The author(s) shown below used Federal funds provided by the U.S. Department of Justice and prepared the following final report:

Document Title: Pathways to Prison: Impact of Victimization in

the Lives of Incarcerated Women

Author(s): Dana D. DeHart

Document No.: 208383

Date Received: January 2005

Award Number: 2000-WT-VX-0010

This report has not been published by the U.S. Department of Justice. To provide better customer service, NCJRS has made this Federally-funded grant final report available electronically in addition to traditional paper copies.

Opinions or points of view expressed are those of the author(s) and do not necessarily reflect the official position or policies of the U.S.

Department of Justice.

Pathways to Prison:

Impact of Victimization in the Lives of Incarcerated Women

Submitted to the National Institute of Justice By Dana D. DeHart, Ph.D.

September 30, 2004



The Center for Child & Family Studies
College of Social Work
University of South Carolina
226 Bull Street
Columbia, SC 29208

This document is a research report submitted to the U.S. Department of Justice. This report has not been published by the Department. Opinions or points of view expressed are those of the author(s) and do not necessarily reflect the official position or policies of the U.S. Department of Justice.

Center Director

Pamela G. Bond, M.Ed., LMSW

Project Director

Dana D. DeHart, Ph.D.

Research Assistant

Leslie Burke, Ph.D.

Media Assistant

Beck Sullivan, MMA

Administrative Assistant

Judy Bauer

This Project was supported by Grant No. #2000-WT-VX-000 awarded by the National Institute of Justice, Office of Justice Programs, U.S. Department of Justice. Points of view in this document are those of the author and do not necessarily represent the official position or policies of the U.S. Department of Justice.

ACKNOWLEDGEMENTS

We would like to express appreciation to advisory board members, our national consultants, anonymous reviewers for the National Institute of Justice, and other professionals who spoke with us, provided suggestions and materials, and helped to contribute to this report. Their efforts have ensured that this project is informed by issues and concerns at community, state, and national levels. We thank the administration, research and legal staff, and correctional officers at the South Carolina Department of Corrections for their support and logistical assistance throughout data collection. Special thanks to the many incarcerated women who shared their personal stories and insights. Although the women have been given pseudonyms to protect their identities, we have tried to be accurate in representing their thoughts throughout this report. We hope that their voices will extend beyond this report to enhance services for girls and women, and to bring strength to those struggling through difficult situations.

Advisory Board Members

Nancy Barton, MSW, Executive Director, Sistercare, Inc.

Flora Brooks Boyd, Director for Special Programs, South Carolina Department of Corrections

Elizabeth W. Campbell, LBSW, Community Group Services Coordinator/Counselor, Sistercare, Inc.

Ann Coker, **Ph.D.** Associate Professor, Epidemiology & Biostatistics, School of Public Health, University of South Carolina

Rebecca Collier, MSW, Executive Director, South Carolina Governor's Commission on Women

Ann-Marie Dwyer, MSW, LMSW, Coordinator, Women's Services Unit, South Carolina Department of Corrections

Lorraine T. Fowler, Ph.D., MSSW, LISW, Human Services Coordinator, Axes Mental Health, Women's Correctional Institution, South Carolina Department of Corrections

Angela R. Gover, Ph.D., Assistant Professor, College of Criminal Justice, University of South Carolina

Barbara Grissom, Coordinator of Victim Services, South Carolina Department of Corrections

Barbara Koons-Witt, Ph.D., Assistant Professor, College of Criminal Justice, University of South Carolina

Surleaner Lakin, Victim Service Manager, South Carolina Department of Juvenile Justice

Rita Rhodes, MSW, Ph.D., Associate Professor, College of Social Work, University of South Carolina

Consultants

Angela Browne, Ph.D., Associate Director, Harvard Youth Violence Prevention Center and Harvard Injury Control Research Center, Harvard University

Beth Richie, Ph.D., Associate Professor, Department of Criminal Justice and Department of Gender and Women's Studies, College of Liberal Arts and Sciences, University of Illinois at Chicago

ABSTRACT

This project examined victimization in the lives of incarcerated women. Specifically, we examined victimization as a risk factor for crime, with particular emphasis on the direct and indirect ways in which victimization's impact contributed to criminal involvement. We interviewed 60 women incarcerated in a maximum security correctional facility. The women had been convicted of crimes including drug offenses, property offenses, child abuse and neglect, violence toward partners, and other crimes. Multi-hour interviews addressed each woman's own perspective on psychological, physical, and sexual victimization within her life, as well as her history of family and peer relationships, alcohol and drug use, and criminal activity. Qualitative analyses were conducted on interview transcripts using the ATLAS/ti software program and a grounded-theory approach. Findings indicated several major ways in which victimization impacted women. These included situations in which victimization related directly to the crime (e.g., coerced to crime), as well as ways in which victimization's impact influenced health, psychosocial functioning, or systemic involvement to create difficult situations for girls and women. Case histories are used to illustrate findings, and we discuss the role of multiple traumas and cumulative impact in contributing to women's involvement in crime. We also discuss impact of violence in the women's lives on their children, again addressing health, psychosocial, and systemic impacts. Opportunities for intervention are discussed, with emphases on turning points, buffers, and strengths in girls' and women's lives. Implications for research, practice, and policy are addressed.

EXECUTIVE SUMMARY

Introduction

Theorists have argued that women's imprisonment is largely attributable to "unsolved social problems" (Fine, 1992)—drug addiction, prostitution, and retaliation against abusive partners. These behaviors have been alternately conceptualized as crimes and as survival strategies to cope with overwhelming physical, sexual, and psychological victimization. With the growing problem of overcrowding in women's prisons, reformers advocate for research on the gender-specific motivations and needs of female offenders. Specifically, research is needed delineating the direct and indirect impact of violent victimization on women's involvement in crime. Examining violence as an organizing principle in incarcerated women's life histories can help us understand forces that "compel to crime" (Richie, 1996) and has implications for ways that residual trauma may impede rehabilitation.

The current study examined links between victimization and women's crime. The study extended beyond prevalence studies by examining women's own perspectives on critical events and turning points, supports and barriers, and ways that life factors intersected—bringing the women to their current place. We examined not only criminal acts, but the contexts surrounding those acts, from each woman's own perspective.

Objectives

The current study was designed to enhance understanding of:

- Risk factors for women's crime, with specific emphasis on contributions of violent victimization over the life span, including ways violence impacts crime via effects on health, psychosocial functioning, and involvement in systems such as family and work.
- 'Turning points' over the life span, specifically points of vulnerability to victimization and/or criminal involvement as well as points when life paths took more positive turns.
- Self-identified strengths or circumstantial 'buffers' that the women perceive as mitigating the negative impact of violence on their lives.

• Implications of study findings for the enhancement of prevention, intervention, and justice programming.

Method

Site & Sample

Our research site was a maximum security state women's correctional facility in the Southeast. Our sample of 60 participants included women from a range of demographic backgrounds, criminal backgrounds, and lengths of sentences. The resulting sample included 52% African Americans and 48% Whites, ranging in age from 18 to 70, with a median age of 31 years.

Research Measures

We had access to electronic records containing demographic information for project participants. Interview measures consisted of participant responses to open-ended prompts addressing risk factors for crime (e.g., physical and psychological victimization, substance abuse), criminal involvement over the life span, turning points, buffers that mitigated the impact of violence, and self-perceived strengths. Individual interviews lasted approximately two hours each. Interview transcripts were indexed, annotated, and analyzed by the interviewer using the ATLAS/ti qualitative software program and an analytic approach that derived from both ethnography and grounded theory (Stewart, 1998; Strauss, 1987).

Results

Discussion addresses impact of victimization on the women in our sample, impact of victimization on their children, and opportunities for intervention with girls and women through consideration of turning points, buffers, and strengths. Within this summary, we highlight some major findings of the report.

Impact of Victimization on Women

For some women in our sample, victimization experiences related directly to the crime, as child corruption or as perceived force, provocation, or pressure to commit the crime.

• This often began early in life—as girls—with caregivers or other adults providing them with alcohol or other drugs, forcing them to steal, or prostituting them. These forms

- of child maltreatment are variously labeled "missocializing" or "corrupting" and "sexual exploitation" (APSAC, 1995; Hart, Germain & Brassard, 1987; NECF, 2004).
- Nearly half of participants described events in their adult lives when they committed
 assaults that might be characterized as defensive or retaliatory efforts to end abuse.
 The victimization directly preceded the women's crime, and the women acted in
 response to being pushed, slapped, punched, beaten, choked, raped, or threatened
 with a weapon.
- Beyond such defensive or retaliatory assaults, some women in our sample described
 events in their adult lives when they were forced (through physical attacks or threat
 thereof) to commit other crimes such as shoplifting, check fraud, robbery,
 prostitution, or murder. These were often the same women who mentioned defensive
 or retaliatory assaults, which may not be surprising given the violent proclivities of the
 women's partners.

For some women in our sample, victimization was not directly associated with a crime, but it impacted life circumstances in a way that contributed to the women's marginalization from mainstream or legitimate avenues. That is, victimization in the lives of these women influenced their physical or mental health, had effects on their psychosocial functioning in areas such as self-image and personal relationships, or influenced their involvement in private and public systems such as family and work.

- As a result of victimization, the majority of women in our sample suffered injuries that
 might be termed "severe" (Straus et al., 1996). This includes things like passing out,
 having broken bones, and needing medical attention. Many of these women had
 enduring reminders of the physical injuries they suffered—scars, chronic pain, and
 permanent disabilities.
- Sexual abuse had a number of effects on the women's health, including unplanned pregnancy, sexually transmitted diseases, and HIV, as well as associated effects on relationships and overall life circumstances.
- Victimization also had an impact on the women's mental and physical health through its
 influence on addictive behaviors such as alcohol and drug addiction. Some of the
 women in our sample were first introduced to alcohol and other drugs as children by
 adults. As adults, some women used addictive behaviors to cope, and many women
 discussed alcohol and drugs as a way to ease the physical or psychological pain of abuse.

- There were a number of psychosocial effects of victimization, including internalizing behaviors such as feelings of worthlessness or withdrawal, externalizing behaviors like aggression, and influences on the ways women felt about personal relationships. Some girls and women began to avoid places and things, restricting their range of activity in the world. Often, this was a means of protecting themselves from further victimization.
- According to the women in our sample, their experiences of neglect or abuse sometimes had an impact on the size, structure, or cohesion of family and peer networks. A commonly mentioned effect was physical disruption or chaos within the woman's family of origin. Such disruption also impacted peer networks, which were sometimes severed when girls were forced to move from one caregiver to the next. These moves often involved changes in neighborhoods and schools.
- Many women in our sample discussed running away from home as children or teens in order to cope with or escape from abuse. In adulthood, women sometimes lost their homes as they tried to escape abusive partners.
- Neglect, as well as more severe emotional or physical abuse, undermined motivation
 and impaired girls' abilities to concentrate on school activities. For some girls, the
 sequelae of abuse—conduct problems, depression, stigma, pregnancy, addiction—
 played a role. Acting out resulted in suspension for some girls, and other sequelae
 contributed to the girls' dropping out of school altogether.
- Women in our sample discussed missing work due to beatings, having to change jobs
 or quit to please controlling partners, and being fired due to stalking and harassment by
 husbands and boyfriends.

If one examines the different areas of impact discussed in this report, the litany of effects is not new to the victimization literature. Incarcerated women experienced some of the same violence as experienced by other women, and they experienced some of the same effects. What may be remarkable within this sample is the cumulative impact of victimization over the life span. Most of the women in this sample suffered multiple traumas. They were victimized in multiple ways (e.g., child abuse and neglect, adult relationship violence, sexual violence), not to mention the number of times they experienced each type of victimization. This is akin to the concept of "poly-victimization," which has recently emerged in scholarly discussion to describe simultaneous episodes of different types of victimization (Finkelhor, Ormrod, & Turner, 2004). The varied impacts of poly-victimization have potential to create ripple effects in multiple arenas in the

women's lives, causing overall disruption and pushing the women out of the mainstream. Often, the intersection of events and losses seemed to create uniquely difficult situations.

Impact of Victimization on the Women's Children

Nearly 90 percent of the women in our sample had children of their own or had cared for a live-in partner's children for an extended period of time. Although we did not specifically inquire about impact of violence on children, a substantial majority of these women mentioned impact of abuse on the children, either through children's witnessing violence or the children's being abused. The women's accounts of the violence their children experienced often paralleled accounts of their own victimization in childhood. The women's accounts also indicated that their children were experiencing many of the same impacts of violence—effects on health, psychosocial effects such as acting out, and involvement in public systems such as social services or the juvenile justice system.

Turning Points

Turning points discussed by women in our sample spread over their life spans, but it was notable that many women discussed marked turning points in adolescence, just as they would be growing to explore avenues in life. Typical turning points involved some of the systems discussed in this report—changes in families, work, religion, and so on. These changes often coincided with mental-health and psychosocial manifestations discussed in the report (e.g., depression, drug abuse, acting out). One of the most frequently mentioned turning points for the women in our sample involved death or loss of a loved one. Often, this occurred when, as a girl, our study participant had lost a caregiver, or as an adult, she had lost a child. A typical scenario might involve the girl's parent dying, and as a result, the children are split apart to live with different relatives, there is a change in living conditions, and a change in neighborhoods and schools occurs. There may be drastic changes in the rules by which the girl lives, including new responsibilities and sometimes a lack of guidance. Other turning points included pregnancy or childbirth, finding or losing a job, getting in trouble, or finding religion.

Buffers

There were a number of factors that might be described as buffers, possibly mitigating the direct and indirect impacts of victimization in women's lives. These were similar to turning points in involving the systems in their lives—work, family, and so on—but as buffers, these systems helped the women in coping or kept them from resorting to crime when things seemed tough. Being employed or being enrolled in school was mentioned by

some women as something that helped them cope or kept them away from trouble at some point in their lives. This may have been a matter of being occupied for some, as the research literature indicates that hobbies and interests foster resilience among abused and neglected children (USDHHS, 2003). Some women in our sample specifically mentioned needing to stay clean and focused in order to achieve. In accord with research on resilience among traumatized children (Frenkel & Wright, 2001), support networks of friends, families, and professionals were important buffers for the women in our sample. Some mentioned caring for children, younger siblings, or dependent parents and grandparents as something that helped in coping or kept the girls and women away from trouble. Others discussed having supportive adults in their lives, including professionals such as teachers, school administrators, rehabilitation counselors, law enforcement officers, and others.

Strengths

For many women in our sample, self-identified strengths included appreciation for things they were able to hang onto throughout all of their experiences—things like their health, strength of mind, their kids, and support of their families. For some women who had less on the outside, they managed to extract strength from experiences in prison. This included some of the relationships they had formed with other incarcerated women. Women also mentioned skills developed during their period of incarceration. This included cognitive and social skills learned through formal programs as well as through informal interaction and individual contemplation. Some described their strength in terms of their aspirations for the future and the opportunity it holds.

Discussion

Much of the existing theory on incarcerated women's criminogenic processes (e.g., Chesney-Lind & Shelden, 1992; Widom, 1995; Snell, 1994; Lake, 1993; Richie, 1996) is supported by our findings. Many of the women were, throughout their lifetimes, pushed away from pathways of legitimacy such as school and work. Their family and social networks often tended more toward perpetration or collusion with victimization than providing positive support. Their role models were often corrupt, and their living contexts permeated with poverty, addiction, and violence.

In drawing from this work, we must bear in mind the multiplicity of traumas that these women faced. The repeated impacts of victimization in multiple arenas in women's lives underscore the need for holistic approaches that address the varied effects of trauma. Data indicate several areas where further research and program development may be desirable.

For instance, assessment and risk reduction aimed at the teenage years may be advisable (e.g., encouraging positive activities, fostering supportive networks), as might be interventions that build upon versus undermine the strengths that these women have.

Implications for Practice & Policy

We anticipate usefulness of these findings in a variety of areas for practice, policy, and prevention, including:

Officers of the courts, probation, & parole: These findings have implications for rehabilitation and accountability, including rationale for recommendations during pre-trial services, sentencing, and developing conditions of release.

Correctional administrators, programmers, & staff: The report may be particularly useful regarding gender-specific program content, and the report's attention to "turning points" may be helpful to program developers in estimating when various intervention techniques might prove most effective for women prisoners. The report may also be useful in examining classification systems and developing mental health treatment plans for offenders.

Youth services & juvenile justice personnel: Women's retrospective accounts of their own experiences of coping in youth can inform interventions that are suited to varied life experiences and social contexts. Because a majority of research participants had or cared for children, the report also has potential to inform professionals about intergenerational aspects of victimization and real impacts for this next generation of youth.

Legislators & justice policymakers: The report has implications for refinement of state laws concerning those who entice young people into criminal behavior, including laws on child endangerment and child prostitution. Findings also may be useful to those individuals who have power and authority to allocate funding for youth programming and gender-specific programming for girls and women.

Prevention & education programmers: Information on contexts and impact of victimization and on turning points, strengths, and buffers can be applied to education for both professionals and members of the lay public. In this way, those who come into contact with children, youth, and families will have the requisite knowledge to build supports, recognize dangers, and help link girls and women to valuable resources as needed across the life span.

TABLE OF CONTENTS

Acknowledgementsi
Abstract
Executive Summary
Introduction
Objectives1
Victimization & Other Risk Factors for Women's Crime
Turning Points in the Lives of Girls & Women4
Strengths & Buffers that Mitigate the Impact of Violence
Implications for Prevention, Intervention, & Programming
Method6
Advisory Board & Consultation6
Site & Sample Selection
Participants8
Research Measures
Recruitment & Interview Procedures
Analysis & Write-up
Results
Impact of Victimization on Women
Impact of Victimization on the Women's Children
Opportunities for Intervention
Discussion
Implications for Practice & Policy
References
Table 1—Sample Timeline
Table 2—Sample Pathways
Figure 1—ATLAS/ti Software
Appendix A—Interview Protocol

INTRODUCTION

Theorists have argued that women's imprisonment is largely attributable to "unsolved social problems" (Fine, 1992)—drug addiction, prostitution, and retaliation against abusive partners. These behaviors have been alternately conceptualized as crimes and as survival strategies to cope with overwhelming physical, sexual, and psychological victimization. With the growing problem of overcrowding in women's prisons, reformers advocate for research on the gender-specific motivations and needs of female offenders. Specifically, research is needed delineating the direct and indirect impact of violent victimization on women's involvement in crime. Examining violence as an organizing principle in incarcerated women's life histories can help to understand forces that "compel to crime" (Richie, 1996) and has implications for ways that residual trauma may impede rehabilitation.

Harden and Hill (1998) have noted that "women behind bars are us—minus privilege, caution, luck." The current study examined links between victimization and women's crime. The study extended beyond prevalence studies by examining women's own perspectives on critical events and turning points, supports and barriers, and ways that life factors intersected—bringing the women to their current place. We examined not only criminal acts, but the contexts surrounding those acts, from each woman's own perspective. A series of interviews with incarcerated women introduced us to women's own subjective impressions of their life circumstances. Throughout discussion of findings, case examples are used to illustrate the impact of victimization in women's lives and its association to criminal activity, with particular emphasis on ways multiple factors in women's lives come together to create complex challenges with which the girls and women struggle.

Objectives

The current study was designed to enhance understanding of:

• Risk factors for women's crime, with specific emphasis on experiences and contributions of violent victimization over the life span. This includes identifying ways violence has indirectly impacted crime and incarceration via effects on financial/occupational well-being, physical health, psychological well-being, and ability to make choices concerning major life options.

- 'Turning points' over the life span, specifically points of vulnerability to victimization and/or criminal involvement as well as points when life paths took more positive turns. These turning points could be times when women's lives changed rapidly for better or for worse, or when the woman's situation or activities turned toward some different direction. We examined women's subjective perceptions of such pivotal life experiences as these contributed to or reduced risks in their lives.
- Self-identified strengths or circumstantial 'buffers' that the women perceive as mitigating the negative impact of violence on their lives. This includes child, adolescent, and adult coping used in the women's life histories, and how this coping did or did not address vulnerability to violence, poverty, and everyday problems in their lives. We also examined outside factors such as kinship and peer networks and justice and service interventions as these may have supported (or failed to support) girls and women.
- Implications of study findings for the enhancement of prevention, intervention, and justice programming. Findings are interpreted with attention to reducing women's risks, building their strengths, and targeting critical points across the life span for prevention or intervention. Findings help to inform us of the most effective timing and means for delivering information and/or support to girls, women, families, and communities.

Victimization & Other Risk Factors for Women's Crime

The majority of incarcerated women are poor, ethnic minorities, and mothers, and they have histories of physical or sexual victimization (Harden & Hill, 1998). In all likelihood, this is no spurious overrepresentation, but rather testimony to the nature and dynamics of social contexts in which the women live. That is, the nexus of these social and demographic factors may create risks for entry into crime, escalation of criminal behavior, and recidivism (Browne, Miller, & Maguin, 1999; Richie, 1996). Gilfus (1992), Arnold (1995), and others have discussed ways in which physical abuse, sexual exploitation, racial and class oppression, and other victimization serve to "structurally dislocate" women from "legitimate" social institutions. Specifically, abuse and its effects push girls and women out of families, schools, careers, and so on.

