

Female Offenders and Their Crimes

Section Highlights

- Women and drugs
- Property crimes by women offenders
- Prostitution and sex work
- Violent crimes by women
- Women who kill their children

Women engage in every type of criminal activity. Much like their male counterparts, females are involved in a variety of different types of crime. While female crimes of violence are highly sensationalized by the media, these crimes are rare occurrences. Instead, the majority of female offending is made up of crimes that are nonviolent in nature or are considered victimless crimes, such as drug abuse and sexually based offenses.

Males have always engaged in greater numbers of criminal acts. However, women are becoming more involved in crime and the criminal justice system. Research over the past several decades has focused on the narrowing of the gender gap, which refers to the differences in male and female offending for different types of offenses. But what does this really mean? Are women becoming more violent than they were in the past, as media reports have suggested? Is the rise in women's incarceration a result of more women engaging in serious criminal acts? What contributes to these changes? How do we investigate these questions?

In Section I, you learned about the changes in male and female crime participation over a 1-year and 10-year period, using arrest data from the Uniform Crime Reports. Using these same data, we can investigate the gender gap in offending. Table 8.1 compares the percentage of males and females in different offense types. These data illustrate that the proportion of violent crime cases is far greater for males than females. In contrast, the proportion of property

Table 8.1 2012 UCR Arrest Data: Males Versus Females

	Number of Offenders		Percentage of Offense Type Within Gender (%)	
	Males	Females	Males	Females
Violent crime	278,167	69,074	28.6%	14.2%
Homicide	6,303	830	0.6%	0.01%
Forcible rape	11,782	109	1.2%	*
Robbery	59,033	9,032	6.1%	1.9%
Aggravated assault	201,049	59,103	20.7%	12.2%
Property crime	694,051	417,033	71.4%	85.8%
Burglary	161,450	32,432	16.6%	6.7%
Larceny-theft	488,888	374,332	50.3%	77.0%
Motor vehicle theft	37,237	8,833	3.8%	1.8%
Arson	6,476	1,436	0.7%	0.02%

NOTE: Total male arrests for index crimes = 972,218; total female arrests for index crimes = 486,107. Arrests for index crimes make up 16.1% of male arrests and 22.7% of female arrests.

* Less than .01%

crimes is greater for females than males, as property crimes make up 85.8% of all female arrests, compared to 71.4% of male arrests. While these data illustrate that the gender gap may be narrowing in terms of gender proportions of crime, it is important to note that the number of male arrests is twice that of the number of arrests of women for index crimes and it is almost three times greater than the number of arrests for all crimes.

Arrest trends over time also demonstrate an overall decrease in violent crimes for both men and women, but they show an increase in property crimes for women. Table 8.2 demonstrates the 5- and 10-year trends in male and female arrests from 2003 to 2012. For example, between 2003 and 2012, women's arrests in property-related crimes increased 24.9%. It appears that much of this increase occurred between 2003 and 2012, as data indicate that women's participation in this crime increased by only 5.0% between 2008 and 2012. In addition, much of this increase comes from a 29.6% increase in larceny-theft crimes and a 14.7% increase in arrests for burglary. Meanwhile, the number of arrests for men in these cases has continued to decrease at both the 5- and 10-year mark. While these percentages may lead some to believe that women's crime is exploding, it is important to remember that women remain a small proportion of the total number of arrests.

While data from the Uniform Crime Report provide valuable insight into the current state of female offending, research by Steffensmeier and Allan (1996) examines the proportion of male and female arrests for three separate snapshots of time during the 20th century: 1960, 1975, and 1990. Their findings indicate that females make up 15% (or less) of arrestees for most types of major crimes (such as crimes against persons and major property crimes)

Table 8.2 5- and 10-Year Arrest Trends 2003–2012: UCR Arrest Data: Males Versus Females

	Percent Change Within Gender Between 2008 and 2012		Percent Change Within Gender Between 2003 and 2012	
	Males	Females	Males	Females
Violent crime	–13.8	–5.3	–14.9	–2.8
Homicide	–14.7	–9.2	–14.3	–8.3
Forcible rape	–17.0	–36.1	–28.9	–48.1
Robbery	–20.9	–10.2	–7.1	+20.2
Aggravated assault	–11.1	–4.3	–16.1	–5.4
Property crime	–6.4	+5.0	–6.9	+24.7
Burglary	–10.3	+2.4	–5.4	+14.7
Larceny-theft	–2.2	+6.1	+0.4	+29.6
Motor vehicle theft	–29.8	–20.5	–52.6	–43.1
Arson	–20.4	–7.5	–29.2	–16.4

across all time periods. For minor property offenses, the greatest increases are noted between 1960 and 1975 arrest data. Here, the female percentage of arrests increased from 17% in 1960 to 30% in both 1975 and 1990. The only exception where women make up the majority of arrests is for the crime of prostitution (where women make up between two thirds and three fourths of all arrests across all three time periods).

In contrast to Steffensmeier and Allan's research, which relied on UCR data, Rennison (2009) compared offending data from the National Crime Victimization Survey (NCVS) for the 9 years between 1992 and 2001. Her work indicates that there have been negligible differences in the gender gap between male and female offending behaviors during this time frame. By using the data from the NCVS, we see a different view of men's and women's offending behaviors as it includes the dark figure of crime—that is, those crimes that were not reported to the police, as well as the crimes where the police were notified of the crime. These findings note that any differences in the gender gap result not from the increases of female offending but rather from the decreases in male offending rates for particular offenses, which fell at a greater rate than the decrease in female offending rates.

While women participate in many different types of crimes, this section highlights five general categories of crime, all of which involve gendered assumptions about crime and offending. The first category focuses on a topic that is at the heart of the dramatic rise of female participation in the criminal justice system: drug addiction. The second category investigates the role of women in property crime. The third category focuses on prostitution and sex work. While this is a crime that is often identified as a victimless crime, a review of women who engage in sexually based offenses often face high levels of victimization in their lives. The fourth category looks at the role of women within gang organizations. The section concludes with a look at women who engage in acts of murder.

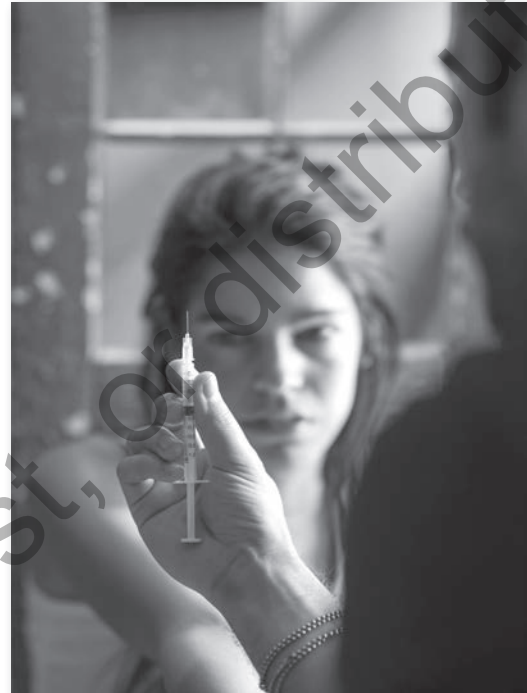
Women and Drugs

Throughout the majority of the 20th century, women were not identified as the typical addict or drug abuser. In many cases, the use of prescription and illegal substances by women (particularly White women) was normalized, often as a response to the pressures of gender-role expectations. For example, cocaine and opiates were legally sold in pharmacies and were frequently prescribed by doctors for a variety of ailments. Historically speaking, “women’s addiction [was] constructed as the product of individual women’s inability to cope with changing versions of normative femininity” (Campbell, 2000, p. 30). Examples of this can be found in advertisements depicting women and antianxiety medications in an effort to calm the frenzied housewife who is overwhelmed with her duties as a wife and mother. In the modern era, drug use was once again promoted as desirable (for White women) with the image of the heroin chic fashionista of the 1990s, personified by supermodel Kate Moss.

Without question, the war on drugs has had a significant impact on women with illicit drug addictions. In the last few decades, female incarceration rates grew 108%, but raw numbers grew eightfold (Harrison & Beck, 2006). These increases can be attributed almost exclusively to the female drug offender (or attributed to the rise in other offenses due to her drug use). This disproportionality continues to increase. In 2012, female drug offenders account for 25% of the state prison population whereas in male prisons, these crimes make up only 16% of all offenders (Carson & Golinelli, 2013). This is a significant increase compared to 2008 data, where only 9% of drug offenders were women (Guerino, Harrison & Sabol, 2011).

There is an endless number of pathways to the onset of drug addiction and offending. However, research consistently identifies similar pathways of drug use for women, regardless of race, ethnicity, or drug of choice. Whether the discussion focuses on women addicted to crack cocaine in lower income communities or middle-class women who abuse alcohol or prescription drugs, substance use becomes a method of coping with their lives (Inciardi, Lockwood, & Pottiger, 1993). These primary pathways include exposure to alcohol and drugs at a young age, early childhood victimization and trauma, mental health challenges, and economic challenges (Bloom, Owen & Covington, 2003).

For some women, their experiences with addiction begin at an early age. These girls are often exposed to drug use within their home environment. A family environment can influence the pathway to addiction in terms of an increased availability of these illicit drugs as well as an environment that is accepting of substance use. In some cases, substance abuse becomes a part of the family culture and a way in which children could spend time with their parents and siblings (Carbone-Lopez, Gatewood Owens, & Miller, 2012). On the other hand, lack of parental supervision may also lead to substance use for girls (Bowles, DeHart & Webb, 2012). Early experimentation with substance abuse can also lead to a longer term of addiction (Dennis, Scott, Funk & Foss, 2005).



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▲ **Photo 8.1** Research highlights that women and men vary in their drug use, both in terms of their drug of choice as well as their motivations of use. Here, a woman is shown using drugs intravenously.

Another pathway to addiction is represented through the issues that result from victimization and trauma, particularly during early childhood. Women who experience violence and abuse during their formative years are more likely to abuse alcohol and other drugs compared to women without a history of abuse. Here, research estimates that 48% to 90% of addicted women have endured physical or sexual victimization during their childhood (SAMHSA, 2009). Left untreated, drugs become a way to escape from the pain of childhood abuse and trauma (Carbone-Lopez et al., 2012). The presence of mental health issues can also serve as a pathway to addiction. Mental illness and substance use go hand in hand as 72% of men and women with severe mental disorders have a co-occurring substance abuse problem (Baillargeon, Binswanger, Penn, Williams, & Murray, 2009). Additionally, research indicates that women have higher rates of mental illness compared to men (James & Glaze, 2006). If effective mental health treatment (including psychotropic medication) is unavailable, many may choose to self-medicate with illicit substances, which can lead to issues with addiction (Harris & Edlund, 2005). Finally, women may engage in substance abuse as part of their romantic relationship with a significant other. In many cases, their experimentation quickly translates into addiction and continues even once the relationship ends (Ryder & Brisgone, 2013).

Addiction limits the abilities for many women to develop a self-sustaining life. In addition to placing them at risk for homelessness, violence, and incarceration in an effort to fund their drug use, addiction has collateral consequences, particularly for her minor children. Indeed, the images of the pregnant addicted mother and crack babies of the 80s and 90s represented the greatest form of evil found in the drug-abusing woman. Many women with addiction issues often fail to recognize that they are pregnant until late in their pregnancy where their substance use and lack of prenatal care can place their child at significant risk for health and developmental issues. However, for some women, the realization that they are expecting may encourage them to seek out treatment and give them a reason to change their lives (Silva, Pires, Guerreiro & Cardoso, 2012). However, relapse issues can threaten this newfound journey toward stability and have lasting effects both for her life as well for her children. Relapse, incarceration, and time in a treatment facility mean that mothers are separated from their children. Even in cases where these mothers were physically present, their addiction meant that they were often emotionally unavailable for their children. Over time, an intergenerational pattern emerges, and these daughters turn to the same addictions that their mothers endure.

Regardless of their pathway to addiction, increases in number of women using drugs and the marginalization of addicts fed the war on drugs. As the behaviors of addicted women shifted toward criminal activity in an effort to support their drug habit, the perception that drug addiction is *dangerous* spread among the general public. Drug use became something to fear by members of society. The shift of addiction from a public health issue to a criminal justice issue fueled the fear about the link of drug use and crime.

The heightened frenzy about the dangerousness of drugs has fueled the war on drugs into an epidemic. The war on drugs and its effects on the criminal justice system have been documented extensively, and the introduction of mandatory minimum sentencing represented a major change in the processing of drug offenders. While these sentencing structures were applied equally to male and female defendants, the role of women's participation in drug offenses often differs substantially from male involvement in drug-related crimes. With the elimination of judicial discretion, judges were unable to assess the role that women played in these offenses (Merolla, 2008). As a result, women now received long sentences of incarceration where they had once been granted probation and other forms of community supervision. The effect of this shift was dramatic. Between 1986 and 1991, the incarceration rates of women for drug-related offenses increased 433%, compared to a 283% increase for males (Bush-Baskette, 2000). Drug-convicted women make up 72% of the incarcerated population at the federal level (Greenfield & Snell, 2000). Most of these cases involve women as users of illegal substances. Even in the small proportion of cases where women are involved in the sale of drugs, they rarely participate in mid- or high-level management in the illegal drug market, often due to sexism within the drug economy (Maher, 2004b). In addition, the presence of crack shifted the culture of the street economy, particularly for women involved in acts of prostitution. The highly addictive nature of crack led more women to the streets in an effort to find a way to get their next high. At the same time, the flood of women in search of sex work created an economy whereby the value of sexual services significantly decreased.

While recent changes in federal drug sentencing laws have reduced the disparities in sentencing, the damage has already been done. The effects of these laws created a new system of criminal justice where the courts are overloaded with drug possession and distribution cases, and the growth of the prison economy has reached epic proportions. Yet these efforts appear to have done little to stem the use and sale of such controlled substances. Indeed, the overall rates of crimes other than drug-related cases have changed little during the last 40 years. The effects of these policies have produced significant consequences for families and communities, particularly given the increase in the incarceration rates of women. Sections X and XI explore in depth the consequences in the incarceration of women, both for themselves and their families, as well as their communities. It is these consequences that have led some scholars to suggest that the war on drugs has in effect become a war on women (Chesney-Lind, 1997).

Property Crime

The category of property crime is relatively broad and encompasses a number of different offenses. Generally speaking, property crime refers to the illegal acquisition of money, goods, or valuables, but without the use of force or fear to obtain the property. While the Uniform Crime Report includes arson, burglary, larceny-theft, and motor vehicle theft as Part 1 offenses under the category of property crime, the National Crime Victimization Survey (NCVS) includes only burglary, motor vehicle theft, and theft (larceny) in its definition. As a more inclusive representation of crime, the National Incident Based Reporting System incorporates many more types of property offenses into its definition, such as arson, bribery, burglary, vandalism, embezzlement, blackmail, fraud, larceny-theft, motor vehicle theft, stolen property offenses, and bad checks.

According to the Bureau of Justice Statistics, the rate of property crime victimization within U.S. households (property crime per 1,000 households) has steadily declined since 1993. While the 2010 property crime victimization rate was approximately 5% lower compared to 2009, today's rate is roughly one third of the 1993 victimization rate (120 victimizations per 1,000 households in 2010, compared to 320 in 1993) (Truman, 2011). While females are more likely to be involved in property offenses compared to other types of crimes, males still commit the overwhelming majority of these crimes. Men committed 62% of property crimes in 2010, while women were responsible for about 38% of these offenses.

Earlier in this section, you learned about how women's lives are shaped by addiction. Addiction can also shape women's participation in crimes, particularly for property offenses as women may engage in these crimes to either support their drug habit or commit crime while under the influence. Indeed, drugs are the most common factor among females who engage in property crimes. Research by Johnson (2004) finds that 52% of property offenders engage in crime to get money so that they can buy drugs. In comparison, only 15% of violent offenders stated that their crime was directly related to obtaining drugs for personal use.



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▲ **Photo 8.2** The majority of crimes involving women are property offenses and include crimes such as burglary and theft. Here, a woman engages in shoplifting from a store.

Another factor in female property offending is economic survival. Given that only 40% of incarcerated women were employed prior to their arrest, it appears that many women engage in these crimes in order to provide for themselves and their families. However, to suggest that poverty and unemployment leads people to engage in property-based offending is a narrow view of the issue. Certainly, addiction can play a role for some offenders. Here, the decision to engage in crime helps not only to fund their substance abuse, but it also provides support to maintain a household. This is particularly poignant given that many individuals who suffer from addiction are unable to hold down functional employment.

The image of women in property crimes varies dramatically. On one hand, shoplifting is typically described as a “pink-collar” crime. While shoplifting may be an act that some undertake to support other areas of criminality, such as drug use, others use shoplifting as their primary occupation and sell their goods to buying customers. These women view themselves as professionals, and their ability to shoplift is a skill. Much like the drug dealer, the shoplifter develops a list of clients who will purchase their goods from her. Her attire is based on what types of stores she will steal from so that she blends in with the rest of the legitimate shoppers and goes undetected by security personnel (Caputo & King, 2011). Another example involves women and the crime of robbery. Some scholars highlight how women engage in robbery as solo offenders; how women choose to engage in crime is gendered in that they typically do not engage in overt acts of violence and select other women as their victims (Miller, 1998a). Meanwhile, other cases show women who use their femininity to draw in their victims as part of a larger mixed-gender group (Contreras, 2009). In each of these cases, women use their gender in their favor.

CASE STUDY

Spotlight on Women and Bank Robbery

Historically, male offenders have dominated the crime of bank robbery. Even in cases where women have been involved in these crimes, they were either co-conspirators with a male or were reduced to a minor role. Consider the example of Bonnie Elizabeth Parker (1910–1934) who was romantically involved with Clyde Chestnut Barrow (1909–1934). Barrow and his gang committed over a dozen bank robberies during the Great Depression. Urban legend suggested that Bonnie was an equal participant in these crimes. However, evidence suggests that Bonnie never actually killed a single victim.

While the days of Bonnie and Clyde are long gone and men remain the most likely offender of these crimes, times are changing. Women are becoming more involved in these crimes. In the last decade, the number of bank robberies committed by women has shifted. While there were more females involved in bank robberies in 2003, there were more of these offenses in general. According to the Uniform Crime Reports, women made up 524 of the 9,714 offenders involved in these crimes. This means that women made up 5.5% of all bank robbery offenders in 2003. In 2011, they made up 429 of the offenders for these crimes. However, the overall number of offenders in these cases fell by 37% to 6,088 (Federal Bureau of Investigation [FBI], 2003, 2011).

Perhaps one of the most famous cases of bank robbery involved Patricia Hearst. Hearst was the 19-year-old socialite granddaughter of newspaper publishing mogul William Randolph Hearst. In 1974, Patty Hearst was kidnapped by members of the Symbionese Liberation Army, a domestic terrorist group. The SLA manipulated Hearst to join their criminal actions. During her 18 months under SLA captivity, she participated in three bank robberies and several other criminal activities. Despite her defense that she had been brainwashed by her captors, Hearst was sentenced to seven years in prison for her part in the robbery. Her sentence was commuted after two years by then President Jimmy Carter, and she was pardoned by President Clinton (Cable News Network [CNN], 2001).

A recent example of a female bank robber is Lee Grace Dougherty. In August 2011, Lee Grace, with her brother Ryan and stepbrother Dylan, robbed a local bank in Georgia. While all three had previously been involved with the criminal justice system, Lee Grace drew the attention of the media both for her status as a woman as well as online statements that “I like causing mayhem with my siblings.” She was sentenced to 35 years in prison for her involvement in the bank robbery and faces additional time, for her subsequent offenses as part of their multi-state crime spree (Coffman, 2012; Gast, 2011; MacIntosh, 2011).

