

**“You have to want it:” Women’s desistance processes in a short-term
provincial prison**

by © Amy Sheppard

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Abstract

My research examines how provincially sentenced women in Newfoundland and Labrador engage in the desistance process when imprisoned and released into the community. Desistance is the cessation of criminal behaviour. There remains a lacuna in knowledge tied to understanding how women's experiences both within and outside prisons shape their ability to engage in crime-free living after the experience of prison. Thus, I focus on women's cognitive shifts toward desistance and services that may help with the desistance process. Furthermore, I examine the impacts of mental disorders and addiction on women's desistance processes.

To examine formerly incarcerated women's processes of desistance, I have interviewed 17 formerly incarcerated women and 16 service providers who work with them. Women interviewed for this study shared their reentry experiences into the community and recommendations to improve the reentry process for other women leaving prison. Furthermore, they share how release from prison into the community informed their ability to engage in desistance. Additionally, formerly incarcerated women share how experiences of being in prison, including accessing services offered, impact their decision and ability to engage in desistance.

Service providers have experience working within systems and with a heterogeneous population of women and thus have valuable knowledge that furthers discussion around women's desistance processes. Service providers share their experience of working with criminalized women in prison and on release. They elucidated systemic barriers that hinder women's ability to engage in desistance after release from prison,

My core research questions are: How do incarcerated women in Newfoundland and Labrador plan to make changes in their lives after prison? What do women interpret as the

impacts of addiction on their ability to make changes or, simply put, desist? I seek to understand (i) if released women are informed about services that met their unique needs (i.e., substance use histories, mental health concerns, childcare issues), (ii) if they feel able to reach out to such services, (iii) and if they feel that using services will help achieve goals of desistance (if they have such goals of course). To understand women's lived experiences and, thus, the role of prison in shaping their interpretation of their possible post-prison experiences, I include an analysis of the services/supports available to women, both in prison and after their release in Newfoundland and Labrador.

Key findings consist of several factors impacting women's ability to engage in the desistance process. These include connections between desistance and drug use whereby formerly incarcerated women see their drug use as interconnected and entwined with their criminal activity. Women and service providers assert that basic needs, such as safe housing, must be met to promote desistance from crime. Stigma impacts the desistance process due to the relational nature of desistance. The desistance process requires that others see that an individual has started to change and move away from criminal activity and towards a pro-social lifestyle. Furthermore, stigma impacts practical elements of desistance, such as the ability to obtain housing and employment,

To support the desistance process for criminally involved women leaving prison in NL, service providers must support both the cognitive processes (individual work) and advocate making systemic changes. The process of desistance is rooted in an individual's desire to make changes. These changes occur within a social context that impedes many women's ability to successfully and smoothly move toward desistance

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I have completed this work in St John's Newfoundland and Labrador; therefore, I respectfully acknowledge the territory as the ancestral homelands of the Beothuk and the island of Newfoundland as the ancestral homelands of the Mi'kmaq and Beothuk. I would also like to recognize the Inuit of Nunatsiavut and NunatuKavut and the Innu of Nitassinan, and their ancestors, as the original people of Labrador. I strive for respectful relationships with all the peoples of this province as we search for collective healing and truer reconciliation and honour this beautiful land together.

A land acknowledgment is poignant given the subject of my dissertation. Indigenous people are disproportionately represented in the prison system, and as you will read further, Indigenous women are particularly disadvantaged and stigmatized within the criminal justice system. I want to acknowledge the many Indigenous women with whom I have worked over the years. One woman, who is a proud Inuk, gave me an Inukshuk key chain and a figurine because she loves to share her culture. An Inukshuk is a marker signalling that others have gone before and we can continue in their footsteps as we make our own journey. The Inukshuk reminds me to continually bring forth the wisdom I have learned from women with whom I work to the new women I encounter. Within this dissertation, I hope to share the voices of those women who often feel voiceless—Nakummek to the women who have shared their stories.

I dedicate this manuscript to women I work with in prison and the community. It is those women who share their lives and stories with me that have made this possible. I hope that this research has made me a better Social Worker and a more humble listener to continue supporting and advocating for criminalized women both in prison and community. I am honoured that so many of you share your lives with me. Thank you to the service providers I interviewed for this project. I appreciate your insight, passion and dedication to the people with whom you work. Thank you to the staff at NLCCW for supporting my work in the prison.

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Chapter One: Introduction

“That’s not the life for me. I never was that person.” Jane¹, a formerly incarcerated woman, aged 30-35

Ashley’s story

I want to share a story about a typical woman incarcerated in the Newfoundland and Labrador Correctional Centre for Women. Ashley is in her early twenties and served a year-long sentence for a series of shoplifting and break-and-enter convictions. She has been to Newfoundland and Labrador Correctional Centre for Women a few times. Ashley is funny, smart, and a loyal friend. She participates in all activities and programs (e.g. school, therapeutic groups, and bible study) offered in prison, and staff see her as a good influence on the other women. She completed high school while in prison and is now thinking about possibilities for future education.

Ashley’s life outside prison is chaos. Ashley has a drug addiction. While Percocet is her drug of choice, she will use, as she says, whatever she can get her hands on. In moments of clarity, Ashley has told me drugs numb the pain, and that is why she continues to use them. Growing up, her family was neglectful, and they too had problems with substance abuse. Ashley did not have a stable family life as a young girl. Therefore, with little family protection, she was raped and assaulted. As an adult, Ashley has had violent relationships with boyfriends. She is in love with the father of her child, who is controlling, abusive, and in prison. Her child was removed from her care and adopted. The loss of her child continues to be a raw wound. While in prison, Ashley does not use drugs, so all the pain from her potentially psychologically traumatic

¹ All names of interview participants are pseudonyms.

experiences floods her senses. She has flashbacks, nightmares, and disassociates. She has moments of rage that she cannot control and panic attacks.

Ashley has goals for when she leaves prison. She would like to continue the schooling she started while in prison. She would like to work and have a family. Ashley is tired of a lifestyle that has brought her to prison multiple times and wants to make some changes. However, she is not sure how she might make these changes.

Consider the name of the institution where Ashley has been living for a year, a correctional centre for women. What does this name imply? In the case of a “correctional centre,” correction means rehabilitation. I want to start from the assumption that prisons, at least in part, have a goal of rehabilitation, whereby a person has the opportunity to address criminal behaviours so as not to commit another crime (Ward & Maruna, 2007). Thus, one of the focuses of rehabilitation is that prisoners do not return to prison. Beyond rehabilitation is the goal of desistance, a process by which people disengage in criminal activity and move toward a pro-social lifestyle (Weaver & Weaver, 2013). I return to think about Ashley, a typical woman serving time at Newfoundland and Labrador Correctional Centre for Women. How might her experiences in prison shape her ability to desist from criminal activities and meet her goals? What does she need when she is released from prison to support her in desistance? Ashley is an example of many women who serve time in a short-term provincial prison, and the questions apply to all of these women. Given these questions about desistance, while the findings are not generalizable to all women who have been in prison, the purpose of my current study is to explore the experiences of 17 women released from prison and how prison impacted their goals and eventual desistance from criminal activity.

A note about language

Before delving into the research, I examine the question of the language used throughout the current project. Scholars examining the lives of those involved in the criminal justice system often use the term “offender.” In addition to academia, this term is widely used within the prison system by staff, correctional officers, and administrators. While the term “offender” is based on the idea that people commit criminal “offences,” the term is problematic. Faith (2011) suggests that the term “offender” implies that those who are convicted of crimes are more “offensive” than those who may commit crimes but are not apprehended or convicted. Faith’s (2011) stance draws attention to power imbalances within the criminal justice system whereby class, race, and gender play essential factors in who becomes criminalized (Barak et al., 2010). The term “female offender” is rife with negative connotations, including the idea that women are offensive in ways that men are not (Comack, 1996). The term “female offenders” implies that women are offensive because they have committed crimes, but also they are offensive in that they have transgressed feminine norms (Carlen, 1995; Lander, 2015; Leverentz, 2014). Thus, within the current study, I use the term ‘criminalized women’ to acknowledge that criminalization is a social process whereby women become criminals (Pollack, 2007).

In my daily work at Newfoundland and Labrador Correctional Centre for Women as a social worker with imprisoned women, I tend to use the words “participant,” “client,” or even the general “woman.” Within my dissertation, I will use the terms “formerly incarcerated women” and “criminalized women” when discussing my research. I come to use these terms after a great deal of reflection. My comfort and respect for the women I work with compel me to think of my research participants as “women” much like me. Nevertheless, there is a significant difference between my participants and myself, I have not lived in prison, and they have. As Hannah-

Moffat (2000) points out, not acknowledging this key difference obscures “wider relations of power not only between institutions and individuals but between women” (p. 520). Thus, I want to explicitly acknowledge the power imbalances inherent in my relationships with formerly incarcerated women. I come from a place of privilege in my position as a white, middle-class, educated woman. With this privilege comes the power to move through the world with relative ease, having many doors opened for me. I have not experienced prison. As I share later in the research project, women who have experienced prison are subject to stigma due to their criminal record status and incarceration. These are experiences I have not endured. Thus, power imbalances exist in how formerly incarcerated women interact with the world around them.

Furthermore, power imbalances exist by nature of my role as a social worker and a researcher without having lived in prison². While recognizing these power imbalances, throughout my research, I respectfully refer to interview participants as women. They are women trying to live their lives as best they can. From feminist standpoint epistemology, women’s “*concrete experiences* provide the starting point from which to build knowledge” (Brooks, 2007, p. 6). Thus, having formerly imprisoned women act as participants in my research project helps a diverse group of women come together to voice the shared experience of being in prison, their experiences of release and life thereafter.

² Please see Chapter Three for a detailed discussion regarding ethical considerations of power in consideration of my role as both a Social Worker and a researcher during the course of the current project.

Research problem

Female prisoners make up 15% of admissions in provincial/territorial prisons and 7% in federal prisons in 2018/2019 (Malakieh, 2020). Given the small numbers of female prisoners, their unique needs were historically not understood and were therefore neglected (Adelberg & Currie, 1987; Hannah-Moffat & Shaw, 2000). However, more recently, there have been efforts to understand women's pathways to crime (Chesney Lind & Morash, 2013; Miller & Mullins, 2006; van Wormer, 2010). Additionally, there has been a move toward providing gender-responsive programming for women within prisons (See Balis, 2007; Covington, 2002, 2008; Covington & Bloom, 2007; Gobeil et al., 2016; Kilty, 2012; Matheson et al., 2015). However, there remains a lacuna in knowledge tied to understanding how women's experiences both within and outside prisons shape their ability to engage in a crime-free lifestyle after the experience of prison.

Scholars of desistance, the cessation of criminal activity, posit that former prisoners tend to move towards a crime-free, pro-social life as they age and mature, developing strong bonds of attachment, including marriage and employment (Laub & Sampson, 2001; Laub et al., 1998; Sampson & Laub, 1993). Other theorists argue that while these strong bonds are helpful, a cognitive shift must occur within a desister to successfully engage in a meaningful process of desistance (Giordano et al., 2002), and, as such, the desister's self-narrative has undergone a gradual shift towards a pro-social lifestyle (Maruna, 2001). In other words, an individual engaged in the desistance process makes a conscious choice to move away from a criminal lifestyle towards a lifestyle with meaningful engagement in community life, including elements such as employment and relationships.

Missing from discussions of desistance is (i) a focus on the desistance experiences of women leaving short-term provincial or territorial prisons and (ii) a connection to the impacts of female prisoners' addiction/drug use on their movement towards desistance.

There is a considerable body of literature examining experiences of women in federal prisons throughout Canada, including literature focussing on female prisoner's mental health needs (Comack, 1996; 2018; Kilty, 2012; Pollack, 2005), institutional programming (Gobeil et al., 2016); impacts of prison on the body (Frigon, 2003) and reentry experiences post-prison (Hannah-Moffat & Innocente, 2013; Maidement, 2006). The body of literature focussed on federally imprisoned women has contributed significantly to understanding how women experience prison and reentry following longer-term prison sentences. However, there remains a gap in literature examining the experiences of shorter-term provincially incarcerated women throughout Canada. A few scholars have researched provincially imprisoned women's rehabilitative needs (See Bernier, 2010; Miccucci & Monster, 2004; Monster & Miccucci, 2005). Other scholars have examined how provincial prisons impact women's health (see Bernier & MacLellan, 2011; Comack, 2018; Daigle et al., 1999; Hu et al., 2020; Jones et al., 2019; Norris et al., 2021; Zendo et al., 2021). Buchanan and colleagues (2011) examined provincially sentenced women's substance use.

My research examines a gap in the literature regarding how provincially sentenced women engage in the desistance process when imprisoned and when released into the community. In particular, I focus on the desistance processes, including cognitive shifts toward desistance and services that may help with the desistance process. In my experience working as a service provider in a provincial prison, I have observed that women leaving provincial prisons

rarely have the same support as women leaving federal prisons. Federally sentenced women often will receive parole, which provides an opportunity for supports from correctional professionals while women live in the community to complete their sentences. Women leaving provincial prisons rarely receive the level of support that parole provides. Therefore, an examination of the reentry needs for provincially sentenced women is essential. Women interviewed for this study shared their reentry experiences into the community and recommendations to improve the reentry process for other women leaving prison. Furthermore, they share how release from prison into the community informed their ability to engage in desistance. Additionally, formerly incarcerated women share how experiences of being in prison, including accessing services offered, impact their decision and ability to engage in desistance,

In addition to the research gap in provincially sentenced women's desistance processes, there is also a gap in examining the impacts of mental disorders and addiction on women's desistance processes. Women in prison are disproportionately affected by mental health concerns compared to women in general (Zinger, 2014). Such realities suggest that female prisoners and women being released from prison require greater mental health support than non-criminalized women. What is more, female prisoners are likely to have experienced abuse/trauma (Zinger, 2014), and many women report coping with their abuse by using alcohol, drugs or engaging in self-harm (Balis, 2007). Correctional Services of Canada staff assessed federally sentenced women and found three-quarters had a substance use problem (Farrall MacDonald, 2014). In a study of provincially sentenced women, Buchanan et al. (2011) found that 82% of participants self-identified as substance users. Furthermore, women in prison are up to 10 times more likely to have a drug addiction than women in the general population (Fazel et al., 2006; Henderson,

1998). How then do mental disorders and drug addiction affect women prisoners' ability to achieve desistance and plan for their future?

Further to the focus on formerly incarcerated women's experiences, I have interviewed service providers who work with these women in prison and on release. While some researchers have explored women's experiences with the criminal justice system, researchers rarely hear from service providers who work with these women. Service providers have experience working within systems and with a heterogeneous population of women and thus have valuable knowledge that furthers discussion around women's desistance processes.

Research questions

In my dissertation, I explore the reentry and prison experiences of formerly incarcerated women in Newfoundland and Labrador to understand their desistance experiences. I explore these experiences through interviews with formerly incarcerated women and service providers who work with them.

My core research questions are: how do incarcerated women in Newfoundland and Labrador plan to make changes in their lives after prison? What do women interpret as the impacts of addiction on their ability to make changes or, simply put, desist? I seek to understand (i) if released women are informed about services that met their unique needs (i.e., substance use histories, mental health concerns, childcare issues), (ii) if they feel able to reach out to such services, (iii) and if they feel that using services will help achieve goals of desistance (if they have such goals of course). To understand women's lived experiences and, thus, the role of prison in shaping their interpretation of their possible post-prison experiences, I include an

analysis of the services/supports available to women, both in prison and after their release in Newfoundland and Labrador.

Context of the current study

In this section, I provide context to my research project. Canada has 14 systems of corrections, 13 provincial/territorial and one federal. Those sentenced to a term of over two years are referred to as federally sentenced and serve time at institutions operated by Correctional Services of Canada. Those who receive a sentence of under two years serve provincial or territorial sentences and serve time in correctional institutions run by provincial or territorial governments. Additionally, I note that provincial institutions house those on remand. Some remanded prisoners are charged but not yet convicted of a crime but not released on bail before trial. Other remanded prisoners have been convicted and are waiting for sentencing in provincial or territorial institutions. In Canada, the total number of remanded prisoners has exceeded those sentenced (Malakieh, 2020). The challenges of such large numbers of remanded prisoners include providing discharge planning due to the uncertainty of the length of stay in prison and increases in costs for security and transportation of people back and forth to courts.

Women from Newfoundland and Labrador serve provincial sentences at the Newfoundland and Labrador Correctional Centre for Women located in Clarenville, about two hours outside of St. John's, the province's capital. The Centre has the capacity to house 28 women. In the recent past, there has been a rise in admissions to Newfoundland and Labrador Correctional Centre for Women, causing overcrowding. Thus, in 2016, the Department of Justice decided to modify a section of the men's prison facility known as Her Majesty's Penitentiary to house 14 women. The government framed the decision to move women to Her Majesty's

Penitentiary as a temporary measure (CBC, 2016). While the overcrowding situation at Newfoundland and Labrador Correctional Centre for Women has not been consistent, there have been a couple of times when the section for women at Her Majesty's Penitentiary has been closed and re-opened. Most recently, ten women were serving time at Her Majesty's Penitentiary from August until October 2018. There are no women at Her Majesty's Penitentiary at the time of this writing (Fall 2021). However, should the population of women at Newfoundland and Labrador Correctional Centre for Women rise, it is a possibility that women will be housed there again.

Women from Newfoundland and Labrador serving federal time (a sentence of more than two years) are transported to Nova Institution in Truro, Nova Scotia or another women's institution in Canada, such as Grand Valley Institution in Ontario. However, Correctional Services Canada intends for women to serve their time as close to home as possible (Phelps & Diamond, 1990). Often, women sentenced to federal time will have served considerable time at Newfoundland and Labrador Correctional Centre for Women, either on remand or waiting for transportation to the federal institution. There is no federal institution for men or women in Newfoundland and Labrador. Most women from this province serve their sentences far from their home communities. While women will be released from Newfoundland and Labrador Correctional Centre for Women and return to their home communities throughout the province, the majority of women return to the St. John's area, the capital of the province.

Positionality: My place within the research

I am a white, settler, middle-class, able-bodied, non-criminalized woman. Within this identity comes enormous privilege and, I would suggest, responsibility to leverage my privilege

to give voice to those who do not have the same access to power, such as incarcerated women. I am not suggesting that incarcerated women do not have agency or “voice” to express their own feelings and thoughts. In fact, I am counting on that agency to drive the current study in that I want to hear from incarcerated women. I suggest that incarcerated women may not have access to the power to have their voices fully heard or even taken seriously due to the stigma associated with criminalization. Thus, I centre the current project around the voices of criminalized women who often do not feel heard. Rice and colleagues (2019) suggest that the privileged need to be open to the “embodied testimony of the other” (p. 17), and it is within this spirit that I interviewed formerly incarcerated women to understand their ways of knowing the world.

My place within this research is immersive in that I am both working as a researcher and as paid employment as a Social Worker in the Newfoundland and Labrador Correctional Centre for Women as a part of the Just Us Women’s Centre which is a part of Stella’s Circle. Stella’s Circle is a non-profit based out of St. John’s, Newfoundland and Labrador. The organization works with marginalized individuals who struggle with mental illness, homelessness, addiction or criminal justice involvement. Various programs in the organization provide services to help people meet goals such as employment, safe and secure housing and feeling a sense of belonging in our community. Department of Justice and Public Safety contracts the Just Us Women’s Centre to provide services to women at the Newfoundland and Labrador Correctional Centre for Women and in the St. John’s area.

I have been working as a social worker with the Just Us Women’s Centre for 12 years. Our program provides services to criminalized women both within the prison and in the community. Community-based services include therapeutic group and individual counselling,

social/recreation activities and concrete supports (accessing housing, clothing, hygiene products, access to phone and computers). Prison-based services include therapeutic group work, individual counselling and supporting prison staff with release planning.

Given these dual roles, as researcher and social worker, I have a lot invested in working with women leaving prison. I have been thinking a lot about my role as a storyteller within this research. In my social work position, I feel like I am a story holder, a story keeper. People tell me things, and I keep their confidence. People tell me stories of trauma and abuse, stories about shame, joy, anger, and lust. All kinds of stories about all kinds of parts of life: people tell me stories that make me laugh with them. People tell me stories where I have to hide my reactions and feelings. I have heard stories that make me angry, make me empathize and that I cannot get out of my head. These are stories I cannot tell. Nevertheless, these are stories that have become a part of me. These stories are a part of my soul because they connect me to deep parts of humanity.

However, now I move into a researcher role, with permission to tell stories. I am asking for stories, and people tell me their stories with the permission that I will share. Sharing stories is important. Other people have already told these women's stories. For example, local news sources often tell women's stories based on crimes committed, rarely asking women for their perspective. Women are often embarrassed by how the news stories portray them. These stories live on through Google and are easily searchable, ensuring that some women re-live one-sided stories.