Richie (1996) has written extensively about the lives of incarcerated women, whom she posits "were confined by social conditions in their communities, restrained by their families' circumstances, severely limited by abuse in their intimate relationships, and

forced to make hard choices with very few options" (p.5). Indeed, it appears as if such difficult choices begin early in the lives of many female offenders. Acoca and Austin (1996) report that approximately half of incarcerated women were first arrested as juveniles. In turn, studies of female juvenile offenders indicate that a majority report their first arrest as running away from home to avoid abuse (Chesney-Lind & Shelden, 1992). Similarly, Widom (1995) has amassed substantial evidence that girls from violent homes are at heightened risk for status offenses such as substance abuse and running away. While we understand that such offenses may be a means of mentally or physically escaping a violent home, girls are provided with few options for survival: physical or sexual abuse at home, gambling between risks and rewards in a series of foster homes, or placement in traditional detention centers. To complicate the situation, the placement choice is not their own. Running away becomes an opportunity to have some semblance of control over one's life.

In the streets, teenaged girls may find themselves physically abused by older romantic partners or sexually exploited by predators. Our interviews with juvenile justice personnel indicate that a number of girls are exchanging sex for *food*. Prostitution and property crime become means of survival, and involvement with drugs is both a means of numbing and a way to make fast cash. Widom's (1995) research shows that females abused in childhood are at increased risk for alcoholism and more likely than non-abused to have alcohol/drug arrests in adulthood. One in four incarcerated women reports committing their offense to get money to buy drugs (Snell, 1994). Addiction is exacerbated when pimps and dealers barter for girls to exchange sex for crack cocaine, heroin, or other drugs (Chesney-Lind, 1997). Recent surveys indicate that between 60 and 90 percent of prostitutes report childhood physical or sexual abuse (National Women's Law Center, 1993).

Although not all victimized girls become runaways, those that stay at home may still be at risk for delinquency. They avoid the aversive home environment, spending more time on the street and falling in with the "wrong crowd." The high-risk environment, proximity to motivated offenders, participation in risky behavior, and avoidance of legal guardianship may place the girls at risk for repeated victimization—by strangers, acquaintances, and intimates (Lake, 1993). They are at increased risk for violent dating relationships/marriages, and some may be coerced into crime by violent lovers who reap profits of prostitution, drug sales, or by fencing shoplifted items. For other women, the crime preceding this incarceration may be a first offense—after long histories of abuse at the hands of partners and repeated failed attempts to escape, the women retaliate or defend themselves with fatal or near-fatal force.

Thus, there is substantial evidence that violence may directly or indirectly contribute to women's commission of crime. There is also evidence that the poor, women, and persons of color are being disproportionately affected by "tough-on-crime" initiatives (Phillips & Harm, 1998)—being arrested, prosecuted, and sentenced to prison in larger numbers. Professor Myrna Raeder (1993), in a legal study of federal sentencing guidelines, noted that "gender-neutral" guidelines place women at a distinct disadvantage with respect to gender-specific characteristics. The guidelines, which are modeled at the state level, do not allow courts to consider mitigating circumstances such as the role of single mothers in caring for children, the minor and peripheral roles that women play in many crimes, the abusive/coercive environments in which many women play these roles, and women's lower recidivism rates. That is, the guidelines de-contextualize women's criminal acts in a manner that ignores motivations and responsibilities, with too little regard for rehabilitative needs.

Turning Points in the Lives of Girls & Women

Incarceration has been conceptualized by some women as the first time in their lives during which they could invest in themselves versus caretaking for others. This has been noted as an exceptional opportunity for intervention (Coll et al., 1998). Yet, it is far from ideal to wait until a woman has been severed from her family and community—with losses of freedom and dignity—to engage her in intervention. Surely, prior to this time there have been turning points along the way—points at which her life reached inspiring highpoints, transforming low points (e.g., just above "rock bottom"), or change-fostering transitions. We know from public health research that, in lieu of childhood malleability, life transitions are preferred points for prevention and intervention (Brown, 1992). By examining women's subjective impressions of their lives, we can exact information about such turning points, including information about what led to the turning point, what helped or what was needed, and what happened to make things better or worse after that. Thus, we may learn ways that, amid devastating life circumstances, resources can be made available to help at-risk girls and women.

Strengths & Buffers that Mitigate the Impact of Violence

To make inferences regarding rehabilitative needs, we need more information on positive forces within women's lives. Just as the aforementioned contexts of violence may compel women to crime, there may exist positive resources or events woven throughout those contexts. These strengths or "buffers" may attenuate the negative impact of violence on

women's lives, and may afford women transitory incentive or opportunity not to enact crime.

We know from research on the general public that such social strengths and buffers typically range from internalized characteristics (e.g., coping styles) to external contexts (e.g., support networks of family and friends). For instance, factors that foster resilience in traumatized children include having non-self-blaming attributions for abuse, having a close relationship with a parent or adult outside the family, having supportive parents, and having a supportive social network (Frenkel & Wright, 2001).

We also know that use of coping and support tends to be gendered, with women using less problem-focused and more emotion-focused coping, more prosocial and less antisocial coping, and actively drawing upon social networks to deal with distress (Monnier, 1998). Some such indications are seen in the general research on incarcerated women. Specifically, women demonstrate different patterns of interaction with prison staff than do men, including greater verbalization and greater range of emotional display (Coll et al., 1998). Women also show a 62% higher rate than men for participation in corrections programming (Federal Bureau of Prisons, 1996).

Research explicitly addressing coping among women prisoners is just emerging in the literature (e.g., Women Coping in Prison Study, 2001), and research on use of coping and other strengths or buffers prior to incarceration is lacking. Thus, we know little about the positive influences in incarcerated women's life histories or how these influences may have mitigated overwhelming contexts of violence. By asking incarcerated women about their strengths and lifetime use of buffers, we can learn more about reasons for using or not using resources, which resources are preferred, and how effective these are perceived to be.

Implications for Prevention, Intervention, & Programming

Concerns about special needs of women in prison have been prevalent since the 1970s (e.g., Law Enforcement Assistance Administration, 1975). Working from androcentrically derived theories of crime and rehabilitation, programs suited for men often fail to address pervasive physical and sexual victimization that has riddled the lives of women in prison. There exists a large-scale movement toward reform in sentencing and corrections, including efforts by high-profile groups such as Amnesty International, the Criminal Justice Consortium, and Families Against Mandatory Minimums. A 1998 Office of Justice Programs report notes, "Although the profile of adult female offenders has changed since 1975, the gender-specific needs of female offenders have not changed

nor...has the criminal justice system's relative inattention to the needs of this population" (p.1). The *Women in Criminal Justice* report recommends greater research on the gender-specific needs of prisoners as well as development of programming to address incarcerated women's past victimization and its impact on criminal behavior. In their report *Gender-Responsive Strategies: Research, Practice, and Guiding Principles for Women Offenders,* Bloom, Owen, and Covington (2003) note that managers attending National Institute of Corrections seminars were convinced that gender made a difference in their operations and programs, but lacked the grounding or evidence to define and make a case for gender-responsive strategies. These authors review quantitative data on prevalence of victimization among female inmates, and they note that victimization has been a "defining experience" (p.42) for women they have studied, but the report does not address dynamics of the victimization-crime relationship in depth.

The current project is intended as an initial step in examining violent victimization as a criminogenic factor for female offenders. We focused on ways in which victimization acts as an organizing principle in women's lives and as a contributor to criminal activity, including ways that social buffers or life events may mitigate negative outcomes of victimization. Women's histories of victimization, gender-specific ways of coping with violence, and pivotal life experiences are important components of developing more effective contexts for intervention. Findings are interpreted for usefulness in applied social service and justice intervention for girls and women, and for those at risk for difficulty with the law as well as those already in the system.

METHOD

Our methodology involved gathering a group of knowledgeable consultants to provide insights on project logistics, selecting a site and sampling method, developing research measures, recruiting and interviewing participants, and analyzing and writing-up findings.

Advisory Board & Consultation

Research involving prisoners necessarily involves consideration of multiple interests, including the interests of prisoner advocates, victim advocates, and advocates for the community at-large, as well as the interests of various agencies and systems involved in justice administration. Working within a prison setting also requires consideration of ethical issues, mandates that may counter routine confidentiality, and barriers and delays due to unforeseen circumstances. For these reasons, we enlisted the assistance of community experts through development of an advisory board.

Nominations for board members were solicited from major state agencies and organizations relating to crime and victimization, such the Department of Corrections, Department of Juvenile Justice, Attorney General's Violence Against Women Program, Commission on Prosecution Coordination, State Office of Victim Assistance, Child Welfare Services, Coalition Against Domestic Violence and Sexual Assault, Victim Assistance Network, and so on. Board members comprised an ethnically diverse group deriving from multiple disciplinary affiliations, with members committed to women's personal development, equity of opportunity for rehabilitation, and accountability in sentencing. Their expertise included specialty in female offenders, correctional programs and populations, impact of violence on women's physical and mental health, addiction among incarcerated women, domestic abuse and sexual assault services, juvenile services, general social services, legislative activism, public policy, research methodology, and victims' rights, among other topics. We also solicited the input of national experts on victimization, poverty, and incarcerated women (Dr. Angela Browne, Harvard University; Dr. Beth Richie, University of Illinois at Chicago) as consultants to the project.

Throughout the project, the board and consultants helped contribute to sound decision making and innovation to meet task demands. The board met with the project director and consultants at the outset of the project, providing feedback regarding methods, safety precautions, and resources for project development. The board met again for discussion and project updates, and individual board members and consultants provided guidance around emerging issues during implementation and data analyses. For instance, board members helped establish liaison with key administrators to facilitate project approval and assist in arranging logistics. They provided insights on issues ranging from participant incentives (e.g., non-monetary incentives such as snacks), to peer support for participants (e.g., identifying an inmate liaison to the project), to feasibility of data collection methods (e.g., barriers in use of focus groups with prisoners). Board members are beginning to identify potential audiences for this report, and we have begun to solicit board input regarding implications of findings. As dissemination progresses, we expect that board members and consultants will be a valuable resource in identifying ways to format findings for a variety of practice applications.

Site & Sample Selection

Our research site was a maximum security state women's correctional facility in the Southeast. About 7% of this state's prison inmates are female—just a fraction of a percentage point above the national average (Federal Bureau of Prisons, 1998; OJP, 1998). The site was chosen with consideration of research questions, methodological feasibility,

and ultimate social impact. Browne and associates have noted that maximum security facilities present "a saturated population for inquiry into issues of drug abuse and violent victimization" (p.308). The longer prison terms not only provide opportunities for later follow-up studies (Browne, Miller, & Maguin, 1999), but also contribute to difficulties that women may experience with reintegration upon release. Because this facility also houses low-risk women with special medical needs, the site offered some sampling flexibility and substantial on-site support should these be needed for research logistics or follow-up with participants. It is notable that a majority of inmates in this state (55%) have some form of medical restrictions, and about three-quarters have substance abuse problems. Accordingly, correctional officials note that distribution of "special needs" across the state's three women's facilities is not clear-cut given overcrowding and high demand for medical and mental-health care.

Within the prospective participant pool of 465 female inmates at the chosen facility, participants were sampled with consideration of criteria set forth by Browne and associates (1999). These researchers suggested that sampling allow time for women to move beyond initial adjustment to prison conditions (e.g., the first two months are "chaotic and potentially frightening"). Sampling after this time allows for women to become familiar with routines and become involved in program activities. Thus, we excluded the 165 inmates still under "Reception & Evaluation." Browne also suggested that eligibility exclude women with severe mental illness, women considered at mental health risk at the time, women serving disciplinary time or protective custody in segregated housing, and women medically hospitalized at time of eligibility. Due to human-subjects issues, women under 18 years of age were ineligible. Within the parameters of the remaining population of 203 inmates, we used the prison's searchable database to randomly sample participants. Prospective participants were drawn from the eligible pool in batches. They were provided with an opportunity to participate, and sampling continued until our final sample size of 60 women was reached.

A sample size of 60 is generous for a qualitative study. Swanson (1986) has suggested that 20 to 50 interviews elicit major, repetitive themes of the topic under study. Lee and Fielding (1996) found a median sample size of 40 in existing studies (including those using software data management).

Participants

Our sample of 60 participants included women from a range of demographic backgrounds, criminal backgrounds, and lengths of sentences. The resulting sample included 52% African Americans and 48% Whites, ranging in age from 18 to 70, with a median age of 31

years. Fifty-seven percent of these women did not graduate high school, and 78% were listed in prison records as having children.¹

The women were incarcerated for a range of offenses, with "most serious offenses" (the offense carrying the longest sentence for each woman) including: murder (12% of participants); voluntary manslaughter (12%); armed, strong-arm, or common-law robbery (12%); cocaine or crack manufacture, distribution, or trafficking (12%); homicide by child abuse (10%); forgery (8%); burglary (7%); arson (5%); shoplifting (5%); kidnapping (3%); assault and battery (3%); felony driving under the influence (3%); child neglect (3%); lewd act on a child (2%); grand larceny (2%); and financial transaction card theft (2%).² Sixty percent of women had one or more prior criminal offenses.

The women were serving sentences ranging from 15 months to life-imprisonment, with some sentences being suspended, running concurrently, or running consecutively. About one-fifth of women were serving life sentences, and about one-third had sentences of 10 years or less. The median time that women had to serve before possible release (e.g., "maxing out" or parole) was about 7 years. At the time of the interviews, the average time the women had already served for their current sentence(s) was just under four years.

A total of 77 women had been invited to participate in the study. Thus, 17 women who were eligible did not participate. Ten of these women failed to show up for the initial appointment, with half of these being attributable to scheduling conflicts (e.g., health care appointment) or logistical problems (e.g., invitation to participate was not properly delivered). Of the remaining women who showed up but declined, six women indicated they "were just not interested" and one said she was "not up to it" emotionally at the time. Analyses of variance indicated that women who did not show up for participation or who declined to participate did not differ from study participants with respect to race, education level, time to serve before possible release, or time served prior to onset of interviews. Those who did not participate, however, were slightly older ($\underline{M} = 41$) than study participants ($\underline{M} = 34$), F(1,75) = 6.13, $\underline{p} < .05$.

Analyses of variance also indicated no differences between study participants and the broader statewide women's correctional population with regard to race, age, or education level. Those who participated in the study, however, had significantly longer times to serve before possible release ($\underline{M} = 3304$ days) than other female inmates statewide ($\underline{M} = 3304$ days)

1

¹ Prison data did not account for children of several women who had adult children, children who were deceased, or children born after incarceration. Additionally, several additional women cared for a live-in partner's children for substantial periods of time.

² Due to rounding of decimals, percentages add to over 100%.

1619 days), F(1, 1416) = 28.07, p < .001. Exploratory analyses did not elucidate this finding, in that this pattern of findings persisted whether our comparison group comprised only women from this single maximum security prison or even those women remaining in the eligible participant pool (i.e., excluding for time served, mental illness, etc.). Thus, the longer time-to-serve appears to be a sampling artifact.

Qualitative researchers posit that criterion of external validity or generalizability needs reconceptualization in qualitative work (Becker, 1990; Schofield, 1990). Rather, they argue that good sampling achieves a range or "strategic coverage" of phenomena under exploration (Johnson, 1990; Werner & Bernard, 1994). This allows the researcher to explore the data with intense consideration, in order to generate insights that may be applied elsewhere (Stewart, 1998). Our sample from a diversely populated maximum security prison appears to embody a range and, as will become evident in our discussion of findings, provides a data set replete with victimization experiences for developing theoretical insights. One would expect that findings here will be useful in theory regarding women incarcerated in maximum-security facilities, and will likely have substantial application to at-risk girls and women in a number of other settings.

Research Measures

Interview measures (Appendix A) consisted of participant responses to open-ended prompts. Prompts provided respondents with opportunity to describe significant events in their lives, to bring together distinct chronologies of events, and to analyze links between varied life events. Following from ethnographic methodology, prompts were loosely structured to achieve a participant-guided perspective on each woman's life history and circumstances. In this way, we gained insight into those events that women viewed as most crucial in their own life stories. These subjective responses have capacity to capture the import that each woman placed on particular life events and the meaning she ascribed to each experience. Lord (1995) describes her own research in this area: "Work with women involves *bearing witness* so that they can examine their life histories in a safe setting in which they can sort out pathways that took them to prison, come to be aware of themselves in terms of those life histories, and finally accept and examine their own responsibility for their own actions."

• <u>Risk factors for crime:</u> In accord with our focus on associations between victimization and women's crime, constructs addressed in individual interviews included a range of physical and psychological victimization variables (e.g., victimization in the family, victimization by peers/acquaintances, victimization by strangers). Lifetime delinquency and/or criminal activity were also addressed. As

discussed in the introduction, victimization may indirectly impact criminal behavior through a variety of means, with reciprocal links between various types of violent victimization and running away, using alcohol/drugs, association with delinquent/criminal offenders, and so on. These constructs were also assessed in the interviews.

- <u>Turning points:</u> Of particular interest were self-identified turning points in the women's lives—points of rapid change or times when things seemed to be "turning around" for better or worse. These may be useful in targeting prospective points for prevention and intervention.
- Strengths and buffers as mitigating factors: We asked women directly about their strengths and methods of coping. General social network variables (e.g., family environment, relationship history, school and peers) were addressed as factors that may have restricted women's access/options, served a supportive function as protective buffers, or colluded with abusers and contributed to victimization. We also assessed women's interactions with social service and justice systems as these may have mitigated or failed to address impact of victimization in women's lives. Women's subjective impressions of such interactions are important considerations for translating research findings to practice.

Beyond interview measures, we were provided with access to electronic records through the Department of Corrections. These included demographic and criminal history information for each prospective participant. Variables included age, race, number of children, marital status, criminal offense history, correctional disciplinary records, probation/parole information, victim/witness notification, corrections program participation, intelligence scores, math and reading scores, basic academic history/degrees, mental health assessment, and special medical needs. These data are important for sampling decisions and providing descriptive information on sample characteristics.

We also conducted NewsLibrary online searches for media reports concerning cases for women who participated in the study. These were helpful in pinpointing certain events within the chronology of women's accounts, and will be useful in future research examining convergence or divergence of women's perspectives (interview data) with those of the system (prison records) and of the public (media reports).

Recruitment & Interview Procedures

As prospective participants were sampled from the database, they were sent a memo that briefly described the project and indicated a date and time that the woman would be excused from daily activities to learn more about participation. At the scheduled time, each prospective participant met individually with the interviewer in a private meeting area on prison grounds. Together, the woman and interviewer went through a general written and verbal description of the project. This included information on the project's purpose, confidentiality limitations, note-taking during interviews, access to correctional records, benefits of participation (e.g., incentives, self-awareness, helping others), foreseeable risks (e.g., reporting mandates, discomfort or embarrassment at questions), and freedom to skip questions and to withdraw from participation without penalty. An informed consent form was provided to each woman to read and was read aloud by the interviewer. If the woman understood all concepts and agreed to participate, she signed the consent form and was interviewed at that time.

Most interviews lasted about two hours, and each interview was followed by debriefing, written contact information, and scheduled date that the interviewer would next be on prison grounds in case participants wished to discuss the study further. Participants were also given information about a senior inmate and correctional staff member who had agreed to talk in confidence with any woman who had completed the interview and "wanted to talk." These persons were selected and trained for this role of "safety net" on the project and were available to provide social and informational support, including information on prison support groups.

It is notable that invitations to the interview only provided cursory information about the project, and our immediate interviewing of women after full explanation of the project allowed us remarkable access to those issues most salient to these women. That is, the women were not provided with detailed information to prepare for interviews. Rather, the experiences, thoughts, and feelings that the women shared with us might be those most pervasively embedded throughout their minds and most accessible on the surface of consciousness. This advances our goal of identifying experiences that have been organizing principles in the women's lives.

Prison policy did not allow tape recording of interviews. Thus, the interviewer kept handwritten fieldnotes throughout interviewing, and these were transcribed by that interviewer immediately following each interview. Representative procedures for recording notes during individual interviews, as well as for expounding upon notes directly after individual interviews (e.g., "process notes") are described in Emerson, Fretz, and

Shaw (1995). Within interview transcripts, we attempted to be as accurate as possible in representing each woman's thoughts, and as much as possible, to use the words and language used by each woman. We chose to transcribe using third-person perspective to underscore that these are not direct quotes, in that thoughts have been necessarily filtered through the interviewer in the transcription process. However, in accord with our goals of seeking the woman's own perspective on events in her life, we made every attempt to honor the veracity of her account. That is, we represented her version as truth, omitting outsider inferences about plausibility or language that dilutes the poignancy of her statements by framing events as "alleged." The interviewer/analyst also kept a separate set of process notes throughout the project's duration, and these provided a forum for more subjective impressions of the interview process or potential sources of bias in the study.