Prostitution

Hollywood images of prostitution depict a lifestyle that is rarely found in the real world. Movies such as *Pretty Woman*, *Leaving Las Vegas*, and *Taxi Driver* paint a picture of the young, beautiful prostitute who is saved from her life on the streets. In reality, there are few Prince Charming's available to rescue these women. The reality that awaits most of these women is one filled with violence, abuse, and addiction—deep scars that are challenging to overcome.

Prostitution involves the act of selling or trading sex for money. Prostitution can take a variety of forms, including escort services, massage parlors, or work in brothels, bars, and truck stops. However, street-level prostitution is perhaps the most visible form of sex work. According to the Uniform Crime Reports, police agencies arrested 36,931 offenders for the crime of prostitution in 2012. Two thirds of such offenders were female (see FBI, 2011, 2012b). Most of these offenders are workers of the trade and not the traffickers or customers associated with these crimes.

For those women who engage in street-level prostitution, money may not be the only commodity available in exchange for their bodies, as they also trade sex for drugs or other tangibles such as food, clothing, and shelter. In addition, women in this arena experience the high levels of risk for violence and victimization.

The journey into prostitution is not a solitary road. Rather, it involves a variety of individual, contextual, and environmental factors. A history of abuse is one of the most commonly referenced risk factors for prostitution, and research by Dalla (2000) indicates that drug addiction almost always paves the way for work in prostitution. However, poverty also plays a role. In Section V, you learned about the issue of forced prostitution and human trafficking, yet many women choose to enter **street prostitution** and brothel work out of financial need (Karandikar, Gezinski & Meshelemiah, 2013).

One of the most common pathways for women in prostitution is the experience of early childhood sexual victimization. Although there is no direct link that indicates that the experience of incest is predictive of selling one's body, research indicates that there is a strong correlation between the two (Nokomis Foundation, 2002), and one prostitution recovery program indicates that 87% of their participants experienced abuse throughout their early childhood, often at the hands of a family member. For these women, incest became the way in which they learned about their sexuality as a commodity that could be sold and traded, and some suggest this process of bargaining became a way in which these victims could once again feel powerful about their lives (Mallicoat, 2006). In Section VII, you learned about how young girls who have been abused within the home often run away to escape the ongoing violence and victimization. Once on the streets, they are at risk for even more violence. Many of these girls turn to prostitution to support their basic survival needs, such as food and shelter. While childhood abuse is a common factor among many women in prostitution, girls who enter prostitution as teens experience higher rates of emotional abuse compared to those who enter the lifestyle as adults (Roe-Sepowitz, 2012).

Women in prostitution experience high levels of violence during their careers. On the streets, they witness and experience violence on a daily basis. More than 90% of these women are brutally victimized (Romero-Daza, Weeks, & Singer, 2003). They are robbed, raped, and assaulted by their customers and pimps alike (Raphael & Shapiro, 2004). Many do not report these incidents out of fear that they will be arrested for engaging in prostitution, coupled with a



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▲ **Photo 8.3** Street prostitution is one of the most visible and dangerous forms of sex work. Many women who work as street prostitutes risk significant victimization from their johns. Unfortunately, many victims do not report these crimes to the police out of fear of victim blaming by the criminal justice system.

tomers (Norton-Hawk, 2004). In an effort to protect against potential harms, women rely on their intuition to avoid potentially violent situations. Many girls indicate that they will not leave a designated area with a client and generally refuse to get into a car with a client. Others carry a weapon, such as a knife. Despite the risks, some women reference the thrill and power they experience when they are able to survive a violent incident (Dalla, Xia, & Kennedy, 2003). Many women are surprised when they reflect on the levels of violence that they experienced on the streets. Some may disassociate themselves from the realities of this journey and believe that the experience was not as traumatic as they originally believed. However, the battle scars from their time on the streets provide the evidence for the trauma they endured, both physically and mentally.

The role of substance abuse is central to the discussion of risk for prostituting women. About 70% of women in prostitution have issues with drug addiction. Some women begin their substance use prior to their entry in prostitution to cope with the pain associated with past or current sexual violence in their lives. They then resort to prostitution to fund their drug habits (Raphael, 2004). For others, entry into substance abuse comes later in an effort to self-medicate against the fear, stress, and low self-esteem resulting from the selling of sex (Nixon, Tutty, Downe, Gorkoff, & Ursel, 2002). As their time on the streets increases, so does their substance abuse. Indeed, the relationship between drug use and prostitution may be a self-perpetuating circle in which they feed off one another. A sample of women in jail for prostitution had significantly higher rates of drug use compared to women arrested for non-prostitution-related offenses (Yacoubian, Urbach, Larsen, Johnson, & Peters, 2000).

In recent years, media accounts have focused significant attention on the use of crack cocaine by street prostitutes. Research has linked the presence of crack to an increased number of individuals working on the street, which in turn decreases the price that women receive for their services. Addiction to drugs like crack has created an economy where money is no longer traded for sex. Rather, sexual acts become a commodity to be exchanged for drugs. The levels of violence associated with the practice of selling sex increases in this drug-fueled economy (Maher, 1996).

While drug addiction presents a significant health concern for women in prostitution, additional issues exist for women in terms of long-term physical health. Women engaged in sex work are at risk for issues related to HIV,

belief that the police will do little to respond to these crimes. Indeed, women often return to the streets immediately following their victimization. This temporary intervention is viewed as a delay in work, rather than an opportunity to search for an exit strategy. One woman characterized her experience as normal—"society and law enforcement consider a prostitute getting raped or beat as something she deserves. It goes along with your lifestyle. There's nothing that you can do" (Dalla, Xia, & Kennedy, 2003, pp. 1380–1381).

Female sex workers also witness significant acts of violence perpetuated against their peers, an experience that often leads to significant mental health issues. Drug use becomes a way to cope with the violence in their daily lives. As the pressure to make money increases in order to sustain their substance abuse addiction or to provide a roof over their head at night, women may place themselves in increasingly risky situations with their cus-

hepatitis, and other chronic health concerns, including dental, vision, neurological, respiratory, and gynecological problems (Farley & Barkin, 1998). Finally, the death rate of women in prostitution is an astonishing 40 times higher than the death rate of the overall population (Nokomis Foundation, 2002).

Mental health concerns are also a significant issue for women engaged in the sex trade. Cases of **post-traumatic stress disorder (PTSD)** are directly related to the levels of violence that women experience on the streets, and an estimated two thirds of prostituted women experience symptoms of PTSD (Schoot & Goswami, 2001). Prostitutes suffering from PTSD may be unable to accurately assess the levels of threat and violence that surround their lives, which in turn places them at increased risk for ongoing physical and sexual victimization (Valera, Sawyer, & Schiraldi, 2000).

The Legalization Debate

The question of whether prostitution should be considered a criminal activity is one of considerable debate. In Nevada, legal prostitution is limited to counties with a population under 400,000, excluding high-traffic areas, such as Reno and Las Vegas, from offering legalized brothels.¹ The laws within Nevada focus almost exclusively on the minimization of risk and reduction of violence for women in prostitution. Since 1986, Nevada has required that prostitutes who work in brothels must submit to weekly exams to assess for any sexually transmitted infections or the presence of HIV. Brothels also implement a variety of regulations to ensure the safety and security of the facility and the women who work there, such as audio monitoring and call buttons in the rooms. Most brothels limit services outside of the brothel environment to control any potentially negative behaviors of clients. Research indicates that women who work in brothel settings feel safe and rarely experienced acts of violence while working as a prostitute. Indeed, it is these safety mechanisms that led women to believe that brothel sex work is by far the safest environment in which to engage in prostitution, compared to the violence and danger that street prostitutes regularly experience (Brents & Hausbeck, 2005).

In the Netherlands, the legalization of brothels in 2000 created a new way to govern the sex trade. While the act of prostitution has been legalized since the early 20th century, it was the brothel environment (popularized by the red light district and “window” shopping in the city of Amsterdam and other cities) that was illegal. At the time of brothel legalization, the practice of prostitution in the Netherlands was not an uncommon phenomenon, and estimates suggest that over 6,000 women per day were working in prostitution-related activities (Wagenaar, 2006). The effects of the legislation lifted the formal prohibition of the brothel, even though many municipalities tolerated their presence, and agents of social control, such as law enforcement and the courts, largely refrained from prosecuting cases. By creating a system whereby brothels had to be licensed, authorities were able to gain control over the industry by mandating public health and safety screenings for sex workers. As part of the decriminalization of prostitution, the state created the opportunity for brothel owners to have a legal site of business. Labor laws regarding the working conditions for prostitutes were put into effect. In addition, it created a tax base in which revenue could be generated (Pakes, 2005). The goals of decriminalization allowed for the Dutch government to improve the lives of women in prostitution by creating safe working conditions, creating a system of monitoring of the sex trade, and regulating illegal activities that might be associated with the selling of sexuality, such as streets crimes associated with prostitution, the exploitation of juveniles, or the trafficking of women into the sex industry (Wagenaar, 2006).

By creating a sustainable economy of prostitution, some critics suggest not only that the needs of the customer are met but also that these regions create an economic strategy for women, particularly women within challenged economic situations. However, creating a system of legislation is no guarantee that laws will be followed; even with the legalization of prostitution in New South Wales, Australia, the majority of brothels fail to register their businesses

¹ However, evidence exists that street prostitution and escort services are still prevalent within these regions.

and pay little attention to the regulatory rules for operation. In addition, illegal sexual practices have continued to flourish—the Netherlands is identified as a leading destination for pedophiles and child pornographers, many of which operate under the belief that the promotion of legalized prostitution has created opportunities for illegal prostitution in these regions, as well (Raymond, 2004).

Other legislation focuses on the criminalization of the demand for sexual services. In addressing the issue of prostitution in Sweden, legislatures have focused on making the purchasing of sex from women a criminal act. The belief here is that by criminalizing the male demand for sex, it may significantly decrease the supply of women who engage in these acts. By criminalizing the “johns,” Sweden has taken a stand against a practice that they feel constitutes an act of violence against women (Raymond, 2004). In the passing of these laws, the parliament indicated, “[I]t is not reasonable to punish the person who sells a sexual service. In the majority of cases . . . this person is a weaker partner who is exploited” (Ministry of Labour, Sweden, 1998, p. 4).

In the United States, even in an environment where both the purchaser and seller of sex can be subjected to criminal prosecution, the data indicate that women are significantly more likely to face sanctions for selling sex, compared to men who seek to purchase it (Farley & Kelly, 2000). Although the focus on demand is an important characteristic in the selling of sex, it is not the only variable. Indeed, larger issues such as economics, globalization, poverty, and inequality all contribute to a system where women fall victim to the practices of sexual exploitation.

Farley and Kelly (2000) suggest that even with the legalization of the brothel environment, prostitution remains a significant way in which women are brutalized and harmed. The social stigma of women who engage in the selling of sex does not decrease simply because the act of prostitution becomes legal. Indeed, the restriction of brothels to specific regions only further isolates women from mainstream society and magnifies the stigma they may experience (Farley, 2004). In cases of victimization, women employed in sex work continue to experience significant levels of victim blaming when they are victimized, even if prostitution is decriminalized. The system of public health, which is promoted as a way to keep both the prostitute and her client safe, fails to meet some of the most critical needs of women in this arena, as these efforts toward promoting safety are limited exclusively to physical health, and little to no attention is paid to the mental health needs of women engaged in prostitution (Farley, 2004).

Research indicates that women involved in street prostitution often want to leave the lifestyle, but they express concern over how their multiple needs (including housing, employment, and drug treatment) may limit their abilities to do so. There are few programs that provide adequate levels of services to address the multiple needs of women during this transition. A review of one prostitution recovery program found that affordable safe housing is the greatest immediate need for women in their transition from the streets (Mallicoat, 2011). Homelessness puts women at risk for relapse: “Without reliable housing, it is challenging to escape the cycle of prostituting” (Yahne, Miller, Irvin-Vitela, & Tonigan, 2002, p. 52).

In addition, women must possess necessary skills and have access to support in order to facilitate this process. Women exiting the streets indicate a variety of therapeutic needs, including life skills, addiction recovery programming, and mental health services designed to address the traumas they experienced. An exit strategy needs to acknowledge the barriers to success and continuing struggles that women will experience as a result of these traumas.



Women and Violence

True crime documentaries and fictionalized television dramas give the perception that the rates of female offending, particularly in cases involving violence, have increased dramatically in recent years. Yet rates of crime for women in these types of cases have actually decreased. This discussion about women and violent crimes investigates three different categories of female offenders. The first topic highlights the role of women in gangs. The second topic looks at general crimes of female violence, including murder. The section concludes with a specific type of female homicide with women who kill their children.

Girls and Gangs

While girls have traditionally made up a small proportion of gang members, there was significant media attention on the rise of gang girls throughout the late 20th century. Surveys conducted by law enforcement agencies in the 1990s estimated that between 8% and 11% of gang members were female (Moore & Terrett, 1998). However, not all law enforcement jurisdictions include girls in their counts of gang members, a practice that can skew data about the number of girls involved in gangs (Curry, Ball, & Fox, 1994). Whereas the National Youth Gang Center suggests that these rates have remained consistent and reflect little change in rates of female gang participation (2009), other data tell a different story. Self-report studies during this same time frame reflect a higher percentage of female gang participation compared to law enforcement data and suggest that 38% of the self-identified gang members between the ages of 13 and 15 were female (Esbensen, Deschenes, & Winfree, 1999). Recent self-report data indicate that girls represent between 31% and 45% of gang members (Esbensen and Carson, 2012).

Who are female gang members? Much of the early literature on girls and gangs looked at female gang members as secondary to issues surrounding male gangs. Classic studies by Campbell (1984) and Moore (1991) illustrated that girls entered the gang lifestyle as a result of a brother or boyfriend's affiliation. Girls in the gang were often distinguished from their male counterparts by their sexuality. This sexualization manifested in several ways: (1) as a girlfriend to a male gang member, (2) as one who engages in sex with male gang members, and (3) as one who uses her sexuality in order to avoid detection by rival gang members and law enforcement (Campbell, 1995). Modern research builds upon this early work, suggesting that female gangs are not only increasing their membership ranks but also expanding their function and role as an independent entity separate from the male gang. Girls in the gang are no longer the sexual toy of the male gang, but have become active participants in crimes of drugs and violence.

The lives of girls in gangs tell a story filled with violence, poverty, racism, disenfranchisement, and limited resources. They come from families who struggle to make ends meet in economically depressed areas. In these communities, opportunities for positive, prosocial activities are significantly limited, and the pressure to join a gang runs rampant. Many of the girls have limited achievements in the classroom, and their educational experience has little to do with books or teachers. Instead, they share stories of disorder, threats, and crime (Molidor, 1996). The majority of their parents never married, and the presence of intimate partner abuse within the home was not uncommon. Many of the girls had a parent or other family members who were involved in the criminal justice system and were either currently incarcerated or had been incarcerated during some part of their lives.

For some girls, membership in a gang is a family affair, with parents, siblings, and extended family members involved in the gang lifestyle. Research by Miller (2000) indicates that 79% of girls who were gang involved had a family member who was a gang member, and 60% of the girls had multiple family members in gangs. For these girls, gang affiliation comes at an early age. During the childhood and preteen years, their gang activities may consist of limited acts of delinquency and drug experimentation. During junior high, girls exhibit several risk factors for delinquency, including risky sexual behavior, school failures, and truancy. By the time these girls become teenagers, they are committed to the gang and criminal activity and participate in a range of delinquent acts, including property crimes, weapons offenses, and violent crimes against persons. The later adolescent years (ages 15–18) represent the most intense years of gang activity (Eghigian & Kirby, 2006).

While the gang is a way of life for some girls, many others find their way to the gang in search of a new family. Many girls involved in gangs have histories of extensive physical and sexual abuse by family members during early childhood. Many of the girls run away from the family residence in an attempt to escape the violence and abuse in their lives. In an attempt to survive on the streets, the gang becomes an attractive option for meeting one's immediate and long-term needs such as shelter, food, and protection. Not only does the gang provide refuge from these abusive home environments, but it provides as well a sense of family that was lacking in their families of origin (Joe & Chesney-Lind, 1995). Research by Miller (2000) indicates that it is not so much a specific risk factor that propels girls into the gang but rather the relationship among several life situation factors, such as a neighborhood exposure to

gangs, a family involvement in the lifestyle, and the presence of problems in the family, that illustrates the trajectory of girls into the gang lifestyle.

The literature on female gangs indicates that the lifestyle, structure, and characteristics of female gangs and their members are as diverse as male gangs. Some girls hang out with gangs in search of a social life and peer relationships, but they typically do not consider themselves as members of the gang. The structure of the girl gang ranges from being a mixed-gender gang to functioning as an independent unit. For girls involved in mixed-gender gangs, their role ranged from being an affiliate of the male gang unit to even, in some cases, having a “separate but equal” relationship to their male counterparts (Schalet, Hunt, & Joe-Laidler, 2003).

The initiation process for girls varies from being “jumped” in or **walking the line**, whereby the girls were subjected to assault by their fellow gang members, to being “sexed” in or **pulling a train**, an experience that involved having sex with multiple individuals, often the male gang members. However, not all of these initiation rites came with a high degree of status within the gang, as those girls who were sexed in generally experienced lower levels of respect by fellow gang members (Miller, 2000). Girls who had been “sexed into the gang” were subjected to continued victimization from within the gang. Although not all girls were admitted to the gang in this manner, this image negatively affected all of the girls.

The fact that there was such an option as “sexing in” served to keep girls disempowered, because they always faced the question of how they got in and of whether they were “true” members. In addition, it contributed to a milieu in which young women’s sexuality was seen as exploitable. (Miller, 1998a, p. 444).

Recent media attention has targeted the gang girl and [thus created] the perception that violence by these girls is increasing. Yet data indicate that female gang members participate in criminal acts at rates similar to male gang members (Esbensen & Carson, 2012). Research by Fleisher and Krienert (2004) indicated that among girls who described themselves as active members of a gang, almost all (94%) had engaged in a violent crime during the previous 6 months, and two thirds (67%) had sold drugs during the past 2 months. More than half (55%) had participated in property crimes, such as graffiti or destruction to property, while two thirds (67%) engaged in economic crimes, such as prostitution, burglary, robbery, or theft, in the previous 6 months. Here, violence is more than just engaging in criminal offenses. Indeed, the participation in a delinquent lifestyle that is associated with gang membership places girls at risk for significant victimization. Girls who are “independent” of a male gang hierarchy tend to experience high levels of violence as a result of selling drugs and their interactions on the streets with other girls. These independent girls are aware of the potential risk they face and take a number of precautionary measures to enhance their safety, such as possessing a weapon, staying off the streets at night, and traveling in groups. While the close relationship with the male gang can often serve as a protective factor, it can also place the girls at risk of rape and sexual assault by their “homeboys” (Hunt & Joe-Laidler, 2001). In addition, girls whose gang membership is connected to a male gang unit tend to experience higher levels of violence on the streets compared to girls who operate in independent cliques. These girls are at a higher risk of victimization due to the levels of violence that they are exposed to from assaults and drive-by shootings that involve the male gang members. Indeed, many of these crimes (and potential risks of victimization) would not be present if they were not involved in the gang lifestyle (Miller, 1998b).

The exit from the gang lifestyle for girls can occur in several ways. For most girls, this exit coincides with the end of adolescence. They may withdraw from the lifestyle, often as a result of pregnancy and the need to care for their young children. For others, their exit is facilitated by an entry into legitimate employment or advanced education. Others will be removed from their gangs as a result of incarceration in a juvenile or adult correctional facility. While some may choose to be “jumped out,” most will simply diminish their involvement over time rather than be perceived as betraying or deliberately going against their gang peers (Campbell, 1995). The few women who choose

to remain in the gang have several pathways from which to choose. They may continue their gang participation as active members and expand their criminal resume. Their relationships with male gang members may continue with their choice of marriage partners, which allows them to continue their affiliation in either a direct or indirect role (Eghigian & Kirby, 2006).