I, too, will tell a story because stories matter. Hearing "layered" diverse voices over time and space contributes to understanding the experiences of people and marginalized people in

particular (McAleese & Kilty, 2019). Also, importantly, how I tell the stories matter. I feel a responsibility to tell the stories I hear because some stories need to be heard. I have a place of privilege and power that enables my voice to be heard. Thomas King believes that stories are medicine, “a story told one way could cure, that same story told another way could injure (King, 2008, p. 14). Women have trusted me with their stories with an intention to share with other women, with service providers and others in an effort to seek a “cure,” which is, improving the lives of criminalized women. So, it is with humility that I share the stories of 17 women here, as well as countless others who have shared their stories with other service providers and me.

Why I am interested in this research

In my role as a social worker, during a group in prison, I facilitated an exercise whereby everyone secretly wrote something nice to everyone else in the group. One of the women in the group wrote to me, sharing that I am one of the reasons that she is considering sobriety. While I know that it is not me, personally, encouraging her to consider sobriety, it is my role as a social worker to which she is responding. However, this was a significant moment for me. It can be challenging to work in a prison environment when your role is to help people change where so many women return. As a social worker and now, as a researcher, I want to provide a little something that helps. Thus, my interest in researching desistance. Every day I see that women want to make changes in their lives and struggle to do so, and I want to help support those changes.

I want to be clear that while my research focuses on women who want to move away from a criminal lifestyle, some criminalized women may not be interested in making changes to their lifestyle or may not be in a position to do so. These women, who may not be on a path

towards desistance, deserve understanding, support, and compassion. Kendall (2020) demands that feminist allies do not require “respectability” from women who have had to “face hard life choices” (p. 4). In my position as a social worker, I am able to see some of these “hard life choices” and am privileged to hear from women about their lives. My research informs my social work practice with individual women who want to make changes. In addition, my research has also informed my social work practice aimed at social justice and challenging structural inequalities for all criminalized women, not just those who seek to make changes to their criminal lifestyle.

Upcoming Chapters

The following dissertation begins with a review of relevant literature and theoretical foundations for the research. In Chapter Two, I review literature related to gender, including matters regarding criminalized and imprisoned women. Additionally, I introduce the theoretical framework regarding desistance, including theoretical considerations of women’s desistance. Chapter Three introduces methodological issues and methods used for the research. Chapter Four begins the analysis of my findings whereby I explore what women said they needed for successful desistance. In Chapter Five, I discuss the impacts of stigma on women’s desistance processes. Next, in Chapter Six, I examine how addiction impacts women’s desistance. Chapter Seven ties a discussion of all three analysis chapters together, including limitations and suggestions for future research. I then discuss implications for policy and practice in Chapter Eight.

Chapter Two: Literature Review and Theoretical Framework

“There’s no reason why we can’t have life-enriching programs for women in prison. Like there’s no reason we have to punish and strip away quality of life just because people are struggling. Because like really we know people who end up in prison are fucking struggling.”

Pearl, service provider, two years occupational tenure

To contextualize women’s planning experiences for a crime-free life post-incarceration, I examine several extant bodies of literature. I begin with theoretical understandings of gender, generally examining how gender is constructed within a Western context and focusing on understanding femininity and women. I then discuss the impacts of patriarchal realities shaping prison living and social experiences for women. Next, I review the scholarship on reentry into the community from prison and move toward a discussion of reentry for female prisoners. Underpinning my review is a focus on community reintegration after incarceration for women with mental health needs. I define and discuss desistance as a theoretical framework before speaking to how drug and alcohol use impact desistance, as well as how women may experience desistance. Finally, I examine stigma and the stigmatization of criminal records and mental disorders before turning to how both affect women’s experiences after periods of incarceration.

Gender

Constructions of and ideas about gender have changed over time and space. Within early western cultures, constructions of gender are entrenched in the binary biological distinction between male and female. Other cultures, such as North American Indigenous peoples, have identified variability within gender constructs (Connell, 2009). More recently, academics, medical and mental health professionals theorize gender as a fluid identity with multiple expressions (Hidalgo et al., 2013). Thus, defining gender is challenging. For some, gender is seen as a means of categorization, dividing people into the binary of men and women. These

divisions are based on gender presentation, which is an elaborate means of signalling an identity. Gender presentation, which is how we signal gender identity, may influence relationships, family construction and expressions of sexuality. For example, gender presentation can affect sexual attraction and influence whom we choose as a partner (Connell, 2009; Mitchell, 2004). Gender is also impacted by a patriarchal system of power that values maleness and masculinities (Epstein, 2007). For example, presentations and perceptions of gender may influence who gets more attention at a car dealership or pays more for a haircut (Liston-Heyes & Neokleous, 2000). Within this patriarchal system, gender places women at more risk of violence (Bordo, 2003; Epstein, 2007) and less economic opportunity (Acker, 2009; Epstein, 2007).

Consequently, gender influences mundane daily life as well as larger systems (Connell, 2009). Gender is a complicated, multifaceted, and routine activity of daily living. Thus, gender is an important sociological concept to interrogate (Butler, 1993; Connell, 2009; Epstein, 2007; Smith, 1987). It is crucial to understand how gender is constructed, including within Western contexts, to interpret the experiences of formerly incarcerated women within these contexts. Given the wide-reaching impacts of how gender is constructed, including daily life and broader social structures, formerly incarcerated women must be understood within the context of gendered existence (e.g., structural barriers to diverse employment opportunities, emphasis on family reunification). As I explore in later sections, gendered constructs impact criminalized women's experiences of prison and release from prison.

In consideration of how the experiences of formerly incarcerated women are gendered, I draw from Epstein (2007), who argues that the most fundamental divide within societies is the "boundary based on sex" (p.1). She asserts that gender needs to be the root issue in all

sociological analysis and that this has been missing or undervalued in past sociological studies. Epstein (2007) argues that gender is a master status that determines the acquisition of most other statuses, hinting at intersectionality (for a fuller discussion of intersectionality, see Collins, 1998; Crenshaw, 1991 and hooks, 2000). However, it does appear that Epstein views gender as the primary divide, as it is the “most basic and... most resistant to change” (p.3). She further states that gender divides all social institutions. Epstein’s (2007) work is problematic. She presents a liberal feminist viewpoint that focuses on women’s position in economics and access to power without considering how the goals of liberal feminism are complicit with the subjugation of racialized women, women outside the west, or working-class women (hooks, 2009; Mohanty, 1988).

Here, an intersectional lens is warranted. Intersectionality is rooted in the work of Black feminist scholars and activists (Rice et al., 2019). Collins (2015) defines intersectionality as “the critical insight that race, class, gender, sexuality, ethnicity, ability and age operate not as unitary, mutually exclusive entities, but as reciprocally constructing phenomena that in turn shape complex social inequalities” (p. 2). At its core, intersectionality examines power and how power can operate on numerous levels and across categories of experience (May, 2015). Intersectionality argues that, while a gendered analysis is essential, researchers cannot engage in gendered analysis without considering the context in which gender is produced.

Social context is vital for Connell (2009), who suggests that the study of gender moves from focusing on the difference between genders to a focus on relations, indicating that gender is a matter of social relations within which individuals and groups act. Connell (2018) further states that how gender is structured remains an important determinant of people’s experiences and

fates. Gender order affects people's access to income, the likelihood of owning land, their education, nutrition, health and illness, exposure to violence, the way police and employers treat them. Gender is essential in personal identities and is persistently affirmed or troubled by how we act in everyday life. In the following section, I focus on gendered social relationships as a critical theoretical underpinning when considering women in prison.

Women in Prison³

In this context of gender operating within social relationships, I consider how gender is enacted within prison systems and further the impacts of prison for women. There is only a relatively small and emerging literature that interrogates women's, thus gender, experiences of reentry or prison. For instance, feminist criminologists have redressed masculinist bias within criminology by attending to women's experiences of crime and interrogating gender as a concept within criminological theory (Chesney-Lind & Morash, 2013).

Researchers often base understandings of prison on men's experiences. As Bosworth (1999) argues, prison practice is determined in part by a gendered binary between the general (male) and the specific (women), meaning that policymakers, researchers and prison staff consider men to be the "default" prisoner and thus female prisoners are deviant from this understanding. In practice, this often means that prison design and programming are made for men in prison and then modified for women prisoners.

While I recognize that both masculinities and femininities are rarely theorized within discussions on penal policy (Bosworth, 1999), I focus my research project on the needs and

³ In the current study, I focus on women's experiences of incarceration and thus draw attention to these women's needs. I do want to clearly state that male prisoners are also in need of increased services, in particular to address mental health and substance use issues, both in prisons and in the community.

experiences of formerly incarcerated women, who are understudied (and never studied in Newfoundland and Labrador). In doing so, I interrogate the prison as a gendered institution with an eye to how gender shaped women's experiences around reentry.

Prisons are gendered institutions that sort and divide those who enter based on a sex binary (Jenness & Fenstermaker, 2014). Within this context, I draw attention to the implications of this sex binary. For example, fewer female populations in the correctional system mean that limited funds are allocated to female prisoners when distributed per capita (Hannah Moffat & Shaw, 2000). Another example of the impacts of prisons as gendered institutions relates to rehabilitation programming. vanWormer (2010) argues that women's rehabilitation is inappropriately modified from programming in men's prisons. Likewise, Sheehan et al. (2007) state that often, prison programming does not holistically address women's needs, arguing that female prisoners have different needs than male prisoners. For example, they state that women in prison require relational programming that addresses mental health questions, substance use and family relationships, and the barriers to reintegration, including poor employment histories and opportunities, housing and rebuilding family relationships (Sheehan et al., 2007). Women in prison require meaningful programming that addresses the lived realities of their lives. Such programming must acknowledge that women have different paths to crime, coping skills, relationships and outside responsibilities that shape prison experiences.

In Canada, female prisoners form a small percentage of the total prison population, comprising 15% of provincial and 7% of federal admissions (Malakieh, 2020). In the past, these low numbers were "too few to count," and researchers suggest that the small numbers of women prisoners contribute to their neglect (Adelberg & Currie, 1987; Hannah-Moffat & Shaw, 2000).

However, there have been efforts in the federal correctional system focusing on women's needs by creating women-centred programming following the 1990's Creating Choices document. It is laudable that Corrections Services Canada has recognized that women's needs are unique and that women require holistic, women-centred, culturally appropriate services. However, these services have also been subject to many critiques from feminist scholars and activists (Hannah-Moffat, 2001; Hannah-Moffat & Shaw, 2000; Monture-Angus, 2000; Kilty, 2012; Pollack, 2005).

Within the province of Newfoundland and Labrador, no government policy addresses women's specific needs within correctional services. However, in 2016-2017, Newfoundland and Labrador's government participated in a provincial/territorial sub-committee. The subcommittee drafted *Gender-Responsive Corrections for Women in Canada: The Road to Successful Reintegration*. The document acknowledges the need for gender-responsive⁴, trauma-informed and evidence-based services and programs for women in prisons. The *Gender-Responsive Corrections for Women in Canada: The Road to Successful Reintegration* document can guide future work with women in prison; however, the Government of Newfoundland and Labrador has not adopted a gender-responsive correctional strategy. The *Correctional Services Act* does outline in its list of guiding principles that

policies, programs and practices will respect age, gender, sexual orientation, ethnic, cultural, religious and linguistic differences and will be responsive to the particular needs of women and aboriginal peoples, the needs of offenders with particular mental health and addictions requirements, and the needs of other groups of offenders with special requirements" (Correctional Services Act, 2018).

⁴ I recognize that gender-responsive treatment also must understand the needs of male prisoners (see Ricciardelli, 2014, 2015) for a discussion regarding masculinity in prisons), however, the focus of my paper is on female prisoner's needs as they have been historically underserved.

However, although the legislation acknowledges gender-responsive treatment, I could not find any policy explicitly addressing women's needs in the provincial prison. The policy gap addressing female prisoners' needs was noted in a report reviewing four deaths in custody, including two women at Newfoundland and Labrador Correctional Centre for Women. In her report, Jesso (2018) recommended developing an evidence-based "female offender" strategy, including gender and trauma-informed interventions, programs, and services. Although gender-responsive treatment is lacking as a whole within the Newfoundland and Labrador prison system, some services are in place to address this need. Stella's Circle, a community-based non-profit, has been contracted by the Department of Justice and Public Safety, Newfoundland and Labrador, to provide therapeutic services to women at Newfoundland and Labrador Correctional Centre for Women. These services are feminist, gender and trauma-responsive and aimed at addressing women's holistic needs.

Furthermore, there are twenty-four non-profit Elizabeth Fry Societies that provide services to women in provincial and federal prisons in Canada. These societies provide a range of direct services to women in prison and on release, including employment programming, halfway houses, counselling and court support (CAEFS, 2018). In November of 2021, the Elizabeth Fry Society opened in St. John's, Newfoundland, which will provide additional services to criminalized women.

Many feminist criminologists, researchers, and service providers echo that women in prison require specialized treatment as put forth by Correctional Services Canada (See Balis, 2007; Covington, 2002, 2008; Covington & Bloom, 2007; Gobeil et al., 2016; Kilty, 2012; Matheson et al., 2015). However, in providing these services to women in prison, it is crucial to

examine the values and beliefs at play critically. Hannah-Moffat (2001) argues that Correctional Services Canada has adopted the same assumptions as many feminist criminologists: women in prison have more in common with other women outside of prison than with other men in prison. Within these assumptions, they stress commonalities shared by women as a marginalized and disempowered group. Hannah-Moffat (2001) argues that this view reflects some experiential and demographic similarities but fails to recognize women's heterogeneity. She further asserts that the viewpoint minimizes differences in race, sexuality, class, and power between women in prison.

Furthermore, asserting that women in prison are the same as all women, the fundamental difference between women in prison and free women is obscured (Hannah-Moffat, 2001). The difference is that free women are free. Saying that all women are the same conceals the more comprehensive relations of power. The concept of woman-centred correctional services gives gender priority over all other factors. Prisoners share dehumanizing pains of imprisonment, implications that women in prison are just like other women or have nothing in common with men in prison denies the involuntary and unique aspects of imprisonment.

Women in prison do share challenges with male prisoners. In general, both male and female prison populations are young, are often poor, are under/unemployed with little formal education, and their offences usually include high alcohol and drug use (Hannah-Moffat & Shaw, 2000). On the other hand, women in prison differ from men in prison due, in part, to the broader marginalization of women in society. Below, I provide an analysis of ways in which women's needs are different due to the gendered nature of family relationships, housing and poverty, and trauma histories that contribute to drug use and self-harming behaviours.

Parenting and Family

Many women in prison are parents, and many provided care for their dependent children before entering prison. Issues around custody and childcare are arguably more concerning for women than men (Hannah-Moffat & Shaw, 2000; Zinger, 2017). Researchers in Scotland have found that only 17% of fathers looked after children while their mothers were in custody, whereas 87% of mothers care for children while the children's father is incarcerated (Loucks, 2004). In the United States, data reveal that 5% of children lived with their father while their mother was in prison, while 90% of children lived with mothers while their father was in custody (Morash et al., 1998). Thus, men in prison are assured that their children are cared for while serving their prison sentences. However, incarcerated women will need to make childcare arrangements or suffer the pains of child welfare involvement and likely removal of their children (Barret et al., 2010).

Problems with family visits further exacerbate relationships that women have with their children. Fewer women prisoners mean that prisons are few, and families have to travel great distances to visit prisoners (Shantz et al., 2009). For example, In Newfoundland and Labrador, there is one provincial prison for women. It is located outside the capital city, where most of the population lives. Given the great distances involved in travel, women are often not able to have visits with their families. However, visiting restrictions due to COVID-19 allowed prison staff to be creative in arranging contact with families. Women at the Newfoundland and Labrador Correctional Centre for Women have been having video visits with family. While not the same as an in-person visit, access to family has increased with the introduction of technology. The addition of family visits via technology has helped women access their families as long distances

and lack of transportation often made visits near impossible prior to COVID-19 restrictions. The increased family access facilitated by video continued when restrictions were relaxed.

Housing

Women are more likely to lose housing than men while in prison, as they are more likely to be single parents with their names on the lease. Men are more likely to have a partner at home to maintain the household (Codd, 2013; Loucks, 2004). While men in prison are often poor and underemployed/educated, women in prison have even lower education, employment, and job skills than male prisoners and experience even more poverty and welfare dependence than men (Comack, 2018; Hannah-Moffat & Shaw, 2000). A more detailed housing discussion is below in the section on women's needs when re-entering the community from prison.

Mental Health Concerns

Incarcerated women experience high rates of mental health problems, including Post Traumatic Stress Disorder, depression, anxiety, substance use, schizophrenia, mood disorders, personality disorders (Brown et al., 2018; Kilty, 2012; Stanton et al., 2016). Stanton et al. (2016) conducted a systematic literature review of studies on women's mental health needs on release from prisons. They found that released women had mental health symptoms, histories of psychological trauma, substance use issues and difficulties accessing psychiatric services and medications on release. Furthermore, released women's mental health concerns interacted with motherhood challenges, supports, access to basic needs and criminalized behaviours. The researchers also found that while positive supports helped, mental health symptoms often made accessing support more challenging. The researchers demonstrate a need to address women's

mental health needs before leaving prison and create a release plan to assist with entry into communities.

Trauma and Substance Use

Mental health issues can take numerous forms, including trauma and substance abuse. Numerous researchers have indicated that most women in prison have experienced trauma in their lives, often in multiple instances and at the hands of multiple perpetrators (Browne et al., 1999; Cook et al., 2005; Covington & Bloom, 2007). Within Canada, 33% of women imprisoned in federal prisons are diagnosed with Post Traumatic Stress Disorder (Derken et al., 2017). While this is significant, I further note that many more women report histories of sexual (68%) and physical abuse (86%) than have been diagnosed with Post Traumatic Stress Disorder (Zinger, 2014). Thus, many more women may be suffering due to trauma histories than are formally diagnosed. While men in prison also have trauma experiences, trauma itself is a gendered concept in how symptoms are expressed, in types of trauma suffered and treated (Covington & Bloom, 2007; Covington, 2011; Matheson et al., 2015). Women are more likely to experience trauma at the hands of a loved one (family or a partner), further exacerbating the experience of trauma with feelings of betrayal and confusion (Covington, 2003). Women are likely to experience trauma symptoms manifesting as self-harm, depression, and suicide behaviours or thoughts (Pollack & Brezina, 2007). These symptoms are often interpreted as problematic behaviours within a prison context, leading to possible punishment (Benedict, 2014; Pollack & Brezina, 2007). Furthermore, often women turn pain from trauma inward and use drugs, alcohol or self-harming behaviours to cope. Thus, many women in prison are forced to undergo withdrawal from drug use while in prison. Not only do women experience the pain of detox, but they also have to face issues that drugs had been numbing (Loucks, 2004; Richie, 2001).

Women respond to and experience prison differently than men. However, women's responses to the pains of imprisonment (and their trauma histories) are often interpreted as pathology, deeming women in prison as "disordered and disorderly women" (Pollack, 2005, p. 76). For example, women are more likely than men to engage in self-harming behaviours (Chamberlen, 2016). The framing of women as out of control has led to a history of managing women through medication⁵ and the viewpoint that women in prison have high needs and are difficult to manage (Kilty, 2012). Staff within prisons often regard women in prison as difficult to handle, more verbal, and more emotional than male prisoners (Hannah-Moffat & Shaw, 2000).

Indigenous Women in Prison

Indigenous women are over-represented in the Canadian criminal justice system. Criminalized Indigenous women are often regarded as "triple deviant" within the mainstream population. They have deviated from mainstream cultural norms of what it means to be a woman by engaging in criminal activity, a behaviour culturally read as masculine. They are further marginalized due to race and cultural traditions (Yuen, 2011, p. 98). Like elsewhere in Canada, Indigenous people are disproportionally represented in Newfoundland and Labrador's criminal justice system. In 2012-2013, Indigenous people made up 20.5% of federally incarcerated persons and 3% of Canada's adult population (Correctional Services Canada, 2014). In NL,

⁵ It is interesting to note that the psychiatric services within the Newfoundland and Labrador prison system have been criticized for not providing medications to prisoners and has been subject to peer review examination as a result of same (See Klassen, 2012). This is a contrast to literature that focuses on federal systems which asserts that women in prisons are over medicated (Chartrand & Kilty, 2017; Kilty, 2012; Langner et al. 2002). The lack of medication is an issue that arose during interviews with women who have spent time at the Newfoundland and Labrador Correctional Centre for Women (See Chapter Four).

female Indigenous⁶ admissions to adult custody comprise 24% of all admissions (Malakieh, 2018) while making up 7% of the province's population (Chernikova, 2016).

There is an overrepresentation of women of colour in federal prisons in Canada, with nine percent of women in federal custody identifying as black (Balfour & Comack, 2014). However, this is not the case within Newfoundland and Labrador, with very few women of colour, other than indigenous women, serving time in the provincial prison. The few women of colour in the local prison are likely due to Newfoundland and Labrador's small Black population.

