## Women of Substances: drug using women and criminal justice

**Margaret Malloch** looks at the services provided for drug users and argues that dedicated services for women would constitute a useful way forward.

llegal drug use is generally portrayed as a 'risky', yet hedonistic pursuit. Images of the 'addict' abound with users of 'hard' drugs objectified by the media and communities as criminal and dangerous. In terms of stigma and reputation, women drug users are often met with significant social disapproval, particularly when they have children. The almost unchallenged association between drug use and crime has an important role in the definition and response to the problems of drug use. In the last ten years, the criminal backdrop to drug use has taken precedence over the threat of disease (HIV, hepatitis) and death (overdose) within the media-fuelled public imagination. The criminal justice system has been expected to take an everincreasing role in responding to drug-related crime, and subsequently to problem drug users. However, a growing awareness that punishment in itself, is not sufficient to deal with the complexity of this social issue has led to the development of services inside prisons and attached to the courts.

the criminal justice system is an important development and fits in with the government's emphasis on partnership working by engaging a range of services which the police, courts and prisons can draw upon. The number of women likely to access these resources will be small but significant.

While it is clear that the prison population is increasing in all respects, the rise in the number of women being held in custody is dramatic. Many of these women receive a short custodial sentence for frequent minor offences (theft and handling are top of the list) or are processed through the prison system for non-payment of fines. In 2000, 79% of women received into prisons in England and Wales had been sentenced for 12 months or less. The impact of this increase is significant, with estimates from the Howard League that the number of children in England and Wales affected by the imprisonment of their mother could be as high as 40,000 (Howard League 2002). Home Office research has indicated that around 66% of women arrestees test positive for drug use (Bennett 1998). Women in the study were likely to spend more on drugs per week than

Within this expanding response to the problems of drug use, the needs of women drug users should

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not be overlooked. Women account for around a third of drug users in contact with community-based drug services and approximately 14% of criminal justice referrals to drug services. Because men are more likely to be in contact with services, resources tend to be directed towards men's needs, although there are undoubtedly pockets of good practice and service provision which acknowledge and address the needs of women. Nevertheless, the small number of women who approach services for help is often used to justify the lack of women-only services, and women's needs (particularly those of women from ethnic minorities) are often overlooked when services are being developed. As one serviceprovider commented:

"If there is a range of limited services, then there is a danger that what you're actually doing is feeding people through what's available, rather than linking people up with what's actually matched to their needs" (Eley 2002).

This observation is particularly relevant for women. Increasing access to drug services through men (£328 compared to £225) and had significantly higher positive test results for opiates and crack cocaine. The high proportion of female drug users entering custody appears to illustrate the impact of drug use on women's offending, with estimates that between 80-90% of women prisoners have used drugs prior to custody.

Again and again, reports into the women's prison population have acknowledged that prison seems particularly inappropriate for many of the women who end up there. Time after time, calls are made to develop services in the community that will more efficiently address the issues that have led these women into contact with the criminal justice system. In many cases however, women appear to be 'out of the loop' when it comes to accessing the more innovative resources. The nature of their offences means that they are sentenced in lower courts, often missing out on the higher-tariff, fast-track initiatives. They enter and exit prison in a relatively short period of time, and any services that they can access in custody are likely to have a limited impact on

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problem substance use (Malloch 2000).

Existing services experience heavy demands on their provisions and the resources available to both voluntary and statutory drug agencies are finite. Demands on services come from within and without the criminal justice system. As a result, concerns have been expressed that access to services has been prioritised to a considerable degree with the criminal justice system increasingly identified as a key mechanism for putting drug users in touch with appropriate services to reduce drug use and consequently drug-related crime. The intensive interventions and fast-track services, which are associated with court-mandated treatment, can often appear to provide a more effective and quicker service than that available outside the criminal justice system. For individuals confronted with lengthy waiting lists for treatment, it may seem that crime is a way to access help more quickly.

While initiatives such as Arrest Referral Schemes, Drug Treatment and Testing Orders, and Drug Courts are intended to lessen the number of drug users sentenced to custody, the success of such initiatives is obviously dependent on available community resources. Regional variations in resources can result in a lottery-approach to accessing services, i.e. it can depend on your (geographical) luck. In practice, drug treatment services often have lengthy waiting lists, particularly for methadone prescribing and women are only considered to be a priority if they are pregnant or there are child-care issues. Resources for users of crack cocaine are in short supply although developing, and this has been recognised as a service which increasing numbers of women are in need of. There is a significant lack of women-only services, particularly for residential rehabilitation and places for women with children are very limited. Interagency working is not always effective and can present obstacles for service-users. Follow-up support and after-care is crucial, but is often extremely limited in practice. Subsequently, many of the 'fast-track' resources for offenders are actually rather slower in providing services than may be expected. In some cases, the fast-track element actually consists of a speedy assessment followed by referral to a waiting list - unless dedicated services exist, as in the Glasgow and Fife Pilot Drug Courts (Malloch et al. 2003).

Women often use drugs for the same reasons as men, but there is a growing awareness that women frequently use drugs (and alcohol) primarily to selfmedicate, or to help them feel 'normal' or to 'cope'. As one woman commented: "It gives me some energy and makes me feel good in myself. If I don't take the drugs I'm paranoid. The drugs make me feel better about myself". Support and treatment programmes need to reflect women's needs and to recognise that different approaches to treatment may be more effective for women. As in other areas, women may be likely to benefit from more supportive approaches and less likely to do so from some of the more intensive interventions which are currently adopted by court-mandated approaches to treatment.

Dedicated drug services for women as both offenders and non-offenders would provide a useful way forward. The Prison Reform Trust have stated "There are other good reasons to argue for women's drug treatment facilities to be community resources used by all women and not just those who have been identified as offenders" (PRT 2000). This could avoid distinguishing between women who come into services through the criminal justice system and those who come in by other routes - thus alleviating criticism that 'offenders' are able to receive services which are not available to other women. This approach could also increase the likelihood of making after-care support available to women on time-specified court orders. The need for an holistic examination of service provision in light of a theoretical understanding of processes of marginalisation and social exclusion is required if criminal justice and social justice are to be obtained. Within this the needs of women need to be recognised and responded to.

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