Gender and Violent Crime

Despite public perceptions, females make up a small proportion of violent offenders. While violent crime perpetrated by women does occur, it is rare. As you learned earlier in this chapter, men engage in far more acts of violence than females. For example, women's participation in the crime of homicide accounts for less than half of the arrests of men. And like the rates of male violence, women's participation in these crimes has decreased, with homicide offending rates for females declining from 3.1 offenders per 100,000 in 1980 to 1.6 offenders per 100,000 in 2008 (Cooper & Smith, 2011). Women are more likely to kill someone known to them, compared to a stranger. Research by Kellermann & Mercy (1992) indicates that while 60% of female offenders knew their victims, only 20% of male murders had known victims. Generally speaking, women generally kill their spouses, significant others, or their children (Cooper & Smith, 2011).

CASE STUDY

Spotlight on Women and Self Defense

Much of the fascination about women who kill comes from the perception of these offenders either as cold and calculating murderers or cases where women just "snap." But what about those cases of women who kill in self-defense? How do we make sense of these crimes of violence?

Consider the case of Marissa Alexander. During a confrontation with her husband in August 2010, Marissa fired a bullet into the wall to scare her husband. She testified that she felt threatened and luckily no one was hurt in the incident. Even though Alexander drew upon Florida's Stand Your Ground Law, the jury convicted her of aggravated assault with a deadly weapon, and she was sentenced to twenty years in prison. Her actions triggered a mandatory minimum gun law which increases the sentence in certain felonies if a gun is brandished or fired. Even lawmakers in the state argued that the intent of the law was not to punish cases like Alexander's but was designed to increase sentences for those who brandished or used a firearm during the commission of a crime such as robbery or assault (Stacy, 2012). While the case was overturned on appeal for errors by the trial judge in the instructions to the jury, Alexander's case continues to face significant scrutiny. While out on bond, prosecutors argued that she violated the conditions of her house arrest, even though her requests to leave her residence were approved by her case manager. She remains out on bond until her new trial (Hannan, 2014). The court is currently considering whether Alexander will be allowed to seek a hearing under Florida's Stand Your Ground Law as part of her retrial in this case (Whitaker, 2014).

Another case of self-defense that has drawn recent attention involves Sara Kruzan. In 1995, Kruzan was only 16 years old when she was convicted of first-degree murder and sentenced to life without the possibility

(Continued)

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of parole. She had no juvenile record and had been an honor student as a young child. The victim was her pimp, a 31-year-old man named G. G. Howard who had begun grooming Sara when she was only 11 years old and had been sexually trafficking her for the past four years (Sharma, 2013). Even though her age made it possible for the case to be tried in juvenile court (where the maximum sentence would have resulted in her incarceration until age 25), prosecutors transferred her case to criminal court where she was tried as an adult. In January 2011, new legislation was enacted that allowed for the reconsideration of juvenile cases where life sentences were handed down. Following the new law, then-Governor Schwarzenegger granted clemency to Kruzan and commuted her [life without parole] LWOP sentence to 25 years with the possibility of parole. Additional legislation signed into law by Governor Jerry Brown required parole boards to give special considerations in parole decisions involving juvenile offenders who were tried as adults and who had served at least fifteen years of their sentences. After serving nineteen years, Kruzan was paroled in part due to these new policies (St. John, 2013).

In both of these cases, public attention played a significant role in raising awareness about these cases. Sara Kruzan was featured in social action campaigns by Abolish Slavery and Human Rights Watch and drew the attention of lawmakers who were seeking changes in how juvenile cases were handled. Kruzan has become the face for thousands of youth who are serving sentences for crimes they committed as juveniles (De Atley, 2013). In contrast, Alexander's story has drawn significant criticism, and the treatment of her case has been compared to that of George Zimmerman, who during the same time was considering Florida's Stand Your Ground Law as part of his defense in the Trayvon Martin homicide. In expressing her dissatisfaction of the decision to retry Alexander, Florida Congresswoman Corrine Brown made the following remarks: "The Florida criminal justice system has sent two clear messages today. . . . One is that if women who are victims of domestic violence try to protect themselves, the Stand Your Ground Law will not apply to them. . . . The second message is that if you are black, the system will treat you differently" (Dahl, 2012).

Much of the fascination about female violent crime stems from how these crimes are portrayed by popular culture. The cable television show *Snapped* (Oxygen network) focuses on true crime cases of women who kill and their motivations for crime. Movie story lines have included both fictional and "ripped from the headlines" examples of women who stalk, torture, and murder their victims. The 1987 film *Fatal Attraction* tells the story of Alex (portrayed by Glenn Close) who obsesses over her married lover Dan (played by Michael Douglas). Alex engages in all sorts of crimes toward Dan, including pouring acid on his car and killing the family rabbit (Maslin, 1987). The Broadway show (and film adaption) *Chicago* tells the story of Velma Kelly and Roxie Hart who are arrested for the murders of their paramours. The backdrop for this story came from several true crime cases from the 1920s where women were tried and ultimately acquitted for killing their husbands or lovers. These cases were sensationalized in local newspapers, and these women became celebrities throughout their trials (Perry, 2010). Even popular song lyrics draw attention (and justify) the actions of women who damage the side panel, vandalize its interior, and slash the tires of their cheating boyfriend's car (*Before He Cheats*).

Beyond the Hollywood portrayals of violence by women, the public is fascinated by the real world examples of women who kill. Consider the case of Pamela Smart. Twenty-two years old and married after a quick courtship, she and her husband Gregory Smart had been having significant problems in their marriage and they began to spend time apart. Pamela began spending time outside of her job at Winnacunnet High School

with several students. She ultimately began an intimate relationship with one of these youth, William “Billy” Flynn. On May 1, 1990, Smart arrived at her home in Derry, New Hampshire, after the workday to find her husband Gregory dead of a bullet wound to the head. The case immediately aroused the suspicions of the local police. While the crime scene appeared to be staged to look like a robbery gone bad, Gregory Smart had been killed execution style. While Pam had an alibi at the time of the murder, police began to suspect that she was involved in her husband’s murder. An anonymous call to the police suggested that Pam had orchestrated the killing. Billy Flynn and two of his friends were arrested for murder. Although the police believed they had the individuals who were responsible for carrying out the murder, they conducted audio surveillance on Pam Smart, where she admitted details of planning the murder of her husband with Flynn (Rideout, 2007). Billy Flynn testified against Smart that she convinced him to murder her husband so that they could be together (Dinan, 2005). While Flynn was sentenced to 40 years to life, Pamela Smart received a sentence of life without the possibility of parole.

The trial of Pamela Smart gained national attention, and it was the first to be televised on the cable television channel Court TV (Rideout, 2007). By the time the trial began, there were over 400 various articles written about the case in local and national newspapers. By the end of the trial, this number approached 1,200. These articles portrayed Flynn as “hot for teacher” and Smart as seducing her young student (even though Smart was an administrator for the school district and not a teacher). They also described Smart’s cold demeanor during the trial, labeling her as the *Ice Princess* (Lyons, 2006). This real life case became iconized by the movie *To Die For* starring Nicole Kidman and Joaquin Phoenix.

A more contemporary example of the media’s fascination with a female murder trial is the case of Casey Anthony, who was tried for the 2008 murder of her 2-year-old daughter Caylee in Orange County, Florida. The police began to suspect Anthony after several discrepancies in her story regarding her daughter’s disappearance. Anthony had alleged that Caylee was kidnapped by her nanny (Zenaida Fernandez-Gonzalez), who it was later determined never existed. In addition, Anthony had not reported her daughter missing, which further raised the suspicions of her family and the police. Caylee’s decomposed body was found in a wooded area on December 11, 2008 (Casey Anthony, 2014).

Casey Anthony’s trial began in June 2011 with significant media attention. In portraying Anthony as responsible for her daughter’s death, the state linked [the death to] a search on Casey’s computer for chloroform. Remnants of this toxic chemical were found in the trunk of Anthony’s car, coupled with the smell of decomposing waste. Anthony was also described as an out of control party animal that did not want to be a mother. However, there was no evidence that directly linked Anthony to the murder of her daughter (Alvarez, 2011). Following her acquittal in July 2011, Anthony’s attorneys vilified the press for their role in creating a sensationalized image of Casey to the public that assumed her guilt. However, newspapers were not the only ones to blame for these behaviors. Like Pamela Smart, the trial of Casey Anthony was televised. Twenty years later, however, there are many other sources of information that dominate the public perceptions of crime. These included a live video feed online of the trial, numerous Facebook pages in the names of Casey and her daughter, and even a Twitter account managed by the Ninth Judicial Circuit Court of Florida (Cloud, 2011). This level of intimate accessibility allowed the public to feel as if they were a part of the trial experience and had a personal investment in its outcome. Indeed, the public outcry over Anthony’s acquittal was significant. “Because many American murder cases, such as the Casey Anthony trial, are shown on television, they sometimes appear to the public as if they were reality television shows. There is great disappointment, therefore, when the result is a verdict of not guilty” (Dershowitz, 2011, para 8). Not surprisingly, the public’s fascination with women who engage in crimes of violence appears to have increased with the times as there are now multiple sources through which one can satisfy their desires for this dramatized portrayal of crime and justice. These themes were once again displayed in the case of Jodi Arias.

CASE STUDY

Spotlight on the *State v. Jodi Arias*

Violence. Murder. Lies. And a woman behind it all. The case of Jodi Arias had everything it needed to be a television movie. Yet this was a real case that was set on fire by the media. Over the course of her four-month trial, every moment of the trial was broadcast on cable television. In addition, there was no shortage of "legal experts" waiting to give their opinion on the events of the day, the evidence presented, or the demeanor of the defendant. Arias was charged and ultimately convicted for the murder of her boyfriend, Travis Alexander. Alexander was found in his shower where he had been stabbed 27 times, his throat had been slit, and he had been shot in the head. This was no simple murder but rather an act of extreme aggression as any one of these wounds would have resulted in his death. Yet the excessive nature of the crime drew the attention of the media. Arias was the perfect candidate for this media frenzy as she had changed her story about the crime several times. At first, she denied any involvement in his murder. Later, she alleged that she and Alexander had been attacked by two masked intruders who murdered Travis, but allowed her to live. During the trial, her story was amended once again to one of self-defense. Jodi asserted that Travis Alexander had frequently abused her throughout their relationship, and she killed him during one of these attacks. However, she claimed that she did not remember the specific events of his death and that she had blocked out these events due to her emotional trauma (Sholchet, 2013). One of the particularly sensationalized parts of the trial involved Arias own testimony, which lasted 18 days. Under Arizona law, members of the jury are allowed to submit questions to the accused should they choose to take the stand in their own defense. "Some of the questions seemed to serve no other purpose but to mock Arias and illustrate the jurors' annoyance with her claims" (Fagel, 2013). While she was convicted of first-degree murder, the same jury was unable to come to a verdict on whether Arias should be given the death penalty.

Mothers Who Kill Their Children

While the crime of **filicide** is a rare occurrence, it raises significant attention in the media. The case of Andrea Yates is one of the most identifiable cases of filicide in the 21st century. After her husband left for work on June 20, 2001, Yates proceeded to drown each of her five children one at a time in the bathtub of the family home. Her case illustrates several factors that are common to incidents of maternal filicide. Yates had a history of mental health issues, including bipolar disorder, and she had been hospitalized in the past for major depression. She was the primary caretaker for her children and was responsible for homeschooling the older children. She and her husband were devout evangelical Methodists. Yates indicated that she felt inadequate as a mother and wife, believed that her children were spiritually damaged, and stated that she was directed by the voice of Satan to kill her children (Spinelli, 2004).

The case involving the children of Andrea Yates is just one tragic example of a mother engaging in filicide, or the killing of her children. There are several different categories of filicide. **Neonaticide** refers to an act of homicide during the first 24 hours after birth, compared to cases of **infanticide**, which includes acts whereby a parent kills his or her child within the first year of life. Here, the age of the child distinguishes these cases from general acts of filicide, which include the homicide of children older than 1 year of age by their parent. While the practice of filicide does not exclude the murder of a child by its father, mothers make up the majority of offenders in cases of infanticide and neonaticide.

What leads a woman to kill her child? There are several different explanations for this behavior. Research by Resnick (1970) distinguishes five different categories of infanticide. The first category represents cases where the infant was killed for **altruistic** reasons. In these incidents, the mother believes that it is in the best interests of the child to be dead and that the mother is doing a good thing by killing the child. Here, the mother believes (whether real or imagined) that the child is suffering in some way and that the child's pain should end. Based on Resnick's (1970) typology, Yates would be identified as a mother who kills her children out of altruistic reasons. A review of Yates's case indicates two themes common to altruistic filicide. The first theme reflects the pressure that exists in society for women to be good mothers. For Yates, this pressure was influenced by her religious fundamentalism, which placed the importance of the spiritual life of her children under her responsibility. The pressure to be a perfect mother was exacerbated by her history of mental illness. The second theme reflected the pressure of bearing the sole responsibility to care for the children. Here, Yates expressed feeling overwhelmed by the demands of their children's personal, academic, and spiritual needs, in addition to the responsibilities of caring for the family home. She also lacked any support from outside of the family, which further contributed to her feelings of being overburdened (West & Lichtenstein, 2006).

The second category in Resnick's typology refers to the killing of a child by an acutely psychotic woman. These cases are closely linked with explanations of postpartum psychosis where the mother suffers from a severe case of mental illness and may be unaware of her action or be unable to appreciate the wrongfulness of her behaviors. Examples of this type of filicide may involve a woman who hears voices that tell her that she needs to harm her child. The third category represents the killing of an unwanted infant. In many cases, these are cases of neonaticide. Research indicates that there are similar characteristics within the cases of mothers who kill their children within their first day of life. These women tend to be unmarried, under the age of 25, and generally to conceal their pregnancy from friends and family. Some women may acknowledge that they are pregnant, but their lack of actions toward preparing for the birth of the child indicate that they may be in denial that they may soon give birth. Others fail to acknowledge that they are pregnant and explain away the symptoms of pregnancy (Miller, 2003). They typically give birth without medical intervention and generally do not receive any form of prenatal care. The majority of these women do not suffer from any form of mental illness, which would help to explain the death of their children. Instead, most of the cases of homicide of the infant are simply a result of an unwanted pregnancy. In these instances, the children are typically killed by strangulation, drowning, or suffocation (Meyer & Oberman, 2001). The fourth category involves the "accidental" death of a child following incidents of significant child abuse and maltreatment. Often, the death of a child occurs after a long period of abuse. The fifth category represents cases where the death of a child is used as an act of ultimate revenge against another. In many cases, these vengeful acts are against the spouse and father of the child (Resnick, 1970).

Mothers who kill their children present a significant challenge to the cultural ideals of femininity and motherhood. Society dictates that mothers should love and care for their children, behave in a loving and nurturing manner, and not cause them harm or place their lives in danger. In many cases, the presence of a psychological disorder makes it easier for society to understand that a mother could hurt her child. Information on postpartum syndromes is used at a variety of different stages of the criminal justice process. Evidence of psychosis may be used to determine whether a defendant is legally competent to participate in the criminal proceedings against her. However, this stage is temporary, as the woman would be placed in a treatment facility until such a time that she is competent to stand trial. Given that postpartum syndromes are generally limited to a short period of time (compared to other forms of psychiatric diagnoses), these court proceedings would be delayed only temporarily.

More often, information about postpartum syndromes is used as evidence to exclude the culpability of the woman during a trial proceeding. In some states, this evidence forms the basis of a verdict of "not guilty by reason of insanity." Here, the courts assess whether the defendant knew that what she was doing at the time of the crime was wrong. "The insanity defense enables female violence to coexist comfortably with traditional notions of femininity. It also promotes empathy toward violent women, whose aberrance becomes a result of external factors rather than

conscious choice” (Stangle, 2008, p. 709). In cases where an insanity defense is either not available or is unsuccessful, evidence of postpartum syndromes can be used to argue for the diminished capacity of the offender.

A third option allows for courts to find someone guilty but mentally ill (GBMI). Here, the defendant is found guilty of the crime, but the court may mitigate the criminal sentence to acknowledge the woman’s mental health status. For many offenders, this distinction can allow them to serve a portion of their sentence in a treatment hospital or related facility (Proano-Raps & Meyer, 2003). While Andrea Yates was convicted of murder and sentenced to 40 years to life by the state of Texas in 2002, her conviction was later overturned. In her second trial, she was found not guilty by reason of insanity and was committed to a state mental health facility for treatment.

Summary

- Women engage in every category of crime, yet their rates of offending are significantly lower than male offending practices.
- Regardless of race, ethnicity, or class, women have similar pathways to addiction: depression, abuse, and social and economic pressures.
- For many women, entry into addiction is rooted in early trauma: Drugs are used for escape, and prostitution and property crimes are then committed for survival.
- The war on drugs has led to increased incarceration rates for both men and women but has had particularly damaging effects for women.
- Women in prostitution face significant mental and physical health issues as a result of their time on the streets. These issues lead to significant challenges as they try to exit prostitution and make a new life off the streets.
- Women are most likely to commit property-based offenses.
- There are several different reasons why mothers may kill their children, but not all involve issues of mental illness.
- Sexuality can be a component of the gang life for some girls, but it is not necessarily the experience for all girls involved in gangs.
- Although female perpetrated homicide is rare, it is generally sensationalized in the media when it occurs.

KEY TERMS

Altruistic	Neonaticide	Street prostitution
Filicide	Post-traumatic stress disorder (PTSD)	Walking the line
Infanticide	Pulling a train	

DISCUSSION QUESTIONS

1. Why is the media obsessed with the image of the female offender? What implications does this have on understanding the realities of female offending?
2. What does research say about the gender gap in offending?
3. How have drug addiction and the war on drugs become a gendered experience?
4. How are drugs, property crimes, and prostitution connected for many female offenders on the streets?

5. What are the risk factors for prostitution? How do these issues affect a woman's ability to exit the streets?
6. Why are jurisdictions reluctant to legalize or decriminalize prostitution?
7. Why do women engage in property offenses?
8. What role does mental illness play in cases of women who kill their children?
9. How do girls use their gender within the gang context?
10. Discuss the types of violent crimes in which women most typically engage.

WEB RESOURCES

Children of the Night: <http://www.childrenofthenight.org>

National Gang Center: <http://www.nationalgangcenter.gov/>

Prostitutes Education Network: <http://www.bayswan.org>

Prostitution Research and Education: <http://www.prostitutionresearch.com>

SAMHSA Center for Substance Abuse Treatment: <http://www.samhsa.gov/about/csat.aspx>

SAMHSA National Center for Trauma-Informed Care: <http://www.samhsa.gov/nctic/>

The Sentencing Project: <http://www.sentencingproject.org>

Women and Gender in the Drug War: <http://www.drugpolicy.org/communities/women>

Visit www.sagepub.com/mallicoate to access additional study tools including eFlashcards, web quizzes, web resources, video resources, and SAGE journal articles.

Reading 15

In the section, you learned how issues with drug use and addiction can contribute to women's criminality. In this article by Drs. Ryder and Brisgone, you'll hear from two groups: women who experienced addiction during the crack cocaine era and girls who grew up with parents addicted to crack during this time frame.

Cracked Perspectives

Reflections of Women and Girls in the Aftermath of the Crack Cocaine Era

Judith A. Ryder and Regina E. Brisgone

In 1983, a new, cheap version of cocaine was disproportionately introduced into poor African American neighborhoods across the United States, where its use quickly expanded. Within only a few years, crack cocaine was entrenched in inner-city New York where it remained popular throughout the 1990s (Johnson, Dunlap, & Tourigny, 2000).¹ In the early years of that decade, however, both national surveys of arrestees and ethnographic neighborhood studies confirmed a significant transition: Inner-city youths preferred marijuana to crack and other hard drugs (Curtis, 1998; Furst, Johnson, Dunlap, & Curtis, 1999; Hamid, 1992). The transition was hailed with cautious optimism and speculation that because the younger generation was not using crack or heroin, youths may not “suffer the severe health and legal problems associated with those [hard] drugs” (Golub, Johnson, Dunlap, & Sifaneck, 2004, p. 362). The current project augments these findings by analyzing in-depth interviews with two generations of females who lived through this devastating period. We confirm the lack of crack use among female

youths but find excessive alcohol and marijuana use. In addition, our analysis reveals disrupted emotional attachments between women and their children and concurrent traumatic experiences among the girls. We explore how this potent combination may have contributed to girls' involvement in serious delinquency.

