freyd (2005) argues that it is not fear, but a sense of betrayal which is really at the core of traumatic experience. According to Freyd, “betrayal trauma” is “…a betrayal of trust that produces conflict between reality and a necessary system of social dependence.” (2005, p. 1) Freyd’s theory, like Herman’s (1992), speaks about the feelings of devastation and distrust that are created when one’s central belief system about who will keep us safe in the world is shattered. According to Freyd’s theory of betrayal trauma, when one suffers trauma at the hands of a caregiver, one is confronted with a terrible double bind: if one detaches from one’s caregiver, one may not survive; if one needs to stay attached to one’s caregiver, one must find a way to “forget” or redefine the betrayal which occurred (2005).

A child faced with such a double bind will often seek to recast or reframe the abuse being experienced as “deserved.” The child will tell her/himself that the abuse is happening because s/he was “bad” (Herman, 1992a). As we know, this
theme of one’s “badness” or “unworthiness” is often exploited by the child’s perpetrator. The longer the abuse and/or violence continue, the more the notion of one’s “badness” gets reinforced. The stage is set, then, for the one victimized to assume that s/he deserves to be abused and therefore, to accept as “normal” this type of behavior from others. In essence, a “controlling image” is created that conveys the idea that one deserves abusive treatment and that one is “unworthy” of receiving any other type of treatment – an example of the inextricable link between controlling images and relational images.

Many of the women in this study experienced a scenario similar to the one described above. Not only did they have to deal with violence early in their lives, but they also had to deal with acts of betrayal by a parent or parent-figure who was supposed to protect them and keep them safe. Along with feelings of betrayal, the women interviewed for this study described feelings of unworthiness. Herman (1992a) and Freyd’s (2005) theories both tell us that in the aftermath of trauma, it is often the feelings of not having been protected from harm that are the most devastating and cause one to question one’s “deservedness,” “worthiness” and “lovability”. This devastation is felt most acutely when the perpetrator is a parent or family member (Herman, 1992a).

We can see this theme of “unworthiness” or devaluation in the narratives of the women who experienced incidents of abuse and violence as they were growing up. For example, as we saw with Renata, the 34 year old African
American woman who was being regularly abused by her grandfather, no one came to her aid even though they knew of the abuse. Finally after enduring the abuse for years, Renata concluded that she had to take matters into her own hands. The inaction of family members and their failure to intervene to protect her let her know that she was not important or valued enough for anyone to act on her behalf. Similarly, Jenele, a 40 year old African American woman described enduring years of sexual abuse by her stepfather. Finally at age eleven, she got up enough courage to tell her mother:

R: Because this man was doing things to me…and then it went on … it went on to the age of eleven, when I finally told my mother. And, you know what the cause of trauma was—her not doing anything about it. That’s what caused the [trauma]…See, when nobody does anything,…it makes it just stay there. Like, it makes you feel worthless and it makes you feel like, you know, unloved.

(Jenele)

Renata’s story and Jenele’s story are but two examples related by the women in this study of childhood sexual abuse made even more devastating by the refusal of a parent to come to their aid when told of the abuse. Sadly, this was also the experience of Sharell, Latoya, Quintessa and Jaquin. All of their stories indicate how the effects of trauma are multiplied and made so much worse when an adult to whom a child looks for protection turns her/his back and essentially “sacrifices” the child to the perpetrator of the abuse. The impact is not only to
create a sense of the inevitability of having to endure the abuse and violence in one’s life, but also the loss of hope that anything could ever be different.

“Learned Helplessness” vs. Passive Endurance as a Means of Survival

When I use the term “passive endurance” to describe the way some women have responded to and coped with the violence in their lives, some may think that I am referring to the concept of “learned helplessness” described by Seligman and his colleagues (Peterson, Maier, & Seligman, 1993). However, at the heart of Seligman’s theory is what he refers to as the “contingency” of uncontrollability, meaning that there is “a random relationship between an individual’s actions and outcomes (1993, p.8),” thereby reinforcing the notion that one is helpless to effectively intervene. In contrast to Seligman’s concept, for the women in this study who described “passively enduring” the violence in their lives, the violence they had to contend with was not “random,” nor was the reaction they expected if indeed they did fight back. What the women felt certain about, if it were possible for them to envision fighting back, was that fighting back would result in more violence, greater harm and even death.

Herman (1992a), writing about trauma, notes that Seligman’s theory of learned helplessness has at times been misapplied to chronically traumatized people. One group who has been cast as passive and helpless is battered women. She notes that often these individuals are seen as passive or helpless when, in fact,
many are engaged in a “complex inner struggle” related to survival (p.91). Here is how Herman describes these victims:

In most cases the victim has not given up. But she has learned that every action will be watched, that most actions will be thwarted, and that she will pay dearly for failure….Before undertaking any action, she will scan the environment, expecting retaliation (1992, p.91).

Bandura (1989), most well-known for social learning theory, takes issue with the notion of individuals as helpless entities unable to act on their environments. He argues that, in fact, people do have the ability to act on their environments and that they often engage with their environments in very creative ways. Bandura’s theory of “reciprocal causation” (1986, p.1175) argues that the manner in which one engages with one’s environment molds one’s environment in the same way that one's environment helps determine how one will act:

Social cognitive theory subscribes to a model of emergent interactive agency. Persons are neither autonomous agents nor simply mechanical conveyers of animating environmental influences. Rather, they make causal contribution to their own motivation and action within a system of triadic reciprocal causation. In this model of reciprocal causation, action, cognitive, affective, and other personal factors, and environmental events all operate as interacting determinants (1986, p.1175).

Bandura’s theory would seem to suggest that those women who reacted to the violence in their lives in a passive, resigned manner, in fact were responsible for helping to perpetuate an environment where the violence would continue. In
analyzing the data, this is an important question to consider: to what extent did the actions (or inactions) of the women contribute to the violence that permeated their lives? I would argue, however, that this question must be asked in the context of asking, “In what ways does society perpetuate the belief that violence, particularly directed toward women and children, is acceptable?” Using the concept of enduring violence, the question posed should be, “Why did these women experience violence as the natural order of things?” In other words, what has contributed to the development of a “controlling image” that has, for women, reinforced the notion of violence as “natural” and normal in their lives and as something to be expected? Therefore, to ask, “How did the actions of the women contribute to the violence they experienced in their lives?” focuses us in the wrong direction, that is, toward insinuating an undue share of blame on the women themselves for what they have endured without any examination of the social structural forces which help to engender relationships rooted not in nurturance, but in domination.