Prison policy also did not allow us to reimburse participants for their time or efforts in the study, neither through individual financial incentives, gift items, nor through donations to the general inmate fund. Women were given an excused absence from work for the time required to participate, and they were provided with complimentary soft drinks and snacks during participation. They were also provided with a Certificate of Completion that they could keep for their case folders.

Analysis & Write-up

Descriptive statistics were performed on quantitative data from inmate records.

We also developed chronological timelines for events in each participant's life using interview transcripts, prison records, and, when available, media reports (see Sample Timeline in Table 1). These were developed to assist us in understanding temporal relationships between events within each woman's life. These multiple data sources also helped us assess whether particular cases contained troubling discrepancies that might threaten veracity of the data. These analyses were conducted by a clinical psychologist trained in project processes but who did not participate in interviewing or in other coding/indexing of data. In turn, the interviewer/coder did not access timelines until all first-order coding of interview transcripts had been completed. We were encouraged by the apparent candor of women's accounts. Their openness with the interviewer (an "outsider") supported what the women had told us about inmates' wanting the opportunity to tell their stories, as personal information is not readily revealed to other inmates who may use information in prison power struggles.

Interview transcripts were indexed, annotated, and analyzed by the interviewer (and author of this report) using the ATLAS/ti qualitative software program and an analytic

approach that derived from both ethnography and grounded theory (Stewart, 1998; Strauss, 1987). The ATLAS/ti program allowed us to mark computerized text passages in a manner akin to underlining text in a book (see Figure 1). Passages were annotated, tagged with commentary, and with index terms or codes (e.g., "childhood sexual abuse," "self-image," "buffers"), as appropriate. The passages, index terms, commentaries, and so on were sorted into hierarchies, and participant files were grouped into "families" or categories (e.g., "African Americans," "Convicted of Property Crimes"). These procedures produced a rich data set for deriving inferences and perceiving associations between key variables.

A few words are necessary about our qualitative methods. Our goals here are not statistical. Rather, we are trying to identify relevant dynamics connecting women's experiences of victimization and their involvement in criminal activity, concentrating on dynamics as they are framed *in the woman's own perspective*. Both ethnography and grounded theory approaches allow findings to emerge from responses in a manner that remains grounded in the participant's life experiences and perceptions rather than being imposed by the researcher. These commonly used inductive approaches differ from deductive content analysis and do not use pre-determined categories for data coding (Glaser & Strauss, 1967; Stewart, 1998). Thus, our methods did not use structured prompts to extract systematic information about many constructs that we will discuss.

Both ethnography and grounded theory are highly reflexive methodologies, with theory and analyses reciprocally intertwined. The two differ in ethnography's focus on actual cases and description, versus grounded theory's focus on making abstract inferences from aggregate findings. Strauss and Corbin (1991) have written extensively on grounded-theory methodology and its constant comparative analysis, through which the researcher remains attentive to similarities and differences among cases and concepts and actively searches for new and disconfirming case examples—until no new examples of variation are found. New data is sometimes sought during the course of analysis if this will elaborate emergent theory. These qualitative methods are especially useful in working with populations whose experience falls outside of the mainstream, and qualitative data help researchers grasp complexity and identify components of constructs in order to design quantitative measures.

The phrase "index terms" in ethnographic theory is analogous to the "codes" of quantitative research or content analyses. The distinction between index terms and codes is important because—in contrast to quantitative and content-analytic work—it is not customary in ethnographic work to conduct intercoder reliability analyses. Stewart (1998), in addressing the fact that quantitatively trained reviewers often request such

analyses, argues that in ethnography, reliability analyses are little more than a "methodological fetish...providing spurious protection" (p.39). As he explains, index terms and codes differ in several respects that render quantitative characterizations of findings deceptive.

Conventional code categories are mutually exclusive and derive from pre-defined coding rules, whereas there is no expectation of exclusivity for ethnographic categories. Further, the ethnographer is encouraged to "code promiscuously," coding incidents under a category if there is any reason to believe that the incident might be considered relevant to this category. Any unit of text that is tagged with an index term will be retrieved and reviewed repeatedly during the iterative cycles of analyses. Thus over-coding (making a Type I error—falsely identifying a positive instance) is preferable because tagged units are repeatedly checked, rooting out some sources of error. Whereas under-coding (a Type II error—failure to identify a positive instance) results in untagged units of text that are not retrieved for review. As Stewart explains, the more comprehensive and intensive a researcher's indexing, the more the interests of veracity are served, yet the lower the likelihood that any second coder would index precisely the same words. This contradiction between validity and reliability is one reason why many theorists discount intercoder consensus as a source of objectivity in qualitative research (Kirk & Miller, 1986; Sanjek, 1990; Stewart, 1998; Wolcott, 1995).

Finally, we provide a note on our presentation of women's perspectives within the current report. Here—as in many ethnographic writings—we provide excerpts of text in our discussion of findings for the reader's own interpretation. It should be noted that these excerpts are edited for brevity and clarity of communication, as well as to obfuscate certain details that might compromise anonymity of response. We have assigned a pseudonym to each woman in the sample, and throughout the report, we alternately refer to women using pseudonyms, demographic characteristics, or type of criminal offense. This is done because providing too much life history information for any single participant creates multiple points of reference by which readers might link individual identities to private stories (e.g., "From public information, *PseudonymX* seems to be *InmateX*, thus any quote from *PseudonymX* gives me more information about *InmateX*"). Full transcripts will be archived in accord with National Institute of Justice standards and will be available for further inspection, analysis, reconfiguration, or elaboration by researchers.

RESULTS

Our findings include discussion of impact of victimization on the women in our sample, impact of victimization on their children, and opportunities for intervention with girls and women at risk for criminal involvement.

Impact of Victimization on Women

Examining victimization as an organizing principle in incarcerated women's lives necessarily assumes that women carry some of the impact of victimization with them—on their bodies, in their minds, in their habits and survival strategies, in the ways they discuss themselves and the social networks that surround them, in the places they have been or been shut out of, and in the places they presently are (cognitively, physically, etc.). The impact reflects sometimes as strength, other times as devastation, and sometimes just as difference. Given this reality, any effort to reduce risks or attend to rehabilitative needs of girls and women must consider the weight and distribution of victimization's burden in their lives. Through this report, we hope to elucidate the varied impacts of victimization in the lives of incarcerated women.

Women in our sample were victimized in a range of ways. This included, as children, witnessing extreme violence, being neglected, or experiencing physical, sexual, or emotional abuse. Some of their parents continued to abuse the women into adulthood, launching physical or verbal attacks on their 30-year-old daughters. Women in the sample were physically and sexually assaulted by strangers and acquaintances. Their property was vandalized or stolen. They were beaten, raped, tormented, and controlled by relationship partners. Their own children witnessed violence in the home and were subject to abuse. It is not necessary here to provide lurid examples of each type of act, as the focus here is on violence's impact, and readers will gain a fuller perspective throughout the report as we provide examples of impact as embedded in the women's lives.

Our qualitative methodology helped to capture the subjectivity of this impact—what each woman carried with her, and what endured the everyday palliations and embellishments of remembering, reexperiencing, and retelling. Indeed, the women's stories were intense, and in our everyday research discussions, we began to stop asking why this or that woman was in prison and instead asked how she survived. And everywhere there were reminders that she had survived. Throughout the research, bits and pieces of the women's stories had been validated in numerous ways, including consistencies in storytelling, indications in case files, and corroborating news articles. Perhaps the most striking testament to what these women had endured was evident as they sat in the interview room telling their stories—

and not just in their speech and palpable emotion. Some women lifted their sleeves or moved aside their uniforms to show the scars as they spoke. Other women's faces showed remnants of extreme damage, including the body's attempts to heal without the benefit of medical attention. These things, coupled with the sheer number of stories, underscored the magnitude of what these women had survived, and rendered the women testimony to the resiliency of the human mind and body. We came to realize that quantitative accounts often decontextualized the violence so much that accounts failed to attest to the entrenchment of victimization in incarcerated women's lives (e.g., see Sample Timeline in Table 1), transformed horrors into something readable, and most importantly, eradicated much of the subjectivity that is so important in understanding impact.

The first objective of this project was to enhance understanding of risk factors for women's crime, with specific emphasis on the direct and indirect contributions of violent victimization over the life span. Here we first discuss examples in which victimization related directly to criminal activity via corruption, force, provocation, or pressure. Second, we will address the indirect impact of victimization on crime via effects on life circumstances such as health, psychosocial well-being, and functioning in private and public systems (e.g., families, peer networks, schools). Finally, we will discuss how the cumulative impact of victimization in these multiple areas related to criminal involvement for women in our sample.

Compelled to Crime

For some, victimization experiences related directly to the crime, as child corruption or as perceived force, provocation, or pressure to commit the crime. Examples occurred throughout the women's lives, sometimes involving onset of criminal activity, and sometimes involving exacerbation of pre-existing criminal patterns.

For quite a few women in our sample, this began early in life—as girls—with caregivers or other adults providing them with alcohol or other drugs, forcing them to steal, or prostituting them. These forms of child maltreatment are variously labeled "missocializing" or "corrupting" and "sexual exploitation" (APSAC, 1995; Hart, Germain & Brassard, 1987; NECF, 2004).

- A woman convicted of forgery said her mother introduced her to crack cocaine when she was 13. The girl and her aunt had been in an argument, and her mom said everything was going to be okay. Her mom told her, "Smoke this, it will calm you down, help you relax." The girl thought her mom wouldn't be giving her anything that would hurt her, so she smoked it.
- A 42-year-old African American woman recalled that, when she was a child between 8- and 12-years-old, her mom would take the kids in the store and make

them steal. She would cry, but her mom would make them put clothes on and walk out of the store.

• Chantelle left home because of the drug use—her mom and dad high all the time, men coming in and out of the house. They'd go straight to Chantelle's room. Chantelle's parents would take money, the keys to a car, whatever. Chantelle laid there and took it. It started as fondling, but then there was also intercourse. It happened more times than she can count—whenever anyone came by with money, every weekend and sometimes during the week.

In adulthood, many of the women in our sample committed at least some of their criminal acts as direct responses to physical victimization. Nearly half of participants described events in their adult lives when they committed assaults that might be characterized as defensive or retaliatory efforts to end abuse. That is, assaults had been directly preceded by a physical assault or threat to the woman or her family. The women acted in response to being pushed, slapped, punched, beaten, choked, raped, or threatened with a weapon.

- Josie's boyfriend jumped her at her mother's house. Josie stabbed him something like 12 times. She was tired of him flipping on her.
- A woman convicted of voluntary manslaughter explained that her live-in boyfriend was very physically abusive, and they fought all the time. That particular night, he said to her, "If you leave, I'll kill you." She had been in bed, and he came in hitting and punching her. She shot him twice.
- Brenda isn't gonna lie. She fought her husband tooth-and-nail—twice. Once she paid dearly for it. The second time he died.

In a few of these cases, women acted in response to verbal threats to beat, kill, or sexually assault them or their families. Consider the following case example from a woman convicted of manslaughter.

• The woman was married to a man who raped her 8-year-old daughter. After this, the woman and her husband were fighting about it, and he began to tell her what he was going to do to her daughter when she got older. The woman told him she was going to kill him, and that's what she did. She pulled a kitchen knife out of the drawer and stabbed and killed him. Stabbed in through the heart—or right beside the heart, just missed.

A few of the women acted after an immediate assault had subsided, but within several hours of the attack when the abuser and threat of further harm still lingered.

• Once Christa tried to set fire to her boyfriend, like the woman from "The Burning Bed." That time he had threatened to drown her if she didn't have sex with him. He had dragged her down by the lake. She gave in, laid in the bed, and he raped her. They had a kerosene heater and Christa poured kerosene all around the bed and lit it on fire. He woke up, and it wasn't high enough flames—he got through. Christa was just tired of getting an ass whooping every day.

Beyond such defensive or retaliatory assaults, some women in our sample described events in their adult lives when they were forced (through physical attacks or threat thereof) to commit other crimes such as shoplifting, check fraud, robbery, prostitution, or murder. These were often the same women who mentioned defensive or retaliatory assaults, which is not unexpected given their partners' reliance on violence.

- Tanya's boyfriend started wanting to rob banks. She didn't want to, and he beat her up—said she was going to do it or he'd kill her. He had a drug habit now. So they ended up robbing banks, and that led up to Tanya serving time.
- Linda's boyfriend prostituted her. After they'd come in for the night, he'd accuse the men she slept with of being better than he was. If Linda said the wrong thing, he'd beat the slop out of her. If she said nothing, he'd beat the slop out of her. If she said he was number one, he'd say she was trying to con him, and he'd beat the slop out of her.

A handful of additional women took blame for or committed criminal acts in response to more subtle pressure or provocation. This includes being manipulated or "talked into" doing the crime, confessing to an abuser's crime due to fear of the abuser, committing physical assaults in response to psychological victimization, or participating in relationship violence that was characterized by the woman as "mutual."

- A 44-year-old White woman explained that her husband would hit and slap her. One day he was angry about having to go with her to visit her mother. He had previously lost his driver's license, and he hit a car on the way. He told the police that she had been driving. She was afraid to say that it hadn't been her driving, so she got the ticket and had 2 points taken off her license. This was her first run-in with the law. Things like this were a game to him. He liked to have her under control and do whatever he wanted.
- LaShawn had sex with a guy who put her up in this lady's house. He asked LaShawn if she wanted to work for him—asked her to sell out of the lady's apartment. He hadn't forced her to sell, just talked her into it. He would get abusive if the drugs or money weren't right from LaShawn's sales.
- Kathryn and her husband would go to strip clubs, and her husband kept stressing to her that stripping was the type of job she needed. Kathryn was really uncomfortable about it—the scenery and the point of it—but they needed money, and that was the only type of work he wanted her to have, so she did it.

As is evident in these stories, the component of personal choice for the woman and the range of force used to compel her to crime varies from one event to another. Such personal choice is an important consideration in evaluating these findings in their entirety, as our discussion of being "compelled" to crime is not intended to provide an excuse for the occurrence of that crime. Overtness of force upon the women ranged from

psychological pressure, to provocation, to child corruption, to intimidation or threats, to beatings or physical force. In most instances, it is arguable that the offense would not have occurred had it not been for the direct influence of some sort of victimization. The notable exception here involves cases of psychological pressure, which tends to be viewed as more conditional (e.g., depends on frequency, intent, and perceived harm) in being labeled "abuse" by psychologists (Follingstad & DeHart, 2000). Yet, it is also arguable that victimization itself was not a sufficient condition for occurrence of the crime. That is, personal choice was a factor, and understanding such choice requires consideration of broader life circumstances.

Impact of Victimization on Life Circumstances

For some women in our sample, victimization was not directly associated with a crime, but it impacted life circumstances in a way that contributed to the women's marginalization from mainstream or legitimate avenues. That is, victimization in the lives of these women influenced their physical or mental health, had effects on their psychosocial functioning in areas such as self-image and personal relationships, or influenced their involvement in private and public systems such as family and work. Effects in these areas often intersected. For instance, a physical injury could impede ability to perform at work, or, as in the following case, illness could impact relationships.

• Thelma said that since the sexual assault that gave her HIV, she is limited in her sources for having a relationship. She thinks that nobody would want her now that she is HIV-positive. If something happens with her current boyfriend, she's afraid she won't be able to find another one.

As we discuss later in this report, the effects of victimization in these multiple areas often added to disruption or instability in the women's lives, and thereby may have indirectly contributed to criminal involvement.

Effects on Physical or Mental Health

Effects of victimization on physical and mental health ranged from minor cuts and bruises to more enduring disabilities, disorders, and addictions, as well as life-altering events such as pregnancy and HIV-positive diagnosis. Here, we address the impact of victimization in the lives of incarcerated women in areas including physical injury, non-injury health effects, and illness, addiction, or suicidality.

Physical Injury

Physical injury was perhaps the most overt impact of victimization that the women suffered. They described a range of injuries, including some that might be referred to as "minor" (Straus et al., 1996). These included sprains, small cuts and bruises, black eyes and busted lips, or other injuries that caused transient physical pain and required

little medical attention. We use this label for its practical and theoretical convenience, and hope that readers remain mindful of the impact that such "minor" injuries might have on one human being when inflicted by another.

In some cases, the victimizer was a stranger or acquaintance, in which case women were often able to distance themselves from future harm. Yet, when the victimizer was a caregiver or romantic partner—as was the case for many women in our sample—the women were subjected to such injuries on a more routine basis.

- A 41-year-old African American woman explained that she was once assaulted by a guy who was helping her move. She had rented a moving truck and he wanted to take it. He began beating her and gave her a black eye. She left him alone after that.
- When Rhonda reached her teens, the discipline got worse. Her mother was drinking real heavy by that time. None of the kids ever had to go to the hospital or anything, but all of them had gotten bloody noses and bruises.

A majority of women in our sample suffered injuries that might be termed "severe" (Straus et al., 1996). This includes things like passing out, having broken bones, and needing medical attention. Some injuries were life threatening. Sometimes the injuries were at the hands of strangers, and other times the injuries were inflicted by loved ones.

- One night Amanda stopped at a convenience store, and a guy on crack robbed her. She wouldn't give him her purse, and the situation escalated. He took a walking stick from under the seat and beat her with it. She ended up in the hospital with broken bones.
- A 27-year-old White woman recalled that her boyfriend never punched or hit her—he would shove her and grab her neck, choke her until she passed out. She would wake up after passing out with handprints on her neck. She was so scared of him that she began to give in to anything to make him stop before things got to that point.

In fact, many of these women had enduring reminders of the physical injuries they suffered—scars, chronic pain, and permanent disabilities.

- Pauletta's husband jumped on her and disfigured her eye. She wasn't married to him yet—her mom warned her about marrying a guy who already was disfiguring her face.
- Brenda had seven knife wounds, massive battering, and injuries from the rape that were so bad she can no longer bear children. Her uterus is flipped backwards, her cervix is torn, and they don't know what happened to her right ovary—they think she may have passed it as a clot. They believe that her

husband may have raped her with an object while she was unconscious from his attack.

• The abuse and the beatings still bother Lorraine. She looks at her scars and gunshot wounds—she's got a bullet in her leg that every time it rains starts aching—and she thinks back to how she almost died. Thank God she's alive to tell someone about it.

Thus, these attackers were able to instill more than pain, fear, and intimidation. They succeeded in branding some women with enduring stigma, and taking from others privileges such as mobility and motherhood. The time and finances necessary for healing are two of countless other effects that routinely stem from physical injury.

Non-Injury Effects on Physical Health

Beyond physical injuries, there were additional physical health effects of victimization for the women in our sample. Both in childhood and adulthood, some of the women in our sample were subject to neglect- or abuse-related deprivation that had potential for serious health consequences.

- A woman convicted of child neglect explained that her parents were drug addicts and never paid much attention to her. She was hungry a lot as a child. She used to go out in the yard and crack walnuts to eat. Her grandmom lived next door, so sometimes she's see the girl out in the yard and come get her.
- Amy and her husband lived at the lake, and he would take off in the car and leave her there when he went gambling. The city came and turned off the power and the water and the phone, and she was stuck out there—near nothing, with no car, no food, no water. She was pregnant. Her dad tried to call and there was no phone service, so he went by and had to take Amy to the hospital with dehydration.

Sexual abuse, of course, had a number of effects on women's health, including unplanned pregnancy, sexually transmitted diseases, and HIV. These were described by a number of women in our sample, including associated effects of disease on relationships and of pregnancy on overall life circumstances. An additional health impact of sexual abuse and possibly psychological abuse may exist unseen in our sample. Emerging research indicates that women who experience physical, sexual, or psychological abuse may be at heightened risk for cervical cancer. Presumably, the association occurs either through chronic psychosocial stress or through the transmission of human papilloma virus during sexual assaults (Coker et al., 2000a/b).

Similarly, psychological stress from abuse may have contributed to somatic effects described by a few women in our sample.

• Kathryn quit brushing her hair because it was coming out in clumps and she was getting bald spots. She was that stressed, that unhealthy. She was malnourished. She couldn't eat or do nothing around this man.

Although such extreme somatic responses may be rare, it is feasible that many more mundane manifestations of somatization may have existed in the sample unreported. That is, individuals often fail to cognitively associate their ongoing aches, pains, and other bodily complaints with psychological stress in their lives.

Mental Disorders, Suicidality, & Addiction

For a few women in our sample, victimization may have contributed to mental health disorders such as depression and schizophrenia. That is, victimization may have acted as a stressful life factor that precipitated onset or exacerbated existing illness. Several women discussed their ideas that abuse was the source of their struggles with mental health.