Much of the literature regarding the overpopulation of Indigenous people in prison looks at the federal criminal justice system. It may not fully reflect experiences within the Newfoundland and Labrador context. While the Indigenous population across Canada has many cultural differences, the loss of identity and fragmentation due to colonization are similar experiences contributing to over-incarceration (Martel & Brassard, 2008). However, within Newfoundland and Labrador, the history of how governments have treated Indigenous populations differs from the rest of Canada. This unique history has indeed contributed to ongoing social problems, including over-incarceration. Before Confederation, the government of Newfoundland had largely ignored Indigenous people; thus, within Labrador, in particular, Indigenous peoples maintained some degree of autonomy (Tanner, 1998). The government of Newfoundland had nothing like Canada's Indian Act, no reserves and no rules about Indian status, which would legally give Indigenous identity to a population (Grammond, 2013). Thus,

⁶ Indigenous identity is self reported. The vast majority of those identifying as Indigenous within Newfoundland and Labrador Corrections are Inuit or Innu and are from Labrador.

Indigenous identity within Newfoundland and Labrador has shifted over time due to stigmatization and assimilation.

During the Confederation negotiations in 1949, Newfoundland's and Canada's governments decided to treat Newfoundland's Indigenous people no different from other people of Canada. At the time, the Indian Act was seen as a temporary measure that would prepare Indigenous people for assimilation into white culture. Accordingly, extending the Indian Act to Newfoundland would deprive Indigenous people of rights, such as the right to vote. Thus, it was seen as better not to have the newly formed province of Newfoundland follow the Indian Act and leave the Indigenous peoples' governance to the provincial government (Grammond, 2013). For more than half a century, the federal government refused to recognize its constitutional obligations to Newfoundland and Labrador's Indigenous peoples. The lack of recognition has been a failure on the part of governments, both federal and provincial, to provide Indigenous citizens of Newfoundland and Labrador with the level of service received by other Indigenous peoples in Canada. First Nations status in Newfoundland and Labrador is being achieved slowly and in a piecemeal fashion. However, provincial and federal governments' lack of action in assuming their constitutionally binding responsibility has had lasting negative repercussions on Indigenous well-being within Newfoundland and Labrador (Burns, 2006).

Thus, within Newfoundland and Labrador, Indigenous women are over-represented in the correctional system and face many challenges due to race, geography and language. During my Master's work within Newfoundland and Labrador Correctional Centre for Women, I interviewed staff about Indigenous women's challenges serving time in this province. At the time of that project, there was a specialized half-time position, titled the Aboriginal Liaison, which

provided services to Indigenous women. That position has since been terminated. The Department of Justice and Public Safety contracted the First Light Friendship Centre (Formerly St. John's Native Friendship Centre) to provide services to Indigenous women at Newfoundland and Labrador Correctional Centre for Women. The change from an Aboriginal liaison position to a First Light Friendship Centre impacted the programming provided to Indigenous women as hours of service have been reduced. However, First Light Friendship Centre provides essential cultural programming within the prison, allowing Indigenous women to remain connected to cultural activities such as smudging and beading. At this time, the implications of the move toward a non-profit agency providing services to Indigenous women are unclear. It may be possible that an outside agency will challenge problematic correctional discourses; however, further study is needed.

Some of the challenges identified for Indigenous women at the Newfoundland and Labrador Correctional Centre for Women include racism from other prisoners and feelings of loneliness and isolation. Furthermore, Innu and Inuit women are often "lumped" together by staff without acknowledging the differences and occasional clashes between these two groups (Sheppard, 2016). A further barrier for Indigenous women at Newfoundland and Labrador Correctional Centre for Women is language. English is not the first language for some women from small coastal communities, challenging providing programming and services (Sheppard, 2016).

Most Indigenous women in prison come from Labrador and are very far from home. On release, their journey home includes the two-hour bus ride to St John's airport and then a flight to Goose Bay. From there, many women will then continue to smaller coastal communities. On the

other hand, there is a correctional facility for men in Labrador that offers culturally specific programming and is closer for family visiting. Indigenous female prisoners from Labrador do not have access to the same services as Indigenous men serving prison time.

Women in prison have different experiences than men in prison, both due to women's societal expectations (work related to childcare, for example) and expectations of living in and responding to institutions and rehabilitative programming designed for white men. Women in prison need gender-responsive, trauma-responsive and culturally relevant philosophies to fully participate in any potential rehabilitation programming within the prison system and beyond. My research focuses on women's experiences when released from prison, including their plans while incarcerated. To provide context for the experiences of women released from prison, next, I examine reentry from prison into the community, first more generally and then looking at specific reentry experiences for women.

Reentry

Reentry is the experience of being released from prison (Travis, 2005). Defining reentry as simply being released from prison implies that little or no preparation work was done to help prisoners transition from work to home. As Travis (2005) states, reentry is not a form of supervision, like parole or probation, and it is not a goal, like rehabilitation and reintegration. Instead, the concept of reentry reflects that most who enter prison will return to the community and may not have any support in doing so. Notably, reentry is not optional; most prisoners will be released from prison (Travis, 2005). Travis (2005) bases his work on reentry on the penal system in the United States, and thus thoughts about reentry are different within Canadian criminological thought and practice. To illustrate the differences in Canadian and American

conceptions of reentry, Griffiths et al. (2007) suggest that the terms such as reintegration, reentry, and resettlement are used within Canada interchangeably. The conflation of these words may reflect the parole system in place, designed to provide support to prisoners after leaving prison and living in the community.

In the Canadian justice system, a judge provides a sentence for a specific length of time. Prisoners then are eligible to apply for parole after serving a portion of their sentence (one-third). A prisoner can then be released for day parole or full parole with varying supervision levels pending the parole board's risk assessment. Furthermore, federal prisoners are eligible for statutory release after serving 2/3 of their sentence, and, if successful, they will be under supervision in the community (Correctional Services Canada, 2019). These supervision models in the community support the reentry philosophy that prisoners will require support to more fully integrate within the community on release. However, Correctional Services Canada operates these services, which often applies to prisoners serving longer-term sentences.

Prisoners serving short-term sentences⁷ do not have the same access to parole and, thus, supervision and resources within the community. Instead, there are limited options for prisoners leaving after a short-term prison sentence. One such option is a temporary absence. Individual prison administrators administer and grant temporary absences for medical, employment or

⁷ Policy states that anyone serving a custodial sentence is eligible for parole, whether serving a federal or provincial sentence. In reality, because the parole process is paper work intensive and requires a great deal of wait time, prisoners in provincial prisons are advised not to apply for parole unless they are serving a sentence close to two years in length. It is unlikely that the application would be processed if they are serving a sentence shorter than this. Furthermore, it has been my experience in working in the provincial prison, that women serving federal time are prioritized by Correction Services Canada and that women serving provincial sentences who are eligible for parole may be left waiting. This wait time is exacerbated by the lack of a half way house for women in Newfoundland and Labrador.

treatment reasons⁸ (Correctional Services Act, 2018). The federal prison system also uses temporary absences, including work or treatment opportunities (Parole Board of Canada, 2021). Researchers have found that prisoners who receive temporary absences from federal institutions have lower unemployment rates, are less likely to return to prison and are less likely to return on a new offence (Helmus & Ternes, 2017).

Another option for supervision after a short-term prison sentence is a probation order. Probation is a community-based sentence designed for those the courts deem to require supervision, control and counselling to develop their potential as law-abiding community members (Justice and Public Safety, n.d.). Provincial departments manage probation, and probation is part of a judge's sentence rather than a condition of release from prison (Parole Board of Canada, 2021). In working in the Newfoundland and Labrador provincial correctional system, my experience is that probation does not have the same resources as parole, such as housing and employment services. Thus, there is a mixed reentry system as some prisoners will receive support with housing and employment from Correctional Services of Canada when released into the community. Others are released into the community with a probation order, which provides supervision and referrals for counselling (Justice and Public Safety, n.d.).

Additionally, problematic for released prisoners is when community supports are stopped when parole ends (Sheppard & Ricciardelli, 2020). The parolee is no longer under the supervision of Correctional Services Canada, and the provided services end at their Warrant

⁸ Given the limited research regarding provincial prisons, there is a lacuna in research regarding Temporary Absences and how they work within provincial prisons. However, as a service provider working in the prison system, I have observed that the lack of halfway houses for women in Newfoundland and Labrador means that Temporary Absences are granted less often for women. An examination of Temporary Absences within Newfoundland and Labrador prisons systems is an area for further research.

Expiration Date (the end of the sentence). The end of services may be challenging for some parolees who continue to need support. There may not be consideration given to what supports the parolee may require post-parole. As Hannah-Moffat and Innocente (2013) state, "...they must also be given the opportunity and systemic resources to support those changes and to *thrive*, not just to 'successfully' complete their parole without incident" (p. 95). Hannah-Moffat and Innocente (2013) draw attention to the fact that systems designed to support reentry, including parole, focus on the individual's responsibility to return home and engage in pro-social behaviours successfully. These systems do not acknowledge the broader social context (such as poverty, lack of employment and education, stigma and addiction) of many former prisoners that may prevent successful reentry (Hannah-Moffat & Innocente, 2013; Maidment, 2006; Turnbull & Hannah-Moffat, 2009).

Balfour et al. (2018) found that Canada's reentry process is fragmented and without a consistent means of providing release planning. In their interviews with 60 former prisoners in four of Canada's major cities, the authors found that many former prisoners were released without any planning or services available. In contrast, others had appropriate and helpful supports. They found that the difference seemed to be the type of institution rather than the prisoners' needs. Participants with short-term sentences or who were on remand were particularly vulnerable after release. Several participants reported being released to nowhere, without adequate clothing or transportation to safe accommodations.

For prisoners who serve longer sentences, there seems to be a disconnect between services and programs available in prisons and how these services help when released into the community. Researchers have reported a positive link between institutional employment

programs and community outcomes, including increased success in finding employment (Visher & Kachnowski, 2007) and decreased likelihood of being readmitted to custody (Callan & Gardner, 2007). However, in their qualitative study with 24 individuals released from prison, Ricciardelli et al. (2019) found that while these individuals took advantage of programming in prisons, these programs needed to do more to prepare prisoners for release. Released men suggested several practical issues that need support before and on releases, such as income support and government IDS.

There has been considerable research in Canadian and international contexts about what works to help prisoners on release. Sieter and Kadela (2003) offer a list of specific programming that has been proven effective for prisoners' reentry into the community. They state that vocational and work programs are effective in reducing recidivism and improving job readiness. They further stated that educational programs that link to community resources are best. Furthermore, drug treatment programs do work in easing the transition from prison to the community. Two such examples of community connections are STRIDE Circles (STRIDE, nd) and Circles of Support and Accountability (COSA) (COSA, 2015). Both agencies provide social and emotional support for prisoners on release in the community. STRIDE Circles of support train volunteers to act as friends and support women in a Federal prison in Canada. Forming relationships while women are incarcerated, the Circles continue to support releasees during reentry and reintegration into the community. Through these Circles, former prisoners can connect to communities and something bigger than themselves (Fortune et al., 2010).

A volunteer group developed Circles of Support and Accountability to address the gap left by those prisoners who have committed sexual offences and left prison on their warrant

expiry date. A warrant expiry date is the final date of a prisoner's sentence. Within Canada, the parole system means that prisoners can leave prison and live in the community under supervision until their warrant expiry date. Some prisoners do not leave prison on parole but rather leave at their warrant expiry date (the end of the sentence). Those prisoners who did not leave prison on parole are left without a formal network to support release and reintegration into the community. With support from professionals, groups of volunteers comprise the Circles and support the released individual (Wilson et al., 2007). Findings have shown a reduction in recidivism of 71% for individuals involved in these types of programming (Wilson et al., 2009).

Likewise, Together Women, a UK program, was set up to address a rising female prison population (Hedderman et al., 2011). The program consisted of centres throughout the UK, offering drop-in services such as counselling, recreation, and training in managing mental health, parenting, job skills and life skills. Hedderman et al. (2011), part of the program evaluation team, assert that qualitative research must produce a comprehensive understanding of how the program works and its benefits and limitations when evaluating such programs. Such an analysis demonstrates 'what works' from the women's perspective. Furthermore, 'what works' does not always mean recidivism or desistance per se, but women's positive experiences themselves are also valuable proof that the programming is working. Interviews with Together Women participants found that lack of belief in the ability to change was at the core of problems (Hedderman et al., 2011) in keeping with Maruna's (2001) work on cognitive transformation path to desistance. He posits that for a person to change, moving toward a pro-social life, they must first believe in their ability to make changes. Thus, working within a service delivery model where staff and community support change is vital for rehabilitative programming.

Maruna's (2011) thoughts about rituals can help with reentry. He argues that if rituals serve a purpose in society, which is to create solidarity, what is lacking in reintegration processes is a familiar ritual. The reintegration process is unlike punishment, where there are many familiar rituals associated with courts and prisons. Maruna (2011) asks what would be needed to develop rituals of reintegration powerful enough to counteract the degradation of the court and prison system. He states that contemporary Anglo-American societies are bad at reintegrating and re-accepting people who have committed crimes back into society. Thus, rituals for rites of passage could be an effective means to bring people back into communities. Maruna (2011) suggests that reintegration rituals could include symbolic and emotive acts such as expressions of remorse and messages of hope to those who have committed crimes from the community. Rituals must involve the community, emphasizing a community of care, not just professionals or volunteers, but the public to witness as there is often no medium available to demonstrate reintegration. Maruna (2011) suggests shifting from a focus on risk to looking at achievements, a way of thinking that can influence how we think about reentry.

Some researchers suggest that reentry is a process that begins in prison and affects individuals long after leaving. Echoing Travis' (2005) sentiment that all prisoners return to the community, reentry can be (and should be) planned for with the individual prisoner's participation, support systems, and service providers in prison and the community. The process can begin in prison with prisoners identifying needs and developing skills to transition back into their community. However, reentry plans must also be future-oriented and consider desistance goals to prevent future prison terms. These reentry plans must be tailored to the individual. Given the individual nature of such plans, it is crucial to consider that women may have differing needs on leaving prison. A discussion of such needs follows.

Women's Needs on Reentry

Women in prison have high levels of needs and vulnerabilities (Bateman & Hazel, 2014). The challenges women face on reentry are compounded by existing gendered inequalities (Maidment, 2006). Thus reentry considerations need to be gender-responsive and trauma-informed and help women find a sense of “agency” (Balis, 2007). Gendered inequalities mean that women returning from prison are often returning to the same conditions that they left, poverty, unemployment, challenging family dynamics, as well as mental health and substance use issues. Women released from prison are stigmatized, arguably more so than most men, and suffer ill effects from social inequalities. For example, safe and affordable housing is a concern for most women on release, as many would have lost their housing while incarcerated (Maidment, 2006).

Added to these issues is the complicating factor of a criminal record, which may come with expectations from parole or probation systems. As Leverentz (2014) points out, messages from well-meaning professionals can be at odds with women’s expectations and relationships. For example, parole officers and other professionals (such as an addictions counsellor) tell many formerly incarcerated women to avoid people or places that may lead them back into old habits. However, this may be improbable and limit contacts with family and friends they have considered supportive. Given these issues, reentry is a complicated process for many women leaving prison and returning to home communities. A detailed discussion of women’s challenges and needs on reentry follows.

Housing Needs for Women on Reentry

One of the challenges when discussing housing for former prisoners is that much of the literature focuses on paroled prisoners. While examining paroled individuals' housing issues is important, it ignores housing challenges for those released from prison without parole support. Researchers have yet to study provincial prisoners who are more likely to leave prison without parole support and thus have increased housing challenges. Further, women in particular often have limited housing options when released from prison. On the other hand, men are more likely to return from prison to wives/girlfriends who have managed their home life in their absence (Balis, 2007). However, if a woman lived in an apartment before her incarceration, she might lose her housing if she cannot pay rent while in prison. Other women may not want to return to living in unsafe and abusive environments (Maidment, 2006).

Halfway Houses

Prison systems use halfway houses as a transition from prison to the community for some prisoners either on a temporary absence or parole. Usually operated by a community-based non-profit, a halfway house has the dual mandate to provide both supervision and support to former prisoners on conditional release from prison (Correctional Services Canada, 2018). While much of the funding for halfway houses come from Correctional Services Canada, provincial governments can also grant prisoners temporary absences, which require the individual to live at a halfway house (Correctional Services Act, 2018).

Halfway houses provide twenty-four-hour supervision, counselling, and assistance to residents. Furthermore, some houses offer treatment, such as drug or alcohol programs. Typically, parolees live in halfway houses while they work, find a job, go to school or attend

treatment. The halfway house must be in agreement to approve the parolee as a resident. Staff can refuse to admit parolees for reasons such as a lack of resources and the individual's potential risk to the other residents and staff at the house (John Howard Society of Alberta, 2001).

A body of literature examines halfway houses' effectiveness (see Bonta & Motiuk, 1987; Costanza et al., 2015; Dowell et al., 1985; Hamilton & Campbell, 2014; Latessa & Allen, 1999). Some researchers have found halfway houses to be effective in supporting residents' successful completion of parole (Bonta, & Motiuk, 1987; Costanza et al., 2015; Hamilton & Campbell, 2014; John Howard Society, 2001; Wong et al., 2019).

On the other hand, Grown et al. (2018) completed a systematic review of nine research studies on halfway houses. They found no difference between halfway house program participants and comparison groups, who were not in a halfway house, in re-arrest, re-conviction and re-incarceration. The researchers suggest substantial methodological flaws in the studies reviewed. For example, there were no randomized controlled trials. Furthermore, the studies reviewed did not always report program characteristics such as duration, which makes the comparison between studies challenging. The authors of the review recommend a need for more methodologically rigorous research of outcomes of programs and a focus on participants' health and well-being.

Some researchers have researched halfway houses specifically for women. Calathes (1991), for example, studied a New York-based program that both housed female parolees and provided other women with an alternative to incarceration. The program allowed lawyers or judges to refer women to the halfway house as an alternative to detention. Calathes (1991) found that 16% of women residing in the house as an alternative to incarceration completed the

program. However, the study is limited as only participants under the alternative to incarceration condition, not those on parole, were included in the program effectiveness study.

Dowell et al. (1985) evaluated a Californian halfway house for women. They looked at records of 60 women from the US Bureau of prisons and compared halfway house residents to a control group with similar arrest/criminal convictions but no halfway house stay. The researchers found that the halfway house successfully reduced the frequency and severity of crime amongst female residents. They speculate that a halfway house might provide a tangible advantage to formerly incarcerated women in the form of social support, shelter and encouragement.

Caputo (2014) completed an ethnographic study at a halfway house for women in the US. She found that the halfway house replicated systems of patriarchal oppression. Caputo suggested that despite the promise to empower women to become confident and productive citizens, the house did not help reentry into productive community life. Instead, she found that most women in her study returned to a life of crime/deviant behaviour.

Housing for Releasees⁹ in Newfoundland and Labrador

The lack of safe housing is a significant barrier for women leaving prison in Newfoundland and Labrador, resulting in some women remaining in prison after being granted parole or a temporary absence. Some women from Newfoundland and Labrador serve time in Nova, the federal prison in Nova Scotia, and are paroled to halfway houses in other provinces, thus removed from their family, friends, and support. Additionally, the lack of halfway houses for women in Newfoundland and Labrador impacts women in the provincial prison. Provincial

⁹ Prisoners can be released from prison in a number of ways, through parole, a temporary absence, on a statutory release, or at the end of their sentence. Please see the earlier section on “reentry” for a detailed explanation of each.

prison staff can grant temporary absences for those who have served two-thirds of their sentence. However, without a dedicated halfway house for women, many women are not granted temporary absences.

While there are no dedicated halfway houses for women released from prisons in Newfoundland and Labrador, there are some options. Westbridge House, operated by the John Howard Society of Newfoundland and Labrador, is a co-ed facility for “adult offenders on day parole, full parole, statutory release, a temporary release, or a probation order” (John Howard Society of Newfoundland and Labrador, 2021). Westbridge House is located on the west coast of the island of Newfoundland. Throughout my work at the Newfoundland and Labrador Correctional Centre, a few women from that area of the province have accessed Westbridge House on parole or a temporary release. Other women have stated that they would rather stay in prison than go to Westbridge House due to lack of services, isolation from supports, and male residents.

Another option for women leaving prison on parole or a temporary absence is Emmanuel House, a treatment centre under Stella’s Circle’s umbrella. Emmanuel House offers a supportive environment where men and women over 18 can live while addressing their social and emotional challenges (Stella’s Circle, 2021). Correctional Services Canada contracts Emmanuel House to provide beds for parolees, two beds for men and two for women. There is often a significant waitlist, limiting women’s ability to access the option when leaving prison. Furthermore, given that Emmanuel House is a treatment centre, not all women qualify to attend. As well, some women may also not be interested in attending an intensive treatment program on release from

prison. Moreover, both options are co-ed facilities, which may be problematic for women who would not want to live with men (Maidment, 2006).