Research on drug use in the Crack Era and the so-called Marijuana/Blunt Era that followed (Johnson, Golub, & Dunlap, 2000) is based primarily on studies of men and boys and generally uses epidemiological methods that may be insufficient for flagging the vulnerabilities of drug-involved females (Maher, 2002). As a result, little is known about how the Crack Era affected the lives of drug-using women and girls. The current project brings a gendered perspective to the generational drug research by analyzing commonalities and differences in female drug involvement. We extend prior research by exploring the ways in which drug involvement shaped family relationships and contributed to the weakening of emotional bonds between mothers and children during a turbulent

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social and economic period. We do not make causal claims, but our work is informed by the psychological construct of attachment (Bowlby, 1988) that allows for a developmental understanding of the effects of the Crack Era on the health and legal problems of a younger generation. Our analysis of the narratives of females born into two distinct drug eras is a pooled case comparison, a method situated in a tradition of cross-study comparative analysis. West and Oldfather (1995) liken pooled case comparison to “the overlaying of one transparency on another” (p. 454) in an effort to understand both groups more fully while maintaining the primacy of each group’s voice. Finally, we propose recommendations for improving treatment services to better address the needs of drug-using women and girls.



Women and Children in the Crack Era

We examine female drug use within a broad historical context, using the concept of *drug eras*, a term that reflects the fluctuations of disease epidemics but with an emphasis on the cultural aspects of the phenomenon. The term describes a point in a historical period when a substance is introduced, adopted, and “institutionalized within certain segments of the population” (Johnson, Golub, & Dunlap, 2000, p. 21). The drug era model uses aggregated (mostly male) arrest data to delineate generational cohorts based on date of birth. The model marks a distinct historical break between the drug-use patterns of those born between 1955 and 1969 (Cocaine Crack Era) and those born since 1970 (Marijuana/Blunts Era; Johnson, Golub, & Dunlap, 2000).

When crack cocaine hit the streets of America in the 1980s, inner-city communities were already suffering from the prior decade’s economic dislocations and widespread unemployment (Small & Newman, 2001; Wilson, 1996). With manufacturing jobs gone and large numbers of men out of work, the number of female head-of-households dramatically increased, and more women became sole caregivers of dependent children (Sampson, 1987; Wilson, 1987). At the same time, women were drawn to crack cocaine in unprecedented numbers, a trend attributed to the drug’s low cost and social perceptions of smoking (as opposed to injecting) as a less intrusive

method of drug use and more in keeping with established gender norms (Sterk, 1999).

Despite an increase in the number of female primary breadwinners and the number of women using crack, little research investigates this intersection or the effect of crack-era drug dependency on parent–child relationships or includes children’s perspectives. Maher and Hudson (2007) conducted an important metasynthesis of the qualitative literature on women *working* in the illegal drug economy but did not include women’s own drug use and identified only two themes pertaining to family relationships and children: the importance of kinship structures (Adler, 1985; Denton, 2001; Waldorf, Reinerman, & Murphy, 1991) and women’s ability to structure their drug dealer role around parental responsibilities (Dunlap & Johnson, 1996; Morgan & Joe, 1996; Sterk, 1999). Other research specific to female drug use details how, as women’s crack dependency increased, their lives became more transient and chaotic, pressuring the women to seek the aid of social networks (Brisgone, 2008; Wilson & Tolson, 1990). By the 1980s, however, kin networks that traditionally had supported impoverished families were economically and emotionally worn down by long-term unemployment, punitive criminal justice policies, and the ravages of HIV/AIDS (Miller-Cribbs & Farber, 2008). Thus, children of crack-using mothers were often left without supportive adults to care for them, and some were placed in the care and custody of the state, solidifying the disruption in the parent–child relationship.

Hardesty and Black’s (1999) study of Latina addicts in recovery is one of only a few to explore drug dependency and parent–child relationships. Women discussed the significant effort they employed to maintain their self-image as “good” mothers in the context of Puerto Rican culture, even as their drug activities became all engrossing. In another study, recovering heroin addicts reflected on the consequences of parental drug use, including parents’ inability to “be there” to meet children’s material and emotional needs, family violence, and family dissolution (McKeganey, Barnard, & McIntosh, 2002).

Distinct from the few studies that analyze parental perspectives on drug use is an ethnographic study of mother–daughter pairs from two crack-user households in New York City’s Central Harlem (Dunlap, Stürzenhofecker, Sanabria, & Johnson, 2004). The paired study exposes disruptions in parent–child emotional

bonds and suggests that mothers' crack use contributed to the intergenerational cycle of "child abuse, neglect, and abandonment of parental responsibilities" (Dunlap, Golub, & Johnson, 2006, p. 133). Although children born to the Crack Generation did not use the drug, they continued to face major deficits arising from their childhoods. These analyses stop short, however, of exploring how disruptions in the parent-child relationship, and other traumatic events, may have contributed to children's later involvement in delinquency and violence.

The Role of Disrupted Attachments

A primary purpose of the current project is to explore the dynamics underlying parent-child relationships among drug-using women and girls. In particular, we sought to understand how the disruption of emotional attachments between these dyads might contribute to girls' problem behaviors. Many criminological theories stress the importance of social bonds and relationships and some, such as developmental life-course theories, explicitly examine the complexities and messiness of *lives in social context*. However, such theories are primarily supported by research on boys and men and thus are likely to miss gendered behaviors and situations.² Life events such as sexual abuse and assault, which feminist scholarship has demonstrated to be much more extensive in the lives of female offenders than among male offenders, are rarely examined despite the potential to negatively redirect victims' life trajectories. The feminist pathway perspective stresses the importance of social bonds and relationships and specifically connects girls' traumatic experiences, such as sexual abuse, with substance abuse and arrests for violent offending (Daly, 1992; Gaarder & Belknap, 2002; Schaffner, 2007; Siegel & Williams, 2003). Both developmental life course and the feminist pathway perspective help, but are not sufficient, to explain how childhood events and experiences might contribute to a young woman adopting delinquent behaviors herself.

In an effort to understand the processes underlying the health and legal problems of a generation of girls growing up during the Crack Era, we place the narratives of women and girls within a developmental framework and employ the psychological construct of attachment. As

conceptualized by John Bowlby and others (1973/1969, 1988; Ainsworth, Blehar, Waters, & Wall, 1978), attachment is considered an innate human need. This counters the use of the term in the criminological literature, particularly control theories, that consider attachment the result of proper socialization (e.g., Gottfredson & Hirschi, 1990). Bowlby's attachment theory proposes that children need more than food and shelter; they require security: "a quality of care . . . sufficiently responsive to the child's needs to alleviate anxiety and engender a feeling of being understood" (Ansbro, 2008, p. 234). Attachment behavior is designed to care for and protect the young by forming an affective bond between children and significant others. Furthermore, the role of the caregiver in nurturing and supporting the child's emotional bonds is critical to healthy development across the life span (Cernkovich & Giordano, 1987; Fonagy, 2004; Sroufe & Fleeson, 1986).

When a primary caregiver abandons, neglects, or abuses a child, attachment bonds are weakened. With attachment needs thus unmet, the child becomes emotionally vulnerable and will exhibit a predictable pattern of protest and despair and—without the intervention of loving and attuned adults—detachment (Ainsworth, 1972; Bowlby, 1973/1969; Margolin & John, 1997). This need for connection influences the course of the child's later development, with much research demonstrating that detachment in childhood is associated with long-term negative outcomes (Hayslett-McCall & Bernard, 2002). The detached child may psychically wall off her needs, even as her yearning for connection continues, or she may still cling to those who have caused the trauma because her terror of being abandoned exceeds her terror of the abuser. She also may seek connection to others through violence, sexual activity, or substance abuse and be comforted by an abusive attachment because it is familiar and similar to the original love object (Robinson, 2011; Ryder, 2007; Shengold, 1999; Smith & Thornberry, 1995). Although such behaviors are maladaptive and potentially destructive, a trauma-saturated child may not see the distinction (Herman, 1997).

Narrative Reflections

The current project encompasses two small groups of drug-using females. We begin with the adult women who were crack and heroin users and (most of them) primary

caregivers of children. We add to this the perspective of adolescent girls, a rare dimension even in qualitative studies centered entirely on females (Lopez, Katsulis, & Robillard, 2009, cited in McKeganey et al., 2002). The project evolved from the authors' informal discussions about our separate National Institute on Drug Abuse (NIDA)-funded studies and how, in theory, the adult women could be mothers of the teenaged girls.³ With some common focus areas and similar methodology, each study includes rich data on drug involvement and the importance of family relationships. Both studies posed questions about family functioning, community characteristics, traumatic events, and illegal activities including drug use and trafficking. The adult cohort also answered questions about prostitution activity and periods in jail and drug treatment. Brisgone interviewed the women between 1998 and 2001 as part of an ethnographic study of heavy drug users involved in prostitution. Interviews were conducted in various settings (e.g., streets, HIV outreach offices, and county jail). In her study, Ryder completed face-to-face, semistructured interviews with girls who had been remanded to custody for a violent offense. Interviews were conducted in 1996 in four state-run, juvenile residential facilities.

The two samples, or "cohorts," are primarily females of color, of low socioeconomic status, and from the New York City metropolitan area. They differ from one another, however, in ways predicted by larger, mostly male, studies of the Crack Era and subsequent Marijuana/Blunts Era. In addition to variation in drug choice, of particular interest is the age differential. Each of our two data sets fit squarely within the generational categories established in earlier, mostly quantitative studies (Johnson, Golub, & Dunlap, 2000). Both adults and juveniles told of extensive drug involvement and strained family relationships and, although their perspectives sometimes overlapped, they just as frequently diverged. The spaces where the two groups differed revealed a poignant yearning for connection. As we continued to discuss our work and findings, we dubbed these differing viewpoints the "what I'd tell my daughter, what my mom should have known" model, and considered the dynamics of an imaginary dialogue between the generations. Findings from the separate projects caused us to think about how the female narratives might enhance existing knowledge about the effects of the Crack Era.

Selected demographics are presented in Reading Table 15.1. Each cohort falls within previously established generational drug eras, based on year of birth (Johnson, Golub, & Dunlap, 2000). The women of the Crack Era were born from 1958 through 1971; at the height of the era in 1989, their median age was 23 years. The postcrack cohort was born from 1980 through 1983, placing them a decade into the so-called Marijuana/Blunts Era. In 1989 when the Crack Era peaked, the girls' median age was only 8 years. More than three fourths of the adult females were Black, and approximately one fifth was Hispanic; three fourths of the girls self-identified as Black or Hispanic. Most of the women had at least one child ($n = 51$); the median number of children per woman was two, with a range of one to nine children. Three of the girls had one child. Forty-six women were arrested on prostitution charges, and nearly a fourth (24%) had also been charged with drug sales. The girls were adjudicated and remanded to custody for assault (79%) or robbery (21%).

In presenting portions of the narratives, we examine these complicated relationships first from one side of the mirror and then from the other. On one side sit adult women who discuss how much, how often, and what drugs they used during their adult years and how they perceived the impact of their actions on family relationships, particularly those with their dependent children. On the other side, adolescent girls look back a short distance to review the years growing up in crack-affected families, linked to histories of traumatic loss and victimization.

Drug Involvement

The adult cohort (Crack Era) is characterized by pervasive drug use in an era of historically high female drug use, a traditional outlook regarding dependence on men, and participation in a street drug network perceived as menacing and ruthless. The women began their drug careers with crack or heroin and were abusing the drugs, on average, 4 years before they began prostituting. The narratives of the juvenile cohort (Marijuana/Blunt Era) indicate excessive use of marijuana and alcohol, typically initiated with family members; participation in drug sales; and involvement with street violence. Drug Involvement describes drug initiation, drug use, and drug-related activities.

Reading Table 15.1 Selected Demographics of the Two Cohorts

	Adult Women (N = 58)	Juvenile Girls (N = 24)
Period of birth	1958–1971	1980–1983
Median age at height of Crack Era (1989)	23 years	8 years
Age (Range [Median])	26–40 years (32 years)	13–16 years (15 years)
Race/ethnicity		
Black	78%	58%
Hispanic/Latina	19%	17%
Biracial/multiracial	—	17%
White	3%	8%
Any children	88%	12.5%
Used regularly (at least 3–4 times a week)	Cocaine 19%	Marijuana 71%
	Heroin 12%	Alcohol 33%
	Both cocaine and heroin 69%	Both marijuana and alcohol 33%

Women's Drug Initiation

The women generally initiated or progressed into hard drug use with intimate partners in the context of family life. Irraida, a poly-drug user, was a new wife and mother when she started using drugs with her husband.

He would do everything for me. He took care of me and my drug habit. . . . I was 18 [when] I had met him. . . . I had no idea about drugs. He introduced me to it. . . . That's how I started using. He didn't force me to do it, and he told me what it was like. . . . Most likely I never would've done it if I hadn't met him.

Using drugs with male partners was considered romantic and protective, something all the women desired. Women previously in such relationships looked back longingly and were always on the outlook to re-create them. Shawnice spoke of this yearning: "I didn't ever have to come outside [to prostitute]. He would bring me my dope. I could smoke

all the cocaine I could. . . . That's what I want to go back to." Many who started with cocaine before trying heroin did not realize their addiction until it was too late: "I liked the warm feeling [of heroin]. . . . I didn't want to get high every day, but I did. . . . Then the girl told me I had a habit. Habit? Habit? What habit?" Women generally moved swiftly from initiation to drug dependence as their habit came to match that of their older, heavy drug-using male partners.

Girl's Drug Initiation

For most girls, drug use began at home. Nearly 80% said that someone in the household drank alcohol or used drugs, and mothers were most commonly mentioned.⁴ Other users in the household included mothers' partners, relatives, and siblings. The girls' median initial age for trying tobacco and alcohol was 10 years old; the median initial age for trying marijuana was 12 years old. None of the girls considered initiation a significant event but rather viewed it as a natural progression. Sixteen-year-old Natalie described how she started using marijuana with relatives:

I was used to people around me smoking and like my family being out in the room, catch a contact, so I just started smoking it. . . . I felt like I was already smoking it because I was already in the room where my aunt and uncle were smoking away.

Joanne began smoking marijuana with her mother and siblings “because I guess, if you watch somebody use it for long enough you are gonna want to try it and see how it is.” Raised by her grandfather and father, Michelle recalled drinking small glasses of rum “for a chest cold, it broke the cold up.” She was about 7 years old when her father gave her beer but, she noted, “he didn’t give it to me for colds, he just gave it to me to drink.” Her father also introduced her to marijuana, and she continued to drink and smoke regularly on her own: “I was hooked on it some. . . . I was just high almost every day.”

Women’s Drug Use

Overall, the women were dependent on cocaine and physically addicted to heroin with its debilitating withdrawals. Cocaine was generally smoked and heroin sniffed, but nearly a third of the women injected at least some of the time. Women used from 2 to 10 packets (bags) of heroin a day; cocaine use ranged from less than one to more than 10 vials daily. Cocaine and poly-drug users followed a pattern of bingeing and resting.

Poly-drug users relied on heroin to level out their mood after a cocaine binge and used cocaine to sharpen their concentration on the street. Said Boobie, “It’s like a . . . roller-coaster all the time.” Christina explained further,

With a crack hit, five minutes later you’re running and chasing that feeling, that high. If you do a lot of coke, you’re going to need the dope because the dope eats the coke. If you do a lot of crack, your heart gets all jittery and you need a lot of dope so you can calm down.

Baby, a poly-drug user and mother of a teenage daughter, was on the streets for a decade. She described how her drug use eliminated most structure and routine: “People like you, you live around a calendar. Me, I get up, and I

don’t know what I’m going to do. I’m not on a clock. . . . I use drugs and then I forget. . . . Time flies when you’re in a drug haze.” Although women did abstain when forced (i.e., in jail), most relapsed unless they broke from the drug scene entirely.

Girls’ Drug Use

In stark contrast to the women’s cohort, none of the girls reported ever having tried crack, but two tried cocaine in powder form. Jennifer claimed, “The older people smoke crack, it’s not . . . you don’t see no younger kids that smoke crack.” Furthermore, the girls had contempt for those who did use the drug. As one girl declared, “Crack heads are crazy. They’ll do anything.” Although all girls renounced crack, four had tried hallucinogens and three had tried PCP [phencyclidine, e.g., angel dust]. None reported trying heroin or injecting any drug. A third of the girls drank alcohol on a regular basis (at least 3 to 4 days a week), and nearly three fourths smoked marijuana regularly during the year prior to incarceration. Often, marijuana was smoked as a blunt, wrapped inside a cigar shell. Indicative of the extent of their use, a third of the girls regularly used *both* marijuana and alcohol. At home, in school, in the streets, regardless of the context, “everybody was doing, every teenager used marijuana and alcohol. That was like normal.”

Girls incorporated drug use into most of their activities. For example, alcohol and marijuana were a regular part of holidays and personal celebrations, such as birthdays, as well as upsetting or traumatic experiences, of which there were many. One 14-year-old described her response to the fatal shooting of her boyfriend.

We all got ripped at the funeral. I mean that was the first time I ever really got so drunk I could hardly even walk, I was so high I couldn’t even see straight. That was the first time. . . . I was already ripped and stuff, I was gone, I was like in another world.

Elena described how after being initiated into her female gang, members used copious amounts of marijuana and alcohol to commemorate “stepping up” through the ranks: “If you succeed when we did something violent you have to smoke at least 25 blunts so you could move up. We didn’t do nothing else. Well, oh yeah, we used to

drink.” The amounts of alcohol and marijuana reported by individual girls may be exaggerated, as some present themselves in a particular “pose,” but overall, the amounts are indicative of heavy usage (Majors & Billson, 1993).

Women’s Drug-Related Activities

Progression into hard drug use with men led women to a variety of drug-related criminal activities, including check fraud and drug sales, but particularly prostitution. In general, the women were inexperienced and had little heart for street crime. “I don’t like robbin’ and stealin’. I’m too chicken,” Irraida confessed. The few who did deal drugs found that as users they were poor handlers of both the drugs and money; many reported an arrest and/or jail time for drug sales. Sam, a former dealer on the run, explained, “I had to keep away from people who wanted to hurt me. . . . Being on drugs and being in these places put you in danger, and I’m a very scary person” (a local colloquialism for easily frightened). Women dealers also noted the hierarchical, gender-stratified nature of the market and the low-level, exploitive work opportunities. Tina dealt heroin with a younger man but believed such relationships oppressed women:

They [men] very rarely let women sell drugs. It’s because of male chauvinism. A robber try a woman quicker than a man. It’s dominance. I learned this back in college. Main thing: They don’t want women to get the power. Dealing is dangerous too. They want you to do 80% of the work.

Desiree believed male dealers took advantage of women who then suffered the consequences: “I think they [male drug managers] think we’re going to get it easier if we get caught. They just don’t know. If we get caught, just like them, we’re going to do that time.” Because women sold on the streets, they were more visible to police and more vulnerable to arrest than were men.