- Tammy's grandmom sent Tammy to a mental health facility when she was 12. Tammy had flipped out—jumped on her grandmom and was hitting her. Tammy was upset about the whole situation—her grand mom had found out about her dad abusing her, and they had to go to court. The mental health place put Tammy on depression and nerve medicine and made her go to counseling after she got out.
- One 26-year-old African American woman said she got mental health disability payments from early on. That man bothering her—what he did—is what she thinks triggered her into all that bad behavior she was doing. First she had that on her chest, then she didn't want to tell because she didn't think she'd be believed, then she thought that people would blame her for it happening. She didn't notice the effects right away, but after a while she started to get into lots of trouble, hear voices in her head.

Victimization's impact had implications both for mental and physical health in cases involving suicidality. Many women in our sample mentioned suicidal thoughts or efforts, and they often discussed these in association with victimization in their lives.

• A 24-year-old African American woman said she coped with the violence by crying and by doing drugs and alcohol every time she had a chance. Once she tried to commit suicide. She was just tired, so she took a handful of blood pressure pills trying to O.D. She was 16 at the time. It backfired and she was sick for a week. Her boyfriend wouldn't take her to the emergency room. She just sweated and had hallucinations all laid up in the house. It got to where she just didn't care.

Victimization also had an impact on the women's mental and physical health through its influence on addictive behaviors, particularly alcohol and drug addiction. As mentioned previously, some of the women in our sample were first introduced to alcohol and

other drugs by adults. This sometimes directly contributed to onset of addictive behaviors for the girls.

- Susan had her first swallow of beer when she was 6 years old—her dad gave it to her. He would give Susan beers and let her get drunk—drunk enough until she'd pass out and go to sleep. This happened about two or three times a week. After that, she kept on drinking.
- When Tara was a child, there was a woman in her neighborhood whose uncle used to sell cocaine. He was a known pervert, and the woman used Tara to score some cocaine. She took Tara to his house and said that Tara had headaches that wouldn't go away. The woman asked for cocaine to make Tara feel better. The uncle said Tara had to do the cocaine in front of him—he wanted to see the smoke coming out of her mouth. Tara pleaded with the neighbor lady not to have to do it, but she ended up having to smoke the coke. From there on out, she was an addict.

Victimization contributed to addiction in a more indirect manner when women used addictive behaviors to cope. This was pervasive in our sample, and many women discussed alcohol and drugs as a way to ease the physical or psychological pain of abuse. That is, they would "numb" themselves—either in anticipation of abuse or in dealing with its ongoing stress or aftermath.

- Laura wasn't an alcoholic until she was 15. She found out that if she was drunk, it was easier to deal with the sexual abuse. She would see her stepdad looking at her like he was going to do it, and she'd drink a half bottle of vodka.
- When Dawn was 13, she would sleep with the dealer-woman's 30-year-old husband to get her own bag of weed or coke. He had initiated the sex-for-drugs. It freaked Dawn out at first, but he got her good and high and then it didn't matter. Dawn dealt with it by just staying drunk and high.
- Lori started to smoke pot at age twelve as a direct effect of the sexual abuse. She was trying to get all of it off her mind, so she got stoned. She was tired of being a liar. It was hidden inside her, so she had to do something with it.

Another, less-common type of addiction, which may have been a by-product of victimization, impacts physical health. Several women described engaging in self-mutilation: intentional self-injury without the direct intent to commit suicide. This includes behaviors such as cutting or burning oneself, head banging, or otherwise inflicting pain. Because self-mutilation may be associated with the body's release of pleasure-producing and pain-blocking endorphins, it is sometimes conceptualized as an addictive behavior (Taiminen et al., 1998), and some women in our sample described using it from childhood into adulthood. Consistent with the women's accounts, self-mutilation has been suggested to be rooted in child sexual abuse. It is thought to be a

way of relieving emotional pain by refocusing on the physical realm (Farber, 1997; Favazza, 1998).

- Rhonda began cutting herself, burning herself, scratching herself when she was 9 or 10—when her parents first split and she was sent to stay at her aunt's, when the sexual abuse started.
- When Emma was 5 years old—in kindergarten—the babysitter's son molested her. After that, when Emma was upset, she would cry all the time, and she started banging her head against the wall like something was really wrong with her.

Like effects on physical health, impact of victimization on mental health has wideranging implications, including ability to perform in school and work, influence on relationships, impact on finances through medical costs or substance needs, and so on.

Psychosocial Effects

For women in our sample, there were a number of possible psychosocial effects of victimization that did not reach a level to be clearly identifiable as mental disorders and did not have definite implications for health. Rather, these effects included more general internalizing behaviors such as feelings of worthlessness or withdrawal, externalizing behaviors like aggression, and influences on the ways women felt about personal relationships. While it is possible that some effects, such as persistent anxiety or acting out, could be indicative of disorders such as post-traumatic stress disorder or conduct disorder, our data are insufficient to make this conclusion if the women have not mentioned a clinical diagnosis. What is particularly salient regarding these psychosocial effects, however, is the extent to which experiences of violence may truly serve as an organizing principle in the minds and behaviors of girls and women.

Internalizing—Distress, Worthlessness, & Withdrawal

Some women's stories regarding the impact of victimization included descriptions of behaviors that might be described as "internalizing" or overcontrolled behaviors. These included feelings of emotional distress, worthlessness, and withdrawal from activities (Martin, 2003). Perhaps the most immediate and pervasive manifestations were persistent fear or discomfort.

- Nancy's dad used child abuse on her if she skipped school, got bad grades little things. He'd beat her with his fists, hard. There weren't a lot of injuries, but the children lived in a world of fear. They didn't know when he'd decide to raise hell.
- Mentally, Kelly's mom's boyfriend frightened the kids. If you'd see him coming, you'd be scared to move. If Kelly wanted to go to the bathroom, she had to ask.

If she wanted to cut the TV on, she had to ask. He'd be out of town working, and then he'd come home, and it was a different world—you couldn't enjoy.

• When Amanda was 5 or 6, she started getting sexually abused. She didn't know how to talk to anybody about it, but it made her not feel safe.

Such private feelings took on a new dimension when the girls or women confronted the possibility of public discovery of abuse. Often, this included feelings of shame, self-blame, or embarrassment.

- A 46-year-old White woman said she never told a soul about the childhood sexual abuse. She felt it was her fault, because that man had given her a doll and she had taken it. He had asked her what she wanted and what she would do anything in the world for. She connected her feelings of being uncomfortable, the shame over what he did, with the doll.
- Pauletta's husband would give her black eyes about three times a year. That's what would bother her, because she had to go out with that.
- A woman with a permanent disability said her doctor asked her if anybody beat her around the head, but she's ashamed to tell him that her boyfriend beat her. She knows that what's wrong with her probably comes from being kicked and beaten, but she ain't going to tell nobody about that.

For some women, the shame they felt about victimization had a substantial and enduring impact on self-esteem. They described feeling degraded, "torn down," and like outcasts. The deep hurt and despair that women felt was sometimes still evident in their visible emotions as they described victimization experiences.

- Joyce couldn't find words to describe how she felt about the rape. "It just felt—uuuuh," she groaned, signifying misery. She knew both of the men who raped her, and that's what made it so hard. She couldn't believe people who knew her would do that. They degraded her—snatching her out of the road and dragging her back there behind a dumpster.
- The abuse from Laura's stepdad wasn't all sexual. While he was doing that—during the actual abuse—he would say horrible things, demean her, make her less than nothing.
- Serena's mom would hit her for nothing, talk at her and call her names. Kids learn to believe that stuff you tell them—especially if you holler at them and tell them that long enough.

A few women described feeling like a "target" for abuse, and some began to accept the label that they felt had been placed on them.

• Dawn thought maybe it was "her"—it had happened so many times that it seemed like it had to be her.

- The abuse impacted Thelma's self worth, self-esteem. It made her feel low and she figured, "That must be the way that I am." She decided she might as well prove it. She became a rebel teen.
- Tara's mother would call her a whore—say that Tara was having sex with these Black guys that were really just friends. Tara got agitated and decided, "You call me a whore, I'll show you a whore!"

These psychological effects of fear, shame, and low self-worth have potential to reach the very core of women as they interact in the world. It is thereby not surprising that some girls and women began to avoid places and things, restricting their range of activity in the world. Often, this was a means of protecting themselves from further victimization.

- Betty didn't like to go outside of the house much when she was a child. It wasn't boys that were the problem—it was family, uncles and cousins. She cut herself off from everything. She just got in a chair, got quiet, and stayed to herself.
- Carrie was terrified all of the time—afraid to go anywhere, to do anything. Her boyfriend threatened that she'd never have nothing if she left him. Other folks thought he was picture perfect, but in the house he was crazy. It was awful.

Several women discussed ongoing avoidance of places and activities that still served as reminders of abuse. One area of avoidance that many women in our sample shared involved sexual activity. This avoidance did not appear to be a function of their current incarceration; rather, the women were discussing adult sexual relationships prior to incarceration. Several expressed disgust at sexuality in general, while others avoided specific types of activities (e.g., oral sex) that reminded them of the manner in which they were abused. As we will discuss, a more generalized avoidance of relationships, and not just sexuality, was another way that some women said they coped with abuse.

Externalizing—Aggression & Acting Out

For some women in our sample, victimization was associated with behaviors that might be termed "externalizing" or under controlled—anger, aggression, or behavioral acting out (Martin, 2003).

- Kelly would see her grandmom do violence, and she would think it was okay for her to do, too. "She hurt me, I hurt somebody else....The low man on the totem pole got to catch all the weight—get all the bad of everything." It got Kelly meaner—got her an I-don't-care attitude.
- Laura started getting in trouble a lot after her mother's boyfriend had touched her. She began throwing stuff at cars, starting fires, tearing stuff up, and raising hell. Now that she thinks back on it, she thinks she was trying to make someone ask what was wrong.

Nothing was really helpful for Shirley in dealing with the rapes. There was nothing anyone could have done—they had already done raped her. It did impact her some. It made her think she was grown enough to be out in the street. She started running away and staying out all night, and her mom would send the police to look for her.

Such externalizing behaviors were often a source of girls' first entry into public disciplinary systems—being suspended at school, being apprehended by law enforcement for juvenile crime, and so on.

Perspectives on Personal Relationships

For the women in our sample, victimization also may have had an impact on the women's perspectives on relationships. Some women described how they came to view abuse or neglect as a normal part of their lives.

- Nicole's aunt would beat up Nicole's uncle—stabbed him, pulled a gun on him. When Nicole's aunt and uncle fought, Nicole thought it was normal. It was a stress relief for Nicole because they weren't focused on her.
- Linda never really missed her mother. It was like it was natural for kids to be there by their selves all the time.
- The sexual abuse came to be what Mary expected out of life. It was the only time she felt like she got attention, and she began to look forward to it. She and her uncle shared a secret that they cared and nobody else did.

For many women in our sample, victimization was associated with a loss of trust, and relationships were viewed through a lens of suspicion. Generalized distrust sometimes resulted in self-imposed isolation from others as a way of protecting oneself from further victimization or discovery of abuse.

- Chantelle's first real relationship was with her current boyfriend. He has not been physically or verbally or sexually abusive, but it is hard for Chantelle to believe that he is the way he is toward her without there being some catch to it.
- Pauletta felt that if she let people get too close to her, they would treat her bad. Everyone always seemed to have something negative to say to her.
- Mary was a loner and didn't really have friends. She felt like she didn't fit in, and that if she got too close to anyone, people would know what was going on.

Sometimes, distrust was more specifically directed at persons similar to the perpetrator. Specifically, aversion to boys or men was mentioned by quite a few women in our sample.

- One of Serena's cousins tried to make her have sex with him. That did drive hate right there—between Serena and him and toward men. Nobody wants to be forced to do nothing.
- A 46-year-old White woman recalled that until she was 18, she stayed away from men. She was deathly afraid of them. She thought there was only one thing all men wanted, and that was to be nasty with you.
- A woman convicted of manslaughter explained that for a long time, she hated men. Part of her still does because of all the abuse—she was abused for 13 years by different men. It's not like she's going to get out of here and be gay, but it pushes her away from getting involved too quickly with men. She doesn't know what she might do if she's pushed to the limit again.

Paradoxically, these perspectives on relationships sometimes seemed at odds with women's natural inclinations to move toward relationships. One woman, for instance, spoke of being "disgusted by sex" yet "needing it, like anybody else." Another spoke of being "starved for love instead of [her] momma's beatings." It is plausible that such contradictions resulted in some women's settling into relationships that they anticipated would be bad and that met with these low expectations.

Effects on Systems

Victimization also had an impact in a number of areas that are better classified as influencing girls' or women's participation in systems (e.g., families, peer networks, schools) versus effects on health or psychosocial functioning. That is, there are a number of social and cultural settings or characteristics that affect individuals as they function and develop in the world (Bronfenbrenner, 1979). Here, we discuss the impact of victimization on family and peer systems, home and finances, work or education, and faith or religion.

Effects on the Family & Peer Systems

According to the women in our sample, their experiences of neglect or abuse sometimes had an impact on the size, structure, or cohesion of family and peer networks. A commonly mentioned effect was physical disruption or chaos within the woman's family of origin.

• As Becca got older, she wasn't comfortable with what was going on, and she told her mom about the sexual abuse. Her mom and dad separated, and her dad went to stay with his brother. Becca could sense the tension in the house, like either her mom blamed Becca or was angry at Becca's dad or was angry at herself—Becca isn't sure which. After a while, Becca and her mom got into it, and her mom made Becca go over and get her father and bring him home. "Me," she wept, "She made ME go over there and get him."

• When Raquel was 13, her mother put two big time dealers in the house to sell drugs. Raquel was tired of being there, and one of the dealers asked Raquel's mother if he could take Raquel to another city with him to live. Raquel's mom said, "For a price." He gave her mom \$250 worth of crack and took Raquel with him. After a while, Raquel went back for a visit. That's when Raquel found out that her mom had been in a shelter and just left Raquel's brothers and sisters there. Now they were in DSS custody and separated, and DSS was looking for Raquel. She went to go stay with her aunt, but she was mad about the family breaking apart and tried to commit suicide. The hospital called DSS, and she was in DSS care, then her godmother and godfather said they would take her. The worst thing about it all was how her mom tore the family apart with crack—how her mom allowed crack to overtake her, to not care about the children.

As Raquel goes on to say, these changes in caregivers involved changes in living conditions, rules, and family practices. As we will discuss later in this report, for many women in our sample, family disruption was a turning point involving a multitude of life changes. In Raquel's case, she said it was "the best thing ever" for her. In other cases, the changes were not always so positive.

Another type of family disruption described by women in our sample affected family systems they developed in adult life—their partners and children. In the following example, a 55-year-old African American woman discusses attempting to see the children after she and her violent partner split. The children were his from a previous marriage, but she had grown close to them when they had lived as a family.

• She tried to make an appointment to see the kids. He'd always say she could and then say the kids were somewhere else when she got there. She made an appointment and saw them at his brother's house, but then he showed up and cursed her out. She never went again.

As in this case, children were used as pawns in the violence directed at other women in our sample, having implications for the well-being of both women and their children. Beyond family disruption, there were other impacts of violence that affected women's children, and these were multifaceted enough to merit discussion in a separate section of this manuscript.

Finally, victimization also impacted peer systems. Peer networks were largely influenced by the girls' moves from one caregiver to the next—moves that often involved changes in neighborhoods and schools. In adulthood, victimization sometimes influenced peer networks in other ways. Some women, for instance, were intentionally isolated from social networks by controlling partners. Other times, friends were alienated by the woman's repeated returns to a batterer.

• Patricia feels ashamed that she let someone beat her, and that she put her buddies in the middle of it. She would call them to come and get her. Eventually

they stopped coming because they said she was just going to go back to him. At the time, she was mad at them, but now she's not and understands why they wouldn't come.

Patricia and other women in our sample sometimes felt impact beyond withdrawal of system support, as perceived rejection by family or friends exacerbated feelings of worthlessness. Especially for women struggling with addiction, the default response seemed to be turning to drugs for coping or to try to "fit in" with new peers.

Effects on Home or Property

Victimization frequently resulted in loss of home for women in our sample. This loss was often associated with loss of family, as well as with loss of property. Many women in our sample discussed running away from home, often as a means of coping with or escaping abuse.

- The verbal abuse at home affected Susan in a lot of ways, mainly in that she didn't care anymore what she said to people. She didn't care if anything happened to her family or happened to her—just so she didn't have to be there anymore. She began having flashbacks of things that had happened in the past. That's when she started wanting to run away again just so she wouldn't have to look at nobody.
- LaShawn coped with the sexual abuse by running away. She was 10 the first time she ran away, and ran away about six or seven times. She would run away and stay gone for days. While she was gone she would get with older men and stay with them in hotels or at their house. Most of the time she would have sex with them. After two or three days they would bring her back to her momma. She also ran away from foster homes.

As is evident in LaShawn's case, sometimes the women ran from one abuser only to be abused or exploited by others. Sometimes the girls' leaving home was not voluntary, in that they were removed from their homes by social services following reports of abuse or neglect.

- LaShawn's mom got involved with the man who would become LaShawn's stepfather. He sexually abused LaShawn. She told her mom about it, but her mom didn't believe her and instead went to DSS—put LaShawn in DSS custody. DSS just dropped the ball and LaShawn was in foster homes for five or six years. She went to stay with her dad when she was 16.
- Serena would get hit with drop cords. Once her mom hit her across the eye and Serena almost lost an eye. DSS came and got Serena, and she was in foster care for almost a year. After that she went to stay with her aunt from the time she was 15 until she moved out on her own.

In adulthood, women sometimes lost their homes as they tried to escape abusive partners. Some women had the resources to move, while others were forced into homelessness or had to seek out friends or a new partner to live with. Several women in our sample discussed having to move long distances or to secret or secluded locations in order to prevent stalking by the batterer.

- Bonnie used to try to break up with her boyfriend, but he'd break in and jump her. She'd be scared to go back home. She had a restraining order out on him, but he'd still walk up and down in front of the house in the street. The cops couldn't do anything then. She couldn't get rid of him—he'd break in, jump her, start back living with her again. Bonnie finally moved because that's the only way she saw to get away from this man.
- After a few months of abuse, Emma moved out and left her boyfriend. She moved to an isolated area where he wouldn't be able to find her, because she was scared of him because he was crazy.

Sometimes loss of home was due to eviction—for instance, when families were evicted for parental drug use or when women were evicted due to actions of a batterer. In these cases, families were not necessarily kept intact, as children were often sent to live with different friends or relatives. Property also was sometimes left behind during these moves. In the following case, a woman convicted of shoplifting describes her loss of home as well as collateral damage and costs of her boyfriend's violence.

• Her boyfriend was constantly destroying doors and windows breaking in. The woman still owes over \$1000 to the housing authority. She had to steal more to pay for repairs. They told him not to trespass, and the neighbors called police, but she couldn't keep him out—he would break the doors and the windows. They finally evicted her because of the damage.

These losses tend to accumulate, and women sometimes have difficulty reestablishing themselves given meager resources and compromised standing with property managers.

Effects on Work or Education

Victimization also had implications for girls' and women's performance in the workplace or at school. Several women in our sample discussed poor academic performance as a byproduct of their parents' lack of interest in their behavior. Failure to encourage or assist children in doing well at school and failure to ensure school attendance are routinely classified as forms of cognitive, emotional, or supervision neglect (Straus, 2004). Within our sample, these were often facets of broader patterns of neglect or abuse in the girls' homes, and were often associated with the caregivers' own alcohol or drug addiction. Neglect, as well as more severe emotional or physical abuse, undermined motivation and impaired girls' abilities to concentrate on school activities.

- Thelma felt like she never got any support from her mom regarding her performance in school, so she just didn't try.
- In ninth grade Laura failed English. There was all this homework, and at home Laura had more stuff to concentrate on than homework—she was worried about other stuff, like that she was pregnant by her stepdad.

For other girls, the sequelae of abuse—conduct problems, depression, stigma, pregnancy, addiction—played a role. Acting out resulted in suspension for some girls, and other sequelae contributed to the girls' dropping out of school altogether.

- Stephanie's grades were Cs and Ds, and they slacked down from there in junior high. It was because of stuff at home. Stephanie didn't care about grades. She wanted to quit school. She was tired of going, she was suicidal, and she wanted to die. She didn't care about anybody, not even herself.
- The kids at school had always teased Cindy. She didn't feel like she fit in, and she was bullied. It was like walking to a hanging—to the gallows—going to school. When she was in ninth grade, she and a friend were walking and got jumped by two guys from school. They raped the girls and shoved objects up Cindy's rectum. There was a court case about it, and then the whole school found out. They teased her more then. One girl started all this teasing, pelting with acorns, name-calling. After that, school was just a bad place for Cindy to be. She began cutting classes, and within a year she dropped out.