Social Capital Deficits on Reentry

Women returning to the community after prison face multiple challenges. Female prisoners may have a social capital deficit, referring to women's lack of access to social networks that traditionally provide pro-social capital, such as employment, before and after prison. Being tied to negative support networks hinders women's reintegration into the community (Cobbina, 2010). Women return home with the same lack of resources but now bring their prison record, which further thwarts efforts to find employment (Balis, 2007).

Societies should share an interest in preparing prisoners for successful reentry into the community; after all, most prisoners will leave prison and return to communities (Sieter & Kadela, 2003; Travis, 2005). Reentry support includes supporting women as they continuously and actively choose to desist from crime.

Desistance

Desistance, simply put, is the cessation of criminal behaviour (Farrall & Calverley, 2005; Giordano et al., 2002; Maruna, 2001). Desistance is not a singular event; it is a process and includes a voluntary ending to criminal behaviour. Given that criminal behaviour is sporadic, at what point can we conclude that engagement in criminal activities has ceased? Maruna (2001) gives the example of a purse snatcher who steals a purse on a Tuesday morning and does not engage in criminal activity for the rest of the day. Has this person desisted from crime? Maruna (2001) questions the use of terms like "termination" and "cessation" of criminal activity because they imply permanency that can only be known after the person is deceased. In this context,

scholars have highlighted a movement toward conceptualizing desistance as a process of turning away from criminality, rather than desistance as a defined and static event (Farrall & Calverley, 2005; Maruna, 2001). Said another way, desistance is the maintenance of a crime-free lifestyle rather than cessation of crime.

Early criminologists explained criminal behaviour as a set of sub-cultural ideals that promoted deviance. Sykes and Matza (1957) challenged this idea. They asserted that many people involved in delinquent behaviour ascribe to dominant social values but participate in deviant behaviour through neutralization techniques. Neutralization techniques are powerful self-talk narratives that justify criminal behaviours while asserting that one is a good person. Building on Sykes and Matza's (1957) theory of techniques of neutralization, Laub and Sampson (2001) and Sampson and Laub (1993) put forth a theory of social control to explain desistance. They theorize that as young people mature, positive elements gradually develop, primarily in marital attachment and job stability. Solid adult social bonds (e.g., marriage and work) strengthen ties to dominant social values and thus are a valuable motivator in desistance (Laub et al. 1998).

Building on Laub and Sampson's work, some theorists assert that cognitive processes underscore strong attachment bonds (Maruna, 2001; Giordano et al., 2002). These theories, suggesting that cognitive processes underpin the desistance process, provide the framework for my research project. I explain each theoretical framework in turn.

Maruna's (2001) theory of desistance suggests that for a criminalized person to 'go straight,' they must generate a gradual shift in self-narrative. He states that the narrative of desisters differs from those active in a criminal lifestyle in three fundamental ways 1.) the establishment of core beliefs that characterize 'true self,' 2.) an optimistic view of control over

one's destiny and 3.) a desire to be productive and give back to society. Those who desist generate a positive self-narrative that states that they are still good people even though they have done wrong. Thus, Maruna (2001) argues that desistance is not merely something that happens to the individual but also an active commitment by the individual.

Giordano et al. (2002) present a theory of cognitive transformation in addition to the age-graded theory of informal social control presented by Laub & Sampson, (2001) and Sampson and Laub (1993). The age-graded theory of informal social control argues that crime has an inverse relationship with an individual's bond to society. The less attached someone feels to their community (e.g., through schooling or work), the more likely they will engage in anti-social activities, such as crime. Giordano et al. (2002) agree that pro-social attachments such as marital bonds/jobs gradually constrain behaviour. However, they argue that it is the strength of these relationships and the ability to gain social capital through relationships that influence desistance.

Furthermore, Giordano et al. (2002) argue that a cognitive shift towards a pro-social lifestyle must occur to obtain the job/marriage. Giordano et al. (2002) argue that cognitive transformation—or change—happens when a fundamental shift in identity occurs. Giordano et al. (2002) identify a four-stage cognitive process in the movement toward desistance. First, the individual must be open to change (e.g., the criminally involved person is tired of their old lifestyle and wants to 'go straight'). The second stage is exposure to a 'hook.' A 'hook' may be a job, school, a relationship or anything else that creates a positive development in the life of the desister. The combination of their willingness to change and their attitude towards the 'hook' fosters desistance. Thus, it is not just the job offer that provides an impetus to lead a life of

desistance. One needs to want to live a crime-free lifestyle, invest in the job, and believe the job is meaningful and contributes to a crime-free life.

The third stage of cognitive transformation in the process of desistance is envisioning a replacement self (e.g., a new pro-social version of themselves). The shift in identity is vital in allowing for new cognitive constructs that encourage the person to think about themselves as someone who does not engage in criminal behaviour. Once established, the new identity guides desistance behaviours (i.e., a criminal lifestyle is no longer compatible with the new identity). The 'hook' begins the process of creating a new identity, and "a solid replacement self may prove the stronger ally of sustained behaviour change" (Giordano et al., 2002, p. 1002).

The final stage in cognitive transformation is how the desister views their former criminal lifestyle. The 'capstone' of the process of change is when the desisting person no longer sees their old criminal behaviours as "positive, viable, or even personally relevant" (Giordano et al., 2002, p. 1002).

I have used cognitive-based theories as an initial framework to understand provincially-sentenced women's plans for change after leaving prison. I am interested in how women frame their decisions and agency as they move toward desistance. The goal of desistance can undoubtedly be understood within the context of the individual as they make shifts in thinking and behaviour as they move toward a crime-free lifestyle. Thus, cognitive theories of desistance in the current project illuminate formerly incarcerated women's journeys toward desistance because they frame their pathways as their own decisions, asserting agency in their lives. However, cognitive theories of desistance are subject to critique as they can ignore the contexts in which desisters (and persisters) make their decisions (Barr, 2019; Comack, 2018; Sered,

2020). Furthermore, agentic theories of desistance, such as Giordano et al.'s (2002) theory, may not fully explain the impetus for a cognitive shift or why one particular “hook” might enact change at a particular time (Weaver, 2019).

As illustrated in the above sections of the current chapter, women leaving prison will face many barriers to reentry into their communities. Systemic and structural issues, including formerly incarcerated women's lack of social capital (Hart, 2017), will impact their ability to engage in desistance despite women's cognitive processes and desire to live a crime-free life. The section below regarding women and desistance further details feminist criminologists' challenges to cognitive-based desistance theories, asserting that to understand women's desistance processes fully, researchers must also examine systems and structures that impact women's lives.

Thus, it is with an understanding of the structural and systemic contexts for formerly incarcerated women that I use cognitive-based theories of desistance to understand how women think about their relationship with desistance within the current project.

Desistance and Criminalized Women

In the early development of desistance theories, there was an absence in consideration of how women may be impacted and experience the process of desistance (Barr, 2019). However, more recently, many researchers have examined the role of desistance in women's lives. In a review of the literature, I have noted two bodies of literature, one that compares women to men and one that centres on women's experiences. In the first body of literature, researchers ask if the theories that have been developed using male subjects also apply to women (Bersani et al., 2009; Leverentz, 2006; McIvor et al., 2004; Rodermond et al., 2016; Uggen & Kruttschnitt, 1998).

The second body of literature takes a more critical approach to desistance theory and centers women's voices and questions if current modes of thinking about desistance fit for women at all (Barr, 2019; Hart, 2017; Opsal, 2012). These studies are not comparative but more a stand-alone examination of women's experiences with desistance. I will examine each of these bodies of literature in turn.

Comparative Studies. Rodermond et al. (2016) reviewed 44 studies of female desistance to examine whether male-based theories of desistance apply to women. They defined desistance as termination or reductions in crime and found that social bonds theory applied to women. Furthermore, Roderman et al. (2016) found that cognitive transformation theory also played an essential role in women's desire to change. Criminalized women strengthened their desire to change by realizing that the life they had been living was not good for their children, further supporting the argument that social bonds theory applied to women. Likewise, Bersani et al. (2009) found that legal marriage reduced offending across gender and socio-historical context. They further found that motherhood was a significant life event that enhanced desistance, suggesting that social bonds theory applies to women.

While Rodermond et al. (2016) found that generally, theories of desistance developed with men applied to women, they also noted gendered differences. For example, there is a gendered difference in marriage/partnerships as either is more likely to increase the odds of crime reduction and termination in men than women. On the other hand, researchers found that some other relationships had a more substantial effect on women. For example, a woman's partner's anti-sociality increases a woman's criminal involvement but does not affect men. Nonetheless, the risk of losing a non-criminal partner was a reason to stop engaging in criminal

activities for women but not men. Rodermond et al. (2016) also found a connection between gendered differences and employment in desistance processes. They found that employment had a more considerable impact on male desistance than on female desistance.

Uggen and Kruttschnitt (1998) found that relationships greatly impacted women's desistance. The researchers used self-reported illegal earnings and self-reported arrests as a measure of desistance. They found that women were more likely to be attached to crime and deviance due to relationships (boyfriends, pimps, husbands). I link anti-social relationships to Laub et al.'s (1998) observation that women tend to "marry down" to an anti-social partner, while men marry "up" to a pro-social partner, explaining gendered differences in desistance.

Further to this, Leverentz (2006) asserts that criminalized women may not have the same access to pro-social partners in the same way men do. Due to the stigma associated with being a woman involved in the criminal justice system, women may have fewer choices when returning to a community due to their marginalized social status. Leverentz (2006) interviewed 49 criminalized women. She found that while women did not form relationships with pro-social partners (defined as no history of offending), many women could form supportive and mutually beneficial relationships despite drug-use and offending histories. At the same time, women in the study were aware that staying away from relationships may be necessary or beneficial for desistance, suggesting that for some, personal agency was more important than relationships.

Further connected to social bonds theory, Giordano et al. (2002) found that childbearing emerged as a factor in 'ageing out' of deviance, but this was far from universal among women in their study. Furthermore, they found, traditionally, desistance related hooks such as employment were not prominent in women's narratives. Instead, women who were more successful desisters

crafted more traditionally passive and feminine identities, such as a good wife or mother, roles that may be considered limiting in some respects regarding an ability to have an independent lifestyle.

In addition to the importance of social bonds, desistance theorists suggest that a cognitive shift must occur for an individual to commit to ceasing criminal activity (Giordano et al., 2002; Maruna, 2001). McIvor et al. (2004) found gendered differences within these cognitive processes. They conducted interviews with 276 young people (an equal number of male and female participants). The researchers found that young women were more likely to cite moral rationales for stopping offending and more likely to emphasize the relational aspects of the process (views of parents, experiences of victimization, parental responsibilities and dissociation of offending peers). In contrast, young men were more likely to cite personal choice and agency.

Furthermore, McIvor and colleagues (2004) found that female persisters wanted to be perceived as desisters, even when they admitted to recently offending. McIvor et al. (2004) suggest that young women may be aware of socially disapproving attitudes to female offending, suggesting that society judges women not only by the criminal act but also by family, sexual and interpersonal relationships. On the other hand, offending seems to be a socially inclusive experience for many men and may cause young men to gain prestige. Women do not similarly gain the prestige associated with criminal activity (Social Work Services Inspectorate, 1998).

Unsurprisingly, the social bond theory, which states that “a job and the love of a good woman” contributes to desistance, does explain some aspects of female desistance. Relationships are significant in women’s lives and will impact desistance. However, gendered differences abound in how relationships impact women’s pathways to desistance. Criminalized women are

less likely to have pro-social relationships (Leverentz, 2006) but are more likely to be impacted positively by family support (Rodermond et al., 2016). Furthermore, as women are more likely to be marginalized within society, they are more likely to be impacted by resource scarcity (Arditti & Few, 2006) and the many competing demands that can impact the ability and desire to desist (Fader & Traylor, 2015).

Women-Centred Studies. The second body of literature examines women's experiences of desistance by centring women's voices and questions if current modes of thinking about desistance fit women at all. This body of literature challenges the notion that desistance is entirely an individual process and suggests that researchers examine systemic and structural issues to fully understand women's experiences of desistance (Barr, 2019; Comack, 2018; Sered, 2020).

Barr (2019) suggests a need to revisit problematic, masculinist theories and concepts of desistance through an intersectional feminist lens. She states that there are problematic arguments around maturation, social bonds and cognitive change theories of desistance, which continue to influence practice in the criminal justice system. She recommends revisiting these theories through criminalized women's eyes to shed light on the gaps in desistance theory.

In her study, Barr (2019) observed activities at Women's Centres (service providers for women involved in the UK's criminal justice system). Additionally, she interviewed sixteen women with recent convictions and six service providers. She found hope and self-efficacy to be significant in the narratives of women. These hopes were modest and included family, home, health, employment and were similar to hopes before pre-conviction. However, while women had hopes and dreams, they did not have a good idea of how to achieve them. While Barr's

results are limited due to sample size, she (2019) advocates for re-thinking desistance. She suggests that researchers question the conditions in which criminalization, punishment and post-criminal justice system contact occur. She suggests considering a social harm approach where researchers and practitioners imagine desistance, not as a concept involving moving away from crime. Instead, Barr (2019) imagines desistance as a concept that involves a move away from harm, whether these harms are interpersonal (violence, trauma) or from relations with the state (inadequate mental health services, poverty).

Likewise, Sered (2020) suggests that desistance focuses away from individual choices and moves toward analyzing how policy and systems shape post-incarceration opportunities. She states that current desistance literature emphasizes a socially normative life pattern (housing and employment). The 41 women Sered (2020) interviewed were unlikely to consistently engage in what society would consider a normative social life throughout the ten-year study. Rather, Sered (2020) argues that women's varied problems (housing, poverty, racism, sexual abuse, and erratic institutional policies) negate any simple cause and effect trajectory to explain desistance. Instead, she argues that "holding on to the language of recidivism and desistance directs too much attention to individuals' strengths and weaknesses rather than macro policies and practices" (Sered, 2020, p. 19). Sered (2020) advocates moving towards a "lens of diminished citizenship" (p. 20), which centres analysis of marginalized identities and highlights the challenges of rights of citizenship, such as protection from violence and the right to earn a living.

Likewise, Hart (2017) argues that the lack of supports for women with social capital deficits impacts their ability to desist from crime. The lack of social capital results in many women being released with little support to help them achieve the aims of a crime-free life. She

further argues that women in prison have the desire and motivation to desist from crime post-release. However, their attempts to plan for release are hindered by a responsabilization discourse throughout the institution. Similarly, Comack (2018) is critical of neo-liberal discourses that emphasize individual responsibility and ignore structural and systemic barriers (race/class/gender) that have framed women's lives. Comack (2018) suggests that trauma must be framed, not as a psychological or individual psychiatric disorder, but as "the lived experience of residing in a settler-colonial capitalist, patriarchal society" (p. 28). She calls for action to address decolonization strategies to address the damage colonialism has caused Indigenous women in prison. She further appeals for resistance against neo-liberal ideas of how citizens live their lives. Finally, Comack (2018) calls for feminist work that breaks the silence and addresses the gendered violence women and girls face within patriarchy.

There are numerous challenges that women have with reentry following prison. First, women in prison have argued that they do not receive treatment and support needed while inside to prepare them for what is waiting on release (Richie, 2001). Added to this, the concept of reentry itself is complicated in that it implies that women were removed from communities that they felt a part of and are now ready to return. However, due to marginalized positions, these women may have never fully integrated into society in the first place (Shantz et al., 2009). Thus, challenging women's ability to engage in the process of desistance.

The factors that influence desistance are not gender-neutral. Poverty, hostile environments, restrictive state controls and stigmatization, each experienced in gendered ways, impact desistance. Women released from prison are less likely than men to find work, earn a

living wage or be supported by a partner (Shantz et al., 2009). Concerns such as these cause complications in the process of desistance.

Desistance and Drug use

There is a small body of literature examining the impacts of drug use on the desistance process. Some researchers view drug use as a risk factor to criminality (Bachman et al., 2016; Schroeder et al., 2007; Wooditch et al., 2014), while others examined the connection between the process of recovery and the process of desistance (Best, 2019; Best et al., 2017; Colman & Vander Laenen, 2012; Marsh, 2011; Van Roeyen, 2017).

Bachman et al. (2016) applied Paternoster and Bushway's (2009) identity theory of desistance to a mixed sample (79% male) of 1250 drug-involved individuals released from prison. The identity theory of desistance states that criminally involved individuals will maintain a working identity associated with crime as long as the benefits of crime outweigh the costs. Said differently, criminally involved individuals will shift their identity to law-abiding once they realize that their current life is more costly than beneficial and that their future life will be similarly costly unless they change. Bachman et al. (2016) found that 80% of those who desisted from crime and substance use made a cognitive identity transformation motivated by fear such as dying as an addict or dying alone in prison. They did not find that pro-social bonds, such as employment, helped this group with the process of desistance.

Likewise, Schroeder et al. (2007) found that social bonds, such as employment and marriage, did not mediate the relationship between drug and alcohol use and criminal activity. They found that drug involvement may compromise a successful move away from crime even if

the individual is generally inclined to do so. The researchers observed that those who avoided serious drug problems fared better than their drug-involved counterparts.

On the other hand, Wooditch et al. (2014) examined the files of 251 drug-using probationers. They found that those engaged in leisure and recreation decreased self-reported drug use, suggesting that some social activities may impact desistance. Furthermore, they found that decreased alcohol use was a factor in decreased criminal activity. Although they did not connect desistance and recovery, Wooditch et al. (2014) argued that drug use is common for contemporary adults involved in the criminal justice system. Thus the inclusion of drug use is a central factor when examining desistance. Below, considering the connection between recovery and desistance, I examine literature whereby researchers theorize recovery from alcohol and drug abuse and desistance as similar and connected processes.

Colman and Vander Laenen (2012) utilized Giordano et al.'s (2002) theory of cognitive transformation to explore the desistance processes of 40 (32 men, eight women) drug-using individuals engaged in criminal activity. They assert that recovery from substance use and desistance are two separate processes whereby recovery comes before desistance. Colman and Vander Laenen found that their study participants saw themselves as drug users, not criminals. Thus, for them, desistance was not a conscious process of making a choice for change to move away from criminal activity but a consequence of a new drug-free lifestyle.

Likewise, Marsh (2011) studied a small sample of five long-term desisters with a history of addiction. He found that the participant's primary identity was related to recovery from addiction and that desistance from crime depended on continued successful recovery. In their review of 15 papers, VanRoeyen et al. (2017) also concluded that there are dual processes of

recovery and desistance, suggesting either parallel processes or that desistance depends on recovery. Although they suggest the two processes are related in a dynamic interplay, it is unclear how the relationship between the two processes is shaped—an area in need of further research.

Finally, Best (2019) and Best et al. (2017) suggest that recovery and desistance are processes of identity change (including motivation and self-perception), and these processes also rely on socially mediated responses. Best et al. (2017) argue for the importance of building community capital to support those engaged in desistance and recovery. Building on the idea, Best (2019) examined six community-based projects aimed at building social capital to support recovery and desistance. Best (2019) found that hope, which is generative and benefits a person in recovery, and meaning are vital components of successful projects, with outcomes “rippling out” to the broader community. Meaningful activities are essential in instilling a sense of pride and connection to the community for the person in recovery. Best (2019) explains that recovery and desistance should be visible, seen as something to be celebrated and aspirational; the two processes are linked in his analysis of how community agencies can support these processes.

There is a relationship between drug use and crime (Young et al., 2021). Thus, to understand desistance, researchers must understand the effects of drug use and recovery from addiction. Some researchers suggest a strong connection between recovery and desistance, yet much work is needed to appreciate how the two processes interact. Additionally, a gendered analysis of connections between desistance and recovery is missing. Women and men enter into both drug use and criminal activity on differing pathways. Thus, gendered analysis is essential in understanding recovery and desistance. Furthermore, the stigma associated with a criminal

record will impact desistance. Key areas that encourage desistance, stable housing and employment are affected by stigma. In the next section, I explore the stigma associated with criminal records and mental health issues.

Stigma

In this section, I define stigma, including the impacts that stigma can have on individuals through both discrimination and self-stigma. I draw attention to how stigma is applied to criminality and mental illness, as these issues are prominent within my research with criminalized women. Adding to the discussion of stigma, mental illness and criminality, I explore the concept of multiple stigmatizing identities. I examine the intersections of criminality, mental illness and other identities, such as gender. Finally, I examine stigma management and how those with stigmatizing identities can cope with the negative attributes.

Stigma Defined

Stigma is “an attribute that is deeply discrediting” (Goffman, 1963, 30). It can be seen as a relationship between the attribute and a stereotype, meaning that society ascribes negative qualities to the attribute. Members of a social group learn stereotypes (Corrigan, 2007) and collectively agree on ideas used to categorize people (Krueger, 1996). Given these negative ideas assigned to stereotypes, stigma leads to an individual’s devaluing based on these ascribed undesirable qualities, branding an individual as inferior, dangerous, or less human. The mark of stigma is powerful with the potential to interrupt social and personal relationships and reshape each through the lens imposed by the perceived stigmatized mark.