The women’s initiation to hard drug use fostered a relationship between intimacy and drugs and set a path toward street prostitution. Forty percent of the women began to prostitute when intimate partners were no longer available to provide their drugs because of a romantic breakup, incarceration, death, or the loss of the partner’s

means of obtaining drugs. Sugartoo, for example, started prostituting at age 32 when her boyfriend, a drug dealer, died during a gang fight in jail: “I’m a good person. I just started doing it [prostitution] since my old man passed. . . . It took me a long time to get used to it. I don’t like nothing about this running.” Prostitution was a pragmatic response to women’s relative inexperience in rough drug-using street scenes, combined with their urgent need for drugs. As Toni stated, “After [my kids] father took off, I wanted men for only one thing. I’d call up a john. I’d use men for my drug addiction. I’d get out there, take care of business, and get what I needed.” Pumpkin was adamant that she would never solicit except for her drug habit: “Of course not! I have an income—I work the [prostitution] stroll just for drugs.” Another woman explained, “If I didn’t have a habit I’d probably be working at something else. But I got a habit so the stroll is it.” All of the women reported street prostitution as their *main hustle* for drugs, and half of them said prostitution was their *exclusive* hustle for drugs.

Although most of the women rejected drug dealing and predatory crimes because of the perceived dangers, prostitution greatly increased their vulnerability to street violence. The women were prey to robbers, rapists, and murderers. They reported multiple victimizations especially when, because they were intoxicated or desperate for drugs, they solicited indiscriminately.

Girls’ Drug-Related Activities

The girls’ early familiarity with drug use facilitated access to people and opportunities in the illegal drug trade. Drug sales, drug use, and crime quickly became closely intertwined with daily activities. For example, Kathy and her friends “used to get together and go to the movies sometimes but mainly it was selling drugs and robberies.” Despite their disdain for crack users, the girls were very much involved in the sale of the popular street drug. More than two thirds had participated in some aspect of drug trafficking beginning at the median age of 12; with the exception of one girl, all were still active in the business during the year prior to custody. Generally, girls partnered with other girls or boyfriends and worked low-level jobs in small organizations under the auspices of male suppliers. Several managed to amass a fairly large amount of cash. The economic benefits were a

major enticement and, at least initially, mitigated safety concerns. One girl used her drug proceeds to rent a city ice-skating rink for the evening for all her friends. Royale, who desperately wanted a pair of sneakers she could not afford, told how she increased her purchasing power when she began selling crack:

... my cousin gave me some drugs to sell and he said this will get you it quick. And I did and I liked it because I got money real quick. Instead of buying my sneakers I bought my own stuff [drugs] and doubled my money and got more than one pair of sneakers!

Another girl explained that she began selling drugs as a way of obtaining household money for her alcohol- and drug-using mother.

Transactions were conducted primarily in public locales where, despite the high risk of arrest, many believed police were less likely to stop a girl. Young and generally optimistic, girls indicated that if stopped, "All I gotta do is, like, 'no sorry, but I'm a female, you can't do that.' You know, then, they couldn't search me." The girls did complain that "guys used to try to gype me and stuff," and many admitted that they had been shot at, physically threatened, and sexually assaulted. Thus, despite some success on their own, most girls eventually came to rely on older males for protection precisely because of their gender and age. This arrangement, however, put them at great disadvantage and exposed them to additional emotional, physical, and sexual harm.

Even with male "protectors," the work required girls to negotiate volatile and violent situations. As part of their tutelage, they learned to use force against others. Violence (for themselves and their clients) was the cost of not adhering to established business norms and conventions. In one instance, a girl said she "beat this crack head up so bad because she wouldn't pay us and she was sending people that we never seen before to our house..." Another young seller told of a nonpaying female customer who put "my life in jeopardy" when her earnings were short. Her male manager verbally threatened her, then gave her a gun and told her she had "better handle your business." The seller and her cousin shot the customer in the head. Minimizing the killing, the girl claimed, "You couldn't do nothing. She was a crack head anyway."



Family Relationships

The two cohorts each suffered from disruptions in their familial relationships. The women espoused conventional aspirations for family life but in their current circumstances failed to live up to them. Their erratic lifestyle and parenting practices created emotional distance between them and their families, especially their children. They believed traditional kinship networks could sufficiently provide for their children, yet this resource had worn thin. From the perspective of girls passed between and among the tattered network of caregivers, adults generated more harm than the interviewed mothers were able or willing to disclose. The girls tell of traumatic losses and emotional detachment, as well as physical and sexual violence—much of which was associated with maternal substance abuse and the lack of intervening, supportive caregivers. This section on Family Relationships describes family composition and structure and emotional connections.

Women's Family Composition and Structure

Though most women in the study were currently not married and not with their dependent children, more than one third reported that they either had been raised in a two-parent family or had raised their own children as part of a stable couple. They described families of origin with "stable enough" finances and parenting and portrayed their mothers as the glue that kept the family together and the ones who upheld mainstream values in difficult circumstances. Lena, for example, credits her mother with raising her two sons and keeping her from getting worse: "It's mainly because I have a mother who's there for me. Without her, God knows where I'd be." When the women were in their worst drug-using phases, they avoided family out of shame and to avoid conflicts that would prevent them from returning home in better times. Women were well aware of how far they had fallen from their own and their family's expectations and, like Sugartoo, remained concerned with others' perceptions: "I'm from an all-right family. I pray to God I never get caught out there soliciting. I'm afraid to [get caught] because of my family."

Most women had at least one child and maintained a committed relationship with the child's father—at least initially—but few were legally married. Of the 51 mothers,

22% were regular drug users when their first child was born. They relied on their family of origin to help raise the children when drug use and criminality forced them to relinquish parental roles. Circumstances forced the majority of the women to disperse their children among relatives so that many siblings were separated and frequently moved. Three fourths had surrendered custody of their children; nine women had ceded custody of at least one child to state child welfare authorities. The women described a pattern of drifting back and forth from their estranged families, and shifting alliances with men as their troubles waxed and waned. They were intermittently homeless or worse, bouncing from home to drug houses to abandoned warehouses as they pursued drugs and engaged in prostitution.

Girls' Family Composition and Structure

Girls depicted home as a shifting configuration of caregivers and locations. At some time in their lives, 71% of the girls had lived with adults other than a parent, residing in both kin and nonrelative foster care, residential treatment centers, and group homes. Locations changed when mothers went to jail or drug treatment, or families were evicted or forced to leave unsafe conditions. The household composition also changed when a mother's new husband or boyfriend arrived or girls ran away, deciding to stay with fathers, extended family, or friends. Mother-daughter separations could be brief stints or last for months—or even years—when mothers could or would not care for their daughters, and the children often were placed in foster care. Paula's description is typical of the cohort's residential instability.

I was back and forth because I was in—it depends—I would be in foster care, then I would be in group homes, then I would go AWOL, go to my house, . . . I don't know where my house—me saying my house—that meant I would go to my father's house. . . . Other times I would go to my boyfriend's house or my sister-in-law's house.

Women's Emotional Connections

Most of the women did not have custody of their children and in interviews avoided revealing the details of that loss.

Only two mentioned neglect or child abuse and revealed that the events triggered their drug abuse. Dinah said the state took her children because "their father molested them" and added that she had tried to hide and protect the children from him. Sunshine, a poly-drug user, was defensive: "I was falsely accused of child abuse." She added that the courts took custody of her children and gave them to her ex-husband. "I started drugs when my children were taken from me." Prostitution kept women on the streets all hours of the day and night, further disrupting relationships with their children. The lifestyle upset domestic routines and left little time or emotion for family. Too often, the women say, they promised to quit drugs and resume their parental role—only to fail—repeatedly dashing their children's hopes. Gina expressed her regret over relapsing and disappointing her children.

I was so ashamed. . . . I have beautiful children who I talk to all the time. . . . How many times are they going to put up with the same bullshit again? My kids know about my drug addiction. I don't want to lose them and I'm tired of losing me.

Lena echoed these sentiments: "I want to do something for their lives. They want a mommy who gets up with them in the morning and goes to bed at night. They're tired of their grandmother taking care of them."

Most women said they tried to visit their children regularly but also realized the need to stay away when they were heavily involved in drugs. They contributed financially when they could, handing over government checks or making family members official recipients of the aid for children, and using their illegal earnings for gifts and special occasions. Desiree, whose three young children stayed with her mother, said,

I try to see them every week. Now and then I see them more. I'll go with them to the park. On their birthdays I chip in and buy them a cake. If they're going on a school trip, I give them what they need.

Despite their love and attempts to bond with their children, the women recognized their inability to offset previously disrupted attachments and physical absences, and they worried about how their behavior affected the

children's life chances. Doreen had been gone for a year when, during a brief visit home, she was devastated to see her teenaged daughter's strong bond with the aunt who raised her.

Sometimes I feel like I made a mistake over there. Sometimes I know I did something right. I took my daughter over to my sister when she was 12 years old. Now she's 18 years old. . . . She calls me mommy, but she goes over and hugs my sister. It upsets me. She goes right over to her and talks with her like a mother.

Doreen's decision to leave her daughter was an act of love and protection.

Her schoolwork was suffering. She was staying up worrying about me. That's why I took her to my sister's house. I took her over there because I loved her. I didn't want nothing to happen to her. . . . I don't want her to go through what I have gone through.

Girls' Emotional Connections

The girls described physical and sexual violence in their homes and the numerous losses that strained relationships with their mothers and others entrusted with their well-being (Ryder, 2007). By the median age of only 10, three fourths had been physically abused, and 29% had been sexually abused by a family member; more than half had witnessed family physical abuse, and 13% had witnessed family sexual abuse. Girls told of seeing their mothers regularly attacked and beaten by male partners: "He tried to hit her and then I came out you know, I was screaming on him . . . he tried to hit her, he tried to beat her up." They also talked about the violence their mothers and others inflicted on them. One girl described her mother as "very abusive when she was drunk . . . yelling, throwing things. When she was high, she used to take the hangers and beat me with it."

The physical absence and psychological unavailability of mothers further disrupted girls' emotional attachments. Sometimes, a mother's whereabouts were unknown to her daughter. Paula's parents separated when she was an infant, and shortly thereafter, her mother left her with an aunt.

Paula said, "I don't know where she went, then she came back and got me later,"—when the girl was 3 years old. For the most part, however, girls reported that when their mothers were physically absent, it was because they were on the streets, incarcerated, or residing in a mental health or substance abuse facility. Fourteen-year-old Gina had only sporadic contact with her mother, having lived with relatives or in institutional settings most of her life. The girl explained that her mother "used to have a problem with drugs and alcohol and so she gave me to my grandmother." Another girl, Gayle, said her father died before she was born, and her mother was repeatedly incarcerated for selling drugs. Gayle described theirs as "a close relationship," but mother and daughter visited only intermittently: "If I would see her we would talk. We didn't see each other that often. She'll come see me like every six months."

Even when physically present, many mothers were incapable or unwilling to nurture girls' basic emotional needs. The dynamics of substance abuse were a primary contributor to such psychological unavailability. For example, Elena stated, "My mother's like anti-social. She don't like speaking to nobody. She just keeps her problems in. . . . I don't know, it was just the crack just really getting to her." Royale complained that her drug-using mother provided physical necessities but that an emotional void existed between them: "I ate regularly, lived in a regular house, like my mother would cook us dinner . . . it was OK, we, never, we didn't hardly talk 'cause my mother was on drugs so my brother had to take care of us." Joanne similarly confided that her mother's regular drug use and involvement with other users affected the mother-daughter relationship. Late night parties and constant visitors to the home kept the girl up and the mother estranged: ". . . when I got older it bothered me because it started to take more of the relationship out of all of us."

All the girls indicated that their victimizations and losses were exacerbated by the fact that they felt little parental attachment, and nearly a third said there was no one with whom they felt safe and secure. Most never told any of the people they lived with when something was bothering them. Instead, the girls learned to rely on themselves. Fourteen-year-old Jill acknowledged that despite the fact that her mother was present "to protect me and stuff, [I] . . . never felt safe with her. Maybe because we didn't have a good relationship." The lack of emotionally attuned adults to help girls integrate traumatic experiences

into their lives and fulfill their attachment needs is a likely contributor to their subsequent use of drugs and involvement in violent activities.

Discussion

In the early 1990s, crack cocaine use began to decline, even in the hardest hit, low-income, minority neighborhoods of New York City (Hamid, 1992). In a related trend, marijuana use was on the rise among individuals born since 1970. Some researchers believe this shift enhanced youths' prospects and limited health and legal risks because marijuana-blunt use tended to promote "conduct norms of controlled alcohol intake" and the sanctioning of "threatening or violent behavior" (Johnson, Golub, & Dunlap, 2000, p. 187). Based primarily on epidemiological studies of male drug patterns, the optimistic projections do not necessarily apply to behaviors and experiences of females. Our study provides the space to hear the stories of women and girls whose lives were shaped by the crack and marijuana drug eras and so posits a more nuanced, gendered perspective on drug involvement and family relationships. The women speak of a desire to explain the reality of their troubled lives and how, contrary to sensationalistic rhetoric about crack-using mothers, they loved and tried to care for their children (see Humphries, 1999; Logan, 1999; Reeves & Campbell, 1994). The girls, however, describe a host of traumatic experiences and describe their caregivers as emotionally and often physically absent. They wanted adults to understand that their mothers' problems, including those associated with illicit drug use, diminished their own chances to live a healthy and productive life. A mother's attempt to shield her daughter from a drug-centered life, for example, may be experienced by the daughter as abandonment and the disruption, or even severance, of primary attachment bonds. The combined narratives reflect a new perspective on the Crack Era and its aftermath by locating drug-related activities of females within the context of disrupted personal and family relationships.

The Gendered Nature of Drug Use

Growing up in families of the poor and working poor, the women had mainstream aspirations of employment and a family life. This vision dissipated, however, after the

women became intimately involved with male partners who helped initiate their long careers with crack and heroin. When legitimate work disappeared, personal relationships ended, and supply sources were lost, the women faced a crisis. In a panic of loss and drug cravings, the women chose prostitution to continue to finance their habits. As their drug use escalated and their economic and social stability deteriorated, the women became increasingly estranged from family life. Despite their inability to demonstrate their love for their children in a consistent and meaningful way, the women spoke repeatedly of wanting to "put things right." They struggled to love and protect their offspring as best they could, which sometimes meant leaving children with relatives or friends and acknowledging that at times it was best to stay away. The experience of losing a child, particularly in cases when children were placed with state authorities, presented an enormous challenge to the women's sense of self as a loving parent. The women served their own needs, but they also recognized that involvement with drugs and prostitution contributed to their diminished, or total abandonment of, parental responsibilities (Dunlap et al., 2004).

The girls' drug use patterns diverged from those of the adult women, as did their perceptions of adult caregivers' behaviors. This group of girls reported heavy, regular use of marijuana and alcohol. Typically, girls' drug use began when they were young children as a normal extension of family life, wherein adults regularly drank alcohol and smoked marijuana and crack cocaine. The girls' drug involvement quickly escalated and expanded into peer networks until heavy usage was fully integrated into routine activities and events. Family life, in addition to providing a setting for drug use, was violent and dangerous, where girls were subjected to multiple and repetitive traumatic events including physical and sexual abuse, loss of caregivers, and frequent relocations. Girls characterized their caregivers as emotionally detached and physically absent. Angered and shamed by their sense of loss and abandonment, girls engaged in physical violence, as well as crack cocaine sales where, under the "protection" of older male dealers, their experiences of victimization within the home were often replicated.

Although others have described the Marijuana Generation—the children of Crack Era parents—as "being reared in severely distressed households" (Johnson, Golub, & Dunlap, 2000, p. 185), little research

has investigated any further. In contrast to earlier, more hopeful predictions based on male data, the limited qualitative research on women and girls suggests that escalating drug abuse and imprisonment among adults of the Crack Era may have contributed to the subsequent problems of the next generation of girls (Males, 2010, p. 28). Our analysis of narrative data from two generations of females goes deeper to expose the underlying dynamics and suggests a developmental understanding of the younger generation's problems.

Both cohorts refer to the fragility of family relationships and, to varying degrees and from different perspectives, each reference loss, abandonment, neglect, and violence. Considered within the framework of attachment theory, such experiences weaken the bond between mothers and children. Despite the women's desire to care for their children, crack and heroin use interfered with their ability to do so, creating situations detrimental to strong mother-child bonds and to girls' emotional development. Adults' behaviors left the girls in this study feeling alone and seemingly unloved. Without other adults to support and protect them, girls struggled on their own to cope with the effects of trauma (Margolin & John, 1997). Lacking a sense of attachment or safety, the girls sought connections through the maladaptive means of substance abuse and violence.



Implications and Recommendations

Bonds between the drug-using females of the Crack and Marijuana Eras were disrupted, but there is also evidence of a yearning to repair the emotional connection. Any policy designed to intervene in women's recovery from drug dependency must first take into account that many women are also mothers and the head of household. Women's role as caregivers of the young deserves the implementation of empathic strategies that balance treatment services with parenting. Furthermore, if policy makers and practitioners seek to interrupt the intergenerational transmission of drug-related problems, they must acknowledge and address the primacy of early attachment bonds and find ways to support mother-child relationships and strengthen family cohesiveness. Appropriate services for recovering women with children must be delivered in the context of total family needs. Women in

substance abuse treatment want "more of a family-focused lens that treats the connection and bond of the family with ongoing nurturance, consideration, and respect" (Smith, 2006, p. 456). Policies that strengthen family cohesiveness have long-term societal benefits unlike, for example, lengthy prison sentences for drug offenses that attenuate family ties and lower children's life chances.

Drug-using mothers and daughters each have their own set of treatment concerns relative to their age and situation, but both also need structured time together to develop or repair emotional bonds. Treatment programs might arrange for mother-child visits that work toward reconnection and reunification. Joint programming between adult and child services may also be possible, necessitating, perhaps, new protocols that enable agencies to share client information. Without improvements in the flow of information between adult-focused agencies and child welfare services, recovery and reconnection may be compromised (McKeganey et al., 2002). Finally, outreach and support for law-abiding and willing family members' participation in treatment and recovery efforts can be extremely helpful in mending mother-daughter relationships and strengthening family unity across generations.

Despite the decrease in the number of crack users nationally, the effects of crack involvement, particularly for those embedded pockets of the urban poor, have carried over into the new millennium. The associated emotional, social, and economic problems continue to plague a younger generation, and yet few holistic and female-oriented drug treatment programs and policies are available to confront this challenge (Sterk, Elifson, & Theall, 2000). As much as we may want to believe that the era is over, "the Age of Crack persists, characterized by whole urban communities demoralized by poor health, violence, poverty, child neglect, and family decay" (Allen, 2003, p. 205). Programs and policies oriented toward changing individual drug use must be accompanied by a parallel commitment to bring down the structural impediments of concentrated poverty, harsh criminal justice sanctions, and widespread sexism and racism. The need for structural transformation, however, must not excuse delays in the implementation of supportive treatment services for women and girls. Neither the mothers nor the daughters of the Crack Era have fared well, and to ignore their stories is to watch the repetition of destructive patterns in future generations, regardless of the next "drug of choice."



Notes

1. Much of this research is based on Drug Use Forecasting surveys that report the number of arrestees who test positive for drugs. Arrestees volunteer to be tested, and results cannot be generalized. City prevalence rates also vary greatly.
2. As Farrington (2003) states, "Generally, DLC [Developmental Life Course] findings and theories apply to offending by lower class urban males in Western industrialized societies in the past 80 years or so" (p. 223). Two exceptions to the all-male study are Moffitt, Caspi, Rutter, and Silva (2001) and Silverthorn and Frick (1999).
3. "Combining Drug Treatment and Law Enforcement for Drug-Addicted Offenders," NIDA Grant No. F31 DA006065; "Learning About Violence and Drug Use among Adolescents (LAVIDA)," NIDA Grant No. R01 DA08679.
4. Nearly two thirds of the girls lived mostly with their mothers for at least part of their lives.