In adulthood, victimization impacted the career efficacy of many women in our sample. They discussed missing work due to beatings, having to change jobs or quit to please controlling partners, and being fired due to stalking and harassment by husbands and boyfriends.

- Lorraine couldn't go anywhere. Her boyfriend didn't want her to work. She got jobs anyway, but he'd quit his job to watch Lorraine at her job. Then if she did something he didn't like, he'd beat her and she'd get fired.
- A 55-year-old African American woman recalled that her husband was always making money and losing money and didn't keep it. She wanted to get a job, too, but he said no wife of his needed a job. She got a job and went to work. Then here he comes into her work cursing the manager. She got fired. That relationship ended, and her next partner didn't like her work, either. He didn't want her at her waitressing job because men flirt. She got a different job.

This instability of performance certainly did not contribute to women's financial autonomy, and, again, compromised reputations—this time with prospective employers. One might imagine that women struggled to find a path in life as barriers were erected at every turn.

Effects on Faith or Religion

Like many people in desperation do, Kelly turned to religion.

• Kelly got into church for a few months when she was in her early 20s. Then her grandmom cursed her, "You think you got religion? You ain't got nothing." Kelly's grandmother loved her but hurt her in so many ways. She would give Kelly everything and then tear it down with a few words.

For many women in our sample, faith had at some point been an important support. Some discussed being active church-goers at various phases in their lives, and some discussed losing faith.

• When Becca was a child, her mom frequently said things like "God said you'll never be nothing." "Evidently," Becca said, "He did say that, because look at my life." Becca's faith in God has always been shaky—it's a game being played even today. One minute she'll love God, the next she'll curse him out. She doesn't know the difference between him and Satan.

Becca's struggles were not surprising, given her mother's reprisals paired with the fact that Becca had been beaten and sexually exploited by several men who quoted scripture and preached. She was also raped at gunpoint by a man who turned out to be a minister. Despite being a talented singer and pianist, Becca doesn't participate in the prison's choir program because, "It would be singing to someone who can't stand me."

Loss of faith was especially damaging for women who discussed it. They often framed the loss in terms of their own worthlessness, and the spiritual loss was accompanied by possible social and material losses as women withdrew from involvement in religious practices and networks. This is particularly troubling given that churches, mosques, and synagogues may have been a resource for addressing some of the other barriers in women's lives, as these institutions often extend beyond spiritual support to provide outreach and services to community members in need. As we will discuss, spirituality was an important part of women's current means of coping while in prison, and many women in our sample discussed getting "back in touch with God" as a turning point associated with incarceration.

Cumulative Impact of Victimization

As was stated in the Introduction, some posit that women in prison are there, in part, because they have been pushed out of other social institutions—families, homes, schools, jobs, churches, and so on. It is evident in our data that this sometimes occurs while the girls or women are simultaneously being pushed—or at least nudged—into criminal behaviors by the encouragement or coercion of others.

If one examines the different areas of impact discussed in this report, the litany of effects are not new to the victimization literature. Incarcerated women experienced some of the same violence as experienced by other women, and they experienced some of the same effects. What may be remarkable within this sample is the cumulative impact of victimization over the life span. Most of the women in this sample suffered multiple traumas. They were victimized in multiple ways (e.g., child abuse and neglect, adult relationship violence, sexual violence), not to mention the number of times they experienced each type of victimization. This is akin to the concept of "poly-victimization," which has recently emerged in scholarly discussion to describe simultaneous episodes of different types of victimization (Finkelhor, Ormrod, & Turner, 2004). The varied impacts of poly-victimization have potential to create ripple effects in multiple arenas in the women's lives, causing overall disruption and pushing the women out of the mainstream. Often, the intersection of events and losses seemed to create uniquely difficult situations.

Three case examples follow, each highlighting a small timeframe within the women's lives. Consider the breadth and depth of trauma experienced by each woman, and think about the resolve and stamina that would be needed to overcome barriers, achieve stability, and thrive.

- When Kelly was 14, after her mom was shot, she went to "Uncle" X's house. He raped her and she got pregnant. Kelly's mom was still in intensive care, so Kelly couldn't tell her. Her dad's mom was too ashamed to go with her to get the abortion—Kelly had lied and said it was just someone off the street who got her pregnant—so she had to go by herself. Kelly had wanted to keep her baby—it was twins—but she was so ashamed of who it was by. She thought people would think less of her and that it was her fault. With the shape her mother was in, Kelly didn't want to bring any more pain on the family. Within a year, Kelly first tried marijuana, joined a gang, and began committing armed robberies of stores and motels. She began to regularly shoot up cocaine.
- At age 13, Maria moved from her grandmother's in with her mom. Discipline was severe, and usually involved either a fist or a broomstick. Within a year of moving, they got evicted due to Maria's mother's drug use, and the family got split up. Maria moved with her mother to a shelter where they stayed for several months. After they got a housing unit, the mother's boyfriend got very abusive. Maria's mother had him locked up, and during that time met someone else. When the ex-boyfriend got out of jail, he kicked in the family's door and killed the mother's new boyfriend. Maria was witness to this. Everything went downhill not long after. Maria learned that her mother was HIV-positive. All of the money her mother made was traded for drugs, and the family often lived with no lights and little food. Maria got by the best she could—babysat and sold drugs to have a roof and clothes. The family was evicted several more times, and Maria dropped out of school so she could get her brothers and sisters off to school.

Drugs were like poison in the family circle—the drugs came and everyone scattered, like cockroaches do when you turn on the light. Everything negative fell into place behind that.

• When Sandra was 14, she got married to this 19-year-old dude. When Sandra's dad found out, he had a fit. A week later, they were at the house to celebrate. Sandra's momma had killed a hog and was preparing the hog. Sandra's daddy was tore up. He and her husband had words, and maybe a scuffle. Sandra's daddy shot the boy twice through the heart. After that, Sandra tried to take her life—took an overdose of sleeping pills—but her momma took her to the hospital. Within a month, Sandra's momma had the heart attack and died. Sandra believes worrying is what caused her momma's heart attack—because the police were coming and took each of the family members and asked them separately what happened with the shooting. Sandra and her momma had told the truth, but her dad said that Sandra's husband was coming at him and that he had a knife in his hand. Sandra's daddy got upset, saying, "Y'all gonna get me put away."

Then he left—a week after her mother died. Sandra dropped out of school and did her best to raise her brothers and sisters. She picked peaches, stole, cleaned houses to get by.

For these three girls, the events described above were preceded by and followed by additional trauma—other rapes in childhood and adulthood, beatings in teen and adult relationships, loss of parents and children, medical problems and disabilities, and so on. What they experienced, like many women in our sample, might be described as unrelenting trauma. If one imagines the devastation of even a single traumatic event (e.g., a rape, a beating, death of a loved one), then considers how an individual recovers when a series of such events occurs in rapid succession, it may be possible to fathom a fraction of the impact that these girls experienced. For the girls, getting back to a path of normalcy—if indeed they were ever provided opportunity to walk such a path—surely would be a difficult task.

Pathways from Victimization to Crime

Examining our aggregate data on victimization's impact in the lives of incarcerated women has allowed us to map out many possible pathways by which victimization may relate to criminal behavior of girls and women. Some examples are illustrated in Table 2.

First, some potential pathways derive from the girls' experiences of child corruption or abuse. Many of these appear straightforward and feasible, especially given the presence of negative role models and absence of caregiver encouragement toward more positive paths. For instance, women who were prostituted as children by their caregivers may have continued prostitution into adolescence or adulthood. Similarly, women encouraged by caregivers to steal may have continued activities of shoplifting, burglary, or theft, and those introduced to drugs by adults may have entered into lifelong addictions.

• A woman convicted of shoplifting explained that after being introduced at age 12 to freebasing cocaine by neighborhood adults, she freebased as often as she could. She'd either get it for free from the neighbors or steal money from her mom, babysit for drug money, or shoplift to get money.

As is evident from this woman's story, drug abuse or statutory crimes such as alcohol abuse may have led to other types of crime in order to obtain money to satisfy addictions. Thus, there may be more complex or indirect pathways from victimization to crime in childhood. For instance, girls who were physically or emotionally abused may have turned to alcohol or drugs to cope, and subsequently turned to stealing or prostitution as ways to procure money or drugs. Girls who ran away from home to escape abuse may have found it necessary to trade sex to obtain food or shelter while on the street, thereby becoming involved in prostitution.

• A 40-year-old African American woman said she ran away many times as a teenager. A lot of times she'd stay at people's houses for two or three days. Usually she'd stay with someone she might call a boyfriend. She would have to do sexual favors or get put out of the house. So she'd do it, or sometimes she'd leave and go home.

Sometimes the girls had "consensual" relationships with statutory rapists, and from this they may have become accustomed to trading sex for material goods or drugs.

• A woman convicted of robbery said that when she was 14 or 15, she would have sex with her 30-year-old godbrother for money. He'd give her \$200 and she'd buy outfits and stuff. By the time she was 16, it was with her boyfriends—she wasn't their girlfriend for free. She'd make them take her to get her hair and nails done. They'd make sure she had spending money all the time. The first time she had sex with a guy she didn't know for money was an old white man that gave her \$800. She just met him walking down the street—he came up to her and propositioned her. Then when she started getting high regularly, it was anybody who had any money.

Other potential pathways from victimization to crime derived from adult relationship violence. Some women may have been coerced by violent relationship partners to commit crimes such as shoplifting, robbery, prostitution, or kidnapping, and some were implicated along with their violent partners as conspirators in abuse of their children. In the latter cases, the women's complicity in abuse ranged from failing to address abuse to being manipulated or coerced to participate in it. In some cases, partner violence may have contributed to addiction (e.g., to cope), unemployment (e.g., due to stalking), or eviction (e.g., due to damages), which in turn contributed to the woman's criminal activity. Most obviously, and perhaps most pervasively, women's crime involved retaliations against abusive partners—again a succinct pathway from victimization to crime.

A few women in our sample retaliated against persons with whom they were not involved, but who had stalked or stolen from the women.

• Margaret came home and found out someone had been coming into her house. Her estranged business partner was finding her hidden key. She changed the locks several times. He was breaking windows to get in every one or two weeks. This continued for months. Margaret had tried to approach him about it, but he told her, "I can do anything I want to you." She had called the police on him a few times, but she couldn't keep on doing that because she was selling drugs. This dude had stolen all sorts of stuff from her—VCRs, all sorts of things. It was at the point where he was "choking" her. She discussed someone hurting him. A guy said he knew a man. Margaret met the man—she heard he was a rough cat. All together it was going to cost \$2500 to take care of.

Some women also described using property crime (e.g., fraud, shoplifting) as a way to compensate for losses incurred when their own property was damaged or stolen.

In considering any of these pathways, it is important to be mindful of the cumulative impact of victimization in order to comprehend why these women chose illegitimate pathways over legitimate ones. For many women in our sample, a buildup of stress seemed to be a contributing factor.

- The rape happened in the spring, a couple of days before Rachel burnt the house down. There was lots of stuff going on within her. After the rape, she had gone to a center to get help with the rape and with her drug problem. They told her that her insurance was not good enough to keep her in there, but they could do outpatient. Rachel couldn't drive because she didn't have any insurance on her car and no money for gas—she'd quit her job. She had gotten behind on her bills. Maybe setting the house on fire had to do with getting freedom—from the payments. Maybe it had to do with being raped in that same place. Something just kept saying to her, "Burn it down."
- A woman convicted of kidnapping said the one thing that's the same every time she gets in trouble with the law is that she feels depressed. That makes her want to go out and do an armed robbery or do drugs—feeling like she didn't fit in, having no relationship, nobody to talk to.
- A woman convicted of murder explained that just a lot of things led up to why she did it—she's not trying to justify it or make excuses. She had just had a baby and was having conflicts at home with her mother. She went to another state to be where nobody knew her, to start over. She ended up getting raped at gunpoint. She doesn't know if the baby she killed was his. Lots of folks thought that's why she did it, but it's not. Her mother had taken the new baby. The woman had wanted the baby so that—and this may sound selfish—but so she'd have someone to love and who would love her back. She had lots going on, and she kept things to herself. She told her mother, her minister, and her best friend—right before it happened—that she felt like she was going to snap. It

wasn't directed toward anybody—like not toward the baby. She doesn't want to remember it—or can't. She remembers standing over him with a knife in her hand, and she remembers lots of blood. She remembers being on the phone but not to who, and she remembers the cops coming at her. She didn't get up and plan it.

Entanglement of Crime & Victimization

The links between victimization and crime have potential to become more convoluted as women fall deeper into criminal careers. Their involvement in criminal activity, association with criminal networks, and presence in known crime venues (e.g., crackhouses, clubhouses, drug corners) may subject them to further victimization. As prostitutes, they may be attacked by "johns." As drug dealers, they may be robbed or attacked by clients. And as female drug users, they may be robbed, raped, or otherwise attacked due to intoxication or in situations where they are trying to "score." The following case example illustrates the entanglement of victimization and crime through the experience of one woman.

• A 29-year-old African American woman said she was with a friend of a friend, and they were going to go to a crackhouse to get high. On the way, he turned onto the highway and sucker-punched her. He drove way out by the railroad tracks, so that nobody could hear her scream because the trains were going by. He hit her again, told her to smoke some, said he'd teach her about getting in the car with strangers. She smoked—she already knew he was crazy because he had hit her five or six times by now. He made her give him oral sex. He was holding her head and beating the top of her head the whole time. He beat her from eleven at night until the birds were chirping in the morning. He had a bottle of white liquor that he offered her. She had seen in the movies that when someone offers you something to drink you don't drink it—you spit it out. So he was almost drunk and she was taking swigs but spitting it out the window without him seeing. He fell asleep with his pants down around his ankles. She robbed him got \$550—and even took the change in his pockets. She got out of the truck and ran. Her head was sore, and she was bruised up most of her back. Her legs got all scratched up from running through the brush. The first two houses she got to, they wouldn't let her in. The third called the police for her. When the police got there, the man was still in the truck with his pants around his ankles. He got locked up, and later, a whole crew of guys the woman knew got together and jumped him, put sugar in his gas tank, sliced his tires, stole his stereo system.

In this case, victimization led to crime, which led to more victimization, which led to more crime. Judging from this account and others like it from our sample, the women appear to have led a chaotic existence that, one would imagine, might relegate them to an ongoing struggle just to "keep their heads above water."

Impact of Victimization on the Women's Children

An issue that is part of—but goes beyond—impact of victimization on women in our sample involves impact on their children. Nearly 90 percent of the women in our sample had children of their own or had cared for a live-in partner's children for an extended period of time. Although we did not specifically inquire about impact of violence on children, a substantial majority of these women mentioned impact of abuse on the children, either through the children's witnessing of violence or through direct abuse of the children. This interested us, because in many ways, the events women described involving their children mirrored their own childhood experiences of violence. Laura, for instance, told us about her conflicts with her mother over her stepdad's abuse.

• Laura and her mom sometimes had a good relationship but sometimes didn't—especially when Laura would ask, "Why don't you leave him?" Then her mom would get mad and they would fight—mostly arguing, but it got physical once when Laura was going to move out due to the sexual abuse.

Similarly, Jessica told of her own daughter's anger with her over sexual abuse involving Jessica's husband, and at one point, involving Jessica.

• Jessica's daughter was six years old when the sexual abuse happened. She's pissed at Jessica for letting those things happen—her daughter doesn't understand why. When Jessica's daughter was in this area of the country, there was a no-contact order against Jessica. Now that her daughter is in another state, there isn't an order, and Jessica would like to try to work through some of the issues.

Such parallel experiences across generations of girls and women may be informative in helping us think about both intervention for incarcerated women and risk reduction for this next generation of girls. Further, these accounts help us to understand parenting and healing issues relevant to incarcerated women's relationships with their children. Here, we will briefly discuss the ways in which incarcerated women's children were exposed to violence, and then we will describe some of the physical, psychosocial, and systemic effects that were evident in the women's accounts.

Manifestations of Violence in the Children's Lives

The women in our sample described a number of ways in which violence in their lives impacted their children. It was evident from women's accounts that their children were often direct witnesses to verbal or physical abuse.

• A 36-year-old African American woman explained that there was verbal abuse real regular in front of the children. Her husband would tell her she was a no good bitch and her whole family was bitches. She would tell him she wasn't a

bitch, that she was those kids' mother, and that teachers respected her for being a good mother.

• A woman convicted of murdering her husband said the last time her husband ever beat her, he had her down in a chair and was beating her. Her baby sister was there and trying to help. The woman yelled for her sister not to help, to just get the children out of the house.

In the course of such witnessing, children were often in the path of danger.

• A 28-year-old White woman said her husband jumped on her, threw her against the headboard, and knocked her out. When she came to, her husband was pacing the room, waiting for her to wake up so he could beat her more. Her son came running to the room and was reaching through the door, and her husband slammed the door shut. She stuck her arm out to keep the door from hitting her son, and the door squished her arm.

Even when children were not direct witnesses, they may have been aware of abuse or were subject to living in the aftermath of violence.

• Once when Josie's husband broke up the living room—broke a picture on the wall and there was glass on the floor—Josie took the kids because she didn't want them walking around in the house with broken glass, cutting up their feet.

The children were also direct recipients of emotional and physical abuse, and unborn children were at risk from violence or withholding of medical care when women were pregnant.

• Anna got pregnant. She thought maybe this would keep her husband from hitting her, but she was wrong. He still hit her. He would shove a .25-caliber against her neck while also shoving a .44 in her forehead. He didn't care if she was pregnant or not. That's also when he started pushing her—to make her fall. He would play Russian roulette with the whole family. He would take a butcher knife and act like he was cutting himself up. One time he even put ketchup on the blade so it would look like there was blood.

Some children were subject to parental kidnapping or were otherwise used as pawns within parental conflict.

• Angela's baby's father was abusing Angela—beating and raping her. He kept taking one or another of her kids so that Angela wouldn't be able to leave the state. He was very abusive to Angela, and she knew he could do some damage to those kids. She eventually got away from him by moving to a far away state. She had to leave her kids behind—left them with their maternal grandparents where he couldn't get to them.

The impact of violence in the lives of these children may have been associated with a number of effects. Here we describe the health, psychosocial, and systemic effects that were evident in women's accounts.

Effects on Physical Health

Women in our sample described physical injuries that their children suffered from abuse.

• Anna's husband would pick the children up and hold them to the ceiling—her husband was 6'2". He would drop them to the floor. Her daughter has spinal problems now and disfigurement on her face from abuse—from being repeatedly hit.

Some participants' children were subject to sexual abuse, as well as associated effects of physical injury, pregnancy, and sexually transmitted diseases. The following accounts are from mothers convicted of participating in such sexual abuse and failing to address the abuse, respectively.

- While Jessica was gone at work, her husband did everything but penetrate her daughter. He masturbated the girl and had her masturbate him, and he performed oral sex on her. Jessica didn't know any of this until after she was incarcerated—the charges involved her husband having her daughter fondling him while he was having intercourse with Jessica.
- A woman incarcerated for neglect said it happened because she was involved in a lot of drugs and was not aware of her daughter's situation. Her daughter, 14, had been tested during a foster placement after running away. That's when they found out she was pregnant, had chlamydia and syphilis. The authorities say that the woman was addicted to drugs and was prostituting her daughter out to get drug money, but the woman said that's not what happened. Her daughter and a 19-year-old boyfriend loved each other.

Children also suffered the impact of deprivation or physical neglect. In recounting events surrounding her offense, a mother convicted of felony driving under the influence touches upon how economic control by her husband impacted the children.

• Her husband didn't come home the night before. When he came in that morning, she and the kids were cold and hungry, because he had taken all the money. She pleaded and fussed about the kids being so hungry. She hadn't wanted to call her mother for help because she wanted to save face—didn't want to let anyone know how bad she felt inside.

Physical harm to children also included death or defects resulting from maternal drug use during pregnancy—a crime prosecuted under neglect, abuse, or other criminal statutes in some states. One mother, convicted on an unrelated offense, reveals her suspicions about the impact of her own drug use.

• A 29-year-old African American woman explained that her second daughter is sick a lot. The woman had been getting high every day with the baby. She was so high she didn't even know it when she was having her contractions. At the hospital, they tested the baby, and there was no dope in the baby's system, but the

woman knows that her baby's health now is because of the drugs she did while she was pregnant.

Being physically victimized during pregnancy also resulted in miscarriage for quite a few women in our sample.

- A 24-year-old African American woman explained that she got pregnant, and her boyfriend said it wasn't his. He hit her in the stomach with a two-by-four and she miscarried.
- A 38-year-old African American woman said that two weeks after her boyfriend dropped her down the stairs, she liked to miscarry. She was in pain, her stomach hurting. She tried to get in the bathroom. She finally got in and sat down, felt gushing and thought it felt good. She thought it was water, but when she looked down, the commode was full of blood. Her mother called 911, and they took her to the hospital. The woman had an emergency C-section, and the baby was delivered. He was premature, but he was okay. He had to wear a hat, and she had to have a home nurse for a while.