Bandura (1989) himself does give us a way to understand what factors may influence how one chooses to act in a particular situation. He states:

People's perceptions of their efficacy influence the types of anticipatory scenarios they construct and reiterate. Those who have a high sense of efficacy visualize success scenarios that provide positive guides for performance. Those who judge themselves as ineffectual are more inclined to visualize failure scenarios that undermine
However, as Freire (2000) reminds us, oppression exists simultaneously as objective and as subjective realities. Thus, one’s internalization of a belief in one’s inefficacy, as we saw in the women’s narratives, is grounded in a history riddled with objective constraints – the “circle of certainty” mentioned above. Further, as Collins’ (2000) helps us to see, each of these “lived experiences” of powerlessness and inefficacy, regardless of the existence of constraints not of one’s own making, “feeds” and reinforces a “controlling image” of oneself as powerless and inefficacious - a perception supported by their relational experience of domination and betrayal. As many of the narratives in this study demonstrate, one’s objective feelings of powerlessness and inefficacy often become subjective feelings of “I deserve to be treated this way because I am bad/unworthy.” Jenele’s narrative, referred to earlier, illustrates this point so well. Resistance strategies (Miller’s (2008) strategies of disconnection) are means to an end, that of survival. For a number of the women, their strategies evolved from more passive means to more active means as exemplified by Quintessa, who after years of more passive enduring, joined with her sister to beat her father. Taking action in response to enduring violence leads us to the third dimension of a concept of enduring violence: action as resistance.
Enduring Violence Dimension 3: Action As Resistance

The third dimension of the concept of “enduring violence” is something I refer to as “Action As Resistance.” This dimension provides a way to understand the actions taken by the women in this study to protect themselves to whatever degree possible from the physical, psychological and/or emotional “wounds” of violent victimization. These actions took three general forms among the women interviewed: (1) help-seeking actions (2) self-destructive behaviors and (3) violence toward others. The actions easiest to understand are “help-seeking” behaviors. In the face of impending or actual harm, most of us can envision reaching out to those closest to us for help and/or protection. However, as we saw with Quintessa, when help is not forthcoming or when we are disbelieved, ignored or denigrated for seeking help, or when the person we turn to for help is a “harmer,” the result can be feelings of despair and resignation, feelings that one has been abandoned and left to endure the violence and abuse alone.

The second type of actions taken by the women, appear, paradoxically, to be self-destructive and yet, for many of the women, they provided an escape of sorts that allowed them to cope with the ongoing violence. It my contention that even seemingly self-destructive acts engaged in by the women in this study in order to survive physically and psychologically, can be seen as acts of resistance. The ability to survive in the face of profoundly destructive relationships and environments constitutes active resistance against “soul scarring” violence, those
“psychic annihilation” experiences designed to *destroy* any sense of self-esteem, self-efficacy or internal locus of control. Efforts to protect the self through “dulling” of the inflicted pain, give the individual the possibility of transcending the present in order to survive into the future.

Most of the women interviewed described engaging in drug and alcohol abuse. Others talked about acts of self-mutilation and attempted suicide. Still others described participating in random acts of unprotected sex. On the surface, each of these acts could be viewed as an attempt to put one’s life in jeopardy. However, to the degree that each of these actions enabled the women to be “taken away,” that is, dissociated from their ongoing experience of violence, these behaviors, then, became a way to cope and to survive.

Actions taken by several of the women, though appearing to be self-destructive, served to help them endure the violence in their lives. Neisha, at age 17, was easily lured into prostitution after years of being abused and neglected in foster homes. She describes explicitly developing a drug habit to dull the pain of childhood abuse experiences triggered by prostituting:

**I:** OK. And, [name], how did you end up in jail the 1st time?

**R:** It was, mostly it was prostitution. Loitering, ya know. And, at the beginning, there were no drug charges. But it progressed to that. I was wanting to change what I was doing because, ya know, that line of work was very painful because of my sexual abuse and my past. So I felt abuse over and over and over, day in and day out, all day long. All night
long. Ya know, it was ongoing. And, and it just
widened the wounds. Deepened the pain. And that
kept me using because, the drugs, they helped me, it
helped me cope with what I was doing, where I was
going, nobody in my life. The loneliness was, it was
rampant in my life. And I started the jail thing, like
I said, at 17.

(Neisha, 42 year old woman of color)

Sharell, a 30 year old African American woman also turned to alcohol and
drugs to cope with the violence in her life. She describes growing up in her
household as being in “a hell-hole.” Sharell’s mother was an alcoholic who was
always drunk and her father was a “crackhead.” Sharell was sexually abused by
her cousins starting at age 5 and continuing until she was age 12. She, too, told
her mother of the abuse and not only was disbelieved, but told that if she was
being sexually abused, it was her own fault. Sharell describes herself as an
alcoholic by the age of 7 who used to go to school drunk. By adolescence, she
was using cocaine.

After years of abuse, Sharell, at age 12, reached outside of the family for
help. She told a teacher what was going on in her house and she was removed
from her family and put in a group home. This began a period of cycling from
group home back to her family back to the group home. Here is how Sharell
described this period:

R: I was 12, back and forth into the group home.
Go to the group home for six months, go home. It
was like a string of rubber bands, back and forth, ya
I: And then how would you end up back in the group home? What would happen?
R: I would run away from home. I would have a P.I.N.S.\textsuperscript{12} petition on me. And I was on probation. And I would just run away from home because my mother would still drink and the abuse would still go on. She would hit us with anything. And so I would never come home And I would be drunk. And they would violate me. And I was happy in the group home.
I: …You said you’ve been in and out of psychiatric hospitals?
R: It started at the age of 12. Every time I’d leave a group home and go home, I tried to commit suicide.
(Sharell, 30 year old African American woman)

So Sharell, even though very young when her abuse began, found several ways to “act out” as a form of resistance. By age 7, she was drinking to excess, a coping mechanism used by many adults who want to block out painful emotional feelings. By age 12, she actively sought help by telling her teacher about the ongoing sexual and physical abuse she was enduring. Then, in another act of resistance, each time she was discharged from the group home back to her family, she would run away and get drunk so that she would be sent back to the group home. If these behaviors did not work, Sharell would try to commit suicide.

\textsuperscript{12} P.I.N.S. is the acronym for “person in need of supervision.” These petitions were used for adolescents deemed at risk because of out of control behavior. A P.I.N.S. petition gives Family Court the legal right to take action, such as removing the adolescent from his/her home.
These acts of attempted suicide would result in psychiatric hospitalization that, as awful as it may have been, was preferable and safer for her than returning to her family’s home.

Although drug and alcohol abuse was probably the most often described action taken by the women in this study to deal with the ongoing abuse and violence in their lives, there were a number of other actions identified by the women.

In addition to their efforts to seek help, dull or dissociate from the pain, some of the women that I interviewed also engaged in a third type of action: striking out against others. Some of the ways the women acted out violence towards others appeared to be clear calls for help and intervention, from someone, from anyone. In addition, some of the acts of violence that victimized others can be seen as attempts to feel more powerful by acting out one’s own oppression on others. Freire (1970) describes these acts as using the tools of one’s oppressor as a means to be “like the oppressor” who is seen as superior.

For example, Earline, a 45 year old African American woman who was sexually abused by her cousins, spoke about gaining a reputation as a “fighter” when she was growing up. By the time she was in junior high school, she had been banned from every junior high in her district for fighting. It was not until she went to jail that she was able to get her propensity to fight under control, and then, only because she began taking medication to help her control her behavior.
Fighting gave Earline a way to reinforce her feelings of being “better than” her classmates, a feeling that Earline describes as important to her throughout her years growing up.