References

- Adler, P. A. (1985). *Wheeling and dealing: An ethnography of an upper-level drug dealing and smuggling community*. New York, NY: Columbia University Press.
- Ainsworth, M. (1972). Attachment and dependency. In J. L. Gerwitz (Ed.), *Attachment and dependency* (pp. 97–137). Washington, DC: Winston.
- Ainsworth, M., Blehar, M., Waters, E., & Wall, S. (1978). *Patterns of attachment. A psychological study of the strange situation*. Hillsdale, NJ: Erlbaum.
- Allen, A. (2003). Against drug use. In A. K. Wing (Ed.), *Critical race feminism: A reader* (2nd ed., pp. 197–208). New York, NY: New York University Press.
- Ansbro, M. (2008). Using attachment theory with offenders. *Probation Journal*, 55(3), 231–244.
- Bowlby, J. (1973). *Attachment and loss* (Vols. 1–2). New York, NY: Basic Books. (Original work published 1969)
- Bowlby, J. (1988). *A secure base*. New York, NY: Basic Books.
- Brisgone, R. (2008). *Varieties of behavior across and within persons of drug-using street prostitutes: A qualitative longitudinal study* (Doctoral dissertation). Rutgers, The State University of New Jersey, New Brunswick. Available from ProQuest database. (UMI No. 332692)
- Cernkovich, S., & Giordano, P. (1987). Family relationships and delinquency. *Criminology*, 25, 295–321.
- Curtis, R. (1998). The improbable transformation of inner-city neighborhoods: Crime, violence, and drugs in the 1990s. *Journal of Criminal Law and Criminology*, 88, 1233–1266.
- Daly, K. (1992). Women's pathways to felony court: Feminist theories of lawbreaking and problems of representation. *Southern California Review of Law and Women's Studies*, 2(11), 11–51.
- Denton, B. (2001). *Dealing: Women in the drug economy*. Sydney, Australia: University of New South Wales Press.
- Dunlap, E., Golub, A., & Johnson, B. (2006). The severely distressed African-American family in the Crack Era: Empowerment is not enough. *Journal of Sociology and Social Welfare*, 33(1), 115–139.
- Dunlap, E., & Johnson, B. (1996). Family and human resources in the development of a female crack-seller career: Case study of a hidden population. *Journal of Drug Issues*, 26(1), 175–198.
- Dunlap, E., Stürzenhofecker, G., Sanabria, H., & Johnson, B. (2004). Mothers and daughters: The intergenerational reproduction of violence and drug use in home and street life. *Journal of Ethnicity in Substance Abuse*, 3(2), 1–23.
- Farrington, D. (2003). Developmental and life-course criminology: Key theoretical and empirical issues. *Criminology*, 41, 221–255.
- Fonagy, P. (2004). Psychodynamic therapy with children. In H. Steiner (Ed.), *Handbook of mental health interventions in children and adolescents: An integrated developmental approach* (pp. 621–658). New York, NY: Jossey-Bass.
- Furst, T., Johnson, B., Dunlap, E., & Curtis, R. (1999). The stigmatized image of the "crack-head": A sociocultural exploration of a barrier to cocaine smoking among a cohort of youth in New York City. *Deviant Behavior*, 20(2), 153–181.
- Gaarder, E., & Belknap, J. (2002). Tenuous borders: Girls transferred to adult court. *Criminology*, 40, 481–517.
- Golub, A., Johnson, B., Dunlap, E., & Sifanek, S. (2004). Projecting and monitoring the life course of the marijuana/blunts generation. *Journal of Drug Issues*, 34, 361–388.
- Gottfredson, M., & Hirschi, T. (1990). *A general theory of crime*. Stanford, CA: Stanford University Press.
- Hamid, A. (1992). The developmental cycle of a drug epidemic: The cocaine smoking epidemic of 1981–1991. *Journal of Psychoactive Drugs*, 24, 337–348.
- Hardesty, M., & Black, T. (1999). Mothering through addiction: A survival strategy among Puerto Rican addicts. *Qualitative Health Research*, 9, 602–619.
- Hayslett-McCall, K., & Bernard, T. (2002). Attachment, masculinity, and self-control: A theory of male crime rates. *Theoretical Criminology*, 6(1), 5–33.
- Herman, J. (1997). *Trauma and recovery*. New York, NY: Basic Books.
- Humphries, D. (1999). *Crack mothers: Pregnancy, drugs, and the media*. Columbus: Ohio State University Press.
- Johnson, B., Dunlap, E., & Tourigny, S. (2000). Crack distribution and abuse in New York. In M. Natarajan & M. Hough (Eds.), *Illegal drug markets: From research to prevention policy* (pp. 19–57). Monsey, NY: Criminal Justice Press.
- Johnson, B., Golub, A., & Dunlap, E. (2000). The rise and decline of hard drugs, drug markets and violence in New York City. In A. Blumstein & J. Wallman (Eds.), *The crime drop in America* (pp. 164–206). New York, NY: Cambridge University Press.
- Logan, E. (1999). The wrong race, committing crime, doing drugs, and maladjusted for mother-hood: The nation's fury over "crack babies." *Social Justice*, 26(1), 115–138.

- Lopez, V., Katsulis, Y., & Robillard, A. (2009, April). Drug use with parents as a relational strategy for incarcerated female adolescents. *Family relations*, 58, 135–147.
- Maher, L. (2002). Don't leave us this way: Ethnography and injecting drug use in the age of AIDS. *International Journal of Drug Policy*, 13, 311–325.
- Maher, L., & Hudson, S. (2007). Women in the drug economy: A metasyntesis of the qualitative literature. *Journal of Drug Issues*, 37, 805–826.
- Majors, R., & Billson, J. (1993). *Cool pose: The dilemmas of Black manhood in America*. New York, NY: Lexington Books.
- Males, M. (2010). Have girls gone wild? In M. Chesney-Lind & N. Jones (Eds.), *Fighting for girls: New perspectives on gender and violence* (pp. 13–32). Albany, NY: SUNY Press.
- Margolin, G., & John, R. (1997). Children's exposure to marital aggression: Direct and mediated effects. In G. K. Kantor & J. Jasinski (Eds.), *Out of the darkness: Contemporary research perspectives on family violence* (pp. 90–104). Thousand Oaks, CA: Sage.
- McKeganey, N., Barnard, M., & McIntosh, J. (2002). Paying the price for their parents' addiction: Meeting the needs of the children of drug-using parents. *Drugs: Education, prevention and policy*, 9, 233–246.
- Miller-Cribbs, J. E., & Farber, N. B. (2008). Kin networks and poverty among African-Americans: Past and present. *Social Work*, 53(1), 43–51.
- Moffitt, T., Caspi, A., Rutter, M., & Silva, P. (2001). *Sex differences in antisocial behavior: Conduct disorder, delinquency and violence in the Dunedin Longitudinal Study*. Cambridge, UK: Cambridge University Press.
- Morgan, P., & Joe, K. (1996). Citizens and outlaws: The private lives and public lifestyles of women in the illicit drug economy. *Journal of Drug Issues*, 26(1), 125–142.
- Reeves, J., & Campbell, R. (1994). *Cracked coverage: Television news, the anti-cocaine crusade, and the Reagan legacy*. Durham, NC: Duke University Press.
- Robinson, R. (2011). "Just leave me alone! I'm so afraid to be alone": Helpful lessons from attachment and object relations theory. In R. Immarigeon (Ed.), *Women and girls in the criminal justice system* (Chap. 25, pp. 1–6). Kingston, NJ: Civic Research Institute.
- Ryder, J. (2007). "I wasn't really bonded with my family": Attachment, loss and violence among adolescent female offenders. *Critical Criminology: An International Journal*, 15(1), 19–40.
- Sampson, R. J. (1987). Urban Black violence: The effect of male joblessness and family disruption. *American Journal of Sociology*, 93, 348–382.
- Schaffner, L. (2007). Violence against girls provokes girls' violence: From private injury to public harm. *Violence Against Women*, 13, 1229–1248.
- Shengold, L. (1999). *Soul murder revisited: Thoughts about therapy, hate, love, and memory*. New Haven, CT: Yale University Press.
- Siegel, J., & Williams, L. (2003). The relationship between child sexual abuse and female delinquency and crime: A prospective study. *Journal of Research in Crime and Delinquency*, 40(1), 71–94.
- Silverthorn, P., & Frick, P. (1999). Developmental pathways to antisocial behavior: The delayed-onset pathway in girls. *Development and Psychopathology*, 11(1), 101–126.
- Small, M., & Newman, K. (2001). Urban poverty after *The truly disadvantaged*: The rediscovery of the family, the neighborhood, and culture. *Annual Review of Sociology*, 27, 23–45.
- Smith, C., & Thornberry, T. (1995). The relationship between childhood maltreatment and adolescent involvement in delinquency. *Criminology*, 33, 451–477.
- Smith, N. (2006). Empowering the "unfit" mother: Increasing empathy, redefining the label. *Affilia*, 21, 448–457.
- Sroufe, L., & Fleeson, J. (1986). Attachment and the construction of relationships. In W. Hartup & Z. Rubin (Eds.), *Relationships and development* (pp. 51–72). Mahwah, NJ: Erlbaum.
- Sterk, C. (1999). *Fast lives: Women who use cocaine*. Philadelphia, PA: Temple University Press.
- Sterk, C., Elifson, K., & Theall, K. (2000). Women and drug treatment experiences: A generational comparison of mothers and daughters. *Journal of Drug Issues*, 30, 839–862.
- Waldorf, D., Reinerman, C., & Murphy, S. (1991). *Cocaine changes: The experience of using and quitting*. Philadelphia, PA: Temple University Press.
- West, J., & Oldfather, P. (1995). Pooled case comparison: An introduction for cross-case study. *Qualitative Inquiry*, 1, 452–464.
- Wilson, M., & Tolson, T. (1990). Familial support in the Black community. *Journal of Clinical Child and Adolescent Psychology*, 19, 347–355.
- Wilson, W. (1987). *The truly disadvantaged: The inner city, the underclass, and public policy*. Chicago, IL: University of Chicago Press.
- Wilson, W. (1996). *When work disappears: The world of the new urban poor*. New York, NY: Knopf.

DISCUSSION QUESTIONS

1. How did women's drug use influence their criminality? How did this differ from girls' drug use and offending?
2. How did women's drug use impact their family relationships? What effect did drug use have on the lives of girls and their relationships with their families?
3. How should treatment providers respond to the needs of women and girls involved in substance abuse?

Reading 16

As you learned, women often turn to prostitution as a way to support a drug habit or provide economic support for food and shelter. In addition, many find themselves on the street, following an abusive childhood and where they are only placed at additional risk for violence. In this article by Jennifer Cobbina and Sharon Oselin, you'll learn how age is an important trajectory for women and girls in prostitution and how their age of entry is shaped by their childhood and also alters their experience of life on the streets.

It's Not Only for the Money

An Analysis of Adolescent Versus Adult Entry Into Street Prostitution

Jennifer E. Cobbina and Sharon S. Oselin

Given the stigma and labeling associated with working in street prostitution, one may wonder what compels individuals to enter the trade. Numerous scholars have attempted to address this question, and the culmination of this work uncovers a variety of explanations that include financial necessity, childhood abuse, runaway behavior, homelessness, interpersonal networks, drug addiction, psychological characteristics, and antisocial personality disorder (Brock 1998; Brody, Potterat, Muth, and Woodhouse 2005; Chapkis 2000; Whelehan 2001). While there is a substantial body of literature that examines the factors that are associated with prostitution entry, most have not considered age of onset (for exception, see Kramer and Berg 2003), which has been shown to impact the pathways women take into crime¹ (Simpson, Yahner, and Dugan 2008). In fact, there is ample theoretical and empirical evidence that indicates age shapes criminal initiation (Laub and Sampson 2003; Moffitt 1993; Sampson and Laub 1993).

The current research bridges the gap in the literature in two ways. First, drawing from feminist and age of onset

literatures, we examine how age of onset shapes pathways into prostitution. Second, we consider how entrance pathways are associated with length of time spent in the sex trade and the effect this has on women. Building on Barton's (2006) findings on strippers, we seek to further explicate the unique challenges that street prostitutes face in their line of work over time. We base our analysis on 40 interviews with female street prostitutes from five U.S. cities to assess motivations for entering prostitution as adolescents or adults, analyze how age of onset is linked to time spent in the trade, and whether the length of time in prostitution exacts a greater toll on women. Our results underscore the importance of including age as an organizing feature of women's pathways into prostitution and the potential associated consequences of working in this trade over time.



Women and Crime

Nearly three decades of feminist research have offered much insight into female offenders and the factors associated with female criminality (Reisig, Holtfreter, and Morash 2006).

SOURCE: Cobbina, J., & Oselin, S. S. (2011). It's not only for the money: An analysis of adolescent versus adult entry into street prostitution. *Sociological Inquiry*, 81(3), 310–332.

Indeed, researchers have documented how gender influences criminal pathways, motivations, and involvement with the criminal justice system (Daly 1992; Kruttschnitt 1996). Empirical evidence indicates that victimization, economic marginalization, and substance abuse disproportionately affect women and play unique roles in shaping women's initiation into crime (Daly 1992; Gaarder and Belknap 2002; Gilfis 1992; Simpson et al. 2008). In her examination of female offenders, Daly (1992, 1994) produced a widely used typology of multiple pathways women take into crime including street women, harmed and harming women, drug-connected women, battered women, and other women. Daly's pathways framework underscores the gendered nature of women's offending patterns.

Scholarly research on pathways into crime has also employed a life-course developmental approach, claiming that age of offending is important for establishing trajectories of criminal activity (Laub and Sampson 2003; Moffitt 1993). In spite of the plethora of research analyzing the initiation to offending among men and adolescents, fewer studies have paid specific attention to first-time adult offenders or considered the age of onset among female adult populations (for exceptions see Eggleston and Laub 2002; Simpson et al. 2008). This is surprising given that research shows adult-onset offending comprises [sic] approximately half of the overall adult offender population, and these rates are even greater among female adult offenders (Eggleston and Laub 2002).

Although studies suggest there are distinct routes and trajectories into crime, there is evidence that pathways to crime are age-graded, especially when we consider the blurred boundaries between women's victimization and offending. Many girls who have experienced childhood abuse find that the best available means of escape from violence is to rely on survival strategies—such as running away from home, drug use, and illegal street work—that thereby constitute crimes according to the “justice” system (Gilfis 1992; Owen and Bloom 1995). Other scholars contend criminal activity among battered women is a by-product of their emotional attachment to criminally involved boyfriends or spouses (Mullins and Wright 2003; Richie 1996).

In one of the few studies analyzing age of onset into crime and pathways to jail, Simpson et al. (2008) found that individuals who engaged in crimes as children were more likely to have experienced sexual abuse and were

more heavily involved in drug dealing, property crime, and offensive violence later on in life compared with adult-onset offenders. In contrast, women whose onset of criminal activity began as adults were more likely to have experienced violent victimization in adulthood compared with earlier onset offenders. While Simpson and colleagues' study highlights the importance of taking into account the age of onset of criminal behavior for criminal trajectories, additional work is needed to further explore these connections.



Motivations for Entry Into Prostitution

Through their extensive research, scholars have identified a variety of factors that are associated with entry into prostitution. One argument in this line of research stresses the link between abuse and prostitution. Indeed, a number of studies on female prostitution have revealed the patterns of victimization at the hands of men (Earls and David 1990; Miller 1993). However, what remains unclear is the causal path linking child abuse with later prostitution. Two models have been proposed as possible explanations. First, the susceptibility model contends that the combination of psychological characteristics (i.e., alienation and feelings of worthlessness) and tragic events (i.e., sexual assault) makes women more vulnerable to entering prostitution. While some scholars argue that childhood victimization is directly related to subsequent prostitution entry (James and Meyerding 1977; Kramer and Berg 2003), others assert that the causal link is indirectly mediated by run-away behavior (Seng 1989; Simons and Witbeck 1991). Nevertheless, according to the susceptibility model, when certain personality attributes are coupled with personal crisis, females become more susceptible to entering the life of prostitution.

The second model used to explain women's motivation for entering prostitution is the exposure model, which refers to interpersonal contacts with and inducement from others who are involved in the subculture of prostitution (Davis 1971). This model is closely tied to the cultural deviance theoretical perspective, which attributes crime to a set of values that exist in disadvantaged neighborhoods. In particular, Sutherland (1939) proposed a theory of differential association, which argues that people learn to

commit crime because of regular contact with antisocial values, attitudes, and criminal behaviors. These definitions that are favorable to crime are learned when one's personal networks are primarily filled with individuals who uphold and perpetuate them. For instance, in their Chicago-based study, Raphael and Shapiro (2002) found that 32.5 percent of street prostitutes had a household member [who] work[ed] in prostitution where they grew up, and 71 percent of their sample reported that they were encouraged by another individual to work as a prostitute to earn money. In short, it appears that the cultural deviance framework may partially explain why some women from disadvantaged backgrounds enter prostitution.

Economic necessity is often connected to entry into prostitution. Women who occupy a lower socioeconomic status (SES) have fewer educational and employment opportunities, making it challenging to avoid poverty (Ehrenreich 2001). As a result, some turn to particular survival strategies, such as working in the underground economy to supplement limited welfare (Edin and Lein 1997). Evidence indicates that when women lack viable alternatives, they are more likely to perceive prostitution as a feasible option for income (Brock 1998; Delacoste and Alexander 1998). In fact, many street prostitutes are runaways who have few resources and engage in a myriad of criminal activities to survive (Weitzer 2009).

Moreover, scholars contend that drug addiction can also pull women into the sex trade. In fact, studies find that substance abuse is often prevalent among street-working prostitutes and note that it can be a primary reason they resort to selling their bodies (Epele 2001; Porter and Bonilla 2009). For certain drug-addicted women, prostitution may serve as the only viable means to finance their habit, especially among those who lack education and job skills (Gossop, Powes, Griffiths, and Strang 1994). Other research suggests that while some women may use drugs recreationally prior to engaging in prostitution, the habit intensifies the longer they work in the trade, as drugs may be used as a coping mechanism (Cusick and Hickman 2005; Davis 2000).

We have just reviewed many studies that analyze female involvement in prostitution and the various motivations that account for their entry into sex work. Yet these works offer little explanation as to why some factors appear to have greater impact on certain women compared with others. Building off previous studies that suggest age may be a defining factor that shapes reasons for

engaging in prostitution (Kramer and Berg 2003), we use age of entry as an organizing tool that influences pathways into street prostitution. Following Simpson et al. (2008), we distinguish women who enter prostitution in adolescence (18 and under) from those who start in adulthood (19 and over) and create a typology to determine whether such a framework explains why and how prostitution results from multiple interdependent factors.

Previous studies conclude street prostitutes are likely to experience the highest rates of violence, abuse, arrests, and stigma of all sex workers (Miller and Schwartz 1995; Sanders 2007; Weitzer 2009), which may increase the longer a woman works as a prostitute. Thus, beyond exploring the connection between age and pathways, we examine the implications of particular pathways as they are linked to time in the trade and whether the tenure in prostitution exacts a greater "toll" on women.



Methodology and Data Collection

To assess the interaction between gender, age, and prostitution entry, we rely on 40 interviews drawn from two research projects, each conducted by one of the authors. The first project was based on a comprehensive in-depth examination of street prostitutes affiliated with four non-profit organizations that specifically aid women in prostitution by providing services, resources, and a range of other amenities to them. These sites were located in different U.S. cities: Los Angeles, Chicago, Minneapolis, and Hartford. While there is much structural variation among these organizations, most claim their goal is to help women in prostitution leave the trade. The author was able to act as an intern and researcher at each of these settings for approximately 3 months per site, where she conducted semistructured interviews with 36 clients. This researcher attempted to interview all prostitutes present at each site; however, overall, fewer than 10 either refused to participate or were unable to because of scheduling conflicts. Of these 36 prostitutes, three were excluded from this current study because they did not provide substantial information about their entrance into prostitution. During these interviews, the women discussed their biographies, including how and why they first entered prostitution, and their experiences in the trade.