Goffman’s (1963) influential work identified three types of stigma, one of which is the stigma of character traits where a person is understood to have “blemishes of individual

character” (p. 4). A mental illness, a criminal record and a history of incarceration are considered to be such “blemishes.” Researchers, practitioners, and mental health agencies are doing a great deal of work to address the stigma of mental disorders (Canadian Mental Health Association, 2020; Szeto & Dobson, 2010). However, mental disorders have historically been viewed as a character moral flaw (Overton & Medina, 2008). Furthermore, mental disorders have often been problematically associated with criminality and violence¹⁰ (Rueve & Welton, 2008). The bearer of the stigma becomes discredited through others’ perceptions once the stigmatizing attribute, like a criminal record or mental disorder, is known. Put another way, the bearer transitions from being “discreditable” to “discredited” once their status is revealed. In essence, a stigmatizing attribute, visible or invisible, becomes the defining quality shaping perceptions of the stigmatized person once known. Stigma then can impact individuals both through acts of discrimination and the taking on of a stigmatized identity. Stigma is imposed upon an individual by those around them as well as the greater society. Consequently, we understand stigma as social rather than individual (Goffman, 1963).

Building on Goffman’s (1963) work, Hannem and Bruckert (2012) put forth the concept of structural stigma that moves beyond the individual and is rooted in institutions and bureaucracy. Structural stigma, as defined by Hannem and Bruckert (2012), is “the result of a carefully calculated decision” by institutions and systems to manage populations perceived as risky. They suggest that policymakers may not mean to harm populations through the creation of

¹⁰ While mental illness and criminality are often conflated, people living with mental illness are not more likely to commit violence or criminal acts (Mulvey, 1994). In fact, those with mental illness are more likely to be victims of violence or crime (Walsh, et al. 2003). On the other hand, there is considerable evidence suggesting that those in prison, particularly female prisoners, suffer from mental illness (Diamond et al, 2001). Based on this evidence, I suggest then, that when considering prisoners, issues around mental health must be considered. Furthermore, I suggest that when focused on rehabilitation or reentry for prisoners, mental health issues must be considered, and services provided.

stigma; in fact, they may be trying to help. However, stigma against a particular population, such as the criminally involved, is further cemented by agencies who identify the population as in need of help because of their ‘tainted’ characteristics.

Ricciardelli and Moir (2013) have also identified the concept of structural stigma but use the term in a different manner. They identify specific stigma attached to particular structures, such as a particular prison unit or institution. In their definition of structural stigma, the stigma is attached to the structure itself, and thus anyone associated with that structure also bears the mark of stigma – structural stigma is rooted in associations between people and structures.

Link and Phelan (1999) add discrimination to the definition of stigma. They state that including discrimination in the definition of stigma focuses on rejection and exclusion by others as the source of the problem rather than focusing on those who bear the mark of stigma. The focus on discrimination is an essential addition to the definition of stigma, as people who are stigmatized often suffer due to discrimination imposed. The inclusion of discrimination as a focus of research helps to assure that those stigmatized are not stigmatized further. In other words, the research needs to focus on the harmful effects of stigma to see stigma as something imposed rather than an inherent part of a stigmatized person’s identity.

Stigma and Discrimination

Discrimination against those with various stigmatized identities can take multiple forms, including social exclusion, mistreatment, and limiting access to employment and housing. Here, I focus on discrimination impacts regarding criminal records and mental illness.

The stigma tied to people with a criminal record leaves them susceptible to being interpreted as untrustworthy, dangerous, and cruel and, in consequence, they may be treated with

hostility, fear, and made socially distant or marginal through social interactions (Foster & Hagan, 2007; Pogorzelski et al., 2005; Winnick & Bodkin, 2008). Schnittker and John (2007) found that the stigma tied to incarceration had lasting effects on former prisoners' health, including increased mental distress. Furthermore, the stigma of criminal involvement can extend to one's family and children. Children with imprisoned parents experience disapproval from peers, teachers, or other family members, resulting in shame and low self-esteem (Travis, 2005). Numerous researchers have noted that being in prison or having a criminal record is detrimental to employment opportunities or success in acquiring employment (Albright & Denq, 1996; Clow et al., 2012; Ricciardelli & Peters, 2017).

The stigma associated with mental disorders can have similar effects. People with mental disorders may be considered unreliable, dangerous or unpredictable (Green et al., 2003). Johnstone (2001) asserts that people suffering from mental illness and other mental health problems are among the most stigmatized, discriminated against, marginalized, disadvantaged and vulnerable members of our society. For example, the stigma associated with mental disorders creates enormous barriers to employment. In the United States, Scheid (1999) found that 50% of employers were unwilling to hire someone with a psychiatric disorder, and 70% of employers would not hire someone with substance use issues or taking psychotropic medications. In Canada, 78% of Canadian Mental Health Association consumers identified employment as an area most affected by stigma (Stuart, 2004). Furthermore, those with mental disorders are much more likely to be hired in unskilled, part-time jobs, temporary with high turnover and few benefits (Stuart, 2006). Similarly, those with a criminal record are likely to have the same employment opportunities (Sheppard & Ricciardelli, 2020).

These discrimination experiences can lead to internalized stigma, whereby the stigmatized individual begins to judge themselves based upon others' judgment (Overton & Medina, 2008). People's expectations about social identities, such as mental illness or criminality, impact their views of stigmatized individuals. These assumptions create the characterization of what Goffman termed the "virtual social identity" (1963, p. 4). As the stigmatized identity develops, the stigmatized individual becomes aware of the potential for status loss and discrimination, which inform self-identification and, in turn, may affect how an individual interacts with those around them. In many cases, by informing interactions, the stigma has lasting impacts on many life areas, such as careers, housing or family relationships (Link & Phelan, 2001).

Despite the multidimensionality of self-concept, researchers often look at stigmatized identities as individual identities (West et al., 2015). Intersectionality theory emphasizes how social categories mutually construct and reinforce each other (Cole, 2009) and suggests that intersecting stigmatized identities may uniquely impact self-concept. Examining the impacts of multiple stigmatizing identities and how stigmatized individuals manage such identifies is particularly relevant to my research, as criminalized women are significantly impacted by stigma. Formerly incarcerated people often suffer from a multitude of stigmatizing conditions such as substance use disorder (Correctional Services Canada, 2015), mental illness (Brown et al., 2018; Kilty, 2012; Stanton et al., 2016), and chronic health issues such as hepatitis C (Nolan & Stewart, 2017; Stewart et al., 2015). Further to this, formerly incarcerated women often face even greater stigma. Women, in general, report more frequent and severe experiences of gender discrimination than men do (Schmitt et al., 2002). Drug use and incarceration carry a stigma for men and women. However, the stigma is much more significant for women because gender-

based stereotypes hold women to different standards (O'Brien, 2001). Giordano and colleagues (2004) suggest that women's transgressive behaviour is subject to more severe stigma given the relative rarity of female offending.

Consequently, released female prisoners will perceive more reasons for stigma and discrimination than will their male counterparts. Women are often stigmatized because of their offending, incarceration, and being bad women and mothers (Flavin, 2001; Greenfield & Snell, 1999; Owen, 1998). In his study with 204 formerly incarcerated individuals, LeBel (2012b) found that discrimination based on incarceration was only one obstacle faced to reintegration into the community; nearly half of those interviewed (46%) identified multiple reasons for discrimination. Furthermore, LeBel (2012b) found that women were more likely to perceive more reasons for discrimination than did their male counterparts

Van Olphen and colleagues (2009) engaged in qualitative interviews and focus groups with seventeen women released from jail in the last twelve months for drug-related crimes. They found that a central theme throughout women's narratives was the double stigma of drug use and incarceration history. Women in the study reported that even short stays within prison/jail could significantly disrupt life. Former female prisoners described facing multiple interrelated problems after release, including drug use, lack of safe housing, lack of employment and family issues. These issues were related to stigma as well as policies and practices that have made reentry more challenging. For many women, the perception that they were being treated as inferior exacerbated emotional problems with which women already struggled and contributed to relapse into drug misuse. Incarceration and drug use added to the burden of stigma already elicited by the gender and race of participants in the study.

Echoing these findings, Dodge and Pogrebin (2001) found that paroled women developed a sense of shame from being unable to live up to societal definitions of what it means to be a woman, a good parent and a responsible citizen. They found that women in their study appeared to engage in constant self-deprecation over the loss of their children, families and relationships. Furthermore, in an Australian study of Children's court, McGrath (2014) found that stigmatization was a significant predictor for young women's reoffending. It is clear that multiple stigmatizing identities intersect, which may amplify how individuals perceive the impacts of stigma.

Stigma Management

What then happens when an individual experiences stigma and associated discrimination? As the stigmatized identity develops, the stigmatized individual becomes aware of the potential for status loss and discrimination, affecting how they may interact with those around them. The development of an awareness where an individual knows that they are being discriminated against creates stigma management: the work of the stigmatized person to manage how they are perceived (Harding, 2003). By developing stigma awareness, an individual can create stigma management practices, meaning that the bearers of stigma create processes to manage how they are perceived.

Several scholars have investigated how stigma management is practised by those with a criminal record (Anazodo et al., 2019; Harding, 2003; Ricciardelli & Mooney, 2018; Winnick & Bodkin, 2008). Stigmatized individuals practice stigma management in a variety of ways. For some, "passing" or hiding a stigmatizing identity may be possible if the stigmatized characteristics are not readily apparent to others (Goffman, 1963). Hiding the stigmatizing

attributes may be challenging for individuals, as they fear their status as a former prisoner becomes known (Ricciardelli & Mooney, 2018). Most individuals with a criminal record advocate some form of disclosure, albeit at different levels of disclosure for different circumstances. I discuss methods of disclosure below.

Harding (2003) examined stigma management in the context of employment, finding that those with criminal records engaged in three types of disclosure, each with their advantage and disadvantage: full, conditional and no disclosure. Full disclosure may be the only option for individuals who want to work in a job where a background check is required. Conditional disclosure resembles Goffman's (1963) idea of "covering" or trying to reduce the impact of a stigma. Harding (2003) found that participants would withhold their ex-prisoner status, take time to demonstrate their value to their employer, and then reveal it at an opportune moment. For example, a stigma management strategy is to start in a lower position within the company where the individual can work their way into a higher position after the employer learns more about the employee. The strategy can help defy stereotypes of people with criminal records and requires a long-term approach to employment, staying in a menial/mundane job until promoted. Furthermore, there is a risk of not being promoted and, worse, exploited, given that a person with a criminal record may have few other opportunities (Sheppard & Ricciardelli, 2020).

Finally, some in Harding's (2003) study practised no disclosure. The practice of non-disclosure aligns with "passing," where the stigmatized individual works to conceal their stigma and "pass" as normal (Goffman, 1963). The practice of non-disclosure may be an effective strategy to garner some forms of employment but limits the jobs they might apply for (Harding, 2003).

Mooney and Ricciardelli (2018) built on Harding's (2003) work and found that participants were less likely to engage in full disclosure as time went on. Their study of 24 participants on conditional release over three years found that participants seemed to distance themselves from their past criminal history. The participants no longer felt defined by the discrediting trait and were thus less likely to disclose. The non-disclosure practice of stigma management echoes cognitive theories of desistance whereby successful desisters generate positive self-narratives that distance themselves from a criminal identity to forge a new, pro-social identity (Giordano et al., 2002; Maruna, 2001). The close alignment with the desistance process is further evident in Ricciardelli and Mooney's (2018) findings that disclosure felt painful for participants as they relived the past events. Furthermore, they found that some participants considered the possibility of a name change but felt they were hiding something. The pain and feelings of dishonesty suggest that participants in Ricciardelli and Mooney's (2018) study were engaged in the work of desistance and attempting to envision a new self, distant from the past criminal behaviour and dishonesty (Giordano et al., 2002).

Additionally, Ricciardelli and Mooney (2018) found that participants' self-disclosure management allowed them to put context to their criminal history rather than have people find out another way. Similarly, Anazodo et al. (2019) found that men who had been released from prison engaged in careful disclosure, revealing some information but not all, to manage stigma. For example, some men revealed that they had been in prison, but not the crime involved. Other men contextualized their prison time in terms of rehabilitation.

Finally, Winnick and Bofkin (2008) surveyed 450 men incarcerated in a medium-security prison in the US. They found that men endorsed self-disclosure as a means of stigma

management and that self-disclosure positively correlated with environments that provided a sense of inclusion. The researchers suggest that environments of inclusion (such as a church) encouraged disclosure of a criminal record even to areas of life outside the immediate environment of inclusion.

Conclusion

I have examined a number of bodies of literature to understand the experiences of women leaving prison. It is helpful to view formerly incarcerated women through several lenses, including gender and how gender is enacted in prison and the wider community. The process of reentry into the community following a prison term is complicated and can have extra challenges for women, including stigma. The challenges women face on reentry no doubt impact women's ability to engage in the desistance process. I have provided a theoretical framework to understand the current study and how women released from the Newfoundland and Labrador Correctional Centre for Women engage in reentry and desistance.

Chapter Three: Method and Methodology

“I need to change my life. That’s the reason you make your plan.” Monica, a formerly incarcerated woman, aged 30-35

Researchers use methodology as an empirical lens to understand what is known while demonstrating an understanding of the environment within which knowledge is produced (Pink, 2012). Thus, methods involve “engaging with a philosophy of knowledge, of practice, of place, and space” (Pink, 2012, p.3) and set the frame that guides a researcher’s work and understanding of data. Therefore, I frame my research within feminist, practitioner-based, and trauma-informed methodologies as these three ways of thinking have guided my approach to research. Such a collective framing creates a space to contemplate research that allows for a thorough, carefully considered research project and fits my values. These values include centring the voices of criminalized women and utilizing research in a way that benefits participants. Further, I acknowledge that research participants are reactive agents in constructing their worlds (Anderson-Nathe et al., 2013).

In the current chapter, I address the methodologies that have guided my research, including the aforementioned feminist, practitioner-based, and trauma-informed research methodologies. Next, I explain the current study; interviews with formerly incarcerated women and services providers who work with them, including details about the sample, recruitment, and data collection processes. In addition to interviews, I engaged in reflexive journal writing where I document and interrogate my place within the research. Following the explanation of data collection, I then detail the data analysis process before finishing the chapter with a discussion of methodological concerns and ethical considerations for the project.

Methodological Perspectives

Feminist Research Methodologies

Feminist research is rooted in the epistemology that gender is the categorical center of inquiry and the research process (Hesse-Biber, 2013). Thus, feminist methodology privileges women's issues, voices, and lived experiences, asserting that researchers should not merely describe women's circumstances. Instead, feminist researchers must consider how race, class, gender, sexual orientation, age and material circumstances intersect and interact in multiple contexts throughout the research process (Olesen, 2005).

Within feminist methodology, there is a recognition of power imbalances because the power to produce authoritative knowledge is not equally open to all citizens (Ramazanoglu & Holland, 2002). Feminist research, however, does not depict women as powerless, abnormal, or without agency (Olsen, 2005). Instead, feminist researchers question who has the power to know what and how power is used in the process of producing knowledge (Ramazanoglu & Holland, 2002). Furthermore, feminist researchers reveal the micro-politics of the research process, explicating differences carefully and avoiding processes that replicate oppression (e.g., blaming the victim) (Olsen, 2007).

I centre formerly incarcerated women's experiences within the broader context of gender intersected by additional socio-demographically informed identities within my research. Critics suggest that feminist research presents a monolithic, homogenous idea of womanhood, primarily based on white, western, middle-class conceptions of what it means to be a woman (Collins, 1998; hooks, 2000; Mohanty, 1988). To address these concerns, recognizing I appear as a white woman, I, like feminist theorists before me, have engaged in work to recognize that women are a

diverse group situated in history, culture, and class (DeVault & Gross, 2011). The work includes practicing reflexivity about my subject position within the research project. Rice (2009) suggests using strong reflexivity to move beyond a mere acknowledgment of social inequalities towards a deeper understanding of the researcher's impact on the data without the researcher becoming the center of the data. Strong reflexivity requires a researcher to subject themselves to the same level of scrutiny directed to data sources—recognizing the self as a data point as well—, thus the “agent of knowledge (is) placed along the same critical plane as the object of inquiry” (McCorkel & Myers, 2003, p. 203). Given the nature of my research, I must subject myself to scrutiny throughout the research process. I do so through engaging in reflexive journal writing, which is detailed later in this chapter. Throughout the journal writing process, I engaged in critical interrogation of the self. I wrote about my feelings and thoughts during the research process and daily work, as these are intertwined. For example, in my journal, I wrote about why I chose this subject as the focus of my Ph.D., expressing some self-doubt about any contributions I would be able to make within the field of criminology. During that journal entry, I also reflected on how this research will help me professionally and personally. I wrote, “...it can change the work that I do with them (criminalized women), and that's something” (Sheppard, field journal, 2018). Engaging in a reflexive journaling practice allowed me to consider that my role in the research process is important. I will be returning to the prison to work with incarcerated women, taking my learning with me.

Feminist researchers have been critical of mainstream criminology, asserting that criminological theories have been androcentric and generically applied to the experiences of both men and women (Daly & Chesney-Lind, 1988; Giordano et al., 2006). To address concerns that criminological knowledge has been historically androcentric, I use feminist standpoint theory to

centralize the lives of criminalized women. Feminist standpoint theorists make three principal claims: (1) that knowledge is socially situated, (2) that marginalized people are in social positions that make it more likely for them to be aware of research questions that impact the marginalized than it is for the non-marginalized to recognize those questions and (3), that research focused on power relations, should begin with the lives of the marginalized (Harding, 2004). While Harding (2004) recognizes that this theory is controversial, feminist researchers can learn from the debates. For example, critics accuse standpoint theory of being relativist and essentialist. However, Harding (2004) notes standpoint theory “studies up,” stating that it is not enough to study women’s experiences, but researchers must also examine how power processes impact women. Thus, the importance of this theory is that researchers include women’s voices. However, the context in which women live, in patriarchal systems of oppression, is equally important in understanding the lived realities of women’s lives.

Feminist standpoint epistemology asserts that an individual’s material and lived experience structures their understanding of their social environment to challenge ways of thinking that privilege dominant voices (Hesse-Biber, 2013). Within this model, oppressed people would develop a fuller understanding of society because they understand the position of both the oppressed and the oppressor (Harding, 2004). Resultantly, theorists argue that women would have an enhanced and nuanced understanding of their own social reality (Hesse-Biber, 2013). Standpoints, the perspective of the central person observing the more significant social world, are placed in a community context as situated knowledge and are developed collectively rather than by individuals in isolation (Haraway, 1988). Standpoint theory is also flexible in that it acknowledges that power and knowledge are not necessarily static between or within groups.

Further, standpoint theorists acknowledge that women's experiences exist among multiple dimensions and modalities of social relations and subject formations (McCall, 2005).

I am working within a feminist framework that recognizes the diversity of women's experiences. Women in prison may have shared experiences within prison systems, yet their individual histories and experiences with gender, class, race, and sexuality inform their experience. Additionally, researchers must acknowledge that prior understandings of prisoners' issues, such as rehabilitation and reentry, have generally been based on men's experiences (Daly & Chesney-Lind, 1988). The fewer incarcerated women lead to most research on prisoners focusing on men (Gobeil et al., 2016). Furthermore, criminological researchers that acknowledge gender differences understand that women's pathways to crime are different from men's pathways (Giordano et al., 2006), that women experience prison in different ways than men (Hannah-Moffat & Shaw, 2000; Kilty, 2012), and that men and women desist from crime differently (Belknap, 2014; Bloom et al., 2004). Given these concerns, I use feminist research methods with a gendered lens to focus on the experiences of formerly incarcerated women and the challenges they face on returning to the community from prison. Feminist research aims to provide a voice to marginalized groups by challenging structures and ideologies that are oppressive (Hesse-Biber & Leavy, 2007). My research practice allows me to listen to the voices of formerly incarcerated women and the service providers who work with them. Given my role as a service provider working in the prison system, I am in a position to advocate for changes identified during the research. I can advocate for change at the prison level and within my program and social work practice (See Chapter Seven for policy/practice recommendations).

I aim to understand reentry and desistance processes for women leaving prison in Newfoundland and Labrador. To accomplish my aim, I have interviewed two groups, formerly incarcerated women and service providers who work with these women. Both of these groups are helpful in understanding reentry and desistance processes. Women who have experienced prison and return to the community can share their own stories of the reentry process. Service providers who assist women in reentry can share their own stories of assisting women and provide information on systems at work within a collective of women's lives. Criminalized women experience marginalization in many ways, including poverty and stigma, which affect their mental health, the potential for employment, successful reentry and eventual desistance into the community (Barr, 2019; Balis, 2007; Comack, 2018; Sered, 2020; Stanton et al., 2016). A feminist research framework directs my research by highlighting social issues within current systems. To said end, I ground my research in formerly incarcerated women's voices about their own experiences. I have also interviewed service providers working with criminalized women who are passionate and take a client-centred approach in their work. Therefore, all interviews, those with criminalized women and service providers, centre the participant's voices to provide a nuanced picture of systemic issues.