Renata, a 34 year old African American woman, also started “acting out” at a young age. Recall that she, beginning at age six, was learning how to take guns apart and clean them; she was digging graves for bodies in her backyard; and she was regularly being sexually abused. In school, at age six, Renata was “acting out” some of the violence she experienced at home.

R: …I was seein’ the psychiatrist since I was 6, cause I was rebellin’ in school, cause I burnt the kids…cause I been doin’ mad crazy, cause there’s no other way.
I: Exactly
R: So, I took my coat out of the closet and burnt all the other kids’ coats. I was hittin’ on my teacher, beatin’ the kids. I was rebellin’ cause that’s the only way I could get my shit on. You know? And first they said I was hyperactive. …[I] wanted to tell the psychiatrist – I just couldn’t tell the psychiatrist. I was uncomfortable. I deceived him so many times. But he knew, but he just couldn’t get it out of me. I told him. I told him.
(Renata)

Clearly, Renata was suffering from the overwhelming violence she was being exposed to at home. Having no way to deal with the enormity of the emotional impact, her actions in school conveyed the fact that there was something terribly wrong in her home environment. With the limited means available to a six year old child, she tried to communicate her need for help.
A number of the women reported taking part in actions that were violent, criminal acts, some committed as juveniles and some as adults. These acts often resulted in their incarceration in residential treatment facilities, in psychiatric hospitals, in jail or in prison. For example, we heard previously about Carmella, a 44 year old, self-described Hispanic, who was committed to a psychiatric hospital at age 15 for killing her physically abusive boyfriend. Carmella started shooting heroin at age 12 and by the time she was in her 20s, began committing armed robbery to support her drug habit. During one of the robberies, the victim was pistol whipped very badly. Carmella was sentenced to two to six years in prison as a result.

Delia, a 41 year old African American woman, also described a history of violence. Delia was given up for adoption at 8 years old and spent the rest of her childhood and adolescence living in group homes all around the State. Delia described an incident where she used her cosmetology scissors to try to stab one of the girls living with her in the group home. The girl had taken something from her and Delia reacted with violence.

Delia also described an incident involving her brother who, she said, was always the one to fight her:

R: He pulled a gun out on me, and I came back and I came back and I tried to shoot him.
I: You did? Yeah. When you were kids or as adults?
R: No, as adult. ‘Cause my son was sitting there and
he came… I was renting a room from him. He came in the room, he was mad, he came in the room with a brand new nickel-plated 38 revolver, short nased, pointed it at me and my son and said, “get your son out of here.” That he was going to do something to his girlfriend. I said listen, I packed my son up, took him to his father. Went to my boyfriend’s house, got a long-nose 357, put the bullets in it, and went back… we shot a hole through the wall… had a kick to it. Almost hit me in my face. I had to let him know you don’t point a gun at me. I’m your sister, you don’t point no gun at me. You got a problem, just say you got a problem. To bring a gun in the room with my son, and he’s looking at it saying, “a gun, Mommy,” you know. And it’s very upsetting ‘cause my son will grow up still remembering that time.

I: Right, right right.
R: So, I didn’t like that.
I: Right…. So… you came back and you shot through the door?
R: Yeah, shot through the door.
I: Did you hit him or anything?
R: Nope. Nope. I hit the wall.
I: Yeah, yeah.
R: I was living a dangerous life. I’m too old for that now.

(Delia)

Later, in that same interview, Delia described feeling like people always have taken advantage of her because she was too kind-hearted and she has reached a point where she is trying to stand up for herself:

R: …people tell me to stand up for myself and stop taking so much from people and stop giving and giving and letting people just take from me. And I was doing wrong…people was taking my
money. I was letting people do a lot of things to me to the point where I just couldn’t take it no more. (Delia)

So, Delia, has clearly reached a point where the residue of years of being taken advantage of and abused has “boiled over” and she will no longer put up with this type of treatment. Her method of enduring abuse and violence today is to immediately lash out against those whom she feels disrespect her and take advantage of her, even if it means using violence. She berates herself for years of silence and inaction and clearly now has chosen a different method of enduring violence, that is, to take direct action, even if that action is sometimes harmful and unlawful.

**Summary**

In conclusion, whether the women acted in help-seeking, apparently passive, self destructive or “other” destructive ways, their efforts had the fundamental function of enabling them to physically survive the violence. For many of the women, however, the impact of enduring violence has left them seriously psychologically and emotionally scarred, with low feelings of self-worth, self-efficacy and little sense of their ability to control their lives. As described so poignantly in their narratives, the women’s experiences of violence and abuse have helped to create and reinforce a “controlling image” which has communicated to them that they are unworthy and undeserving. In addition, the
“truth” of these negative self conceptions has been confirmed for them because their experiences of violence and abuse were suffered in the context of relationships which, by definition were supposed to be loving and caring and nurturing. The violence they have had to endure has communicated clearly, not only their devalued and objectified status, but also that they are deserving of nothing more than relationships characterized by violence.

Understanding the impact and the extent of the violence experienced by women coming out of prison and jail has tremendous relevance for macro, mezzo and micro level social work professionals. I will address these issues in the next chapter, “Conclusions, Recommendations and Areas for Further Research,” and discuss how the findings from this study can help to inform policies and programs designed to help formerly incarcerated women as they reenter the community. I will also make several suggestions for areas of further research.
CHAPTER 7

“CONCLUSIONS, RECOMMENDATIONS AND AREAS FOR FURTHER RESEARCH,”

The knowledge of horrible events periodically intrudes into public awareness but is rarely retained for long. Denial, repression and dissociation operate on a social as well as an individual level. (Herman, 1992a, p. 2)

Summary of Study

In conclusion, I began this study in order to understand how women who have recently been incarcerated experience the process of transitioning from incarceration to life back out in the community. I was interested in learning how they saw themselves and their lives prior to incarceration, how they have made meaning in their lives and what they envisioned now for themselves as they reentered mainstream society. It seems self-evident that their voices be heard in any policy or program planning committed to rehabilitation or resettlement; at the same time, as I have shown, they are among the least visible and/or audible people in our society.

In the course of conducting 41 interviews with 20 formerly incarcerated women, I discovered that it was not possible to discuss their lives, their sense of themselves, nor how they have made meaning out of their experiences without
discussing the violence that has been so ubiquitous throughout their lives. I quickly understood, as the women began to discuss their lives prior to incarceration, just how profoundly damaging these experiences of violence had been and continued to be to their sense of themselves, to their sense of self-efficacy and to their sense of having control over their lives. It became evident that in order to have an idea of how well the women in this study would fare post-incarceration, I needed to have a much better understanding of how they had endured the cumulative impact of the violence that saturated so much of their lives.