Some children died as a result of violence by the woman or her partner.

- There was proof that Melissa's son was sexually abused—they found that through the autopsy. The cause of death was manual strangulation, also asphyxiation from gastric juices in his stomach. There were hand marks on his neck. There were hand marks on his back, too. He had been held down and expelled his dinner, and he suffocated on that. Melissa's husband was charged and convicted.
- A woman convicted of homicide by child abuse said she made a phone call to her baby's daddy and asked for money for the kids. He said, "No," and they argued. Later that night, her daughter was crying and wouldn't be quiet. The woman tried changing her, fed her, rocked her—nothing worked. The woman picked her up and hit her in the head with a fist. The woman laid her down, and thought the baby had just stopped crying. The next morning, the woman woke up and found out her daughter was dead.
- Kathryn thinks her husband killed their daughter because he was jealous of her. He didn't like it because Kathryn held the baby too much.

Like their mothers, children who survive this violence may have enduring health consequences. Those who do not survive may have siblings who must cope with reality that a parent murdered their sister or brother.

Psychosocial Effects

A number of psychosocial effects of violence on the women's children were evident in the women's accounts. Typical accounts indicated fear and worry that children developed in response to ongoing violence.

• Patricia's boyfriend had a daughter and son who would come visit on weekends. They would hide in the bathroom, saying they were scared of their father because he was crazy.

There were a number of behavioral manifestations of participants' children witnessing or experiencing violence. Sometimes responses were more passive, such as hiding in fear or crying. Other times, children attempted to verbally or physically intervene.

- Anna's husband was beating her son with a belt that had a hook on the end.

 Anna's little girl laid on top of her brother to keep the man from killing the boy.
- A woman convicted of assault explained that her boyfriend would punch her with a fist, kick her, choke her, use weapons. He tried to cut her hands off once, cut her neck, hit her over the head with a gallon jug. Her baby son would see it. He'd cry to her, "Momma why do we got to stay here? Let's go!" He'd scream and cry and try to bite and hit the boyfriend. He told his mother that when he got big enough, he was going to kill her boyfriend if he ever saw him hit her. The woman's oldest son—maybe the violence affected him, too—he'd sit in the car and cry, and he wouldn't move no matter what the boyfriend was doing to her.

Like their mothers, some children ran away or used drugs, presumably as means to cope with violence.

• A 46-year-old African American woman said she did crack to deal with the violence, but that didn't solve nothing. She believes that's also why her son got into snorting cocaine—to get the nerve up to come in the house and fight his daddy. Her son thought couldn't nobody hurt him when he was high.

Acting out or aggression was also a way in which participants' children displayed possible effects of victimization.

- Sandra's boyfriend would call her "bitch" so much that he even had her son calling her "bitch."
- Dawn's husband physically and sexually and mentally abused those kids. Dawn knows because when the kids came to visit her, they were doing things to each other—with crayons and fingers—things they wouldn't have known unless they had been taught that.

Other accounts describe children's bullying, using weapons, and displaying other behaviors that are likely to bring the children into contact with justice systems if the behaviors persist.

Involvement in Public Systems

Some of the women's accounts describe involvement of justice and service systems in the children's lives, including children's interacting with law enforcement officers, social

service workers, court officials, healthcare professionals, and mental health providers. Like their mothers, some children were subject to extended involvement in these systems.

- When Irene's baby was born with crack in her system, DSS was called to the hospital. Irene signed a form, and they admitted her to treatment, and DSS took her kids.
- One mother explained that after she and her husband separated, he killed his next girlfriend. He beat her to death. He was choking her, pushed her off a wall—the mother's sons told her this because they were witnesses in the case. They were there and saw the whole thing, including when he put a blanket around his girlfriend and wrapped duct tape all the way around her head. He dragged the body through the house out to the car. Then his mom came and got the kids, and he drove with the body and dumped it. The police eventually picked him up, and the children had to go to therapy.
- When Jessica quit working as an escort, the woman there got mad and reported Jessica. She said Jessica's child was running around half naked and half starved. When DSS started asking questions, they asked Jessica's daughter about good and bad touch. Jessica's daughter told the truth—because that's what Jessica always told her to do. DSS took her daughter that day. The girl is with her birth father now, and was doing good until recently. She's been in therapy. She was an outgoing people-person, but now she's a bully, aggressive, standoffish.

Such stories of systemic involvement parallel the women's own experiences in childhood. For the women, the stories often described public systems "dropping the ball"—failure to protect children from ongoing abuse, violence in foster homes, failure to address traumatic responses to victimization, failure to address conditions of poverty and addiction in the children's households, and so on. Thus, an important component of risk reduction for this next generation must be considering potential points for assessing and addressing violence and its sequelae in the children's lives.

Opportunities for Intervention

Examining the impact of victimization in our sample assists us in understanding how these women came to be in prison, but further information is needed to properly craft rehabilitative programs and to develop models of risk reduction for future generations. To this end, we asked women about turning points in their lives, buffers that helped deal with the impact of violence or keep the women away from trouble, and strengths that they had developed over the years. We hope that this information will assist in conceptualizing opportune points for identifying and addressing needs, as well as ways to cultivate resources within the lives of at-risk girls and women.

Turning Points

One of the objectives for this project was to examine 'turning points' for girls and women—times when life circumstances seemed to be turning around or rapidly changing for better or for worse. In the women's accounts, the context for these turning points frequently included several major life events, so it was difficult to identify any single factor as pivotal or causative of surrounding changes. Victimization was often one such factor among a confluence of life events.

Turning points are of interest because such points of flux may be opportune points for intervention with girls and women at risk. Thus, the findings here may be informative in developing added supports for girls and women when victimization coincides with other major events in the individual's life.

Turning points discussed by women in our sample spread over their life spans, but it was notable that many women discussed marked turning points in adolescence, just as they would be growing to explore avenues in life. Typical turning points involved some of the systems discussed in this report—changes in families, work, religion, and so on. These changes often coincided with some of the mental-health and psychosocial manifestations that we have also discussed (e.g., depression, drug abuse, acting out). Here, we will discuss some of the themes that emerged in women's discussions of turning points.

Death or Loss of Loved One

One of the most frequently mentioned turning points for the women in our sample involved death or loss of a loved one. Often, this occurred when, as a girl, our study participant had lost a caregiver, or as an adult, she had lost a child, sometimes in custody battles. A typical scenario might involve a parent dying, and as a result, the children are split apart to live with different relatives, there is a change in living conditions, and a change in neighborhoods and schools. There may be drastic changes in the rules by which the girl lives, including new responsibilities and sometimes a lack of guidance.

- After Diane's mother died, there was no one to fuss at her—nobody cared enough. No one could listen and know what you meant.
- Joyce's mom dying was a tragedy beyond anything in her life. Joyce went on about a nine-month drunk—became rebellious, partied every day. She didn't care about life.

Some women's loss involved miscarriage or other loss of children.

• A 46-year-old White woman said the miscarriage hit her hard. She couldn't find anything to take away the pain.

• Another 46-year-old White woman recalled that when they removed her baby from her arms, he was eleven months old and screaming for her. She felt like something had left out of her. She walked through the house screaming. She was weak all the time.

Whether the loss was of a caregiver or a child, the girls and women were sometimes faced with depression coupled with newfound freedom. Although the freedom was not something they had hoped for, girls and women were now in situations where they had less weighing down on them in terms of supervision (for those who lost a caregiver) or daily child-rearing responsibilities (for those who lost a child). In both situations, substance abuse was a common method of coping. For women who lost children, the loss may have been a "last straw" that resulted in dropping attempts to stay off of drugs.

- A 46-year-old African American woman explained that she lost her middle son—seeing him hemorrhaging from his nose and mouth. He died of sickle cell. That put her into a depression. Then her oldest son started running away—asking why God took his brother. He said he didn't want to live anymore. He got sent to DJJ, and the woman sunk deeper into drug use.
- Instead of getting her kids back, Amanda got into crack really bad for about two years.
- During the DSS investigation, Carrie was getting income from her child support. Folks would get high at her house because there were no kids there. It was the main house to get high at, and folks would give her some. It was a crackhouse.

These stories are consistent with past research that indicates mothers' arrests and convictions, especially for drug offenses, rise sharply following placement of their children in foster care (Ehrensaft et al., 2003). Of course, the placement of their children is possibly a reflection of the mothers' struggles with addiction. Whether these women could have overcome drug problems had their children not been removed from custody remains a question for future inquiry.

Other Family Disruption

Besides death of a loved one, other types of family disruption such as divorce, remarriage, and parental career changes sometimes had a similarly transforming impact in the lives of our study participants.

- Things were good until Barbara's parents got divorced. Barbara had to grow up early because her mother had to work to support the family, and Barbara had to take care of the house and her sisters and brother.
- The worst thing was when Latisha's father got a job, and her brother went off to the marines, and her mom was working and trying to go to medical school.

Latisha felt alone. She was by herself, and there was nobody to turn to. She was hanging with the wrong crowd and smoking weed, going to clubs—doing things that she knew her family wouldn't approve of.

Sometimes, structural changes in the household created opportunities for abusers. This included situations in which a stepfather or other adult male might be introduced into the household, or times when custody arrangements resulted in large periods of unsupervised time with one parent.

• Tammy was never physically abused in the home while her parents were together. After they divorced, her dad had visitation rights and would pick Tammy up every other weekend. He started beating her at age 6 and having sex with her at age 9. This happened every time he picked her up, up until she was 12.

In some cases, families were not so much disrupted as corrupted—by drug use. This often preceded family disruption, and parental drug use was mentioned as a turning point for many women in our sample.

- When her mom started doing drugs, there was a decrease in Maria's grades. Maria would bring home grades and once brought home a D—she usually brought home Bs and Cs. She was worried that her mom would go off on her. Her mom didn't even say anything. Maria figured if her mom didn't care, then she would just try to get by. Her mom didn't care how she did in school, what she did in school. A child wants her parents to know how she's doing. It just didn't matter no more—nothing did.
- Angela's mother and father always drank, but you couldn't even tell. They began doing drugs—rock cocaine—when Angela was around 14. That's when the bills started adding up. They lost the house, and Angela's father ended up in prison. That's when Angela started smoking weed heavily—laughing, tripping out, hanging around the Mexicans.

Pregnancy or Childbirth

Pregnancy and childbirth were mentioned by many women in our sample as turning points. Often, pregnancy was a time when women elected to quit or cut down on drug and alcohol use. Similarly, having a child sometimes inspired the women to "clean up" their lives.

- Tara was pregnant and didn't want any more drugs. She was to that point that she was going to kill herself if she touched more drugs—she didn't want to hurt her son or have him born addicted.
- Thelma wanted to be clean for herself so that she could be somebody for her daughter.

Sometimes, however, efforts to clean up were short-lived, or new responsibilities became a source of stress.

• Things went downhill for Elizabeth after she had her son—when she was 19 or 20. She went through a depression. She had three kids, was young, living with her mother, her ex-husband was living there with them, and he was abusive and on drugs and hardly home. It was really stressful on Elizabeth.

For younger mothers, having a child was often a reason the women cited for dropping out of school, which in itself was associated with a host of changes in the women's lives.

Finding or Losing a Job

Finding or losing a job was discussed as a turning point for some women. Getting a job, like starting higher education, often was viewed as a hopeful time. But again, this hope was sometimes transient. More often, women mentioned losing work as a turning point.

- Melissa blew out her engine. Even her supposedly mechanic ex-husband couldn't fix her car. She lost her job because she didn't have any transportation. Then she lost her house because she lost her job.
- When Irene lost her job, she had nowhere to go in the morning, so she could get as high as she wanted. Irene had been laid off, so she was getting unemployment and severance pay, and her sister was getting Irene's son ready for school in the morning.
- Diane started selling drugs. She had been watching her brothers sell marijuana. She had a job and had just gotten fired. Diane had \$100 from her last paycheck. She decided to invest it in an ounce, and it started from there.

Trouble with the Law & Finding Religion

Although it may seem an odd juxtaposition to discuss trouble with the law in the same context as finding religion, the two topics were often mentioned in conjunction with one another as women described turning points in their lives. The first type of event—trouble with the law—was a turning point for some girls and women before they came to prison, as described by Susan.

• Susan said her run-ins with the law pulled her family closer together. When she started getting in trouble, her dad started to come around more. Susan had a distant relationship with her mom, but later on their mom started showing more concern—things changed like that when Susan started getting in more trouble. Her mom maybe realized that Susan needed support.

Quite a few women discussed "getting their lives together" in the interim between getting caught and being imprisoned.

• One turning point for Amber was right after the wreck, when she went off pills for the three months before she was in here. Amber accomplished more in those three months than she had in ten years. She had her own home, a vehicle, had her home furnished the way she wanted, she was holding a job.

It seems that waiting for the court date may have been a powerful motivator for some women. The question remains whether such motivation would have endured beyond the court date had the disposition resulted in a different outcome. Being incarcerated was another commonly discussed turning point.

• One woman convicted of a drug offense explained she always thought of herself as a pretty alright person—even when she sold crack. When she got to prison, she looked around her and saw what other folks were doing to get crack. She realized that she was a criminal and had just as big a hand in it as they did. She wasn't robbing or killing, but she was enabling them—making the problem worse. She used think it was funny when people would spend all their money on crack. She would meet them at their jobs and take them to the bank. Now she realizes she's not helping, and that she's ruined lots of people's lives.

Women frequently discussed their experiences of being in prison and their experiences of finding God as hand-in-hand turning points.

- Prison has been the biggest turning point in Josie's life. This time she has gotten closer to God. She loves who she is—loves herself. She's learned to treat others with respect, despite what they say about her or how they treat her. She carries herself as a woman. She doesn't try to look or act any better than anyone else. Plus she's clean, and if she can be this happy clean off of drugs, she can be happy with anything.
- Martha's only turning point is when she came here. She and her children are back in touch. She's back in touch with the Lord. It is a change for the better. When Martha walks out that door and has freedom back up under her feet, she's going to stay changed. She knows God will keep her up, and crack will bring her down—it's her choice which one.

A few women discussed their incarceration as if it were an act of God.

- Margaret's primary turning point in life was when she was Saved. Before in her life she had been so busy that she didn't take time. Being shackled, God had time to deal with her.
- Deborah thinks God put her here to show her what she could and couldn't be to draw a full picture of what could be her. He needed to put her somewhere where he could get her full attention.
- Grace asked God to change things in her life—either change her violent boyfriend, or take her out of the house, or change her situation. She ended up in prison. "They say the Lord works in mysterious ways..."

Spirituality was discussed as an important source of support by many women in our sample. Religious readings and activities helped pass time and were sources of strength for coping with stress in prison. Much of the women's language in discussing spirituality appeared similar, underscoring the fact that some of what they said may have come from sermons, one of the common influences on women's philosophies while incarcerated. This reality should be a consideration for researchers, both in assessing prison ministries as a possible source of research bias and a potential resource in developing interventions.

Buffers

While our discussion of turning points described times of rapid change in the lives of girls and women, there were a number of factors that might be described as "buffers," possibly mitigating the direct and indirect impacts of victimization in their lives. These were similar to turning points in involving the systems in women's lives—work, family, and so on—but as buffers, these systems helped the women in coping or kept them from resorting to crime when things seemed tough. Our objectives for this project included enhancing understanding of such buffers and the manner in which buffers helped women in coping.

Women in our sample seemed comfortable talking about buffers as things that "kept them away from trouble." Some buffers were more enduring, while some had a transient impact. Any such buffers may be important considerations in reducing risks and developing interventions for girls and women. Some of the major buffers discussed included work and school, dependent family members, supportive adults, and personal philosophy.

Being employed or being enrolled in school was mentioned by some women as something that helped them cope or kept them away from trouble at some point in their lives. This may have been a matter of being occupied for some, as the research literature indicates that hobbies and interests foster resilience among abused and neglected children (USDHHS, 2003). Some women in our sample specifically mentioned needing to stay clean and focused in order to achieve.

• Once Maria stopped smoking pot for a year. It was because she had a job and she was ready to get her own place. She couldn't focus with pot, and she needed a clear head instead of a clogged one.

In accord with research on resilience among traumatized children (Frenkel & Wright, 2001), support networks of friends, families, and professionals were important buffers for the women in our sample. Some mentioned caring for children, younger siblings, or dependent parents and grandparents as something that helped in coping or kept the girls

and women away from trouble. Others discussed having supportive adults in their lives, including professionals such as teachers, school administrators, rehabilitation counselors, law enforcement officers, and others.

- When Laura's sister was a toddler, Laura's mom made Laura take care of her. Laura had been heavily considering suicide due to sexual abuse. Her sister gave her a reason to live. Laura had to stay alive to make sure that the same thing that was happening to her didn't happen to her little sister.
- When Barbara was at her lowest, she could talk to her grandmother, and Barbara would feel better about herself and be able to cope with whatever was going on.
- Maria's best friend's mom was a help. She knew a lot of what was going on, and she encouraged both girls to get their GEDs. She wouldn't get on them about stuff—instead she'd always say something positive or put them into something positive.
- The thing that's kept Nicole out of trouble has always been a person in her life. Three police officers that she knows—they negotiate for her. In school there were her favorite teachers. Even here there are a few correctional officers. Someone always watches over Nicole. They see something in her that she doesn't see herself.

It was evident that buffers often functioned not to keep the women totally on the straightand-narrow, but to limit the amount of delinquent or criminal behavior.

- A woman convicted of robbery said that after she had the twins, she had to taper back to two pills a day for them to be okay—because then she had to be monitored by a doctor, had to have a home health nurse for a while, had to have syringes ready for them. She couldn't stay completely intoxicated.
- Nicole didn't want to cut school too regular because she didn't want to get caught and be bad in her grandma's eyes.

A number of women emphasized that buffers could not work without the girl's or woman's own commitment, and concepts of caring and respect were cited as important factors in developing such a commitment. Women also discussed the role of self, morality, opportunity, and determination in making personal decisions.

- The one thing through Deborah's life that's helped her and led her away from trouble has been her inner senses. "I've been places where I been knowing I didn't need to be there, so I get up and leave."
- Joan explained that it all goes back to trying to please people that you care about. It keeps you focused. If you care about your family and love them, you aren't going to put yourself in a position to have yourself taken away from them.

Strengths

Amid devastation from victimization and loss, women in our sample carried with them a number of strengths. Such strengths were also a component of our research objectives, and we hoped that the project would enhance understanding of strengths in the lives of incarcerated women. Some strengths were those that had endured through the women's life experiences, and some derived from the experiences themselves. For some women, identifying their own strengths was a relatively new experience; some mentioned that their time in prison had afforded them opportunity to find and appreciate their strengths. These self-identified strengths may be especially important to risk reduction and intervention for girls and women, in that, things that the women value may have the most potential to motivate for change.

For many women in our sample, self-identified strengths included appreciation for things they were able to hang onto throughout all of their experiences—things like their health, strength of mind, their kids, and support of their families.

- One of Chantelle's strengths is that she is still in her right mind. She didn't let it bring her down, and she's still strong. She thanks God for that.
- Tara's children have pulled her through a lot. Whenever she has wished for death, she looks at her babies and can't do it. She's got two beautiful, intelligent children.

Family members inspired the women, serving as examples of strength.

- A 52-year-old White woman said she got strength from watching her mother survive with 13 kids and keep her sanity.
- Serena explained that her little girl is on the national honor roll and is nationally recognized in sports. The girl is preparing for college and wants to play in the WNBA. That's Serena's strength—watching her little girl grow up, doing positive things and not following Serena's role—doing all the things Serena should have done. It lets Serena know that she raised her daughter the right way, and that's important.

For some women who had less on the outside, they managed to extract strength from experiences in prison. This included some of the relationships they had formed with other incarcerated women.

• Gloria has gotten lots of support since she's come to prison. She didn't have much support before.

Unfortunately, maintenance of these newfound relationships is typically discouraged once the women are released from prison (i.e., prohibitions against associating with known felons). Thus, support networks formed on the inside may be lost when the women go back to the streets.

As we have mentioned, many women found strength in spirituality while incarcerated.

• God is Deborah's strength. If it weren't for him, Deborah wouldn't be here. She draws strength from him on a daily basis. She wouldn't have made it this far if she didn't believe. He's the only one that will always be there for her.

Some women also mentioned skills developed during their period of incarceration. This included cognitive and social skills learned through formal programs as well as through informal interaction and individual contemplation.

- Serena doesn't let certain things get to her—like people that try to bring you down by talking about your crime. Here you can't use your fists, so people try to outtalk you and embarrass you. You have to use your education.
- Ruthie just prays and reads the Bible the best she can. She's learned to read better since she's been locked up.
- Things have changed—Lori is able to hold her temper better.

Some described their strength in terms of their aspirations for the future and the opportunity it holds.