Data from the second study come from a broader investigation examining the reentry experiences of incarcerated and formerly incarcerated women in St. Louis, some of whom also worked as street prostitutes. As the original study was comparative in nature, the sample included women who returned to custody 2 to 3 years following their release from prison and a matched sample of females who were not reincarcerated during this period. During these interviews, 11 women discussed working in prostitution, and of these individuals, seven were therefore included in the current study.² Women were recruited to participate in the project based on the following criteria: (1) They were released on parole between June 2004 and December 2005, and (2) they were released with at least 2 to 3 years to serve on their parole sentence.³ To ensure the comparative nature of the sample, approximately equal numbers of women were included in the study if (1) they have [had] no documented new crimes, law violation, or technical violation resulting in reincarceration and (2) they were reincarcerated as a result of a new crime, law violation, or technical violation.

In this study, we focus specifically on age of entry into street prostitution and do not analyze when they first engaged in other criminal behaviors (unrelated to prostitution). Drawing on Barton's (2006) study, which concluded that strippers experience a greater *toll* the longer they work in the trade, we also examine whether female street prostitutes feel this toll and whether it increases the longer they remain on the streets. We were able to gauge this toll because in the first research project (which encompasses 83% of the sample for this study), the researcher asked participants questions that specifically addressed the difficulties and negative effects of working in street prostitution. These questions included, What are the negatives of working in prostitution? What were some of the difficulties of being a prostitute? Did your family and friends know you were working in prostitution? How did they react? Did working as a prostitute affect how you felt about yourself? How did you cope with these difficulties?

Because of the differences between strippers and street prostitutes, we developed an alternative definition of the toll that emerged from our qualitative data. Based upon these accounts, the *toll* is defined as the accumulation of violent encounters, elevated levels of exhaustion associated with the job, heightened stigma and broken

relationships with family members, increased drug addiction as a way to cope with the difficulties of the job, and severe punishments from the criminal justice system.

In the current study, we employed qualitative research methods because it provides insight into the perspectives and lived experiences of the research participants. In both projects, the interviews followed a semistructured protocol designed to elicit rich accounts relating to prostitution, with interviewers using follow-up probes to obtain a fuller depiction of the context and circumstances surrounding entrance into prostitution and the outcomes of working in the trade. The interview questions that were useful for this study related to crime, entry into prostitution, age of entry, length of time in the trade, and experiences associated with the work. Interviews were voluntary, and research participants were promised strict confidentiality; therefore, pseudonyms were used. The interviews lasted between one and two hours, were recorded and transcribed verbatim, and were subsequently coded.

In the analysis, we took care to ensure that the concepts developed and illustrations provided typified the most common patterns of women's accounts. Inter-reliability was achieved by having both authors independently code the data sets for themes related to how females constructed their understandings of their entrance into prostitution. We then conferred to identify the most common thematic patterns. We ensured internal validity using inductive analytic techniques, including the search for and explication of deviant cases (Charmaz 2006). Although we are cautious of the generalizability of our findings, the study's findings underscore the importance of age as an organizing feature of women's pathways into prostitution and the potential associated consequences of working in this trade.

Findings

The demographics of the women in our sample were racially and ethnically diverse with 67 percent African American, 23 percent Caucasian, and 10 percent Hispanic.⁴ They ranged from 20 to 60 years of age, with a mean age of 36.5 years. In addition, 50 percent of women entered prostitution when they were 18 years or younger, and 50 percent entered prostitution when they were 19 years or older. We analyzed pathways according to age group and

discovered they varied by age of entry. At the time of the interviews, the women included in these samples had ceased working in prostitution.⁵ The women are separated according to their age of entrance categories—adolescents or adults.

Age and Pathways Into Prostitution

Previous research finds numerous pathways into prostitution, yet the relationship between age and entry remains unclear. Thus, we aim to illuminate this topic here by analyzing prostitutes' accounts of how and when they entered the sex trade. To do so, we identified patterns and compared them across two age categories: adolescents (18 and under) and adults (19 and up).

We find pathways into prostitution differ according to age of entry, as illustrated by our typology (see Reading Table 16.1). Among those who entered prostitution during adolescence, we identified two categories or pathways: Prostitution to Reclaim Control of One's Sexuality and Prostitution as Normal. In comparison, women who entered as adults comprised *sic* the two other categories: Prostitution to Sustain Drug Addiction and Prostitution

for Survival. There were three individuals who comprised *sic* a fifth category of Others because their age category did not coincide with corresponding pathways or they exhibited a combination of two or more pathways.⁶ While there is some overlap, we contend that overall, each typology encompasses a distinct set of motivations and pathways into prostitution that varies according to age.

Motivations for Entering Prostitution as Adolescents

Fleeing Abuse and Reclaiming Control. A majority of the women (60%) who entered prostitution as adolescents discussed their entry as an attempt to regain control of their lives and their sexuality. A common experience among the women who had an early onset of prostitution (18 years or younger) was enduring childhood victimization, including sexual molestation, rape, incest, and physical assault. As a result, many girls chose to run away and flee their families. Kali, for example, discussed having entered prostitution at 16 years of age because of molestations: "I left home at an early age because there was some molestation in my family. I did it for money and to rebel from my parents." Similarly, Tisha linked her reason for engaging in prostitution at the age of 11 to early sexual abuse:

Reading Table 16.1 Typology of Entrance Into Prostitution

Type of Entrance	Characteristics	Sample
18 and under		
Fleeing abuse and reclaiming control	Childhood physical / sexual abuse, runaway behavior, perception of prostitution as empowering, some use of pimps	<i>N</i> = 12
Normal	Economic motivation, learned from family and friends, viewed prostitution as exciting and glamorous	<i>N</i> = 8
19 and up		
Sustain drug addiction	Family history of drug use, drug addicted, association with other prostitutes, morally conflicted about prostitution	<i>N</i> = 11
Survival	Means of survival, nearly homeless, holds some allure, not motivated by drugs but drug use escalates over time	<i>N</i> = 6
Other	Do not fit into other categories	<i>N</i> = 3

[My grandmother] was also engaged in a lot of activities such as selling drugs, doing drugs, renting out the rooms of her house and stuff like that. So staying was basically out of the question because she had so many men in the house and I had been sexually molested and raped a lot of times, so I didn't want to stay there anymore and put up with that.

Other women attributed their initial involvement in prostitution to sexual abuse but did not attempt to runaway. Instead, they began to perceive their sexuality as a way to garner power over men and reap monetary rewards. For instance, Jackie who engaged in prostitution at an early age was sexually victimized repeatedly during childhood. Her first memory of sexual abuse was by two family friends she was staying with from the age of 9 to 14 years of age and then by her great-uncle from the age of 15 on. She explained that her mother "gave" her away to family friends who molested her, which ultimately resulted in her entry in prostitution:

The people that my mama gave me to, one [of] their sons molested me real bad. I would go through the house and he would catch me in the kitchen and do stuff to me. But anyway, I got into prostitution. Grandpa, his daddy, he would always give me little money to feel and touch on me and stuff like that, so that's how I got off into that [prostitution]. I learned then that if I wanted something, I had to give up something.

Additionally, some recalled that engaging in prostitution gave them a sense of empowerment, allowed them to exact revenge, or provided a sense of control over their bodies. Janelle engaged in prostitution as a teenager: "[b]ecause from my childhood, I had been molested. And then as time went on, I was still getting molested, so I got tired. And I said well, if a man going to take it from me, why not sell myself?" And CeeCee rationalized her entry into prostitution in the following manner: "At the time it gave me a sense of control because I had been molested as a child. So it was like at some point it felt like I was getting a revenge for the predators in my life at that time." Consistent with prior research, we found that child abuse and runaway behavior became a pathway into prostitution

for certain individuals (Hwang and Bedford 2003; Kramer and Berg 2003; Tyler, Hoyt, and Whitbeck 2000; West and Williams 2000).

Other scholars posit the mechanism between sexual abuse and prostitution often lies within a third-party actor (Williamson and Cluse-Tolar 2002). While not common among the women in our study, a few established relationships with men who then played a main role in their entry into the trade. For Janise, a teenage runaway, a male figure was key to her entrance:

I used to run away from home a lot because my father used to beat us. So I ran away from home and I met this guy and he told me—I explained to him how my father beat on us, he said "well I'm [not] gonna beat you. Call me daddy." He used to buy me anything I wanted, whatever, no matter how much it was.

Janise later discovered that these gifts came with a price. She explained that "later on in the relationship he said 'now you gotta go do this in order to keep me buying you that' which was prostitution. So I did it." In this case, Janise was enticed as an adolescent to engage in prostitution because she believed these acts pleased her pimp, sustained the acquisition of material goods, and gave her a sense of control over her life.

Similarly, Alissa stated she engaged in prostitution at approximately 14 years of age because her boyfriend introduced her to the idea and encouraged her to do so. After she agreed, he became her pimp and profited off her labor:

He said, "[w]ell if you like me, would you like to make some money?" So I'm like, "well yeah, okay." So he took me over to different men's houses, he said, "[y]ou do whatever they want you to do. . . . They'll give you money and when you get the money you bring it back and give it to me." And that's what I did, not knowing that I was prostituting because again I was young and didn't know.

Most of these adolescent girls claimed performing sex work gave them a sense of control over their sexuality (and their lives). Ironically, certain girls (e.g., Janise and Alissa) engaged in prostitution not only because of encouragement

from a male figure in their life, who served as their pimp, but also relinquished much of their autonomy and earnings to him within a short time. While some may enter the trade to obtain control, the coercive nature of street prostitution under a pimp's rule is often far from empowering and often abusive. (Williamson and Baker 2009). In entering street prostitution, many girls worked in environments where the risk of violence was heightened, the very circumstances that initially caused them to flee their abusive homes.

Working in Prostitution Is Normal. An additional category of entrance into prostitution as adolescents consisted of the "normalization" of prostitution. Among early-onset females, 40 percent fell under this category and described prostitution as a normal activity in the neighborhoods where they grew up. As a result, these individuals viewed prostitution as a viable option for income. Lisa described her motivation for entering prostitution at 16 years of age in the following manner: "I use to hear [my sister] say stuff like . . . 'don't get up with a wet ass and no money in your pocket.' So instantly that planted that seed for me. When you lay down with a man you ain't gon' get up with an empty pocket and a wet ass." Evette also was exposed to prostitution through family members, as her father was a pimp and routinely kept company with many prostitutes. She explained how this was a normal facet of her childhood and adolescence:

I wanted to be with my dad and of course these things were going on in my dad's household because I told you my dad was a dope dealer and pimp, so that's when I became attracted to the lifestyle. The glamour part of it, you know, I saw the dressing up and the makeup and really that was the attraction for me. . . . You know my dad kept a lot of street people around and that's how I met this guy that eventually introduced me to prostitution. I was doing it regularly by sixteen.

Both Lisa and Evette viewed prostitution as "normal" because they were surrounded by prostitution from a young age. It was through this socialization that they learned values, beliefs, and behaviors that corresponded with this lifestyle.

Another common theme, alluded to by Evette, was the perception that working in prostitution was glamorous. As these adolescent girls observed women working in the sex trade, they regarded the work and the accoutrements as sophisticated. Thus, they believed prostitution was a way to achieve status. Tina surmised: "[A]fter my father died we were so poor and in that area that's all you see are prostitutes and pimps. . . . The girls are wearing nice clothes and making money, that's what I wanted too, so that's how it started for me." Likewise, Monique entered prostitution at 10 years of age, "Because of the money, the excitement, my environment. . . . When I grew up in the late 60s, the movies and people were glamorizing pimps and hustlers and stuff. . . . All I seen was the money, the furs, the jewelry and the talk. . . . so I started and I got a rush out of that quick money, that fast living." The lure of early entry into prostitution can be partly explained by interpersonal contact with others involved in the prostitution and the perception that it is a viable course of action to acquire money, clothes, and material resources.

Even though certain women in this sample claimed that as adolescents they learned to view prostitution as "normal" behavior to engage in, it is noteworthy that they did not also "learn" to use addictive drugs at this point in their lives. Indeed, many studies suggest that women enter prostitution for the purpose of earning money to sustain their drug habit (Potterat, Rothenberg, Muth, Darrow, and Phillips-Plummer 1998); yet we found that most women who entered prostitution as teenagers did not share these motivations, as few contended with severe drug addictions. Rather, they avowed to having used drugs recreationally as adolescents and limited their use to marijuana or alcohol.

In sum, early-onset prostitutes' entrance into the trade was complex, yet they exhibited particular pathways that spanned across these five samples. Those in the first category consistently focused on childhood abuse when explaining their motivation for entering prostitution. In response to these experiences, many of the girls became runaways and engaged in prostitution to earn money in an attempt to reclaim control over their sexuality. The rest of our adolescent-onset sample fell in the second category of learning about prostitution at an early age from others involved in the sex trade and adopting the perception that sex work is normal. In these accounts, they routinely described sex acts as alluring and exciting. Our data

suggest that female adolescent entry into prostitution revolves around two particular pathways, associated with specific events and motivations. We now explore the pathways into prostitution as adults.

Motivations for Entering Prostitution as Adults

Sustaining the Drug Habit. In contrast to early-onset prostitutes who depicted their entry as a way to gain control over their sexuality or who viewed the sex trade as a viable course of action in their community, the women who entered as adults provided alternative explanations. Indeed, 65 percent of women who first engaged in prostitution as adults attributed their entrance to drug addiction. Most of these women came from a family or environment where drug use was prevalent and consequently became drug addicted. Chanelle, for example, explained why she engaged in prostitution:

Because of my drug addiction. I found out that that would enable me to get money for drugs . . . quicker than waiting on county checks or a boyfriend to bring it to me. I could go out there and be assertive and get it myself. . . . And I was propositioned once or twice but then it occurred to me one day—hey, I could sell my body and get some money. I tried it and it worked.

When posed with the same question, Melanie responded, “I have an addiction to money and drugs.” And Vanessa explained, “Once I started [drugs] and got hooked is when I first entered prostitution to support my growing habit.” For many women, prostitution served as a practical and accessible way to support their substance addiction.

One striking difference between the women who entered the sex trade during adulthood (rather than adolescence) was that the former held strong moral condemnations of prostitution. They stressed that the drugs affected their willingness to enter the trade by making them lose sight of their morals and values. Belinda recalled, “I used to see other girls out there and . . . I’m like ‘how could they do that?’ Then I had a strong need for a drug. . . . It [prostitution] wasn’t something that I liked to do actually, you know, but the need for the drug was so great that it took priority.”

And Noelle explained how she initially struggled with moral beliefs about engaging in prostitution at the age of 22:

It was for the money to support my substance abuse. When I first started prostituting it had a very big impact on me. I would only work when it was dark out. I didn’t want my children or family members to see me. God forbid if someone should see me . . . I was so ashamed. As the progression of my disease picked up sooner or later it was early hours of the morning, then it was afternoon, then it was 24 hours a day. Then it became seven days a week. The progression of my disease took hold. And nothing matters. You use to live and live to use.

Although some had been exposed to prostitution in childhood, the women in this category felt conflicted about prostitution, with most having strong moral opposition to it. However, as their addictions progressed, they violated their previously held beliefs about prostitution, as it became a viable means to earn quick cash for drugs. These findings support previous research that asserts drug addiction can lead women into prostitution and keep them “stuck” in the trade (Cusick and Hickman 2005).

Survival Sex. Among adult-onset prostitutes, 35 percent described their entry into prostitution as a means of survival, in that it served as a necessary way to earn money to eat and pay rent for housing. For example, Elena explained, “I lived in the streets and there was no other way to maintain myself for food, clothes—it was really hard for me.” As a result, Elena sold drugs but resorted to prostitution “when the sales weren’t coming through.” And Shondra explained why she first started turning tricks:

I was still married to my second husband. We were separated. He left me in Atlanta stranded. He packed up our things, my kids, and left—during a time when I was in a mental hospital. I had a real bad breakdown. And when I got out I told him that I couldn’t live with him for a minute, that I needed time to adjust. So I moved in with a girlfriend of mine and during the time I was at her house he packed up everything and moved

back North and left me in Atlanta stranded. It kind of messed me up. I guess he felt that my relatives were here I would be okay but it kind of messed me up. I ended up prostituting my way back to the Midwest because I had no money, nothing to my name.

In contrast to those who cited the previous pathway, the women in this category turned to prostitution to survive. Findings corroborate previous research which argues structural conditions can lead impoverished individuals into prostitution (Miller 1986; Weitzer 2009), as they often view it as a survival mechanism and one of the best available opportunities for making money (Rosen and Venkatesh 2008). This pathway, in particular, is similar to Daly's (1992, 1994) "street woman" classification.

While acknowledging structural factors that make prostitution a practical option for lower-class women, some described their work as glamorous or alluring, even though they entered the work primarily for income. After a period where she "tested" prostitution out by walking the streets with a fellow prostitute, Kristin explained: "It was kind of exciting. . . . And I kind of got a thrill out of the guys whistling at me with my mini-skirt on." And though Loretta engaged in prostitution because she was unemployed, when asked whether there were other secondary reasons, she admitted, "I was in my late twenties and I had just had my second child . . . and honestly, I also thought it was exciting."

While there is some overlap between categories, these findings reveal that age of onset is important to consider because it is linked to particular pathways that lead adolescents and women into prostitution. However, these conclusions also generate further inquiries, such as, Why are pathways into prostitution important? And are they associated with other outcomes? We address these concerns in the following section.

Pathways, Time in the Trade, and the Toll

Beyond showing that age appears to be linked to particular pathways into prostitution, the age of entry also holds other implications for street prostitutes. We believe it is especially noteworthy that those who began working in prostitution as adolescents remained in the trade for longer periods of time compared with individuals who first

entered as adults. Specifically, the former group spent approximately 22 years in prostitution compared with the latter group who averaged 8 years on the streets (see Reading Table 16.1). This stark difference suggests those who entered earlier are more likely to work in prostitution for a longer duration of time, which in turn can increase the toll the work takes on these individuals. The toll experienced among street prostitutes consisted of an accumulation of violent encounters, elevated levels of exhaustion, heightened stigma that resulted in broken relationships with family members, intensified drug addictions as a way to cope with the difficulties of the work, and arrests and incarceration. Previous work based on a large data set of street prostitutes concludes that drug use and violence, in particular, can also lead to premature mortality among them (Potterat et al. 2004). Likewise, it is evident throughout these accounts that fear of death is a prominent factor that contributes to the toll women experience owing to their work.

The first indicator of the toll is the number and intensity of violent encounters prostitutes experienced on the streets. Like much of the research on prostitution, we found women who remained in the trade for longer periods of time had been exposed to higher levels of abuse and appeared to feel the effects of victimization to a greater degree. Carrie, for example, who began work as a prostitute at the age of 18, remained in the trade for 17 years and recalled countless violent encounters: "I've been raped, woken up rolled up in a tarp, left for dead, had my lung collapse in a street fight, and more. It's amazing I'm still alive." Likewise, Jenna, who was 14 years old when she first started and worked as a prostitute for 27 years, emphasized the violence and abuse she endured: "I was raped many times and left for dead, having people cut my face up and my eye was permanently damaged. I was almost killed by my last john and I ran for my life." Although prostitutes can experience violence at the hands of johns, pimps, or others at any point in their career, abuse appears especially salient among those who had been on the streets a substantial time and had been subjected to numerous attempts on their lives.

In addition, the level of overall exhaustion is another indicator of the toll experienced by street prostitutes, which was frequently reported by those who remained in prostitution for a considerable number of years. For instance, 28-year-old Amy worked as a prostitute for 15

years and claimed she stopped working on the streets because, "I was tired of prostituting and wanted to try and change my life so I could do something else . . . because I'm getting way too old for it. By the end, I was so tired I just sat on the sidewalk from sheer exhaustion until the cops found me."

Likewise, LaTonya, a 52-year-old woman who worked in prostitution since age 13, stated, "I realized that I wanted to stop this lifestyle because I'm way too old for this shit. . . . I'm a mother of 11 kids and 15 grandkids . . . at this point in life I shouldn't be doing that." When probed to describe specifically the ways in which she felt tired, LaTonya referenced multiple forms of exhaustion: "I was so tired and ill that I went to the hospital, I barely made it. Around that time I got too depressed, that's another issue I struggled with was depression or whatever." Similar to Barton's (2006) assessment, those who emphasized these feelings underscore the difficulties of the work itself, which manifested itself in terms of both mental and physical exhaustion.