The women’s narratives revealed lives riddled with violence and abuse; every woman who participated in this study reported a history of some type of serious abuse or violence. For many of the women, the violence began early in childhood, was pervasive during adolescence and continued into their adult lives. The violence that began early in life had a continuous presence in their life span and presented itself to them as a formidable challenge to their developing assumptions about the (in)stability of their environments and their identities within these environments. The types of violence and abuse the study participants reported experiencing included: childhood sexual abuse; childhood and adult physical abuse; neglect; intimate partner violence; rape and sexual assault; and witnessing violence. In addition, several of the women also reported being abused or threatened with violence by corrections officers or other inmates.
while incarcerated. Forty percent (40%) of the women also reported engaging in violent acts toward others.

The women’s narratives told the story, not just of violence experienced, but also of violence anticipated or expected, regardless of the setting. If they weren’t experiencing violence or abuse in the present, they were anticipating and attempting to prepare for when and with whom their next violent encounter would occur. For the women in this study, their lives and their experiences had taught them that the violence and abuse in their lives was ongoing and pervasive, that it would “endure” as the predominant reality with which they would have to contend. I have suggested the creation of the concept of “enduring violence” as a way to understand both the “enduring” or ongoing nature of violence in the lives of these formerly incarcerated women and as a way to conceptualize how these women were able to “endure” or survive and adapt to the violence in their lives.

I have drawn from Patricia Hill Collins’ (2000) concept of “controlling images” and related this concept to the women in this study. I have also drawn from Jean Baker Miller’s concept of “relational images.” I have concluded that the violence experienced by the formerly incarcerated women in this study has both helped to create and to reinforce existing “controlling images” and “relational images” which have communicated to the women that they are “unworthy” and “undeserving” of loving, nurturing, non-exploitative relationships. As Freire (2000) reminds us, the women’s experience of violence
and abuse continues to send a clear message that they are “objects to be known and acted upon,” (2000, p.36) objects without any intrinsic value. Carrying this assumption about themselves and their social world can be understood as an adaptive response to lived realities beyond the imagination of most of the policy shapers and program operators charged with orchestrating their resettlement into community life.

There is an inexorable link between the women’s “controlling images” of “unworthiness” and “undeservedness” and the “relational images” carried by the women in this study. Miller and Stiver (1997) describe the interplay of controlling images and relational images. They define “relational images” as “the inner constructions we each create out of our experience in relationships (Miller & Stiver, 1997).” According to Miller and Stiver (1997), we begin forming relational images at a young age and these images communicate not only what we believe our experience will be in relationships, but also the meaning these experiences will have in terms of how we think about ourselves and the scope of relational possibilities available to us. Thus, societally-created “controlling images” both provide the context within which we experience relationships and, concurrently, let us know what type of relationships we are entitled to have. From our experienced relationships we then derive “relational images” which reinforce the negative “self-portrait” painted by our “controlling images.” To paraphrase Collins (2000), “controlling images” function to make various forms of social
injustice appear “normal” and “natural.” Therefore, these controlling images effectively instill in marginalized populations the notion of being “less than;” they also contain the assumption that the person is a recipient of direction, meaning and reactive responsibility. Deprived of the opportunity to experience oneself as a Subject who knows and acts (Freire, 2000), the respondents’ human energy from birth onward is directed towards a survival devoid of empowering, mutually empathic relationships (Miller, 2008) that “fit” with more positive and life- affirming controlling images.

Within this framework, it is easy to understand how and why the women in this study entered into and remained in physically, psychologically and emotionally abusive relationships. In addition, each and every act of violence toward the women by an intimate partner reconfirmed the negative self-concept of “unworthiness” which, in turn, confirmed the belief, “I deserve to be treated this way.” Without any countervailing force, the cycle of violence, abuse and degradation will continue, further solidifying the women’s burgeoning negative self-concept and the continued participation in exploitative and harmful relationships. The implications of this reinforcing cycle of negative beliefs, relationships and self-concepts are tremendous and I will address them shortly.

The women participating in this study live their lives at the intersection of social statuses typically socially stigmatized, degraded and objectified: as women, as women of color, as women struggling socio-economically, as undereducated
women, as women addicted to drugs and alcohol, as women who have lost custody of their children, as women who have been the victims of violence and abuse. What I discovered was that to help these formerly incarcerated women leave these lives requires much more than participation in generically designed drug and alcohol rehabilitation or job training programs. In order to assist these women in their transition, not just from incarceration to the community, but also from a life of survival through criminal activity to survival in mainstream life in society, not characterized by the ever-present threat of violence, we need to understand who the women are, how they make sense of their lives and how they understand their sense of themselves, their sense of self-efficacy and their sense of an internal locus of control. This study has been an endeavor in that direction. Efforts to seek this understanding and an alternative life course must be grounded in a critical understanding of violence and its enduring impact.

Implications of the Study Results

Violence is an epidemic, not just in the United States, but worldwide. In 1996, violence was declared “a major public health issue” by the World Health Assembly (Krug, et al., 2002, p. 1083). In 2002, the World Health Organization issued the first “World Report on Violence and Health,” exploring, in part, the extent of the health and social effects of various types of violence and abuse (Krug, et al., 2002). Public health researchers long ago declared violence in the
United States to be of epidemic proportions and a threat to our physical health, a
demand to our health care system and an undermining factor to the basic social
institutions of our society (Gilligan, 1997: Mercy et al., 1993).

Herman (1992a) and others (Scaer, 2001; Schnurr & Green, 2004; van der
Kolk, 2004) have documented the physiological as well as psychological
repercussions of extreme stress associated with the kinds of trauma experienced
by the women in this study. The Adverse Childhood Experiences (ACE) Study
(Anda et al, 1999; Felitti, 1998, 2002) has shown that pervasive exposure to
enduring violence, especially violence that occurs in childhood has been
correlated with much higher than expected incidence of engagement in high risk
behaviors such as smoking, drug and alcohol abuse, high risk sexual behavior,
and overeating. These findings suggest that those exposed to early childhood
trauma and victimization often attempt to manage the impact of their trauma
through self destructive coping mechanisms that also result in serious adverse
health outcomes later in life. Felitti (2002) asserts that the Adverse Childhood
Experiences Study “found many other measures of adult health to have a strong,
graded relation(ship) to what happened in childhood: hepatitis, heart disease,
fractures, diabetes, obesity, alcoholism, occupational health, and job
performance” ¶ 13.

Similarly, the literature on health and stress has identified disparities in long-
term health outcomes among people of unequal economic and social statuses.
Pearlin et al. (2005) introduce the concept of stress proliferation to help explain how events and circumstances of one’s early life can adversely affect one’s health over the life course. Consistent with the findings of the Adverse Childhood research group, Pearlin et al. (2005) posit that traumas, both physical and emotional and often involving violence, are among the most powerful and long-lasting precipitators of additional stressors negatively affecting one’s well-being. Turner and Avison (2003) argue that, in general, those in the least privileged socio-economic positions experience a greater incidence of trauma than those in more privileged strata. Pearlin et al. (2005) argue that findings of disproportionately high incidence of early trauma among those most socially and economically disadvantaged coupled with the research demonstrating the impact of early trauma on later health problems indicate that traumatic events must be considered as contributing to the health disparities among disparate socio-economic groups in a compounding and interactive way.