Practitioner-based Research Methodologies

I have used qualitative methods to explore formerly incarcerated women's experiences of mental health, incarceration, employment, and post-release goals. Beyond my graduate studies, I am a Social Worker with Stella's Circle, a non-profit agency in St. John's, Newfoundland and Labrador, that provides services to people with complex needs, including criminalized women. Stella's Circle provides therapeutic and practical (e.g., assistance with employment and housing)

services to women both at Newfoundland and Labrador Correctional Centre for Women and in the St. John's area.

The practitioner-researcher has responsibilities within a health/social care setting when also researching within that field (Dodd & Epstein, 2012). In my position as a Social Worker researching a population with whom I work, I turned to practice-based research methods to guide me through research and ethical issues that can arise. For example, Dodd and Epstein (2012) suggest that practice-based research is an opportunity for clients of a particular agency to provide feedback about an organization. Such feedback is a critical component of my research; I am asking for participant feedback about services in the Newfoundland and Labrador Correctional Centre for Women, including the direct service I provide. Given my focus, practitioner-based research guides my ethics to focus on this feedback, although it may be challenging to hear or disruptive to existing services. Also, practice-based research challenges me to reflect on the services that I provide and listen to the people I serve. My ethical obligation then is to my participants and not to protect the agency.

Within practitioner-based research, I recognize my role as both the practitioner and researcher, how these roles can compete and how these dual roles can benefit both practice and research. Research can challenge 'practice wisdom' but not ethical principles, values, and commitments to practice (Dodd & Epstein, 2012). Furthermore, skills developed within social work practice can often aid the research process (Dodd & Epstein, 2012). For example, during the process of interviewing while conducting research, building trust and rapport is essential. As a Social Worker, I have developed interviewing skills by presenting my authentic self, being interested and curious about what people have to say, and presenting as non-judgmental.

Open-ended interviews depend on the interviewer to be fully present and to operate reflectively throughout the interview. The semi-structured interview resembles processes used by Social Workers during assessment; there are vital areas that need to be covered, but not necessarily in order. Skilled Social Workers, like skilled researchers, focus on content relevant to the case before moving on to a new topic (Dodd & Epstein, 2012).

Trauma-informed Research Methodologies

While I am not researching trauma specifically, I will be working with a population with higher rates of trauma histories than those found within the general population (Miller & Navajits, 2012). For instance, 33% of women imprisoned in Canada's federal prisons are diagnosed with post-traumatic stress disorder (Derken et al., 2017). While the said statistic is significant, many more women report histories of sexual (68%) and physical abuse (86%) than have been diagnosed with post-traumatic stress disorder (Zinger, 2014). Thus, many more incarcerated women may be suffering due to histories of trauma than are formally diagnosed with post-traumatic stress disorder or other comorbidities. Also, and likely connected to trauma history, substance misuse is a reality for many women involved in the criminal justice system (Balfour & Comack, 2014; Covington & Bloom, 2007; Cimino et al., 2015; Matheson et al., 2015).

As a researcher, I am sensitive to the said realities of criminalized women. Moreover, I assume that women will discuss some issues related to trauma history when I inquire about their mental health histories during interviews. Thus, trauma-informed care can ensure that I am researching a sensitive topic ethically.

Trauma-informed care can require a paradigm shift; specifically, social service workers must acknowledge the impact of trauma, violence, and abuse on people's lives and development (Evans & Coccoma, 2014). Trauma-informed practitioners understand that in instances where someone has been traumatized, regaining control over the environment is often their highest priority. Therefore, a trauma-informed practitioner and researcher must emphasize safety, choice, trustworthiness, collaboration, and empowerment (Blanch et al., 2012). I emphasized each goal of safety, choice, trustworthiness, collaboration, and empowerment when interviewing formerly incarcerated women. To help establish feelings of safety and trust, recruitment was done by trusted members of Stella's Circle staff with whom participants had good relationships. I conducted recruitment and interviews in safe spaces where women felt comfortable. Furthermore, women were provided with choices regarding where and when to be interviewed. While I did not conduct the recruitment, word quickly spread who was conducting interviews, which contributed to feelings of safety and trust. Many women actively sought me out for an interview after realizing that I was the person conducting the research. Prior to beginning the interviews, I reviewed the interview process and questions with women and informed them they did not have to answer any questions that they did not like. I reiterated this sentiment during the course of the interview as well. Several women disclosed feelings of empowerment and collaboration in sharing their stories in the hopes that other women are, in turn, helped.

Furthermore, as a researcher, I informed women that they were in control of the interview process, advising women that they could end the interview or not answer any questions with which they were uncomfortable. Given the ongoing relationships I have with the women interviewed, a feeling of mutual trust emerged. Women's comments evidenced the feeling of trust; many participants explicitly told me that they trusted me during the informed consent

process. Moreover, during the recruitment process, I did not directly ask women for interviews; instead, many women approached me to participate in an interview. My trusting relationship with formerly incarcerated women allowed them to feel safe and secure during the interview process.

Method

Interviews

Before conducting interviews, the Health Research Ethics Board (HREB) of Memorial University approved my ethics application (20200414). To understand the reentry and desistance processes for women released from prisons in Newfoundland and Labrador, I conducted interviews with two groups: formerly incarcerated women and service providers who work with these women both in the community and in prison. I elected to interview these two groups because each provides insight into the challenges and what might work well within the reentry and desistance processes for women leaving prison and returning to the St John's area. Interviewing formerly incarcerated women aids in understanding challenges in transitioning from prison back to the community from their unique perspectives as each woman has a different experience.

Service providers have the experience of working with numerous criminalized women and can provide a wealth of information from working with a diverse population. Service providers who work closely with criminalized and imprisoned women also provide their perspectives on the challenges of providing services to women on reentry, including systemic barriers. Furthermore, examining service providers' perspectives can aid in understanding how services have been designed and provide local context for what is available to this population.

Thus, interviewing these two key groups provided a rich data source that complemented each other and provided a diversity of experience.

I conducted interviews because of the sensitive nature of the topic under research, the experiences of formerly incarcerated women with unique trauma histories, criminal histories, stigma, goals, hopes, and dreams. Therefore, the interview content was profoundly personal and much better supported through one-on-one interviews. Interviews with service providers touched on topics that they may not be feel free to discuss in other settings, such as a focus group. Indeed, I did not focus my research on interpersonal relationships between service providers or incarcerated women; thus, focus groups were inappropriate. While service providers' interviews did not address personal issues, there were concerns about how disclosing information may potentially impact their work, including access to prison or funding sources. Given these issues, speaking one-on-one with research participants offered the best means of addressing privacy and anonymity concerns.

Interviews were informal, using a semi-structured interview guide (See Appendix A for copies of interview guides for service providers and formerly incarcerated women). As I knew most of the interviewees through my work as a service provider or as colleagues working in the same field, interviews were conversational in style in that there was discussion back and forth. However, qualitative interviews are an asymmetrical power relationship between the interviewer and the interviewee. While the interview seemed conversational in style, I led the questions asked, and therefore the conversation can be seen as a one-way dialogue (Brinkman & Kvale, 2015). Given the power imbalance at play due to my position as a social worker and the nature of research interviews, I allowed the interviewee to ask me questions, which I answered.

Furthermore, I turned off the recorder at their request, allowing the interviewee some control over the interview.

Interviews, however, differed from my usual work interactions with clients because I was asking questions related to a particular topic rather than areas necessitated by my work obligations. For example, in my professional work, conversations are about helping the client understand their feelings/life/situation during counselling sessions. By contrast, in research interactions, interviews were open-ended yet maintained focus with directive prompts and questions. I entered into the interviews wanting information on reentry and desistance experiences yet listened to interviewees' stories that diverged from the specific topic of my interest. In essence, I always prioritized interviewees' voices. Interviews were semi-structured, meaning I had a list of questions. Nevertheless, there was an openness to the sequence of the questions (Brinkman & Kvale, 2015). This interview style allowed conversational paths to emerge organically and emphasized the participants' voices as their ideas led the interview.

Grounded theory supports such interview techniques, encouraging the researcher to follow where data takes us (Charmaz, 2014). Furthermore, interviewing facilitates open-ended, in-depth exploration of an area where the interviewee has substantial experience (Charmaz, 2014). The fundamental grounded theory question opening a study is, 'What is happening here?' (Glaser, 1978). During interviews, the 'happening' is the experience or central problem addressed in the interview. As interviews progress, the depiction of "what is happening" guides and focuses subsequent interview questions (Charmaz, 2014). During my interviews, as particular themes emerged, I encouraged interviewees to expand on topics of interest and explain their views of diverse topics that arose during the conversational process.

Interviewees, knowing my work, at times, directly asked me questions about the prison, such as services provided or the process of reentry for women leaving. Thus, as interviewing is a method of knowledge production (Brinkman & Kvale, 2015), an exchange of information between interviewer and interviewee can enhance the richness of data gleaned through the interview process¹¹. My ability to provide information to interview participants further helped the interview process in that clarification of accurate information enabled participants to provide an opinion on what services were available. For example, during one interview with a service provider, I informed them that a psychologist is available for twelve hours a week for women in prison. They stated that they were shocked because the incarcerated men at Her Majesty's Penitentiary (St John's, Newfoundland) have access to full-time psychological and addictions counselling. They felt that twelve hours weekly for women was insufficient, which evolved into a discussion about the need for 24-hour mental health services for women in prison. Thus, my insider knowledge led to a discussion that likely would not have happened otherwise,

Consent forms, written as simply and clearly as possible to address potential literacy issues, were reviewed and signed at the beginning of each interview as per HREB (see Appendix B for copies of the consent forms for each group of interview participants). Miller & Bell (2012) argue that consent should be regarded as an ongoing element within the researcher/participant relationship and be negotiated and re-negotiated throughout the research process. In other words, consent is a fluid process, acknowledging that consent for participation can change during the interview. With this in mind, I did check in with research participants throughout the interviews, asking if they were comfortable with the conversation.

¹¹ Examples of back and forth dialogue are seen in the analysis chapters.

Formerly Incarcerated Women

I conducted 17 interviews with formerly incarcerated women who had returned to the St. John's area (See Appendix A for the interview guide). Questions for formerly incarcerated women focused on plans they had for release while incarcerated and how these plans fit with the reality of their lives now. I asked women to share their histories and goals, what they see as barriers to achieving these goals, and their potential to overcome obstacles.

Sample. Interviews took place over six months, starting in September 2019 and ending in March 2020. Women interviewed were from all over Newfoundland and Labrador but had moved to St. John's, many as a way to access more services. The length of time since incarceration varied, from a couple of days since incarceration to 15 years. The lengths of sentences also varied. For example, one woman spent a few days in the lock-up before being released on house arrest. Another woman spent eight years in prison between remand and her eventual sentence of four years at Nova Institution for Women. The ages of women interviewed ranged from 21 to 79, and two women self-identified as Indigenous. The other 15 women self-identified as white.

Recruitment. Recruitment for all women occurred at Stella's Circle's Just Us Women's Centre and Emmanuel House. Stella's Circle is a non-profit in St John's, Newfoundland, whose mission is to provide services to adults who face barriers to fully participating in their community. These barriers include mental health challenges, addictions, trauma, poverty, homelessness, criminal justice involvement, low literacy, and long periods of unemployment. Stella's Circle has three streams that address these concerns: Real Homes, Real Work and Real

Help. The Just Us Women's Centre and Emmanuel House fall under the Real Help stream and provide clinical counselling and concrete support (Stella's Circle, 2020).

The Just Us Women's Centre program was established in 2009 to meet an identified need for criminalized women in St John's and Newfoundland and Labrador Correctional Centre for Women. Since the initial hiring of a social worker,¹² the program has grown to develop and provide programming with two social workers, an outreach worker, a housing case manager (one year pilot), a peer support worker and administrative support. The Just Us Women's program provides services two days a week at Newfoundland and Labrador Correctional Centre for Women, including therapeutic group work (addiction, trauma, anger management, grief and loss, and Dialectical Behavioral Therapy) assessments, and support for release planning. In addition to working in prison, The Just Us Women's Centre provides services to women in the St. John's community. These services include therapeutic group work and individual counselling in addition to practical supports (help with housing, clothing and toiletries, referrals to employment, access to computer and telephone, and other services as needed), peer support and informal social events through drop-in and a weekly supper. Participation in the program is voluntary.

Women can access the services of the Just Us Women's Centre program through several channels. Women who have served time at Newfoundland and Labrador Correctional Centre for Women and return to the St. John's area will connect for services on release. Additionally, criminalized women who have not served prison time are referred through agencies such as probation or child welfare, community groups, or self-referral.

¹² I was the initial social worker hired and I continue to work in that capacity with the Just Us Women's Centre.

Emmanuel House is a treatment centre under the umbrella of Stella's Circle. Emmanuel House offers a supportive environment where men and women over 18 can live while addressing their social and emotional challenges. Participants stay for four months and participate in individual counselling, therapeutic groups, and life skills support. They provide follow-up services to help people transition from Emmanuel House back into the community, including help with housing and employment (Stella's Circle, 2020). Significant to the current project, Emmanuel House is contracted with Correctional Services Canada to provide beds for parolees, two beds for men and two for women. We do not have a dedicated halfway house for women in Newfoundland and Labrador; therefore, these two beds are one of the few options for women released from prison on parole.

I recruited all women for this study from two programs within Stella's Circle, Just Us Women's Centre and Emmanuel House. I limited research participants to women who have served time within a correctional institution (including Lock-up¹³, Newfoundland and Labrador Correctional Centre for Women, Her Majesty's Penitentiary,¹⁴ or Nova Institution for Women). All of the women interviewed were actively engaged in the desistance process, as indicated by their engagement with services at Just Us Women's Centre and through the 'change talk' noted in interviews (Giordano et al., 2002). Giordano et al. (2002) suggest that cognitive transformation—or change—happens when a fundamental shift in identity and the meaning awarded to criminal behaviour occurs. They identify a process of cognitive transformation that

¹³ Lock-up is where people accused of committing a crime may be held while waiting for an appearance at court. Some may be held for a short period (one day) while others may be held for longer periods (weeks) while waiting for bail hearings or to be transferred to a prison.

¹⁴ In past years, there was a rise in admissions to Newfoundland and Labrador Correctional Centre for Women causing overcrowding and thus, in 2016 a decision was made to modify a section of the men's prison facility (known as Her Majesty's Penitentiary) to house 14 women. Thus, while Her Majesty's Penitentiary is a men's facility, women interviewed in this study have served time at that institution.

includes: openness to change, changes in the environment that bring positive change, the ability to see themselves in a new light, and finally, a change in how the former criminal life is viewed. During interviews with formerly incarcerated women, I centred conversations around these ideas related to change and moving away from a criminal lifestyle. While not all women were successful in desisting (I am aware of one woman who has returned to prison since her interview), all women engaged in change talk. I define change talk as women talking about living pro-social lifestyles and their former criminal involvement as a part of their past.

I recruited research participants using a poster displayed on notice boards. Additionally, I provided information to Stella's Circle staff, who answered questions and made arrangements for interviews. Furthermore, snowball sampling naturally occurred as women knew who was doing the interviews and spread the word to others and women approached me for an interview. I recognize that my position as a Social Worker within Stella's Circle enabled me to recruit interview participants for this project. I did not do initial recruiting, but rather a co-worker explained that a researcher would be conducting interviews. However, after the first interview, word quickly spread that the interviewer was me. Thus, the snowball sample began as women were familiar with me and willing to participate in an interview.

I recognize the asymmetrical power imbalance within any research interview (Brinkman & Kvale, 2015). My relationship with this group of women adds an extra layer of power imbalance. I discuss some of my ethical considerations later in this chapter. Here I will share my experiences as a social worker that inform my decision to work with, research and interview this population. I have been working with criminalized women both in prison and in the community for twelve years. In my experience, many of these women have stories that they want to tell and

be shared. I am an empathic ear for some women, and many of the women interviewed hoped that my research would help other women like them. Therefore, while certainly women interviewed with me because they knew me, it is also because they trusted their stories with me.

I also share a story from a woman I worked with in prison a few years ago. At the beginning of our therapy session, I discussed my ethical obligations as a social worker, including the power imbalance in our relationship. She asked for clarification about power, and I gave her an example; I could potentially influence early release from prison as her social worker. She said she understood but that she was the one with the power in our relationship. She told me that I would no longer have a job if she did not want to talk to me. Thus she believed that she held a great deal of power over me. While it may not be true that if this one woman refuses to talk to me, I am out of a job, she believes that she has some power to influence our relationship. My interaction with her caused me to rethink power dynamics within research relationships. If I am not respectfully engaging people during the interview process, I do not have any data. Thus, throughout the interview process, I consider the power imbalance shifting as we engage in discussion.

Data Collection. After consulting with management at Stella's Circle, we agreed that the interviews would not occur in my office to reduce role confusion for interviewees. As such, I conducted interviews in a boardroom and other staff's offices at Stella's Circle. Many women asked why they could not just go to my office. After I explained why they felt that it was "foolish." However, they stated that another space was OK with them.

Additionally, I informed women that I would still be able to engage with them as a social worker, but during the interview period, I was a researcher. All women stated that they

understood the role distinction. Many women commented that they just wanted to tell me their story and were keen to participate.

Interviews were digitally recorded, saved on a protected jump drive, and transcribed verbatim. I reviewed and confirmed informed consent with the interviewee before starting each interview. I also took notes during the interviews, which I incorporated into my reflexive journal (detailed below). One woman elected not to be audio recorded. I took notes during our interview and reflected in the journal following the interview.

Service Providers

I interviewed 16 service providers over six months, starting in September 2019 and ending in March 2020. I asked service providers about types, quality, and access to services available to women within the prison and after leaving prison. In addition, I asked them to describe what they have observed about policies and practices for criminalized women and how such policies and practices could improve. My conversational interviews with service providers examined barriers in community connections such as employment, mental health services, and housing.

Sample. The sample is a cluster based on my connections working within the area of service provision for criminalized women. I reached out to organizations and individuals who provide prison in-reach and support to women in the community. I interviewed a variety of service providers, including those working with specific populations. Given that service providers are a small community, I cannot name populations served as doing so would reveal the organizations that participated. All service providers were based in St. John's, although some organizations provide province-wide services. They worked with marginalized populations who

experience mental health and addiction issues, homelessness, poverty, racism, and are often street entrenched and have high needs.

Service providers had a range of tenure in the field, from two years to 21 years. All service providers had earned a bachelor's degree, with some having degrees in specialized fields such as Social Work or Occupational Therapy. The services offered varied. Some service providers perform prison in-reach as a regular part of their job, while others work with women post-release. While not all service providers' were mandated to work specifically with criminalized women, the types of service provided meant that criminalized women used these services.

Recruitment. I recruited service providers via email and in-person through their organizations. I first based recruitment efforts on my contacts as I work in the field and know many people working with criminalized women. Service providers were recruited based on their engagement with criminalized women and work within the mental health field. Given my insider knowledge of service providers actively working within the non-profit sector, I compiled an initial list of providers working directly with the population. As the research progressed, I received suggestions about other service providers to interview. Furthermore, as the research progressed, I identified information that was lacking and sought to interview service providers in specific areas, for example, those working in the employment support sector.

Data Collection. Interviews were digitally recorded, saved on a protected jump drive, and transcribed verbatim. I reviewed and confirmed informed consent with the interviewee before starting each interview. I also took notes during the interviews, which I incorporated into

my reflexive journal (detailed below). Interviews generally occurred at service providers' workplaces, with one exception, when we met at a coffee shop for the participant's convenience.

Reflexive Study

Data Collection

Throughout the research project, I engaged in reflexive journaling about my role as a service provider and researcher. Journaling had a number of purposes: to provide a record of personal reflections, accounts of events, and descriptions of experiences (Hayman et al., 2012) and a reflection and recording of thoughts and evolving insights (Chabon & Lee-Wilkerson, 2006). Journaling is also a means of documenting and reflecting on the practice of research (Banks-Wallace, 2008) and data collection, which allows the researcher to record information for later data analysis (Valimaki et al., 2007). Finally, a researcher can also use reflexive journaling to problematize the self to progress towards a more comprehensive understanding of research participants (Wakeman, 2014). Therefore, within my reflexive research, I seek to examine my role as a practitioner/researcher to explore the impacts of both my positionalities on formerly incarcerated women and the service providers I interviewed.

Additionally, Anderson (2006) suggests using analytical autoethnography, a method where the goal is not just to capture emotional content but to develop an extensive critical analysis of a given social phenomenon through the process of self-study. Thus, analytical autoethnography, rather than a method of self-investigation, is a technique of social investigation through the self. Anderson (2006) notes potential pitfalls within this line of inquiry, including the researcher becoming too self-absorbed and losing sight of the social processes under study. To

avoid focusing the research on myself, I view the reflexive study as complementary to the interviews with women and service providers.