Moreover, another toll of prostitution was the stigmatization women felt upon being labeled by loved ones, which in turn adversely affected these relationships. A few women in this study spoke of their shame and the stigma they experienced while in prostitution and how that shaped their familial relationships. Shondra was a prostitute for 12 years, and she explained how the shame she felt over her actions caused her to sever ties with her family members: "Once my family found out I was in county jail on prostitution charges . . . I didn't see them for years after that because I was embarrassed and ashamed of what they would think about me and my lifestyle."

CeeCee, who entered prostitution at 15 and worked in the trade for 25 years, recalled how her relationships with family members completely deteriorated when her brother saw her on the streets and took physical action: "In fact one of my brothers got so angry with me that he physically assaulted me." Thus, consistent with previous research, the stigma and shame women felt and the lack of support from family and friends became a burden for these individuals that took a toll over time (Chapkin 1997; Sanders 2007).

It is well documented that many prostitutes use drugs as a coping mechanism (Davis 2000; Porter and Bonilla 2009; Young, Boyd, and Hubbell 2000). Similarly, our interviewees claimed their addictions intensified the longer they remained in the trade to contend with the difficulties of the

work (e.g., stigma, shame, violent encounters). Elaine, who worked as a prostitute for 17 years, admitted she occasionally used drugs prior to becoming a prostitute, but the habit grew worse after her entrance. She stated, "When I started working the street [prostituting] it got even worse because I didn't have commitments to make. As I got more money I could just blow it on drugs." Monique, who entered prostitution at age 10 and spent a total of 39 years working on the streets, discussed how drugs became the way she coped with shame and stigma associated with her work: "Yes, it bothered me that my family found out what I was doing and what they thought about me, but I just went and got high so I wouldn't have to have to deal with it." The following account by Noelle, who had worked as a prostitute for 16 years, highlights how drugs and prostitution reinforced one another:

When I was arrested I was so sick and so sick and tired that they had to arraign me from the doorway. My drug of choice was heroin. I couldn't even walk to stand in front of the judge so they arraigned me from the doorway, that's how sick I was. That's how I got out of it finally.

As Noelle's earlier comments imply, she felt shame and stigma about working as a prostitute, and drugs helped to assuage those feelings. As a result, she had a severe drug addiction at the time of her arrest. The women who had been in prostitution for significant lengths of time often had a serious drug habit that grew worse as they grappled with feelings of shame, worthlessness, and powerlessness.

The final indicator of a toll that woman experienced was extensive histories with the criminal justice system, which led to increasingly stiff punitive sentences. Tisha had a substantial history of arrests and jail time, accumulated during her 9 years of prostitution. She was "burned out" and felt the costs of being in prostitution were becoming too high as she faced another long stint in prison: "I was on parole and I got busted for prostitution again. I knew I was going back to prison for a long time. At that point, I knew something had to change." Janise, who worked in prostitution for 28 years, also expressed that going to prison was her biggest fear and caused her great anxiety. She espoused, "I had been to the penitentiary twice, one more arrest and I would have gone away for a long, long time. I became so scared of getting in a car with

an undercover cop . . . that was a big fear for me. Because when you go to prison, you don't really know if you'll get out alive." Anxiety about stiff punitive sentences became especially taxing for those who had significant prior involvement with the criminal justice system.

Many of the issues that caused a toll fueled each other (e.g., feelings of shame, escalated drug use, and strained familial relationships) and culminated in negative outcomes and feelings that prostitutes claimed they endured because of their participation in prostitution. Specifically, we found the women who entered prostitution as adolescents were more likely to remain in the trade longer, as well as experience and recount negative aspects associated with the job. For some of these individuals, the toll became too great to bear and ultimately served as the impetus to pull them out of the sex trade.

Discussion

Many studies examine factors that pull women into prostitution, including economic and structural conditions (Brock 1998; Chapkis 2000; Whelehan 2001), cultural norms (Raphael and Shapiro 2002; Sharpe 1998), and personal experiences, such as past abuse or drug addiction (Cusick and Hickman 2005; Hwang and Bedford 2003; Rosen and Venkatesh 2008; Simpson et al. 2008). However, these works do not provide a clear explanation as to why certain factors shape some women's entrance into prostitution more than others. The current study extends previous research through a qualitative analysis of female entrance into street prostitution. Our study underscores that pathways into prostitution are age-graded; thus, the relevance of certain explanatory factors varies according to age category.

One pathway that accounts for adolescent entry into prostitution centers on childhood victimization, which includes physical abuse, sexual molestation, and incest. Consistent with other research, we find that many in our sample ran away from home to escape assaults (Gilfis 1992; Hwang and Bedford 2003; Owen and Bloom 1995) and subsequently engaged in prostitution to reclaim control over their sexuality. Ironically, those who were encouraged to work as prostitutes by male figures soon felt disempowered as their work was "managed" by others.

The other pathway of adolescent entry into prostitution was based on socialization and learned perceptions about prostitution. Growing up in disadvantaged community contexts where prostitution was prevalent exposed females to this lifestyle at an early age. Because of close interpersonal networks with family, friends, and neighbors who participated in the sex work, adolescents came to view these activities as acceptable and glamorous and prostitution as a viable option of work. Consistent with differential association theory, we find females who had regular contact with prostitutes or those who encouraged prostitution embraced the lifestyle at an early age.

Although some studies argue that childhood victimization and exposure to others involved in sex work account for women's entrance into the trade (Potterat, Phillips, Rothenberg, and Darrow 1985; Simons and Witbeck 1991), our research reveals different motivations for women who entered prostitution as adults. The first pathway into prostitution among our adult-onset sample was primarily fueled by drug addiction. Interestingly, these individuals claimed they were morally opposed and reluctant to engage in prostitution, yet drug addiction led them to violate their beliefs to obtain money to support their habit.

The last pathway into prostitution among adult-onset prostitutes was economic instability. Extant research claims poverty can "pull" women into prostitution, especially when the trade serves as a survival mechanism and rational means for making money (Rosen and Venkatesh 2008; Weitzer 2009). This is consistent with the feminization of poverty theory, which states that many women resort to committing crimes because of their low SES (Daly 1992, 1994).

In uncovering these four pathways into prostitution based on age category, we are aware that none of these pathways are completely distinct from another. However, we assert that each embodies a prevalent pattern of entry into prostitution associated with a particular age group. Our study builds on Simpson et al.'s (2008) work by identifying "risk factors" that pull women into prostitution that vary by age, many of which have been uncovered in previous research on this topic (Brock 1998; Chapkis 2000; Hwang and Bedford 2003; Potterat et al. 1998; Raphael and Shapiro 2002; Rosen and Venkatesh 2008). Yet our study presents nuanced explanations by analyzing how age of onset (adolescence versus adulthood) is associated with different pathways and risk factors. We assert that age is central to understanding this phenomenon because it

appears not only to be connected to pathways into prostitution but also [because] entrance types may predict longer durations in the trade, which heightens the toll experienced by prostitutes.

Our age-graded typology provides an organizing framework that bridges both personal and structural features. Dalla (2000: 352) concludes that while “entry into prostitution results from the cumulation of multiple interdependent personal and contextual factors . . . [e]fforts at teasing apart those variables, and the relative significance of each, have left many questions unanswered and uncertainties remaining.” By examining age and its connection to pathways into prostitution, this analysis begins to disentangle these concerns and goes beyond them by discussing implications of tenure in prostitution.

Our findings add not only to scholarly research but also can be used to inform public policy relevant to prostitution. From this perspective, our pathways underscore the need for additional support services for “at-risk” women, as the prevalence of these may affect whether girls and women enter street prostitution. To be effective, prevention and intervention programs must address the unique needs of prostitutes. One way to do so is to focus on treating physical and sexual assault victims and to allocate proper guardians and housing for at-risk adolescent girls. Adult prostitutes are primarily in need of services that help them obtain legal employment, secure housing, and maintain their sobriety.

Despite our contributions, we must note a few limitations of this study. First, these data precluded us from addressing psychological factors, which may impact female entry into prostitution (Potterat et al. 1998). Second, each participant in our sample was interviewed once regarding their pathways into the trade; thus, we were unable to capture changes in attitudes or interpretations of personal experiences linked to entrance. Third, given our small sample size, our findings may not be generalizable to all street prostitutes. And, indeed, not all street prostitutes experience the degree of hardships evident among our sample. Nonetheless, future studies can continue to assess not only pathways into prostitution but also tenure in the trade as it engenders a toll on these workers. In spite of these limitations, our study concludes that age of onset is a critical feature that should be considered in future attempts to understand and theorize entrance into prostitution.



NOTES

1. We recognize that there is scholarly debate about the classification of prostitutes as “criminals.” It is not our intention to promote this idea; however, owing to the legal and cultural mandates in the United States, being labeled and treated as criminals was especially salient for the women in this sample. Thus, we include this framework because it is derived from our data and sheds light on the perceptions of the individuals included in this study.

2. Although 11 women admitted to having engaged in prostitution, four were excluded from the study because during the course of the interview, no information was gathered regarding the reasons they entered prostitution.

3. Because the purpose of the original study was to explore how women managed their release from prison, this time frame was selected because it provided an ample follow-up period post-release to identify women successful in not recidivating and a similarly situated reincarcerated comparison group.

4. Race was not found to shape prostitution entry among respondents in the sample.

5. Most women in this study claimed they worked consistently in prostitution for the length of time they specified. However, there were some individuals who left for short durations of time; temporary breaks were often attributed to other events such as being incarcerated, pregnant, in a hospital, or in detox programs. We stress that these calculations represent the estimates of tenure in prostitution and are likely not exact measures but overall demonstrate broad patterns and averages. We connect time in the trade with the toll and rely on rich, qualitative data to support our assessment.

6. Rosaria and Sabrina fit into the first typology; however, they entered prostitution as adults rather than as adolescents. Although Rachael entered prostitution as an adult and admits having experimented with drugs recreationally when she was younger, she did not engage in prostitution to sustain a drug habit or to survive while on the streets.



References

- Barton, Bernadette. 2006. *Stripped: Inside the Lives of Exotic Dancers*. New York: New York Press.
- Brock, Deborah. 1998. *Making Work, Making Trouble: Prostitution as a Social Problem*. Toronto, ON: University of Toronto Press.
- Brody, Stuart, John J. Potterat, Stephen Q. Muth, and Donald E. Woodhouse. 2005. “Psychiatric and Characterological Factors Relevant to Excess Mortality in a Long-Term Cohort of Prostitute Women.” *Journal of Sex and Marital Therapy* 31:97–112.
- Chapkis, Wendy. 1997. *Live Sex Acts: Women Performing Erotic Labor*. New York: Routledge.

- . 2000. "Power and Control in the Commercial Sex Trade" Pp. 181–201 in *Sex for Sale*, edited by Ronald Weitzer. New York: Routledge.
- Charmaz, Kathy. 2006. *Constructing Grounded Theory*. Thousand Oaks, CA: Sage.
- Cusick, Linda and Matthew Hickman. 2005. "'Trapping' in Drug Use and Sex Work Careers." *Drugs: Education, Prevention and Policy* 12:369–379.
- Dalla, Rochelle. 2000. "Exposing the 'Pretty Woman' Myth: A Qualitative Examination of the Lives of Female Streetwalking Prostitutes." *Journal of Sex Research* 37:344–366.
- Daly, Kathleen. 1992. "A Woman's Pathway to Felony Court." *Review of Law and Women's Studies* 2:11–52.
- . 1994. *Gender, Crime, and Punishment*. New Haven, CT: Yale University Press.
- Davis, Nanette. 1971. "The Prostitute: Developing a Deviant Identity." Pp. 297–322 in *Studies in the Sociology of Sex*, edited by J. M. Henslin. New York: Appleton-Century-Crofts.
- . 2000. "From Victims to Survivors: Working with Recovering Street Prostitutes." Pp. 139–155 in *Sex for Sale*, edited by Ronald Weitzer. New York: Routledge.
- Delacoste, Frederique and Priscilla Alexander. 1998. *Sex Work: Writings by Women in the Prostitution*, San Francisco, CA: Cleis Press.
- Earls, Christopher M. and Helene David. 1990. "Early Family and Sexual Experiences of Male and Female Prostitutes." *Canada's Mental Health* 38:7–11.
- Edin, Kathryn and Laura Lein. 1997. "Work, Welfare, and Single Mothers' Economic Survival Strategies." *American Sociological Review* 62:253–266.
- Eggleston, Elaine P. and John Laub. 2002. "The Onset of Adult Offending: A Neglected Dimension of the Criminal Career." *Journal of Criminal Justice* 30:603–622.
- Ehrenreich, Barbara. 2001. *Nickel and Dimed: On (Not) Getting by in America*. New York: Metropolitan Books.
- Epele, Maria. 2001. "Excess, Scarcity & Desire among Drug-Using Sex Workers." *Body and Society* 7:161–179.
- Gaarder, Emily and Joanne Belknap. 2002. "Tenuous Borders: Girls Transferred to Adult Court." *Criminology* 40:481–517.
- Gilfis, Mary E. 1992. "From Victims to Survivors to Offenders: Women's Routes of Entry and Immersion into Street Crime." *Women and Criminal Justice* 4:63–90.
- Gossop, Michael, Beverly Powes, Paul Griffiths, and John Strang. 1994. "Sexual Behavior and Its Relationship to Drug-Taking among Prostitutes in South London." *Addiction* 89:961–970.
- Hwang, Shu-Ling and Olwen Bedford. 2003. "Precursors and Pathways to Juvenile Prostitution in Taiwan." *Journal of Sex Research* 40:201–210.
- James, Jennifer and Jane Meyerding. 1977. "Early Sexual Experience and Prostitution." *American Journal of Psychiatry* 134:1381–185.
- Kramer, Lisa A. and Ellen C. Berg. 2003. "A Survival Analysis of Timing of Entry into Prostitution: The Differential Impact of Race, Educational Level, and Childhood/ Adolescent Risk Factors." *Sociological Inquiry* 73:511–528.
- Kruttschnitt, Candace. 1996. "Contributions of Quantitative Methods to the Study of Gender and Crime or Bootstrapping Our Way into the Theoretical Thicket." *Journal of Quantitative Criminology* 12:135–161.
- Laub, John H. and Robert J. Sampson. 2003. *Shared Beginnings, Divergent Lives: Delinquent Boys to Age 70*. Cambridge, MA: Harvard.
- Miller, Eleanor. 1986. *Street Woman*. Philadelphia, PA: Temple University Press.
- Miller, Jody. 1993. "Your Life Is on the Line Every Night You're on the Streets: Victimization and the Resistance among Street Prostitutes." *Humanity & Society* 17:422–446.
- Miller, Jody and Martin D. Schwartz. 1995. "Rape Myths and Violence against Street Prostitutes." *Deviant Behavior* 16:1–23.
- Moffitt, Terrie E. 1993. "The Neuropsychology of Conduct Disorder." *Development and Psychopathology* 5:135–152.
- Mullins, Christopher W. and Richard Wright. 2003. "Gender, Social Networks, and Residential Burglary." *Criminology* 41:813–840.
- Owen, Barbara and Barbara Bloom. 1995. "Profiling Women Offenders: Findings from National Surveys and a California Sample." *The Prison Journal* 75:165–185.
- Porter, Judith and Louis Bonilla. 2009. "Drug Use, HIV, and the Ecology of Street Prostitution." Pp. 163–186 in *Sex for Sale*, edited by Ronald Weitzer. New York: Routledge.
- Potterat, John J., Devon D. Brewer, Stephen Q. Muth, Richard B. Rothenberg, Donald E. Woodhouse, John B. Muth, Heather K. Stites, and Stuart Brody. 2004. "Mortality in a Longterm Open Cohort of Prostitute Women." *American Journal of Epidemiology* 159:778–785.
- Potterat, John J., Lynanne Phillips, Richard B. Rothenberg, and William W. Darrow. 1985. "On Becoming a Prostitute: An Exploratory Case-Comparison Study." *The Journal of Sex Research* 20:329–336.
- Potterat, John J., Richard B. Rothenberg, Stephen Q. Muth, William W. Darrow, and Lynanne Phillips-Plummer. 1998. "Pathways to Prostitution: The Chronology of Sexual and Drug Abuse Milestones." *Journal of Sex Research* 35:333–340.
- Raphael, Jody and Deborah Shapiro. 2002. "Sisters Speak Out: The Lives and Needs of Prostituted Women in Chicago." Chicago, IL: Center for Impact Research.
- Reisig, Michael D., Kristy Holtfreter, and Merry Morash. 2006. "Assessing Recidivism Risk across Female Pathways to Crime." *Justice Quarterly* 23:384–405.
- Richie, Beth. 1996. *Compelled to Crime: The Gender Entrapment of Battered Black Women*. New York: Routledge.
- Rosen, Eva and Sudhir Alladi Venkatesh. 2008. "A Perversion of Choice: Sex Work Offers Just Enough in Chicago's Urban Ghetto." *Journal of Contemporary Ethnography* 37:417–441.
- Sampson, Robert and John Laub. 1993. *Crime in the Making: Pathways and Turning Points through Life*. Cambridge, MA: Harvard University Press.

- Sanders, Teela. 2007. "Becoming an Ex-Sex Worker: Making Transitions Out of a Deviant Career." *Feminist Criminology* 2:74–95.
- Seng, Magnus J. 1989. "Child Sexual Abuse and Adolescent Prostitution: A Comparative Analysis." *Adolescence* 24:665–675.
- Sharpe, Karen. 1998. *Red Light, Blue Light: Prostitutes, Punters, and the Police*. London: Ashgate.
- Simons, Ronald L. and Les B. Witbeck. 1991. "Sexual Abuse as a Precursor to Prostitution and Victimization among Adolescent and Adult Homeless Women." *Journal of Family Issues* 12: 361–379.
- Simpson, Sally S., Jennifer L. Yahner, and Laura Dugan. 2008. "Understanding Women's Pathways to Jail: Analysing the Lives of Incarcerated Women." *The Australian and New Zealand Journal of Criminology* 41:84–108.
- Sutherland, Edwin H. 1939. *Principles of Criminology*. Philadelphia, PA: Lippincott.
- Tyler, Kimberly A., Dan R. Hoyt, and Les B. Whitbeck. 2000. "The Effects of Early Sexual Abuse on Later Sexual Victimization among Female Homeless and Runaway Adolescents." *Journal of Interpersonal Violence* 15:235–240.
- Weitzer, Ronald. 2009. "Sociology of Sex Work." *Annual Review of Sociology* 35:213–234.
- West, Carolyn and Linda Williams. 2000. "Adult Sexual Revictimization among Black Women Sexually Abused in Childhood: A Prospective Examination of Serious Consequences of Abuse." *Child Maltreatment* 5:49–58.
- Whelehan, Patricia. 2001. *An Anthropological Perspective on Prostitution: The World's Oldest Profession*. Lewiston, NY: Edwin Mellen Press.
- Williamson, Celia and Lynda M. Baker. 2009. "Women in Street-Based Prostitution: A Typology of Their Work Styles." *Qualitative Social Work* 8:27–44.
- Williamson, Celia and T. Cluse-Tolar. 2002. "Pimp-Controlled Prostitution." *Violence Against Women* 8:1074–1092.
- Young, Amy M., Carol Boyd, and Amy Hubbell. 2000. "Prostitution, Drug Use, and Coping with Psychological Distress." *Journal of Drug Issues* 3:789–800.

DISCUSSION QUESTIONS

1. How did the life circumstances of women entering prostitution differ for those under the age of 18 and for those over the age of 18?
2. How did time on the streets impact the shame and stigma that women experience?
3. What toll does street prostitution have on women and how does time increase this toll?