However, federal, state and local policies continue to fail to recognize, not only the prevalence of violence, but also the enduring impact of violence on physical, psychological and emotional well-being and on one’s ability to feel safe in the world.

In addition, policies have failed to recognize and respond to the enormous social and fiscal costs which come from violence (Caldwell, 1992; Children’s Defense Fund, 2005; Wang & Holton, 2007.) Incarceration is but one of these
costs. Another related cost is the multi-generational impact of incarcerating increasing numbers of women who are the primary caretakers for children under the age of eighteen. Looking at the statistics from New York State, 76% of women in prison are mothers. Most often, these women are sentenced to penal institutions located hundreds of miles from their families, preventing visitation and resulting in disconnection between mothers and their children. Thus, upon release, these women are faced not only with the difficult task of reentry into the community, but also with struggling to rebuild relationships with their children with whom they may not have been able to meet for many months.

The findings of this study and others (Farmer, et al. 2006; Reiss & Roth, 1993) pose serious and troubling questions about the will of policy makers to work to end violence toward women and children. Indeed, the prevalence of violence experienced by women and children in this country raises the question, “How much importance do those in our society who influence policy formulation attach to addressing the issue of violence toward women and children?” We know that the overwhelming majority of women who are incarcerated have experienced profound degrees of violence, are women of color and come from poor families. Perhaps, as Davis (1981, 1985, 2000) and others (Bograd, 2005; Ritchie, 2005; Smith, 2005) suggest, the seemingly inconceivable neglect of the violence in their lives can be largely explained by race and class.
As many have noted (Blau, 2007; Ginsberg & Miller-Cribbs, 2005; Rainwater, 2009,) the way in which a social problem gets defined determines the framework within which the problem is viewed, the type of “solutions” which are pursued and the ways in which resources are allocated. Violence as a social problem, historically, has been linked to crime. Therefore, how our society has defined violence as a social problem has been very intertwined with how we have responded to the problem of crime. The biases and contradictions inherent in our criminal justice policies, therefore, are also inherent in our response to the problem of violence. For example, feminist criminologists (Chesney-Lind & Pasko, 2004; Pollack, 2007) and others (Mustard, 2001; Spohn, 2000; Spohn and Beichner, 2000; Steffensmeier and Demuth, 2000) have written extensively about the disparities across racial, ethnic and gender lines in terms of which laws are enforced, how they are enforced and the types of prison sentences which are imposed. Ritchie (2005) has argued, for example, that crimes against members of marginalized or oppressed populations are not taken as seriously as crimes committed against members of the majority population. Similarly, and related specifically to this study, the response to crimes against women, including violent victimization, is often a non-priority. For evidence of this gender bias, we have to look no further than most large U.S. city police departments and the huge number of unprocessed rape kits, some of which have sat for years in evidence lockers waiting to be tested (Kristoff, 2009).
The situation is even worse for poor women of color. Many times these women are blamed for their violent victimization and so learn in short order that violence is just something that they are going to have to learn to endure (Wyatt, 1992). The indifference of society to the harm experienced by women and children who are marginalized reinforces for these women and children their status as “disposable” human beings and conveys clearly the message that they are not worthy of societal protection and/or intervention.

Policy Recommendations

As a way to begin the discussion of policy recommendations, I start by identifying the premises, derived from and related to the findings of this study, which must underlie any recommendations of policy:

1. Policy makers must recognize that we have an epidemic of violence and that this epidemic is experienced differentially as a result of gender, class, age, race, ethnicity and sexual orientation

2. Policy makers must recognize the disproportionate amount of violence borne by poor women and children

3. Policy makers must recognize the social, economic and human “costs” of this epidemic of violence
4. Policy makers must recognize the ways violence has become embedded in our social structure and recognize the need to work to rid the system of its endemic violence.

If the starting point for policy makers at all levels is an acceptance of the truths identified above, then the most immediate task is to take steps to change the societal acceptance of violence “as a given.” In order to begin this process, policy makers at the federal, state and local level must establish “zero tolerance for violence” policies aimed at transforming the social norms which accept, encourage and, in some cases, reward the use of interpersonal violence. Indeed, what we must work to change are those norms which “normalize” certain social, economic and political contexts which beget violence.

Based on the premises described above, I would make recommendations in two general areas. The first area addresses social policy to reduce the overall level of poverty and inequality that precipitates and exacerbates many of the worst elements of violence in the lives of women, children and men (Fagan & Browne, 1994). The second area addresses policies that would more directly be targeted toward women who are entering the criminal justice system, facing sentencing, women currently in prison or jail and women being released.
Structural Level Social Policy Recommendations

Dr. Sandra Bloom (2001), a past president of the International Society for Traumatic Stress Studies argues that in order to work to eradicate violence, we must work on both a social and an individual level simultaneously. Writing about violence from a public health perspective, Bloom notes that to fight against violence at the level of the individual without addressing the problem on a systemic level will render the efforts on an individual level ineffective. I concur with Bloom and believe that any policy recommendations aimed at preventing and eradicating poverty must include the following:

1. The establishment of a minimum income for all. Creating a “floor” below which no individual living on American soil should be allowed to fall.
2. Federal and State programs designed to develop safe and affordable housing options for the poor and the working poor.
3. The development of different types of transitional housing geared specifically for individuals and families displaced and struggling to rebuild their lives while coping with financial, health-related and other socially-related problems
4. The provision of universal, quality healthcare, including care for mental health and substance abuse problems
5. Guaranteed access to quality education for everyone and access to job training programs
6. Greater availability of resources and services to support and assist families in crisis and under stress
7. Greater availability of resources and services to help families grow and thrive

Prevention and Intervention Social Policies

Given the existence of wide scale inequality and denial of resources to address basic human needs (as delineated in the previous section), social policies must be designed both to prevent the kinds of violence that the women in this study experienced and to intervene to remediate the devastating effects of the failure of society’s institutions to prevent violence and protect its most vulnerable members. Thus, at the level of social policy decision-making, policy makers must ensure that the institutions which make up our systems of education, healthcare, social services, and juvenile and adult criminal justice focus their missions and activities on identification, preemption, prevention, monitoring, interruption and eradication of violence.
Programmatic Recommendations

The findings from this study and the policy implications addressed above must translate into agency prioritization of the elimination and remediation of violence throughout all programmatic activities. For example, program initiatives formulated from policies designed to eradicate violence must incorporate the insights that derive from the first dimension of the concept of enduring violence. This dimension identifies the objective reality and subjective sense experienced by the formerly incarcerated women in this study that the violence in one’s life will be ongoing and/or recurrent. In addition, this dimension highlights the belief in the inevitability and constancy of violence in their lives. Knowing that this belief in the inevitability of violence pervading their lives comes from the women’s actual lived experiences, we must develop both policies and programs which work to eradicate violence and which demonstrate a commitment to the ongoing pursuit of this goal. Only then, will we be able to begin to help women who have been incarcerated to have some hope that, in fact, their lives could be different.