- Raquel isn't straightening up for her family. She's doing it for herself. She wants a baby before she leaves this world. She wants to be able to say that house is hers, that car is hers. She doesn't want to be just another statistic.
- Cindy knows that things can get better, and she sees a life beyond this place. She's got a vision of a different life for herself, and she believes it can be obtained. Cindy doesn't believe that she was born to be like this—maybe she was born to help others not be like this.

DISCUSSION

One of our research objectives was to enhance understanding of risk factors for women's crime, with particular emphasis on the contributions of violent victimization over the life span. Much of the existing theory on incarcerated women's criminogenic processes (e.g., Chesney-Lind & Shelden, 1992; Widom, 1995; Snell, 1994; Lake, 1993; Richie, 1996) is supported and expanded by our findings. These women were indeed, as Richie wrote, "confined by social conditions" and "forced to make hard choices with very few options." Many of the women were, throughout their lifetimes, pushed away from pathways of legitimacy such as school and work. Their family and social networks often tended more toward perpetration or collusion with victimization than providing positive support. Their

role models were often corrupt, and their living contexts permeated with poverty, addiction, and violence. When Harden and Hill noted that these women were "us—minus privilege, caution, luck," they identified what could be a byproduct of victimization in these women's lives—a lack of caution that we might expect to arise if the women resign to abuse as normal and assessing their current status as "having nothing left to lose." Given the restricted options and negative influences illustrated in these women's stories, failure to choose a pathway involving criminal behavior seems more remarkable than having chosen such a pathway. This is not to excuse or justify their criminal behavior, for most of the women in our sample did possess a component of choice in committing their crimes. However, these findings place a frame of life circumstances around such choices, helping us to understand the crossroads at which choices were made and the types of things that may have helped the women to make different choices.

There are some major considerations in drawing from this work. First, this research elucidates the multiplicity of traumas that women may have faced prior to their incarceration. Most of the women in our sample experienced child abuse/neglect, sexual violence, or adult relationship violence, and most experienced more than one of these types of victimization. Often, victimization was ongoing, and multiple perpetrators existed throughout the women's lives. Victimization carried with it a variety of associated impacts or traumas, and there were additional factors such as death of loved ones, instability of homes, and parental addiction contributing to the chaos in the women's lives. All of these factors had potential to accumulate and interact over the life span, resulting in a tangle of potential barriers that the women faced in finding legitimate pathways in life.

A second consideration is thereby the need for holistic approaches that address the varied impacts of trauma in the women's lives. There were physical and mental health effects, psychosocial effects, and effects on systems in the women's lives. These became increasingly evident in the girls' teens, with abuse sequelae including teen pregnancy, alcohol and drug addiction, and dropping out of school. Even as opportunities for intervention arose, these seemed repeatedly to be missed or poorly executed by those within public service or justice systems. Admittedly, some of the women's accounts describe systems of yesteryear, and substantial improvements have been implemented in recent years.

Data directed toward our second and third objectives—to enhance understanding of turning points, strengths, and buffers—indicate several areas where further research and program development may be desirable. Turning points, for instance, were frequently clustered around the girls' teen years. Our findings here are consistent with recent work on delinquency among juvenile females, in which researchers and policymakers have

discussed a "developmental pathway to delinquency" by which traumas such as loss of a caregiver, family dysfunction, and child maltreatment may be linked to later behavioral problems (Belknap & Holsinger, 1998; Oregon Commission on Children and Youth Services, 1990). In addressing these theories, the report Guiding Principles for Promising Female Programming posits that teen years create particular vulnerability because this is when "girls begin to separate from their families, assert their own identity, identify with their peers, redefine their relationships with nurturing adults, explore their sexuality, develop their own moral and ethical sense, and prepare for the responsibilities and challenges of adulthood" (OJJDP, 1998). It may thereby be advisable to develop more extensive plans for assessing existence of trauma in teen girls' lives before and beyond when girls get into trouble with the law. For instance, assessment for multiple forms of trauma might be performed at times of major life events such as death of a parent or caretaker, pregnancy, or when young women access services around employment and/or financial aid. Such turning points may also be crucial times to for building buffers—encouraging girls to stay in school or stay employed, cultivating their interests in positive pastimes, and fostering their relationships with supportive adults and healthy peer support networks.

Our findings regarding women's self-identified sources of strength (often their children) indicate that, when things begin to get rough in the women's lives, these strengths are among the first things taken from the women in the course of mandated interventions (e.g., the women lose custody due to addiction). In these findings and previous work, there is evidence that drug offending may increase following removal of children from the women's custody. In developing public interventions, safety of both women and children must be paramount. These data, however, indicate that we have much to learn about developing interventions that build upon versus undermine the strengths that women have. Beyond the impact of removal of children on women's offending, women's accounts indicated that inability to spend time with their children is an ongoing source of stress while incarcerated.

• Amy's kids have pulled her through everything. She doesn't like to talk about them—it hurts too bad to think about them. It makes you feel like you can't go on. You have to act like you were born into this world alone and keep on fighting.

Women in our sample mentioned things like their health, families, and skills as strengths in their lives. Risk reduction and intervention might derive from such strengths by encouraging athletics or fitness, strengthening positive family bonds, and working toward skills that provide girls and women with a sense of pride or mastery to accomplish things in life. Some women in our sample saw their opportunities in life as strengths; programs

might thereby include activities that assist individuals to identify their own potentials and develop long-term aspirations with realistic and achievable short-term objectives. Some such strength-building currently exists in prison programming, as well as in early childhood education. Yet, the momentum of social action to build girls' strengths seems to waver around the teen years, again leaving these young women in a window of vulnerability just as they are exploring identity, relationships, and careers. Bolstering teen girls' strengths is not an endeavor that can be left solely to informal processes (e.g., even a "girl power" trend in fashion and media recently mutated into a spate of "anti-boy" merchandise; Couture, 2001; Williams, 2004), thus structured and respectful programming for girls' self-esteem must become more integral to the teen years.

There exist a number of opportunities for future inquiry within the current data. The sheer volume of information provided through these interviews has great potential for further exploration. Beyond findings addressed in this initial report, we have data and analytic capabilities to perform qualitative analyses on ways in which the relationship between victimization and crime is influenced by racial and socioeconomic factors. We also might examine how the relationship between victimization and crime may differ depending on the crime type for which each woman is convicted (e.g., property, drug offense, violent crime). Our data also allow analyses regarding role of social networks and coping mechanisms in addressing abuse, efficacy of justice and service interventions within the women's lives, and intergenerational aspects of victimization and crime (e.g., women's parents' patterns, women's patterns, and their children's patterns). The in-depth qualitative data on these women's lives affords unique insight into the cumulative impact of victimization within each participant's life span. Case-by-case analyses of timeline data for women's life histories may be used to explore individual pathways (e.g., from child abuse to running away to prostitution) in more depth, including estimating commonness of different pathways, developing more detailed prototypes of particular pathways, or examining how multiple pathways intersect in the lives of girls and women.

We have limited data that may be extrapolated into quantitative applications. For instance, we specifically probed in interviews regarding women's experiences of violence in childhood and adulthood, and we asked women to provide examples of the types of violence used upon them. Thus we may have sufficient data to make quantitative inferences regarding percent of the sample that experienced particular types of violence (e.g., severe violence by Conflict Tactics Scale standards). We also have capability to examine issues such as qualitative ways that the women's perspectives (i.e., interview data) converge or diverge from perspectives of the justice system (i.e., prison records) and the general public (i.e., media articles). Finally, there exists potential for follow-up interviews

with these same women, including those who remain incarcerated and those who have been released, as well as possible follow-up with the children mentioned in women's interviews.

Implications for Practice & Policy

Our final objective for this project was to examine implications of study findings for prevention, intervention, and justice programming. Qualitative data are particularly useful for making the human connection necessary to impart awareness of victimization issues to practitioners, program developers, and policymakers working in justice and service systems. For optimal utility of findings, however, specific reports might be selectively formatted and targeted toward particular interest groups (those working in prevention, in prison programming, in re-entry services, etc.). We anticipate usefulness of these findings in a variety of areas for practice, policy, and prevention.

Officers of the courts, probation, & parole: An important potential audience for this report includes professionals who work with women as they enter or exit the justice system. Thus, we hope that prosecutors, defense attorneys, judges, probation officers, and parole officers and boards will find the report of interest. These members of the criminal justice community may benefit from a more fully informed perspective on women's past circumstances and future potentials. Although many professionals who work in these arenas are familiar with risk factors for crime, they are less likely to have knowledge concerning multiple victimizations and the cumulative impact of victimization over the life span. These findings have implications for rehabilitation and accountability, including rationale for recommendations during pre-trial services, sentencing, and developing conditions of release.

Correctional administrators, programmers, & staff: These professionals might benefit from the report regarding needs for program design and inmate management strategies. The report may be particularly useful regarding gender-specific program content, and the report's attention to turning points may be helpful to program developers in estimating when various intervention techniques might prove most effective for women prisoners. The report may also be useful in examining classification systems and developing mental health treatment plans for offenders.

Youth services & juvenile justice personnel: The report provides several forms of information that might be useful to professionals working in services for youth. Women's retrospective accounts of their own experiences of coping in youth can inform interventions that are suited to varied life experiences and social contexts. Information on

turning points may be used to develop targeted prevention programs, reduction of risks, and early interventions so that resources are available not only in a usable form, but also at an appropriate time. Such findings may benefit a variety of professionals ranging from teachers and school administrators, to child welfare and social service workers, to youth counselors and juvenile justice personnel. Understanding the contexts of hope, despair, and motivation for girls and women will help to target interventions to address victimization as it rests among compounding risk factors for crime such as poverty and addiction. Because 90% of research participants had or cared for children, the report also has potential to inform professionals about intergenerational aspects of victimization and real impacts for this next generation of youth.

Legislators & justice policymakers: The report's coverage of child corruption and statutory rape and their impact on criminal behavior of young girls underscores the importance of policy regarding these crimes. In this respect, the report has implications for refinement of state laws concerning those who entice young people into criminal behavior, including laws on child endangerment and child prostitution. Findings also may be useful to those individuals who have power and authority to allocate funding for youth programming and gender-specific programming for girls and women.

Prevention & education programmers: The report provides information about the contexts and impacts of victimization throughout the lives of girls and women. This information, combined with findings on strengths and buffers that mitigate the impact of victimization, can be applied to education for both professionals and members of the lay public. In this way, those who come into contact with children, youth, and families will have the requisite knowledge to build supports, recognize dangers, and help link girls and women to valuable resources as needed across the life span.

We are interested in the immediate usefulness of products derived from the study. To be truly accountable, we believe we must hear what potential users can tell us about effective means for enabling them to use what we have learned. We want to assure that these findings extend beyond academic and research audiences to make an impact in everyday practice of fields such as child welfare, elementary and secondary education, juvenile justice, drug and alcohol rehabilitation, probation and parole services, and so on. Thus, besides using the traditional dissemination methods of conference presentations and scholarly papers, we will concentrate on identifying potential users and learning from them the best format for dissemination. Our advisory board will play an important role in helping to maximize translation of research to practice and policy. We may also conduct additional interviews with potential users (e.g., correctional officers, corrections

programmers) to assess acceptance and utility of products. Our ultimate goal is to enhance applicability of findings and bring usefulness of this rich data set to full fruition.

REFERENCES

Acoca, L., & Austin, J. (1996). *The crisis: Women in prison*. Report submitted to the Culpepper Foundation. San Francisco, CA: National Council on Crime & Delinquency.

American Professional Society on the Abuse of Children. (1995). Psychosocial evaluation of suspected psychological maltreatment in children and adolescents. *Cultic Studies Journal*, 13, 153-170.

Arnold, R. (1995). Processes of victimization and criminalization of Black women. In B. Price & N. Sokoloff (Eds.), *The criminal justice system and women: Offenders, victims, and workers.* McGraw-Hill.

Becker, H. S. (1990). Generalizing from case studies. In E. W. Eisner & A. Peshkin (Eds.), *Qualitative inquiry in education: The continuing debate* (pp. 233-242). New York, NY: Teachers College.

Belknap, J., & Holsinger, K. (1998). An overview of delinquent girls. In R. T. Zaplin (Ed.), Female offenders: Critical perspectives and effective interventions. Gaithersburg, MD: Aspen Publishers.

Bloom, B., Owen, B., & Covington, S. (2003). Gender-responsive strategies: Research, practice, and guiding principles for women offenders. Washington, DC: United States Department of Justice.

Bronfenbrenner, U. (1979). The ecology of human development: experiments by nature and design. Cambridge, MA: Harvard.

Brown, J. (1992). Handbook of social work practice. Springfield, IL: Charles C. Thomas.

Browne, A., Miller, B., & Maguin, E. (1999). Prevalence and severity of lifetime physical and sexual victimization among incarcerated women. *International Journal of Law & Psychiatry*, 22, 301-322.

Chesney-Lind, M. (1997). The female offender: Girls, women, and crime. Thousand Oaks, CA: Sage.

Chesney-Lind, M., & Shelden, R. (1992). *Girls, delinquency, and juvenile justice*. Pacific Grove, CA: Brooks/Cole.

Coker, A., et al. (2000a). Intimate partner violence and cervical neoplasia. *Journal of Women's Health & Gender-Based Medicine*, 9(9), 1015–1023.

Coker, A., Smith, P., Bethea, L., King, M., & McKeown, R. (2000b). Physical health consequences of physical and psychological intimate partner violence. *Archives of Family Medicine*, *9*(5), 451-457.

Coll, C., Miller, J., Fields, J., & Mathews, B. (1998). The experiences of women in prison: Implications for services and prevention. In J. Harden & M. Hill (Eds.), *Breaking the rules: Women in prison and feminist therapy*. New York, NY: Harrington Park.

Couture, L. (2001). The Girl Power generation and anti-boy attitudes. Haverhill, MA: Eagle Tribune (Editorial reprinted).

Ehrensaft, M., Khashu, A., Ross, T., & Wamsley, M. (2003). *Patterns of criminal conviction and incarceration among mothers of children in foster care in New York City*. New York, NY: Vera Institute of Justice & NYC Administration for Children's Services.

Emerson, R., Fretz, R., & Shaw, L. (1995). Writing ethnographic fieldnotes. Chicago, IL: University of Chicago.

Farber, S. K. (1997). Self-medication, traumatic reenactment, and somatic expression in bulimic and self-mutilating behavior. *Clinical Social Work Journal*, *25*(1), 87-106.

Favazza, Armando R. (1998) The Coming of Age of Self-Mutilation. *The Journal of Nervous and Mental Diseases*, 186(5), 259-268.

Federal Bureau of Prisons. (1996). *Program report*. Washington, DC: United States Department of Justice.

Federal Bureau of Prisons. (1998). A profile of female offenders. Washington, DC: United States Department of Justice.

Fine, M. (1992). Disruptive voices: The possibilities of feminist research. Ann Arbor, MI: University of Michigan.

Finkelhor, D., Ormrod, R., & Turner, H. (2004). *Poly-victimization: A neglected component in child victimization trauma*. Durham, NH: Crimes against Children Research Center.

Follingstad, D. R., & DeHart, D. D. (2000). Defining psychological abuse: Contexts, behaviors, and typologies. *Journal of Interpersonal Violence*, 15(9).

Frenkel, E., & Wright, M. (2001). The cumulative impact of abuse across the life span: Child sexual abuse and adult revictimization. In K. Franey, R. Geffner, & R. Falconer (Eds.), *The cost of child maltreatment: Who pays? We all do.* (pp.75-86). San Diego, CA: Family Violence & Sexual Assault Institute.

Glaser, B., & Strauss, A. (1967). The discovery of grounded theory. Chicago: Aldine.

Gilfus, M. (1992). From victims to survivors to offenders: Women's routes of entry and immersion into street crime. *Women and Criminal Justice*, 4, 63-89.

Harden, J., & Hill, M. (1998). Breaking the rules: Women in prison and feminist therapy. New York, NY: Harrington Park.

Hart, S., Germain, R., & Brassard, M. (1987). The challenge: To better understand and combat the psychological maltreatment of children and youth. In M. Brassard, R. Germain, & S. Hart (Eds.), *Psychological maltreatment of children and youth* (pp. 3-24). New York, NY: Pergamon.

Johnson, J. C. (1990). Selecting ethnographic informants. Newbury Park, CA: Sage.

Kirk, J., & Miller, M. L. (1986). Reliability and validity in qualitative research. Beverly Hills: Sage.

Lake, E. (1993). An exploration of the violent victim experiences of female offenders. *Violence & Victims*, 8, 41-51.

Law Enforcement Assistance Administration. (1975). The report of the LEAA Task Force on Women. Washington, DC: U.S. Department of Justice.

Lee, R., & Fielding, N. (1996a). Computer-Assisted Qualitative Data Analysis: The User's Perspective. In F. Faulbaum and W. Bandilla (Eds.), *SOFTSTAT* '95: Advances in statistical software 5. Stuttgart: Lucius.

Lord, E. (1995). A prison superintendent's perspective on women in prison. *The Prison Journal*, 75, 257-269.

Martin, K. (2003). Substance-Abusing Adolescents Show Ethnic and Gender Differences in Psychiatric Disorders Research Findings. *NIDA Notes*, 18(1).

Monnier, J. (July, 1998). How antisocial and prosocial coping influence the support process among men and women in the U.S. Postal Service. *Sex Roles*.

National Exchange Club Foundation. (2004). What is child abuse? WebPage of NECF, www.preventchildabuse.com.

National Women's Law Center. (1993). Factsheet: Incarcerated women. Washington, DC: NWLC.

Office of Juvenile Justice and Delinquency Prevention. (1998). Guiding principles for promising female programming: An inventory of best practices. Washington, DC: OJJDP.

Office of Justice Programs. (1998). Women in criminal justice: A twenty year update. Special report. Washington, DC: United States Department of Justice.

Oregon Commission on Children and Youth Services. (1990). Oregon girls advocacy project final report. Salem, OR: Author.

Phillips, S., & Harm, N. (1998). Women prisoners: A contextual framework. In J. Harden & M. Hill (Eds.) *Breaking the rules: Women in prison and feminist therapy*. New York, NY: Harrington Park.

Raeder, M. (1993). Gender and sentencing: Single moms, battered women, and other sex-based anomalies in the gender-free world of the federal sentencing guidelines. *Pepperdine Law Review*, 20.

Richie, B. (1996). Compelled to crime: The gender entrapment of battered black women. New York, NY: Routledge.

Sanjek, R. (1990). On ethnographic validity. In R. Sanjek (Ed.), *Fieldnotes: The makings of anthropology* (pp. 385-418). Ithaca, NY: Cornell.

Schofield, J. W. (1990). Increasing the generalizability of qualitative research. In E. W. Eisner & A. Peshkin (Eds.), *Qualitative inquiry in education: The continuing debate* (pp.201-232). New York, NY: Teachers College.

Snell, T. (1994). *Women in prison*. Bureau of Justice Statistics Special Report. Washington, DC: United States Department of Justice.

Stewart, A. (1998). *The ethnographer's method* (Qualitative research methods series #46). Thousand Oaks, CA: Sage.

Straus, M. (2004). Guide to the Multidimensional Neglect Scales: Preliminary draft. WebPage of the Family Research Laboratory at the University of New Hampshire, www.unh.edu/frl.

Straus, M., Hamby, S., Boney-McCoy, S., & Sugarman, D. (1996). The Revised Conflict Tactics Scales (CTS2): Development and preliminary psychometric data. *Journal of Family Issues*, 17(3), 283-316.

Strauss, A. (1987). *Qualitative analysis for social scientists*. Cambridge: Cambridge University.

Strauss, A., and Corbin, J. (1991). Basics of qualitative research: Grounded theory procedures and techniques. Newbury Park, CA: Sage.

Swanson, J. M. (1986). The formal qualitative interview for grounded theory. In W. C. Chenitz & J. M. Swanson (Eds.), *From practice to grounded theory: Qualitative research in nursing* (pp. 66-78). Menlo Park, CA: Addison-Wesley Publishing Company.

Taiminen, T. J., Kallio-Soukainen, K., Nokso-Koivisto, H., Kaljonen, A., & Helenius, H. (1998). Contagion of deliberate self-harm among adolescent inpatients. *Journal of the American Academy of Child & Adolescent Psychiatry*, 37(2), 211-217.

United States Department of Health and Human Services. (2003). *Emerging practices in the prevention of child abuse and neglect*. Washington, DC: USDHHS.

Werner, O., & Bernard, H. R. (1994). Ethnographic sampling. *Cultural Anthropology Methods*, 62, 7-9.

Widom, C. (1995). *Cycle of violence revisited six years later*. NIJ Research Preview. Washington, DC: United States Department of Justice.

Williams, D. (2004). Clothing designer misses point of 'girl power.' www.tolerance.org.

Wolcott, H. F. (1995). The art of fieldwork. Walnut Creek, CA: AltaMira.