I journaled at the end of each day throughout the research process. I chose to journal after the workday and not to journal in the presence of the women as I prioritized “being with” and “being present” during data collection. For example, I did not want the distraction of journaling while interviewing or doing data collection (See Wakeman, 2014). However, during the data collection period, the Just Us Women’s Centre staff (myself included) began a writing group with women in prison. The group work did include in situ writing time, and I did use this time to reflect on working with imprisoned women. The in situ writing opportunity allowed me to contemplate the embodied impacts of prison as I was in the space of imprisonment. I reflected on my surroundings, including the cold, institutional walls, cameras, and constant surveillance. I was also able to reflect on the experience of being with the imprisoned woman, including hearing their pain and sharing in their moments of joy through witnessing art on display, sharing their accomplishments, and hearing them share their writing. Richardson (2000) refers to writing as “a method of inquiry, a way of finding out about yourself and the topic” (p. 923). Thus, within this process, the act of writing itself can be viewed as a method to collect information, generate thinking about the research, and engage in dialogue with myself through the process of writing, which collectively makes me better able to determine what I know and how I know it (Watt, 2007). The opportunity to write within the prison assisted tremendously with the process of knowing.

Data Analysis

Grounded Theory

Developed by Glaser and Strauss (1967), grounded theory is a mode of qualitative data analysis, asserting that theory is derived and thus emerges from data. Said another way, data grounds the theory (Clarke, 2007). Furthermore, grounded theory is an empirical approach to studying social life through qualitative research and analysis. As a method of analysis, grounded theory is a way of generating a theory based on empirical research (Atkinson et al., 2003). Grounded theory methods consist of systematic yet flexible guidelines for collecting and analyzing qualitative data to construct theories from the data themselves. Grounded theory invokes iterative strategies of going back and forth between data and analysis. The researcher uses comparative methods to compare data with data, data with codes, codes with codes and codes with categories (Charmaz & Bryant, 2011). This method keeps the researcher interacting and involved with the data and emerging analysis (Charmaz, 2014). I used a semi-grounded, thematic approach to data analysis (Ricciardelli et al., 2010). Although I used grounded theory for data collection, meaning that codes and themes emerged inductively through the data, I analyzed data driven by theoretical constructs of desistance and criminology.

Using grounded theory, researchers can add new pieces to the research puzzle while gathering data. Specifically, grounded theory is flexible, allowing the researcher to follow leads as they emerge within data (Charmaz, 2014). The flexibility and values of theorizing from data fit well with the feminist research values of problematizing women's diverse situations and gendered institutions (Olesen, 2005). Both grounded theory and feminist research stress the inter-relatedness of researcher and participant and multiple ways of knowing (Dankoski, 2000). Some feminist critiques of grounded theory primarily apply to earlier works of Glaser and Strauss

(Olsen, 2007). For example, early grounded theorists posit that research starts from a blank slate, disavowing previous knowledge. Smith (2005) challenged the idea that the researcher's knowledge does not impact the interpretation of the data. While Glaser's later writing (2001) disavows reflexivity as applicable to grounded theory, feminist researchers have aimed for reflexivity when using grounded theory by reflecting on the research process's experience and identifying the researcher's role and voice. Reflexivity is a means to realize 'strong objectivity' (Harding, 1992, p. 71), which rejects reliance on value-free objectivity and, instead, places the relationship between the researcher and the participant in the foreground. Here, the participant takes on a participatory role by gazing back at the researcher.

Given my position as a researcher/practitioner, such reflexivity is a crucial element of data analysis. Clarke (2007) argues that Glaser and Strauss's key contribution to grounded theory is how they consider working with data; themes emerge from the data over time instead of being designated a priori. She further argues that this way of looking at data is implicitly feminist. It tries to build an adequate database by expanding data collected "as needed" through our reflexivity research. Thus, grounded theory considers the researcher's experiences with the project and the researcher's reflexivity about it. Given this element of reflexivity within the research process, I have to question why particular codes are emerging or seem most important to me. As a student/researcher, I have brought my knowledge, including theory, to the research project.

Furthermore, as a social worker, I have firsthand experience working with criminalized women. Therefore, my history of academic and professional knowledge, values and experiences with criminalized women will undoubtedly impact why specific data speaks to me. However,

strong reflexivity also allows me to delve deeper and ask what else is in the data that I may minimize or overlook.

Coding

Grounded theory requires that analysis begins as soon as there is data. Therefore, coding of interviews began immediately, as did theorizing on that coding (Glaser, 1978). Coding began during the transcription process when I noted temporary labels (codes) related to a particular phenomenon (Saldaña, 2015). After completing transcription, I used these initial, temporary codes systematically alongside NVivo software to explore if the codes appeared in other data sources. I then elaborated on the codes, creating parent and child sub-nodes as needed. Next, I wrote analytic memos about each category, asking what codes mean, how often they may appear, the range of variations found within the data, and what the particular code may overlook. I then integrated categories into a theoretical analysis of the research area (Clarke, 2007). Based on these memos, I created a codebook for the thematic analysis of the interviews, and I completed a third analysis of the data after the initial first round of coding and the second round, which created the codebook.

A codebook is a set of codes, definitions, and examples used as a guide to help analyze interview data. Codebooks are essential to analyzing qualitative research because they provide a formalized operationalization of the codes and ensure consistency in coding (Fereday & Muir-Cochrane, 2006). Thus, the codebook guides the research, ensuring consistency across analyses.

An example of a code from my research is “change talk,” defined as research participants seeing themselves as able to live a pro-social lifestyle. An example of a memo is “early memo on stigmatized identity,” where I wrote about the idea of managing multiple stigmatized identities.

Finally, an example of a theme emerging from the data is “drug use and barriers to desistance,” describing the multiple meanings participants ascribed to drug use as a barrier in moving toward a crime-free lifestyle.

Methodological Concerns

Separating Social Worker and Researcher

Knowledge production within a research project is a collective experience between the researcher and the researched (Miller & Bell, 2012). Meaning is co-created during the interview and research process (Hesse-Biber, 2013). Therefore, I acknowledge my part in contributing to knowledge production, and as such, I cannot separate my professional role from the research. I am inside the system and know slang, shorthand, and people within the system. Such knowledge helped me to understand what women were talking about during interviews. For example, women referred to the psychologist in prison by name. Thus, I did not need to ask clarifying questions about who he was.

However, while insider knowledge can help obtain rich data, role confusion, such as distinguishing my roles as researcher and social worker, is also a pitfall (Hodkinson, 2005). While I attempted to distinguish between when I am doing research and when I am a social worker, formerly incarcerated women regarded the distinction as either ridiculous or unimportant. The women¹⁵ I interviewed know me, and our relationship was prioritized, not the role I was in at the time (i.e., researcher versus social worker). Many times, issues relevant to my role as a social worker did arise during interviews. I informed the women that I would make a

¹⁵ It is worth noting that in my social work practice, people with whom we work are called participants. This is an attempt to move away from medical or formal models that term people are patients or clients. Like in research, the term participant acknowledges the co-creation of work between worker and participant. This, however, further muddies the boundaries between researcher and social worker.

quick note, and we returned to the issue following the interview. Said act acknowledged to participants that the issue was important but could not be dealt with at that time and attempted to reinforce the division in my two roles (researcher versus social worker).

During interviews with service providers, it was also impossible to separate my researcher and service provider positions. Therefore, during conversations, I often explained things, such as the services available in prison or the reentry process, to interviewees as I have close knowledge of these subjects based on my daily work. Such explanations also were a factor in shaping the conversational style of the interview – we shared dialogue. Furthermore, the experience of these interviews allowed me to consider my role as a researcher/practitioner and incorporate my employee knowledge in my research.

Compensation For Participation

Local community practice has been to compensate people who participate in research or evaluation of programming to acknowledge the value of their time and knowledge (e.g., Point In Time Homeless Count, Stella's Circle, THRIVE, SHOP). While I recognize that payment can be construed as potentially influencing potential interviewees to participate, I offered formerly incarcerated women who participated \$20 to acknowledge their time (an hour) and effort in meeting with me. Such payment is a common practice in the community and thus would not be seen as unusual by research participants, thereby minimizing potential problems with coercion.

Ethical Considerations

There are many considerations for ethical research with any research project. When engaging in research in an environment where I am also a practitioner, ethical issues require careful consideration. Practitioner-based research is, by definition, any situation where someone

is researching a field where they also have professional responsibilities (Dodd & Epstein, 2012). Central to ethical considerations within the current research project are power and privacy issues, which are impacted by my dual roles as a social worker and a researcher. Regarding the latter, in my role as a researcher, a central issue was to manage the nuanced responsibilities of each of the roles (which may require a different course of action) ethically.

Power

An issue of potential concern is that my role as a social worker may create an undue influence on potential research participants to coerce them to participate in the research. Therefore, I made it clear both verbally and on a consent form that interviewees can withdraw from the study at any time. I further stated that withdrawal (participation or lack of participation) would not affect their relationship with me as a social worker at Stella's Circle or their relationship with Stella's Circle more broadly. Furthermore, I informed participants that they could withdraw by contacting one of my co-workers or my supervisor at Memorial University. I designed this additional measure to provide interviewees with additional privacy and choice about participating.

In addition to conversations about withdrawal during the interviews, I also asked other staff members at community agencies to recruit potential interviewees. Staff members informed women at community agencies that a researcher from Memorial University was conducting interviews and invited women to participate. After I conducted a few interviews, women shared that I was conducting the interviews, and eventually, women began asking me directly.

Privacy

A further ethical issue is the considerations of the privacy and dignity of potential respondents. I was able to provide some privacy during interviews at the Just Us Women's Centre. However, word quickly spread that I was conducting interviews and why. Therefore, other Just Us Women's Centre clients may have seen interview participants leaving with me for an interview at the Centre. Observing a participant leaving an interview may expose women to being "outed" as serving prison time. The Just Us Women's Centre provides services for criminalized women, not all who have been to prison. Thus, in agreeing to an interview with me, the fact that a woman has served time can become public knowledge. While the Just Us Women's Centre tries to maintain a non-judgmental atmosphere, many women experience shame due to prison time.

Furthermore, I am acutely aware of the risks in exposing formerly incarcerated women I have interviewed to potentially punitive systems (Fine & Torre, 2006). For example, some women fear that in speaking out, if they return to prison, they may not be treated fairly by staff. I attempted to mediate the potential that women may feel that they cannot share negative experiences of prison due to the risk of being found out by authorities and fear that they may return to the prison system. I assigned pseudonyms to participants and was careful not to collect identifying demographics. For example, I collect an age range and region of the province rather than specific information. Service providers, too, may risk losing funding or access to the prison if they are perceived as being too critical. To mitigate said risk, I assigned pseudonyms to all participants. Furthermore, in this writing, I have shared general information about workplaces and do not share work location when using a direct quote. I explained these processes of anonymity and confidentiality while reviewing the processes of consent.

Moreover, there is a responsibility and obligation to research participants when there is potential for sharing information to be damaging to the participants and the greater community in which the participants are a part (Barker & Langdrige, 2010). My research works with a group of people, formerly incarcerated women, who are marginalized and stigmatized by the community at large and, as well, are subject to significant power inequities within their daily lives. Stigma is “an attribute that is deeply discrediting” (Goffman, 1963, p. 30). Stigma can be seen as a relationship between the discrediting attribute and a stereotype, meaning that negative qualities are ascribed to the attribute. Stigma leads to the devaluing of an individual based on these ascribed negative qualities, branding an individual as inferior, dangerous or less than human. The mark of stigma is powerful with the potential to interrupt social and personal relationships and reshape each through the lens imposed by the perceived stigmatized mark. (See Chapter Two for a fuller discussion of stigma.)

Formerly incarcerated individuals face stigma (Goffman, 1963). The general public interprets former prisoners as untrustworthy, dangerous, and cruel, and, in consequence, they may be treated with hostility, fear, and made socially distant or marginal through social interactions (Foster and Hagan, 2007; Winnick and Bodkin, 2008). Furthermore, a criminalized woman’s pathway to crime is often paved with issues related to poverty, mental illness, experiences of trauma and abuse, and addiction (Hannah-Moffat & Shaw, 2000; Brown et al., 2018). Because of these experiences, women who return to communities after prison report feeling excluded from participating in community life, which challenges their ability to desist from criminal lifestyles (Fortune & Arai, 2014). Because criminalized women face considerable marginalization and stigma, I am cautious about further marginalizing participants or contributing to negative stereotypes underpinning stigma (Goffman, 1963).

On the other hand, this group of women deserves to have their voices heard. I have carefully considered the implications of sharing information as I write this research. As Dupont (2008) asserts, it is important to chronicle and share the stories of marginalized women with a commitment to social justice goals of challenging inequities. To this end, I have committed to sharing women's stories in their own words, using direct quotes when appropriate. Throughout the interview process, many women told me that they wanted to share their own stories in the hopes of creating change for other women. I have heard from many women about the importance of sharing their stories. Thus, I have committed to using my research findings within my practice and to advocate for better services and programs for criminalized women.

Conclusion

This chapter details how I researched reentry and desistance processes with formerly incarcerated women and service providers. I have included the thought processes utilized in framing the research as feminist, practitioner-based and trauma-informed. I consider my duties as a researcher to be, in part, a storyteller, sharing the information and stories shared with me. Women in this study informed me that they wanted to be able to help other women through telling their own stories and contributing to this research. I am honoured that women entrusted me with their stories and endeavour to use them to the best of my abilities in the pages that follow,

Chapter Four: What Women Say They Need: Supporting Desistance

“You go back to exactly where you were before you went in.” Robyn, a formerly incarcerated woman, aged 20-25

Introduction

Desistance, the act of ending criminal activity, is a process. Nugent and Schinkel (2016) suggest that the process of desistance is not linear. Rather, desistance involves periods of engaging in criminal activity, refraining from criminal activity, identity shifts, and recognition of change by others. Furthermore, a person’s environment, community, and society as a whole will affect their desistance journey. An individual’s hope for desistance is, in part, dependent on the recognition by others as a “non-offender” (Nugent & Schinkel, 2016, p. 580). Said another way, the more support an individual receives in shifting from a criminal to a pro-social identity, the more likely the individual is to sustain desistance. Framed by desistance theory, I interviewed formerly incarcerated women and service providers working with formerly incarcerated (and incarcerated women) to learn their thoughts about the process of desistance and what they believe can support the process.

During interviews with formerly incarcerated women, I asked about their release from prison, specifically, factors that helped and those that would have helped with their reentry (i.e., if they had had access to said factors). I also solicited their perspectives of how women in prison struggle to change and move toward a crime-free lifestyle. I asked women about their own future goals, including what they wanted for themselves in the next few years. These questions helped elicit “change talk,” highlighting how women view desistance processes (Maruna, 2001). Additionally, service providers shared their insights into helping the process of desistance for women who have been to prison.

In the current chapter, I outline what formerly incarcerated women and their service providers describe is needed for women's desistance. I begin with a discussion resulting from interviews with formerly incarcerated women, who stated that they needed their basic needs to be met. Basic needs include housing, transportation, and money access. Additionally, formerly incarcerated women also drew attention to how reentry services are delivered. I then turn to service providers' perspectives, specifically what they felt formerly incarcerated women need to be supported in living pro-socially. I conclude by discussing the similarities and discrepancies between what women stated that they need and what services providers stated that women need.

What Women Say They Need

Formerly incarcerated women stated that basic needs, such as housing and transportation, need to be met to support their release from prison and support longer-term desistance. Women also explain how these services should be delivered, asserting that services need to meet their specific needs, such as trauma histories and mental health concerns. They offer a peer support model as one such way of meeting their needs.

Housing

The Housing First approach asserts that housing is a fundamental human right; therefore, everyone is entitled to housing. Ideally, communities should provide homeless individuals with permanent housing as quickly as possible while providing services to maintain their housing. The basic assumption here is that people need housing first before working on other issues such as addiction or criminality (Gaetz et al., 2013). Formerly incarcerated women identified housing as a critical component of the process of release from prison and supporting longer-term desistance.

There is currently no dedicated halfway house for women in Newfoundland and Labrador. Without a halfway house for women, a significant resource gap, some women remain in prison after being granted parole/temporary absence due to a lack of housing. Alternately, some women from Newfoundland and Labrador end up paroled to halfway houses in other provinces, thus removed from their family, friends, familiarities, and all supports. While there are no fully devoted halfway houses for women released from prisons in Newfoundland and Labrador, there are a couple of options for women released from prison.

Westbridge House, operated by the John Howard Society of Newfoundland and Labrador, is a co-ed facility for “adult offenders on day parole, full parole, statutory release, a temporary release, or a probation order” (John Howard Society of Newfoundland and Labrador, 2021). It is located on the west coast of the island of Newfoundland. Another option for women leaving prison on parole or a temporary release is Emmanuel House, a treatment centre under Stella’s Circle’s umbrella. Emmanuel House offers a supportive environment where men and women over 18 can live while addressing their social and emotional challenges (Stella’s Circle, 2021). Emmanuel House is contracted with Correctional Services Canada to provide two beds for parolees. There is often a significant waitlist, limiting women’s ability to access the option when leaving prison. Furthermore, Emmanuel House is a treatment centre, thus, limiting the women who qualify and thus can attend. Some women may not be interested in attending an intensive treatment program on release from prison.

Women in the current study used a variety of housing options when released from prison. Eight of the sixteen women interviewed went to Emmanuel House, the pseudo-half-way house,

on release as a parole condition or temporary absence¹⁶. They all were able to secure housing after completing parole or temporary absence with Stella's Circle staff's help. The other eight women in my sample had a variety of housing arrangements on release. Some women were able to keep their housing while incarcerated due to several reasons, including short incarcerations (two women), negotiations with a landlord (one woman), or having a family member pay the rent (one woman). One woman stayed with friends on release, another with her boyfriend, and another was released on a temporary absence with arrangements supported by Stella's Circle Housing (an unstaffed but supported apartment). Finally, one woman was released to a homeless shelter; but referred to a case management program with Stella's Circle, where she found permanent housing about a month after her release.

The diversity of housing arrangements for women on release from prison illustrates a lack of adequate housing support. What exists in Newfoundland and Labrador are ad hoc arrangements for women. Some women can access formal supports through Stella's Circle, and some women rely on their survival skills to have their housing needs met. As Robyn (aged 20-25) stated, for some women, "you go back to exactly where you were before you went in." In her words, Robyn illustrates the importance of having safe, reliable housing on release from prison. She asks how society expects women to change when they are back in the same situation as before their incarceration.

¹⁶ Both parole and temporary absences can be avenues for prisoners to be released from prison early while abiding by certain conditions. Parole is administered by the Parole Board of Canada, an independent tribunal who make conditional release decisions (Parole Board of Canada, 2021). On the other hand temporary absences are administered by the individual prison administrators and can be granted for medical, employment or treatment reasons (Correctional Services Act, 2018).

On the other hand, the women who were able to access Emmanuel House stated that they benefitted to “land” somewhere staffed, safe, and in a sober environment after prison. As Mary (aged 70-75) stated, “Emmanuel House saved my life.” Mary said she felt safe and was able to address her anxiety and depression, which allowed her, when she went home, to move on with her life in a positive way.

While Emmanuel House was a helpful place to stay when initially released from prison, many women expressed concerns about finding adequate housing. For example, Beth (aged 20-25), who had stayed at Emmanuel House, stated she would return to live with her family after her temporary absence. Staying with her family was not what she wanted, but she explained that a housing shortage exists in her home community:

Beth: Right now, I’m just struggling going back home cuz, and I’m still living with my mom, and I’m (age redacted) years old, and I still don’t have a place of my own. I’m just struggling about that. I have a hard time thinking about it, like going through this situation when you’re (aged redacted) years old, and you’re grown-up. Yeah, as a woman, and you don’t have a place of your own.

Amy: It feels like you’re a kid?

Beth: Yeah, living with my mom, my dad.

Amy: What’s the situation like in (location redacted) for housing. Is it easy to get your own place?

Beth: No, no, it’s not easy.

Amy: What’s the situation? Do you have to apply for housing?

Beth: Yeah, I applied for housing like three years ago, four years ago, but no, that was five years ago because I wanted to have my own place because I never have space.

My conversation with Beth highlights challenges in finding adequate housing in particular rural and Northern areas of the province, such as rural Labrador. Her words show she values having

her own housing, which she considers a step towards independence and being a “grown-up.” For Beth, her independence is a crucial component in her future goals, including education, employment, and living a sober, crime-free life.

Beyond the lack of housing in Newfoundland and Labrador to support women post-release from custody is the lack of *safe* housing. Gloria (aged 40-45) explains her challenges in accessing safe housing and provided a drug-free environment. She references the day the court granted her release, noting, “... I walked into my friend’s place, and there was (drug) paraphernalia everywhere. I’m like, oh, what am I gonna do? So I called (a friend). I’m like, can I please stay with you? So that’s what I did, and I went and stayed with her.” Gloria had been on remand¹⁷ for two and a half months and was released on house arrest. Gloria arranged her own housing situation to stay with a friend, explaining that release planning while on remand is difficult because there is an unknown release date. A person attends court for sentencing, and a judge may or may not give a sentence of time served. The uncertain release date means that the individual and their supports, including professionals in the prison system and community, cannot make plans for housing or income support due to the sentence’s uncertainty. For the high numbers of remanded prisoners, release planning is a challenge in the provincial prison system. On a typical day, about 50% more adults were in remand than in provincial/territorial sentenced custody (14,812 versus 9,543) in 2017/2018 (Malakieh, 2019). The high numbers of remanded prisoners mean that many women are released from prison with minimal supports.