Programs must acknowledge the impact that negative controlling and relational images have played and continue to play in the lives of women who have been incarcerated. Programmatic foci must seek to transform these images. A cautionary warning, however, is warranted when seeking to turn research findings into policies and programs designed to “treat” individuals: we need to
avoid the temptation to “over psychologize” those for whom policies and programs are designed, while ignoring the structural elements contributing to the particular problem. Too often analyses that further our understanding of the impact of particular phenomena and the coping strategies used by those experiencing these phenomena lead to the pathologizing of the individuals affected. Thus, policies and programs designed to respond to and remediate the ubiquity of violence, especially violence against women and children, must avoid the trap of characterizing those victimized as “mad” or “bad (Pollack, 2007)” and ultimately responsible for the harm which has befallen them. If we end up blaming the victims of violence for the trauma and abuse they have experienced, then the “solution” to the problem becomes individual, medical model based psychotherapy.

**Specific Recommendations for Programmatic Interventions**

The following are recommendations for mezzo or intermediate level programs to address the issue of violence against women and children. While these recommendations would benefit all women and children, they are proposed specifically to address the tremendous amount of violence experienced and endured by women who have been incarcerated. Some of these recommendations focus on prevention of violence while others focus on treatment for those victimized by violence. The goal of all the programs and policies needs to be the
transformation of existing norms which accept or condone violence as an acceptable means for resolving conflict.

Prevention Recommendations

1. Resources need to be made available to community-based not-for-profit agencies, particularly those serving marginalized populations, to address issues of violence in the lives of women and children. Funds should be earmarked for outreach programs to schools in order to promote violence awareness and to develop programs designed to build a constituency of students who will commit to “violence-free living” and who themselves will become “violence-free” advocates among their peers. There are a number of program models which could be used to develop programs like this including Gay/Straight Alliance clubs currently existing in many schools and Drug-Free clubs. These programs could be used as models for the formation of Anti-Violence Alliance clubs in schools.

2. Resources should be made available to faith-based organizations and communities to develop effective anti-violence education programs and initiatives. Faith-based organizations often have more credibility than non-faith-based organizations in minority and marginalized communities because they frequently have been the only organizations responsive to the
needs of community members. Therefore, many times they are able to reach out to hard-to-engage individuals with whom traditional agencies have not had success. Traci West (2007) has documented the potential power of faith based communities to respond to violence in the following ways: the mentoring of survivors; monitoring and responding to crisis situations; documenting the stories of those who have lived with violence, survived and resisted it; and advocacy with and for those affected by domestic violence to get the help they need from police, hospitals and social services.

**Treatment Recommendations**

There appear to be an increasing number of programs developing to address the needs of women finishing their periods of incarceration and reentering the community. However, there continues to be a need for additional programs and services which have as their mission the provision of services in the context of building supportive, affirming and empowering relationships between staff members and the women they serve. These programs should specifically counter the negative controlling and relational images internalized as a result of the multiple, severe and traumatizing experiences of abuse and violence experienced by women who have been imprisoned. The focus must be on working with formerly incarcerated women to transform these negative controlling and
relational images so they can begin to envision the possibility of empowering, affirming and mutually empathic relationships. There are existing programs in several States based upon the Stone Center Relational-Cultural Theory approach which should be used as models for program development of this sort.

The following, therefore, are principles that must underlie treatment programs in order to help address the ubiquity of violence in formerly incarcerated women’s lives. These principles reflect the results of this study.

1. All programs must start with a definition of the problem under treatment which acknowledges the macro or structural roots of the problem and does not hold the individual responsible for those things which are not in her control, for example, the lack of priority given to the issue of violence against women and children by the society in which she lives.

2. Programs must start with a definition of the problem under treatment which recognizes how societal structures marginalize certain groups and how this marginalization often leads to feelings of individual powerlessness, low self-efficacy and the destruction of any sense of an internal locus of control. Programs must recognize the link between marginalization, feelings of individual powerlessness and decisions to act out in ways harmful to self or others.

3. Programs must recognize the power of respectful, non-objectifying, supportive relationships in helping individuals to find or develop their
“authentic selves” and in so doing, to begin to work toward changing the circumstances of their lives.

4. Programs must be staffed and run by individuals who believe in the transformative power of mutually supportive, non-objectifying, non-exploitative relationships, who treat people with dignity and respect and who will hold others responsible for acting in these ways.

5. A useful program model to help formerly incarcerated women work on issues of low self-esteem and low self-efficacy might be a stage-oriented model similar to Herman’s (1997) model of the stages for healing from trauma. Herman suggests that first, a sense of safety and control has to be established, followed by an engaged, partnered process of grappling with the actuality of one’s traumatic experiences, and a third stage which focuses on reconnection. The process would necessarily incorporate the development of critical awareness of how one has unwittingly internalized negative “controlling images” in order to move toward being able to experience themselves as authentic human beings.

6. Another promising model described by Almeida and Lockard (2007) is based on the Cultural Context Model which avoids the risk alluded to above, of over individualizing therapeutic interventions by incorporating socio-education from a Freirian (1972) approach to enable survivors of abuse to name and situate the violence they have experienced in a critical
analysis of the culture within which it occurs. Through dialogue centered on the women’s stories about their lives, relationships and experiences, as well as exposure to cultural depictions (e.g. films) of societal gender, race, ethnic, sexual orientation and class norms deriving from inequality and domination, the process seeks to enable the women to locate themselves within the society’s hierarchy. The Cultural Context Model uses same sex “culture circles” which include trained therapists and other survivors (p. 308-311) to rebuild a sense of connection and shared understanding. In addition, these culture circles are utilized in work with abusers as well to foster a similar development of critical consciousness and connection to self and others whose choices and behaviors have been enacted from their place in the structural hierarchy. These cultural circles function to increase accountability and enable batterers to deconstruct their own privilege and the alienation that derives from it.

Both Herman (1997) and Almeida & Lockard (2007) have conceptualized approaches to treatment that seek to place survivors at the center of their treatment. Each of these models challenge survivors’ to reject their internalized “controlling images” as objects and repudiate their socialized acceptance of having to “endure” violence.”

While this discussion has focused on therapeutic interventions, the same conception of incorporating a critical approach to dealing with the nearly always
individually framed notion of “bad” or “mad” (Pollack, 2007) should be applied in the institutions of education, health care and criminal justice.

**Substance Abuse Treatment**

The majority of women who end up incarcerated have drug and/or alcohol problems and are often referred for treatment upon release. The results of this research and numerous other studies (Dayton, 2000; Evans, 1995; van der Kolk, 1996,) indicate that there are many reasons why people turn to drugs and alcohol, including using these substances to deal with feelings of low self-esteem, low self-efficacy and hopelessness. This study and many others have documented the ways in which the conditions of the environment in which one lives can contribute to and exacerbate these negative feelings. For example, the data from this study demonstrate that when a woman’s life is characterized by enduring violence, she may react by engaging in harmful or self-injurious behaviors including drug and/or alcohol abuse. Similarly, a woman dealing with enduring violence may simply try to accept that the presence of violence in her life is “just the way it is” and to deal with the violence in whatever way she can, including abusing substances. Unfortunately, many programs set up to help people deal with their substance abuse problems do not deal with the issues underlying one’s decision to abuse substances. Instead, most drug and alcohol programs focus on the addictive behavior, the “people, places and things” which trigger the desire to
However, because most programs are based on the Alcoholics Anonymous 12 Step program, the treatment focuses on individual responsibility for one’s behavior and not on the larger, environmental issues which may be inexorably linked to one’s abuse of substances.