Women Coping in Prison Study. (2001). Webpage maintained by University of Virginia and Fluvanna Correctional Center for Women at http://curry.edschool.virginia.edu/prisonstudy.

TABLE 1—SAMPLE TIMELINE

This illustrates the general format of timelines developed from interview transcripts, prison records, and media reports. We constructed timelines for each participant in order to view events not only as they exist in the woman's storytelling or perceptual context, but also as framed in a broader context of the woman's life. Several details (e.g., exact charges, sentences) have been edited from this timeline in order to preserve anonymity of the respondent.

Early childhood — Tasha lived with her mother who was a crack addict and neglectful. Her grandmother often made sure she had what she needed.

Age 8 — Tasha was molested by a neighbor. She told her grandmom and he went to jail. Tasha briefly attended counseling after the molestation.

Age 10 — Tasha first started dating when she was 10; her boyfriend was 24.

Age 11 — Tasha was gang raped by a large group of men. They just picked her up and took her off to an abandoned house. Half of them were locked up for it, but a bunch of them weren't. There was no counseling.

It affected her—she started to have sex just to be having sex. Tasha started messing with any man willing to give it to her.

Tasha started drinking; she drank hard liquor. She cut school regularly to hang out and drink.

There was lots of verbal abuse at home. Tasha's mom and her mom's boyfriends would call Tasha "bitch," "whore," "slut," and tell her she was no good, would never amount to nothing. This happened almost every day.

Tasha started running away regularly. She ran away about 7 times. She would stay with whoever picked her up—sometimes they were guys. She'd sleep with the guys just to be doing it. They were feeding her, so she didn't have to steal. They were all older, and Tasha hung out with older people.

Age 12 — When Tasha turned 12 she got pregnant by her 26-year-old boyfriend, who began to stay overnight with Tasha at her mom's house.

Tasha's grades were not good until she was pregnant with her son, then she was B-Honor Roll.

Tasha's uncle, who lived with her mom, was violent when he'd drink and would make threats about the house and family. They'd have to call the police. He'd get like that every weekend.

Tasha's mom's boyfriend would beat up on Tasha's mom. He slapped her around, and she cut him. It happened one or two times a month, and the kids would watch. Tasha's brother would jump on the boyfriend trying to stop it. This was when Tasha was 12, 13, and 14.

Age 13 — Tasha's mother's boyfriends started messing with her, trying to pay her to have sex with them. One of them did have sex with Tasha. Her mother didn't believe her, but her grandmother did—her grandmother told him if he ever touched Tasha again she would kill him. He never got locked up.

Tasha moved in with her grandmom. Tasha's grandmom didn't drink or do drugs—she didn't allow it in her house.

Tasha quit school because she had a son to take care of.

Tasha broke up with her son's father and started seeing another man in his 20s.

Age 14 — Tasha was drinking every day.

Age 17 — Tasha had a daughter and moved out on her own with her children.

Tasha's boyfriend stayed with her some. He was verbally and physically abusive. Tasha called the cops on him regularly, but they never helped.

Tasha stopped seeing her boyfriend and he stalked her for a while.

Tasha had a couple of relationships—both drug dealers who gave her guns to hold and taught her to sell drugs, one of whom she would eventually marry.

Tasha had a job at a healthcare facility but left after working there for about a year.

Age 18 — Tasha started smoking weed and dealing. She got a drug charge, but it was dropped.

Age 19 — Tasha married her current husband.

They fought sometimes. He would holler and scream at her and call her all types of names. He hit her once and she shot him. Charges were dropped, and the abuse stopped.

Tasha started smoking cigarettes and hanging with the "wrong crowd." Tasha was wanting to tote pistols, hang out, sell drugs.

Tasha had her own place and started to get in more trouble with the law—showing out, fighting the police.

Age 20 — Tasha tried coke and did it for about 3 months, but it didn't do nothing for her so she just gave it up.

Age 22 — DSS had her children, and her husband had just been sentenced to a lengthy prison term.

Tasha was pregnant and found out she was HIV+.

She had just been a supplier of crack, but she thought the world was going to end, so she might as well have fun while she had time. She started using crack.

Tasha was selling drugs and using a fraudulent check card, because she was trying to stay off the street—trying to make money for her drugs without prostituting herself.

Age 23 to 24 — Tasha started prostituting herself. There were two times when there was real violence from johns, as well as one time when Tasha got shot in an argument with a man whom she turned down.

Tasha was charged with drug trafficking, but the charges were dropped.

Prior records indicate four minor convictions at age 24, including incidents in which she was prostituting or trying to elude arrest. Tasha was in and out of jail and served less than 2 months total for these charges.

Age 24 to 26 — Prior records do not fully corroborate a two-year sentence Tasha says she served, but some records and timelines are consistent with such a sentence. The crime involved a confrontation with a woman over Tasha's husband.

When Tasha got locked up, she had just started messing with the checks a little but she didn't know it well. Tasha got out of prison at 26 and started thinking about it—what she could do better.

The day she was out of prison she was using crack again. Her mom was getting high and gave some to Tasha.

At 26, Tasha was charged with several violent and nonviolent offenses in a single prostitution-related incident. The incident involved a dispute with a john, and Tasha pled to assault and battery. Her sentence was 18 months time-served.

Age 27 — Tasha was incarcerated for violation of probation. Her original charges were fraud related. She had done the crimes to get money for drugs—crack. She was reporting to a probation officer and was getting dirty urine tests. Her current sentence is several years.

TABLE 2—SAMPLE PATHWAYS

SAMPLE PATHWAYS: Victimization to crime

Child corruption/abuse

- · Guardian pimps to dealers for drugs > prostitution, addiction
- · Guardian makes steal for drug money > shoplifting, burglary, theft
- · Guardian introduces to drugs > addiction
- · Household abuse or household addiction > drugs to numb > addiction
- · Household abuse > run away > trade sex > addiction, prostitution
- · Statutory rapist as sugardaddy > trade sex > prostitution, addiction

Partner abuse

- · Partner abuses > implicated in homicide of abuser
- · Partner abuses family > implicated in abuse of children
- · Partner abuses > coerced into crime

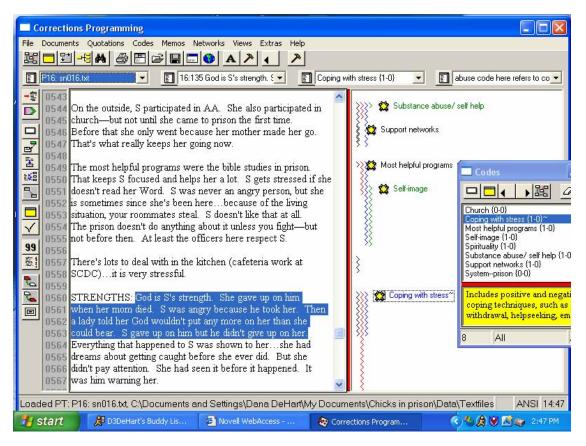
Property loss

- · Abusive partner steals or damages property > financial crime
- · Abusive partner causes eviction > homelessness, criminal affiliates > prostitution, addiction

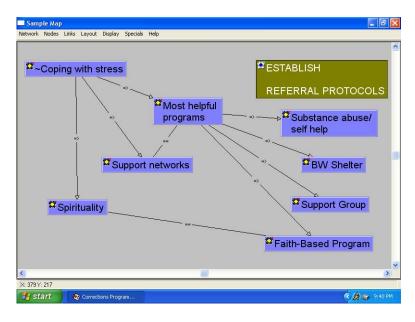
SAMPLE PATHWAYS: Crime to victimization

- · Prostitution > abuse by johns
- · Drug dealing > robbed or attacked by clients
- · Drug use > raped or robbed due to intoxication or trying to score

FIGURE 1—ATLAS/TI SOFTWARE



The ATLAS/ti software allows the transcript analyst to mark passages of text, attaching codes or index terms (e.g., "Coping with stress") to each passage. Passages of coded text can be viewed graphically and sorted, and codes can be linked into theoretical networks to map out relationships between constructs.



APPENDIX A—INTERVIEW PROTOCOL

PROJECT DESCRIPTION

We want to learn about the lives and experiences of incarcerated women—from events growing up until you arrived here at the Women's Facility...things that were turning points, things that maybe you could have needed, things that you might need on the outside when you leave here. We're hoping this information can be used to develop programs to help women like you in the future, and also to identify girls early that may be at risk and could use some help getting to where they need to be—getting out of one situation and into another.

INFORMED CONSENT

[Researcher reads consent form aloud, explains terms, clarifies, asks if any questions, invites participation].

NOTETAKING

I'm going to be taking some notes because I want to be sure I get down your thoughts accurately—I may even have to ask you to backtrack or repeat things because I want to get it right. If there are things I don't understand as we go along, I'll ask about them so that I get as close as possible to what you mean.

PROMPTS

Today we're going to discuss some of your ideas about the reasons you're here, including things throughout your life that led up to the present situation. To start out...

ATTRIBUTIONS FOR CURRENT SITUATION: Tell me about the reasons you're in here—the charges, the sentence, and why you think it happened (immediate circumstances, over life span).

Let's backtrack some so I can learn more about your life...I want you to tell me about your experiences so that you can help me understand—as best I can—what it was like to grow up in your shoes. Then we'll work our way up to the present.

FAMILY ENVIRONMENT: Let's start from the beginning—tell me about growing up...What was it like in your household?

Who all lived in your household? How did that change over time—who entered the family or left?

What were your living conditions like—in your home and in your neighborhood? What were the best things about living there? Worst?

FAMILY RELATIONSHIPS: What was it like, living in your family?

How would you characterize your childhood?

How did people in your family get along? Did some people get along well and other people have trouble?

What was it like for <u>you</u> in your family? Tell me about your relationship with each person in the household.

FAMILY SUBSTANCE USE: Did anyone/people in your family drink — socially or at home — or use drugs (who, what, how much, how often)?

When they drank/used, what happened?

FAMILY DISCIPLINE: What kinds of things could you get in trouble for in your family? If you did something your [caregiver] didn't like, what happened?

What was discipline like in your family (types used, by whom)?

Did all the kids get in trouble/punished about the same, or were there some that had it harder or easier than the rest?

When people in your family got angry, what happened? Did you usually know what was wrong, or did they sometimes get mad for reasons you couldn't figure out?

Did y'all get hurt during punishments or angry fits? Like were there welts or bruises or worse?

Did alcohol/drug use ever influence the punishments or anger?

FAMILY VIOLENCE: Did anyone in your household ever hit or punch or push someone else or anything like that? — like between siblings, a parent to a child or teenager, your parents with each other — anything we haven't talked about already?

Can you tell me a little about that (who, what, when)?

How did you and other family members deal with that (avoid, numb, use substances, seek help, fight back, try to protect others, etc.)? Did it make it better, worse, no difference? Any involvement of police, child welfare, hospitals/ERs because of this (why/not)? How did that work out?

EFFECTS OF VIOLENCE: In terms of the discipline (or the violence), were there effects you could see on the household—like people's health or bills or how much time folks spent with friends or away from home?

Did any family members ever run away because of something that happened at home? Did they go to live with other relatives? Who?

If something was helpful in dealing with this/these things, what was it?

What types of things did folks do in your household to survive—to keep yourself going, to cope?

VERBAL ABUSE: How about verbal or emotional stuff—was there a lot of yelling or name-calling or messing with people's heads?

Can you tell me a little about that (who, what, when)?

How did you deal with that (avoid, numb, seek help, etc.)? How did other family members?

How do you think it affected how you felt about yourself—things you did or didn't do, your choice of friends, health, school, your future? How do you think it affected others in your family?

OTHER PHYSICAL EXPERIENCES: We know that many folks have other kinds of experiences while growing up. Did you ever experience anyone making a pass at you or forcing you to do anything sexual or watch things like that when you were growing up—someone that was not a boyfriend, like someone in your family, or a family friend or a babysitter, or <u>anyone</u> else?

Can you tell me a little about that (who, what, context)?

How old were you the first time anything like that ever happened? What happened? Did these things happen more than once? Get worse over time (duration, escalation)? How did you deal with it—then and over time (avoid, numb, use substances, seek help, run)?

Did you tell anyone? [IF NOT]: Tell me about the choice to keep silent. [IF YES]: What happened when you told? How did that work out?

Any involvement of police, child welfare, hospitals/ERs because of this (why/not)? How did that work out?

How did other family members deal with this happening? Was there protection? Do you think they knew?

If something was helpful in dealing with this/these things, what was it?

How do you think it affected how you felt about yourself, things you did or didn't do, your choice of friends, your health, how you did in school, your future? Other people in your family?

SCHOOL AND PEERS: How'd you do in school?

Did that change over time? When? What was going on in your life then?

What did you like best about going to school? What was worst/hardest about going to school?

How did you get along with other kids in school? Who were your friends? What were they like?

[IF physical fighting by woman]: With whom? – boys and girls? What would set it off? Type of fighting? Outcomes?

How many years did you go to school? [IF dropped out]: What was going on in your life then?

If something was helpful for you in handling problems or succeeding in school – something at school or in the community or your family – what was it?

What did you and your friends like to do most (over time)?

SUBSTANCE USE: How about alcohol or drugs? Did you use them as a teenager? Younger?

What did you use first? Age? How did you get it? What got you started?

How did it feel? What did you like about it?

Tell me about the 1st time you ever drank to the point of being drunk or buzzed? How old were you? What was going on?

What about other drugs (when, what, how used)?

Were there changes in what you used, how you used, or how much/often? What was going on then?

Did you buy regularly, or how'd you get it? How did you support that? Who were you using with, anyone?

If something was helpful in dealing with your drinking (or using), what was it? What type of impact do you think your use had on your life—your family, school, relationships, how you felt?

RUNNING AWAY: Did you ever run away from home before you were grown up—like for a few days or for longer?

Tell me about that. How old were you (the 1st time)?

Why did you leave (that time; abuse, punishment, fights at home, freedom, drugs, relationship)?

Where did you stay? How did you get by—like food & spending money?

Did anything bad ever happen to you while you were away (attacked, hooked on drugs, hungry, scared, violent partner or pimp)?

Why did you go back home (or not)? What made you decide that? [IF WENT HOME]: What was it like when you did go home?

If something was helpful in dealing with this/these things, what was it?

OTHER CHILDHOOD: When you think about it, do any other things stand out about your growing up years, that we haven't talked about?

MAJOR RELATIONSHIPS WITH INTIMATE / DATING PARTNERS: Thinking about your childhood again, when did you 1st start dating, even a little?

Who was the 1st person you dated or were involved with (ages, met, type of relationship)? Tell me a little about other relationships before you were 18 (ages, etc.). Who was your most important partner before 18?

How about after 18—tell me about your relationships.

PHYSICAL EXPERIENCES WITH PARTNERS: In <u>any</u> relationship with a dating partner or boyfriend/girlfriend, or for some people this might be a pimp or someone they were with because of drugs—did you ever experience a time when someone pushed or slapped or hit you, threatened you with a knife or gun, or anything else like that?

Which partner(s)? Can you give me some idea of what happened? Did it happen once, or several times, or pretty often?

At what point in the relationship? How long had you been together?

What happened as a result of this (to relationship, injuries/pain)?

Did anyone else know? Did they intervene? What did they say about it?

Did you ever use the police, courts, hospital, ER involvement (why/not)? How did that work out?

What (else) did you do? – At the time, later (fight back, just take it, hide, try to protect others, etc.)?

What about leaving, separation/divorce? How did that work out (threats, contrition, stalking, financial)?

How did you deal with this experience/these experiences over time (avoid, numb, use substances, seek help, etc.)?

VERBAL: What about verbal threats or control (insults, threats to harm or find, limit activities, etc.)?

How did you respond to it? What did you do? Did this help? Make it worse?

SEXUAL: What about sexual force (unwanted sex, control, refuse condom use)? Effects of this? Outcomes? Impact on you?

PRECURSORS/EFFECTS: Did alcohol/drug use ever influence these actions or anger (physical, verbal, sexual; whose use, what, how influence)?

How do you think this/these experiences affected how you felt about yourself, things you did or didn't do, your choice of friends, your health, your future (e.g., missed bills, isolation, unwanted pregnancy or miscarriage due to abuse, etc.)? Others in your family? If something was helpful in dealing with this/these things, what was it? Did any of these experiences cause you to do things you might not otherwise have done out of fear, anger, etc? What kinds of things?

ASSAULTS BY OTHERS: How about other experiences when you were a teenager or adult? Have you ever been hit, threatened, cut or shot at...or anything else like that—not by a romantic or dating partner?

Can you tell me what happened (who, context, age)?

What led up to this? What happened then afterward?

Anyone hurt? Injuries? Hospital/ER? Police (why/not)? How did that work out?

What was the impact on your life? Then? Later?

How did you deal with this/these things (avoidance, numb, use substances, seek help, withdraw, retaliate, risk reduction, etc.)?

If something was helpful in dealing with this/these things, what was it?

OTHER ASSAULTS—SA: What about other kinds of physical stuff—We're almost done with this part....When you were a teenager or an adult, did you ever have any other experience—that we haven't talked about yet—where someone forced sex on you, forced you to do sexual activities, made passes at you when you didn't want them, raped you? Can you tell me a little about this/these times (who, ages, context)?

Any weapons involved? Any injuries?

Did you tell anyone? What was the result of that?

Any involvement of police, courts, hospital, ER involvement (why/not)? How did that work out?

How do you think this affected you or people close to you—like effects on your mind or relationships or health (e.g., pregnancy)?

If something was helpful in dealing with this/these things, what was it?

ADULT SUBSTANCE USE: What about use of alcohol or drugs after age 18 or so?

What kinds of drugs were you using (How much, how often, etc.)?

Did you start and stop? Use less or more at different times or change what type you were using most?

What do you think led to these changes? What was going on in your life at the time? How did you get it? Did you buy regularly? How did you support that?

What type of impact do you think your use had on your family, relationships, how you felt?

If something was helpful in dealing with your use, what was it?

ORIGIN OF CRIME: Let's talk about times when you had run-ins with the law—how it started and where it went from there. If we go back to the first time you remember doing a crime or having a run-in with the law—even delinquency stuff or stuff that wasn't all your doing. Tell me about that.

How old were you when that first happened? What happened?

Describe for me your role in that event—relative to other folks involved.

What was your thinking about it at the time?

What was your situation like at that time? What led up to it?

What happened afterward—like did you get in trouble or did it affect your relationships or family or other part of your life?

Where'd it go from there?

SYSTEM EFFICACY: Let's talk a little about your interactions with the justice system—what happened with the system each time (fine, program, probation, time served)? How did you handle that (avoid, resist, survive)?

How did your [caregiver or partner] react to that (collusion, punishment/violence, support)?

How did the intervention work for you—did it help (attitude, behavior, circumstances)? Looking back on it now, what would have helped—what could you maybe have used to set you in the right direction?

Where'd it go from there?

TURNING POINT: Was there a point in time in there when you began to think of yourself as being on the "other side of the law"?

Tell me about the situation you were in at that time in your life, in terms of where you lived, how you were getting by, who you spent time with.

Was there a time that you can think of when things really got worse—like in terms of your involvement with criminal behavior or in terms of your situation?

Tell me about your situation at that time—what was going on in your life?

CONNECTIONS TO CRIME: How do you think your involvement in criminal activity or run-ins with the law might be connected to other significant events in your life (what events, how)?

Is there anything about your situation that was the same every time you started getting in trouble, that maybe led into it some? How you felt, or who you hung with, or what it could get you (coercion, addiction, poverty)?

SUPPORTS—BUFFERS / INTERVENTIONS: Was there anything in your life that led you away from trouble or protected you or helped you (what, when, how)? What happened with that?

How about people—anyone you haven't already told me about? —Someone who was there for you, who you could talk to or go to who might have helped some? —Like a family member or friend or preacher? Someone who showed you other ways to do things? Someone who supported you?

PROGRAMS: Have you participated—in prison or on the outside—in any support services or programs, like for domestic abuse, or counseling, or drug programs? When did you participate? For how long?

What was most helpful about that program? What was the biggest problem with it?

STRENGTHS: We are about finished with this interview now, but before we end, I'd like to talk a little about your strengths, the things that help you make it through the day. You obviously have many strengths that have helped you get through the experiences of your life. I'd like to talk a little bit about those so we can get a better understanding of what helps women survive.

If you think back about it, what was it about you as a child that got you through difficult experiences? That you think helped you survive? What strengths did you have? What techniques did you use?

What about as a teenager later on? What was it about your life, your personality, or your beliefs that helped you keep going through the day?

Do you still use some of those same strengths today? What are the stable things, tried and true?

Tell me three things about yourself that you feel proud of or that you like to do.

OPEN-ENDED: Is there anything else that you want to tell me that you think is important about the things we've discussed?

SUPPORT/COPING: We've talked about some tough issues today—is there someone around you can talk to if you need to work some stuff out in your mind after I leave? Are there things you do on your own when you need to wind down—to help you get through tough stuff in here?