**Suggestions for Further Research**

This study was designed as an in-depth, exploratory study of twenty formerly incarcerated women working to reconstruct their lives after one or more stays in prison or jail. As a qualitative study, its findings cannot be generalized to the larger population of all formerly incarcerated women. However, the findings from this study help to expand the knowledge base about the dynamics of violence in the lives of women who end up in the criminal justice system and help us to understand the lasting impact of violence on formerly incarcerated women, even as they finish their prison/jail sentences and begin reassembling their lives “post incarceration.” The ubiquity, severity and amount of violence experienced by the twenty women in this study and the lack of intervention by societal

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13Most alcohol and drug treatment programs use a 12 Step model similar or identical to the 12 Step program used by Alcoholics Anonymous and Narcotics Anonymous. The first steps are admitting that you are powerless over your disease and turning to a “higher power” for help.
institutions that could have intervened, raise questions that should be explored in future research. The following are several suggestions of areas needing further exploration:

1. Further research using a larger and more culturally, racially and ethnically diverse sample is needed to determine if the pervasiveness, nature and impact of violence found in this study holds true for a larger, more diverse sample of women who become incarcerated. In particular, the concept of enduring violence needs to be “tested” with a larger, more culturally diverse population, both to see if the larger concept holds true and to see if the three dimensions of enduring violence identified in this study are relevant to a larger, more diverse sample of formerly incarcerated women.

2. Especially important is further research that will examine the impact of the concept of enduring violence on the controlling and relational images internalized by female offenders. Future research should examine the ways in which the perpetuation and affirmation of negative controlling and relational images keep formerly incarcerated women caught in a cycle of re-offend--re-arrest--re-incarcerate.
3. Future studies should examine the effects that class, race, ethnicity, culture, sexual orientation and religion have in varying the exposure, degree and impact of violence in the lives of women who become incarcerated.

4. Future research should continue to examine the relationship between poverty and violence and the ways in which both are likely to impact future health and mental health outcomes for women and children born into these circumstances.

Most importantly, however, any future research must be designed so that, in our efforts to achieve results which can be generalized, we guard against losing the “voices” of the women themselves. The voices of women and their children must no longer be rendered silent; their lives must no longer be invisible; women and children must no longer be forced to endure untold violence and abuse. As a society, we must commit ourselves to the eradication of violence and the mores which support a culture of violence. We must commit ourselves to furthering the principles of equality, human dignity and social justice for all and continue to pursue research agendas which track the success or failure of our efforts.
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APPENDIX A

CORIHS CONSENT FORM

Project Title: Women Released From Jail: Re-Entry and the Struggle to Avoid Re-Incarceration

Principal Investigator: Dr. Linda Francis,

Co-Investigator: Diane M. Johnson, LCSW-R

Research Consent Form

You are being asked to volunteer in a research study.

Purpose: The purpose of the study is to gather information about the experiences of formerly incarcerated women during the first five years after their release from prison or jail. The data gathered from this study will be used to help policy makers and program developers to better address the issues and problems faced by formerly incarcerated women as they re-enter the community and attempt to rebuild their lives.

Procedure: If you agree to participate, you will be asked to read this consent form or you can have it read to you. You will then be asked to give your verbal consent to participate in the research. In an effort to provide you with the highest degree of confidentiality protection, you will not be asked to sign a written consent.

By giving your verbal consent to participate in this research project, you are agreeing to be interviewed at least twice during the next six months. During these interviews you will be asked to talk about a number of different topics including the experiences that led to your incarceration, your experiences since your release from prison or jail and your experiences re-connecting with family and friends.

IMPORTANT: You will not be asked to disclose any information which could be harmful to you, for example, information about crimes committed for which you have not been prosecuted. It is important that you not disclose this information to the person interviewing you as there may be a legal requirement to report such information.
Each interview should take 1 to 1 ½ hours. At least 14 women released from prison or jail within the last five years will be interviewed for this study.

**Risks/Discomforts:** The risks to you of participating in this study are minimal. However, some people may experience emotional discomfort when discussing certain events or circumstances. If you would like to be referred to someone to talk further, a list of mental health professionals will be provided. This study will not assume responsibility for any costs associated with a decision on your part to pursue mental health services.

**Benefits:** There are no foreseeable direct benefits to you of participating in this study. However, your participation will help to further the effort to provide information about the experiences of formerly incarcerated women attempting to successfully rebuild their lives and to avoid re-incarceration. In addition, the information may help to improve the services and resources available to women coming out of prison.

**Payments to You:** You will be paid $25.00 for each interview completed as a way of thanking you for participating in this study. By accepting payment for participating in this study, certain identifying information about you may be made available to professional auditors to satisfy audit and federal reporting requirements, but confidentiality will be preserved. Please note that if you earn $600 or more in a calendar year as a research subject, you may have to pay taxes on these earnings.

**Confidentiality:** The following procedures will be followed in an effort to keep your personal information confidential in this study:

- Audiotapes of each interview, transcripts and demographic information will be coded by number, not by your name.
- The linking information will be kept separate in a locked file and identifiers will be destroyed when the study is complete.
- All data will be kept in a secured, limited access location.
- Your identity will not be revealed in any publication or presentation of the results of this research. Your identity will be held confidential.

All tapes and transcriptions will be kept for no more than 5 years. These will be kept for the purpose of reference in the process of analysis, development of findings, conclusions, writings, and any publications that may result from this effort. Thereafter, the data will be destroyed.
In spite of the procedures described above, confidentiality cannot be absolutely guaranteed. Your personal information may be disclosed if required by law. This means that there may be rare situations that require us to release personal information about you, for example if a judge requires such release in a lawsuit or if you tell us of your intent to harm yourself or others (including reporting behaviors consistent with child abuse).

To ensure that this research is being conducted properly, Stony Brook University’s Committee on Research Involving Human Subjects has the right to review study records, but confidentiality will be maintained as allowed by law.

Costs to You: There are no foreseeable costs to you of participating in this study.

Subject Rights:
- Your participation in this study is voluntary. You do not have to be in this study if you don’t want to be.
- You have the right to change your mind and leave the study at any time without giving any reason and without penalty.
- Any new information that may make you change your mind about being in this study will be given to you.
- You will get a copy of this consent form to keep.
- You do not waive any of your legal rights by verbally agreeing to participate in this research.

Questions about the Study or Your Rights as a Research Subject:
- If you have any questions about the study, you may contact Dr. Linda Francis, Principal Investigator, at (631) 444-3174 or Diane Johnson, LCSW, Study Coordinator, at (631) 664-6555.
- If you have any questions about your rights as a research subject, you may contact Ms. Judy Matuk, Committee on Research Involving Human Subjects, Stony Brook University at (631) 632-9036.

If you agree to be interviewed, it means that you have read (or have had read to you) the information contained in this document and would like to be a volunteer in this research study.

Thank you.

______________________________       ____________________________
Linda Francis, Ph.D.      Diane Johnson, LCSW-R
Principal Investigator       Study Coordinator
APPENDIX  B

DEMOGRAPHIC QUESTIONNAIRE

Interview Code__________       Today’s Date__________

How old are you and what year were you born?
What Race and Ethnicity do you identify yourself as?
What was the highest Grade you Completed in School?
Do you have any Children?
If yes, How many Children do you have?
➢ How old is the oldest? Are they a boy or a girl?
➢ How old is your next oldest? Are they a boy or a girl?
➢ How old is your next oldest? Are they a boy or a girl?
➢ How old is your next oldest? Are they a boy or a girl?
➢ How old is your next oldest? Are they a boy or a girl?
➢ How old is your next oldest? Are they a boy or a girl?
What is your Marital or Relationship Status?
What town and state were you living in before you went to jail?
How many times have you been Incarcerated?
  # of times in Jail?
  # of times in Prison? (State? Federal?)
How old were you When you were First Incarcerated?
What crimes Have you Been Incarcerated for?
Prior to this arrest, how would you describe your socio-economic status?
  (e.g. poor, working class, middle class, upper class)
What would you say was the Social-economic status of your family of origin?
Were you working at the time of your (last) arrest?
➢ If yes, what kind of job did you have?
  o Could you return to this job if you wanted to?
  o Do you plan to return to this job?
➢ If Not, What was the Last job you held?
  How long ago?
  o If yes, what kind of job did you have?
Since your release from jail/prison:
  1. Have you been living with your family? Your children?
  2. Are you in permanent housing?
  3. If in temporary housing, how long can you stay there?
  4. Do you have a job?
    a. What kind of job?    b. Is it full or part time?
5. Do you have any health conditions that affect your ability to do the things you need/want to do?
   a. If yes, what are they?
   b. Are you receiving any treatment for it/them?
6. Are you receiving mental health services (counseling, case management, etc.)?
7. Are you receiving drug or alcohol treatment services?
8. Are you on probation?
   a. For how long?
9. Are you on parole?
   a. For how long?
10. What religion, if any, do you identify with?
APPENDIX C

INTERVIEW GUIDE

Interview Code__________       Today’s Date___________

Introduction:
I am doing this research study because I want to learn more about the experiences of women who have been incarcerated. Specifically, I am interested in learning about your experiences since the time of your release. There have been some people writing about this, but there is a lot more we need to understand about what women go through after they are released from prison or jail. Some of the topics I will be asking you about have to do with your family and your efforts to reconnect with them, your experiences reconnecting with some of your old friends, your attempts to find housing, to get a job, and so on. I will ask you about the services you received when you came out of jail, who helped you out, what, if anything, has helped you begin to rebuild your life and what has gotten in the way of trying to rebuild your life.

(A Reminder to Keep Me Focused):

The Questions this Research is Trying to Answer:

- What are those things which affect the lives of these women once they are released from jail or prison and re-entering the community?
- How are the women affected by these things?
- How do these things impact the women’s ability to stay out of jail/prison?

Part 1: Life Before Jail/Prison
As a way of helping me to understand your experiences since your release from jail or prison, I would like you to tell me a little about your life before you went to jail or prison and about how you ended up in jail:

1. Tell me about the events that resulted in your being arrested.
   a. What were you charged with?
   b. What sentence were you given?
   c. How long did you serve?
   d. Was this your 1st offense?

2. Tell me about what was going on in your life before you went to jail/prison
   a. Where were you living?
   b. Who were you living with?
3. Tell me about how you got involved in criminal activity.
   a. As you look back, and think about the decisions that you made and
      the circumstances around you that resulted in your getting involved
      in activities that are against the law, what decisions and
      circumstances do you think had the most impact.

Part 2: Life Since Release From Jail/Prison

Now I am going to ask you some questions about what happened when you
were released and what has been going on in your life since you got out of jail:

1. Tell me what has been going on for you since you first got out of
   prison/jail.
   a. What has the experience been like?

Follow-up Questions:

Topic: Pre-Release

1. When you knew that you were going to be released, did anyone work with
   you helping you with plans for what was going to happen once you were
   released?
2. What kinds of things did they talk to you about?
3. Did you find that these discussions prior to your release were helpful?
   Why or why not?
4. If no one worked with you prior to your release, did you find yourself
   making plans for what you wanted to have happen when you were
   released or did just assume that you’d figure things out when you got out?
5. Have things worked out as planned? How so or how not?

Topic: Upon Release

1. When were you released?
2. Where did you go when you were released?
3. Tell me about that day you got released:
   a. What was it like for you?
   b. Did anyone meet you at jail to take you to where you were going to
      stay?
   c. Did the jail give you any money when they released you?
   d. What about clothes? Did you have clothes of your own?
e. What was it like when you got to where you were going to be staying? Did you know anyone there? Did it feel safe there?

**Topic: Housing/Shelter**

1. What type of housing are you currently living in (e.g. DSS emergency housing, a women’s shelter, a halfway house, with family members, etc.)
2. Will you be staying here permanently? If not, where do you expect to go next?
3. What is that like for you?

**Topic: Children (If a woman has children)**

1. Tell me about your children
   i. Are your children living with you now?
   ii. What was it like for you to be separated from them while you were in jail?
   iii. Who cared for them while you were incarcerated?
   iv. Did your children visit you when you were incarcerated? Tell me about one of their visits.
   v. Have you reconnected with your children since you were released? What has it been like to reconnect with your children?
   vi. Do you feel like you have been able to resume the role of “mother” to your children?

**Topic: Significant Others and Friends**

1. Is there a “significant other” in your life right now?
   a. If so, was this person your significant other at the time of your arrest?
   b. Have the two of you talked about plans for the future?
2. Have you seen any of your old friends since you were released?
   a. In what ways has seeing them made it harder or easier to stay away from criminal activity?

**Topic: Services and Resources Being Used**

1. Are you currently receiving counseling services?
   a. For mental health issues (depression, anxiety, etc.)?
   b. For alcohol or drug addiction?
   c. How is it going?

**Topic: Staying out of Jail**

1. What feels like the biggest hurdle you are facing right now?
2. What is the thing you worry most about now that you are out of jail?
3. Do you feel like you will be able to stay out of jail?
a. What do you think will help you to stay out of jail?
b. What do you think will make it hard for you to stay out of jail?

**Topic: Family of Origin**
I want to ask you about your family of origin so I can get a sense of what growing up was like for you:
1. Who are the people in your family of origin?
2. Where are you in the birth order?
3. What was it like growing up in your family?
5. What was your family’s economic status? Was there enough money for things?
6. What was school like for you? Did you graduate from high school? Attend school after high school?
7. What was the best thing about growing up in your family? What was the worst thing?
8. Have other people in your family been in jail or prison? If yes, what was the impact of this on you?