Furthermore, Gloria’s quote highlights issues with addiction and challenges associated with housing and the commitment to desistance. Gloria decided to leave her housing arrangement when she

¹⁷ Remand refers to when a person is charged and held in prison until trial and/or sentencing.

saw drug paraphernalia. Leaving her housing arrangement was not an easy choice. Because she was on house arrest, Gloria had to report her living arrangement to her probation officer and ask that another housing arrangement be approved. Disclosure to her probation officer means potentially divulging the reason for the move (drug paraphernalia), which can mean extra scrutiny for Gloria by authorities.

On the other hand, Gloria was very committed to her recovery from drugs and believed that she needed to move, despite moving not being an easy process. Many women in the current study will return to places and people where criminal/drug lifestyles are the norm (see Chapter Six).

Given these diverse experiences with housing on release from prison, housing plays an integral part for women planning to change their lifestyles. Most women in this study had access to housing on release from prison, which they felt supported their ability to desist. However, there is a shortage of housing options for women leaving prison. For some women, a safe option is not readily available. On the other hand, for women who were released to Emmanuel House, having a safe, drug-free and staffed housing option was critical in making a plan for future desistance and future housing.

Transportation

Women also reported that transportation was a barrier to accessing services and activities, some that were conditions of their release. Laura (aged 40-45) explains, “even with a bus passes [it is] still hard to get around and do stuff using the buses. Like the other day, I had an appointment, and it was a specialist, and I was on the bus, and the bus got into an accident, so he (the bus driver) had to stop and get out. I missed my appointment.” Laura’s words illustrate the challenge that women face in meeting some basic needs. Public transportation is challenging

when women have multiple appointments. At the time of the interview, getting a bus pass could be difficult. As of October 1, 2020, all clients on income support receive a bus pass, which is helpful, but challenges remain. For example, women report how long it takes to arrive at a destination by bus, limiting their ability to attend appointments or run errands. At the time of writing, due to budgetary constraints, the city had further reduced the public transit hours, limiting women's ability to access needed services. Furthermore, while income support clients will receive bus passes, those working and receiving low wages are ineligible.

Although I conducted all interviews in St John's, some women interviewed were originally from other areas of the province, including Labrador, the Avalon peninsula and the west coast. Furthermore, due to my role as a social worker at the Newfoundland and Labrador Correctional Centre for Women, I am aware of transportation challenges in other parts of the province. For example, I wrote about a woman I worked with at the Newfoundland and Labrador Centre for Women in my field journal. She expressed frustration in her lack of transportation to access counselling services once back in her home community after prison. She stated that the nearest available counselling is a half-hour away by car. She is ineligible for transportation; however, because the counsellor cannot verify the service in advance because the counselling type is a drop-in style. An individual must apply to receive funding for transportation from a government agency. To receive funding, they must have the documentation stating they require health services in advance.

Transportation can be a crucial barrier in women accessing services they need for their mental health, well-being, and commitment to desistance.

Service Delivery

Most women stated there are existing quality services in the community and prison. However, they expressed concerns (i) about the availability of services (e.g., more were needed), (ii) the frequency of service provision (more often was desired), and (iii) with how services are delivered. Interviewees suggested that services must be gender and trauma-responsive.

More Services Needed.

Women interviewed acknowledge that existing services at the Newfoundland and Labrador Correctional Centre for Women, with one exception (the psychiatrist), are helpful but provided too infrequently. For example, the women interviewed stated that the psychologist in the Newfoundland and Labrador Correctional Centre for Women is helpful. However, he has limited time to see the women in the institution, leaving women to see him biweekly or not at all.

Robyn (aged 20-25) states:

I think that counselling needs to be available more often. (The psychologist) is an awesome counsellor, like amazing. His job is probably one of the best things about that place in total, but like you see him once a week, maybe. Yeah, maybe every two weeks. Yeah, you know and like you don't know when you're going to see him either so you can't like, you know what I mean? It's like you're sitting there and have no idea when you'll get your chance, right, and then there's times that you were supposed to, and it's just not reliable. It's not consistent, right, there's no consistency to it at all like structure, reliability like sometimes you're told you're going to go see him and there's something comes up, and now you can't see him. Like if something happens or like yeah, some random emergency or a guard can't come in, so we were all locked down. Like it's just there's no consistency to it.

Women were largely positive about the services provided and the staff at the prison. However, they wanted access to services more frequently and throughout the days, evenings, nights, and weekends. Robyn's comments above are typical of other women interviewed who identified that

the psychologist is empathetic; he listens and helps women develop plans for their lives outside of prison.

Women interviewed acknowledged that Stella's Circle services, which are offered in prison, helped encourage them to think about their needs, such as substance misuse or problematic patterns of behaviour. Women also stated that they felt that Stella's Circle was non-judgmental and treated women with respect. For example, in a discussion about her goals, Laura (aged 40-45) shared that Stella's Circle staff was supportive in helping her choose a "better life," which, for her, means a drug-free life. She states, "it's nice to have people to give you that confidence that you don't really have all the time." Similarly, Judy (aged 60-65), a formerly incarcerated woman, shared that Stella's Circle staff validated women in prison by helping them to see their own self-worth. She states, "They didn't have any self-worth. And you guys gave them that. No matter what you have done, no matter what your background you're a human being, you're loved." Judy believes that Stella's Circle staff treated incarcerated women with the respect that they often did not feel, allowing them to internalize feelings of self-worth,

Furthermore, Ali (aged 25-30) stated that Stella's Circle was vital in helping her understand her path to recovery from addiction. I asked Ali what was helpful when she was released. She explained that programs through Stella's Circle helped her identify natural supports such as family and friends and helped her identify harmful patterns in her social life. Ali shares:

Ali: I've learned a lot in these programs (Stella's Circle) and stuff. Because I didn't get Facebook back or nothing. So like I got no friends. I got one decent, one good friend that I've been best friends with since we were five, but she lives up in Ontario, just had a little boy last year and everything.

Amy: When you say that you didn't get Facebook back, that was your choice or was it a condition?

Ali: No, that was my choice. Yeah. I got no social media at all. I sit down on my phone and play solitaire.

Amy: Why is that a good thing?

Ali: It's just trouble. I know too many, too many people that are not good people to know in the city. Yeah, and I know the majority of them.

For Ali, through attending programming with Stella's Circle, she learned that disconnecting from Facebook and therefore disconnecting from "not good people to know" will help meet her goals towards living a pro-social life

Many interviewed women identified ad hoc services such as equine therapy, gardening, the dog program and bible study, as well as doing chores in prison as giving them a sense of hope and purpose. When asked about services, Mary (aged 70-75) stated, "Like I did all the courses that were offered, and they needed someone in the wintertime to help shovel and look after the dogs. And that was the big thing. I love the dogs." Ali also shared that "the spirit horse thing that they did at NLCCW (Newfoundland and Labrador Correctional Centre) that was really cool." These services, such as equine therapy (Spirit Horse) and the dog program, are ad hoc services that are offered when resources are available. While they are not consistent, they have an impact on women who are able to participate.

Interviewees also acknowledged many of the staff in the Newfoundland and Labrador Correctional Centre for Women as helpful in that they listened to women when they needed to talk. While not all staff have an empathic ear or are available to talk, interviewed women shared that some prison staff were helpful during their time in prison. Women noted that staff needed more training to deal with the number of mental health issues presented by incarcerated women. As Mary (aged 70-75) states, "the guards were excellent. You know, everyone was good to me." However, Mary also acknowledged that while the guards were friendly and would talk to women

who were having a mental health crisis or just going through a difficult time, they were not trained to handle mental health crises adequately. Mary stated: “I've seen the young ones in there that they really needed help, and they were never given the help, and the guards couldn't do anything. I mean, yes, they could talk to them. I don't think the doctor did anything.” Mary’s frustrations are seeing other women suffering mental health crises while imprisoned and feeling that staff were inadequately equipped to support women.

While the women interviewed identified existing services as helpful, empathetic, and non-judgmental, the consistent complaint remained about the infrequent service provision. Many women interviewed stated that services needed to be available when they and other women they served time with were experiencing a crisis in prison. Services such as the psychologist and Stella’s Circle are in prison for a limited number of hours and provide a specific service: individual and group counselling, not crisis management. Women, like Mary above, acknowledged that, for the most part, correctional officers are empathetic and are willing to talk; however, they are not trained adequately in mental health, thus limited in their ability to help women navigate mental health crises. When women experienced a mental health crisis, they felt that their needs were not met. These feelings are in line with Jesso’s (2018) report, which followed an investigation into four deaths by suicide in Newfoundland and Labrador’s prison system within a relatively short period. She concluded that there are inadequate responses to mental health crises in the prison system. For example, in response to a mental health crisis, the psychiatrist may be called, but there can be an up to four-day wait to see the doctor.

Furthermore, women universally dislike the psychiatrist providing mental health care at the Newfoundland and Labrador Correctional Centre¹⁸. Women stated that he does not listen, has no empathy, and takes everyone off medications prescribed before entering prison. Mary (aged 70-75) explains her experiences with the psychiatrist:

(There is) definitely not enough for mental help. Yeah. I've seen the young ones in there that they really needed help, and they were never given the help, and the guards couldn't do anything. I mean, yes, they could talk to them. I don't think the doctor did anything. I mean, they used to send me to him, and I told him I said I'm not coming to you. I don't want to come to you. I don't like you. You took me off this (medication), and I needed that. Yeah, and he wasn't very nice about it, but I didn't care, and every time that he called my name, I just said to the guard I'm not going (to see the psychiatrist.)

Mary's statements echo what many women told me: the psychiatrist was not helpful for their mental health, and they did not feel that he cared about their well-being. Judges, prisoner advocates, and prisoners themselves have criticized psychiatric services within Newfoundland and Labrador prison systems for not providing adequate health care to prisoners (Bradbury, 2018). The prison system's psychiatrist has been subject to peer review examination due to the complaint that he does not prescribe medications such as sleeping pills and anti-anxiety medication (Klassen, 2012). The peer review found that the psychiatrist provided adequate care to prison populations in Newfoundland and Labrador.

In addition to concerns about psychiatry, women identified boredom as a significant issue in prison and a challenge for their mental health. Women identified the need for outdoor recreation as a requirement for mental health. Monica (aged 30-35) shared: "I think personally

¹⁸ The psychiatrist has retired at the time of this writing. Currently, the prison system is under going a shift of health service delivery whereby local health boards will provide services to prisons as recommended by the Jesso Report (2018). Currently, there are three rotating psychiatrists providing services to the Newfoundland and Labrador Correctional Centre for Women.

for myself, where I have bad anxiety if you gotta go out to the yard to be able to get some air and you should be able to get air. And I don't think that's right (that we can't go out)." Furthermore, they felt that additional services, such as therapeutic groups and spiritual activities, organized recreation such as arts and crafts or physical activities, and social activities (e.g., friendly visitors, volunteering) are needed. As Robyn (aged 20-25) states:

Like they just need more groups in general. There should be like at least one thing every day. Because, like, you spend so much time in there and then like when you get out was like, well, I just had all this time sitting around doing nothing. I could've used that towards it (planning for release), right, but you can't do much there because, like, who are you going to talk to? Like how can you get anything on the go for yourself when you're on the outside? Because you can't use the internet. You can't call to look through your options and stuff.

Robyn implies she has time she could spend making plans for the future. However, Robyn asserts that without someone to help with those plans, prison time is a waste. Robyn's ideas about spending time in prison speak to the debate about if the purpose of prison is rehabilitation or punishment. Ward & Maruna (2007) argue that the key to successful 'rehabilitation' is for service providers to listen to the prisoners. They state that prisoners have told them: "no one else can rehabilitate you. You rehabilitate yourself" (Ward & Maruna, 2007, p.16). Having a sense of agency or belief that one can exert influence on oneself and the environment promotes desistance (Maruna, 2001).

Reflecting on Robyn's words reveals a need for practices responsive to the criminalized person's needs. Program design, according to Robyn, should include the interests, abilities, and aspirations of those incarcerated. Furthermore, prisoners should help direct practitioners develop intervention plans that assist incarcerated persons with acquiring skills and accessing the relevant internal and external resources to achieve personally meaningful goals (Fortune et al., 2012;

Maruna, 2001; Ward, 2002). Women want service providers' objectives to include helping them look at their lives through a new lens and determine future goals. Person-focussed interventions should be used instead of programming that aims to 'fix' people by providing them with skills to change how they "think, feel, act" (Fortune et al., 2012, p.649). Given adequate resources, service providers can begin person-based interventions during incarceration.

Person-centred care is rooted in a healthcare model that aligns healthcare services and settings with the unique needs of an individual. To achieve person-centred care, an individual must have access to the right services in the right setting (World Health Organization, 2013). The model can be extended to working with prisoners while incarcerated and on release. Pearson and colleagues (2015) suggest that in a person-centred model of service delivery for prisoners:

Practitioners would work with individual offenders for a time-limited 'pathway' based on identification prior to release, support 'through the prison gate,' and support in the community. We envisaged that the intervention would be judiciously modifiable to local contexts; link to, and support, coordination of existing resources (rather than being a stand-alone, all-encompassing service); and provide some form of ongoing care and support,

They put forth a model that begins in prison before release and provides wrap-around support when released into the community. For services to prisoners to be genuinely person-centred, practitioners must recognize the person within the prisoner. The Good Lives Model is a strength-based model that advocates that practitioners help prisoners examine their own goals, abilities, and interests to achieve pro-social behaviours and eventual desistance (Fortune et al., 2012). Within the Good Lives Model, the practitioner works to help the prisoner identify how they envision a good life and how the individual can achieve that good life.

Truly person-centred interventions for prisoners must include both a deep understanding of the individuals' goals and an understanding of systems that impact achieving these goals. As

stated in the World Health Organization (2013) definition of person-centred health care, the right services must be in place in the right places. Having services in the right place at the right time is a challenge when working with prisoners and those on release. Often, adequate services are not in place to help a former prisoner achieve their goals, no matter how realistic or modest these goals may be. Thus, person-centred care for prisoners also involves advocacy with an understanding of the barriers faced by former prisoners.

Gender-Responsive and Trauma-informed.

Women stated community-based services were not always attuned to the women's needs. Specifically, services offered are neither gender-responsive nor trauma-informed. Within the criminal justice system, gender-responsive services acknowledge that gender makes a difference in how a person experiences that system and the wider world (Covington & Bloom, 2007). Gender-responsive services recognize that women enter into the criminal justice system on different pathways than do men. Women experience prison and supervision differently and experience differences in substance abuse, trauma histories, relationships and responsibilities (Balis, 2007; Belknap, 2014; Cimino et al., 2015; Covington, 2008). Given these differences, services provided to women must create an environment based on safety and address specific needs such as relationships with children and other family members (Covington & Bloom, 2007).

If services for criminalized women are to be gender-responsive, it follows that services must understand the impacts of trauma. The impacts of trauma are far-reaching and are often intertwined with substance misuse. Trauma impacts physical health, mental health, employment, and educational opportunities (Cimino et al., 2015, Covington & Bloom, 2007; Crowder, 2016;

Matheson et al., 2015). Within trauma-informed services, the goal is establishing safety and interventions based on improving coping skills (Matheson et al., 2015).

While interviewees did not use the terms gender-responsive or trauma-informed, their experiences revealed the service gaps in said areas. For example, Katie (aged 30-35) relayed a story about needing to go to a local non-profit that provides a host of services to vulnerable and marginalized populations, including food, clothes, and medical and therapeutic services. She stated, “.... I have to go up there (a local non-profit), and I’m frightened to death. I should have been three weeks ago. Yeah, but I’m going. Yeah, I just got to make myself some go. Yes. I’m afraid of who (former male associates) I’m going to see up there.” Likewise, Laura (age 40-45) states, “I don’t go to the (local non-profit). Not for anything. There is too much drug trade, and up there whacked out of their heads and getting into fights. It’s just not a good scene.” Both Katie and Laura cite violence and the drug trade as reasons they are afraid to access an otherwise helpful service.

As Katie, Laura and others explained, the non-profit provides essential services, but many women avoid the non-profit agency because men too access services there. Women state that it is a small city, and they easily run into people they know, including ex-partners or drug dealers. Women fear running into men they know, particularly men with more violent reputations who frequent the non-profit. Katie’s example illustrates challenges in providing gender-responsive services in an agency that serves a large, heterogeneous population. Katie is afraid to see men from her past who are associated with drug use and crime. Laura fears violent men. For many women, their pathways to crime are associated with relationships with men

(Covington, 1985; O'Brien, 2001). Thus, services must recognize the unique needs of criminalized women to provide them with adequate services.

Another example is the co-ed parole options for women. Through my work at the Newfoundland and Labrador Correctional Centre, I know that a small number of women from the west coast of the province have accessed Westbridge House on parole or temporary release. In my field journal, I noted that when given the option of being paroled to Westbridge house, some women would rather stay in prison than attend Westbridge House due to the lack of services, isolation from supports, and the house's male residents. Furthermore, the other option for women on parole, Emmanuel House, is also co-ed. Women interviewed in this study spoke about discomfort with men in spaces meant to provide them with a sense of safety, such as a halfway house. Their discomfort is likely rooted in their experiences of trauma. Experiences of trauma are gendered, and women are more likely to experience trauma at the hands of an intimate male partner or other family members (O'Brien, 2001). These traumatic experiences are compounded by the nature of the intimate relationships, adding a sense of betrayal and confusion (Covington, 2008). Therefore, the presence of men in what should be considered safe spaces can be challenging. I am not suggesting that women avoid men and co-ed spaces, but service providers need to recognize the challenges associated with male presence for women.

Concerns about men's presence in service-oriented spaces are an example that speaks to the need for services offered to be trauma-informed. A significant number, 33%, of women imprisoned in Canada's federal prisons are diagnosed with post-traumatic stress disorder (Derken et al., 2017). While significant, many more women report histories of sexual (68%) and physical abuse (86%) than have been diagnosed with Post Traumatic Stress Disorder (Zinger,

2014). Thus, many more women may be suffering due to trauma histories than are formally diagnosed with a mental illness. Researchers and practitioners characterize trauma-informed care as requiring a paradigm shift that requires social service workers to acknowledge the impact that trauma, violence, and abuse can have on people's lives and development (Evans & Coccoma, 2014). Trauma-informed practitioners understand that regaining control over their environment is the number one priority when someone has been traumatized. Therefore, there is an emphasis on safety, choice, trustworthiness, collaboration, and empowerment (Blanch et al., 2012). Given experiences of trauma that incarcerated women have had, these factors are essential when considering how to deliver services.

Women's concerns about women-only and trauma-informed spaces are in line with literature that states programming and services provided for women involved in the criminal justice system, both in and out of prison, must be gender-responsive (Balis, 2007; Covington, 2002, 2008; Covington & Bloom, 2007; Gobeil et al., 2016; Kilty, 2012; Matheson et al., 2015). Gender-responsive services are effective in meeting treatment needs for women. Clinical services for addiction treatment that focus on women's specific issues and needs are more effective for women than traditional programs initially designed for men (Grella, 1999; Nelson-Zlupko et al., 1996). Therefore, services must keep within the unique needs of women in spaces and services traditionally thought of as male-dominated spaces, such as prison, homelessness, or addiction.

Peer support.

Many interviewees expressed a need for a peer support delivery model. Some criminal justice systems use a peer support model of service delivery for criminalized populations,

including the UK (See Fletcher & Batty, 2012; Nixon, 2020 & Wincup, 2019), Canada (McLeod et al., 2020) and the US (Barrenger et al., 2019). Currently, at the Newfoundland and Labrador Correctional Centre for Women, professionals, such as social workers and psychologists, offer services in prison. In the past, self-help groups such as Alcoholics Anonymous/Narcotics Anonymous (AA/NA) offered meetings inside the prison. However, these services have been inconsistent, and as of this writing, AA/NA does not provide meetings at the Newfoundland and Labrador Correctional Centre for Women. However, at times, women at the Centre have organized their own NA meetings based on their experiences attending meetings in the community. Some community-based services in the province incorporate a peer support model. For example, CHANNAL (Consumers' Health Awareness Network Newfoundland and Labrador) is a peer-led mental health service (CHANNAL, 2021). The Elizabeth Fry Society recently opened an office in St. John's, and they employ a peer support model to deliver services to criminalized women (M. Gushue, personal communication, November 25, 2021).

Peer support/mentoring usually involves someone with more experience guiding or encouraging someone with less experience performing a task or a role. In the case of peer work, both parties share similar experiences, and there is a sense that both “speak the same language and have walked in the same shoes” (Fletcher & Batty, 2012, p. 2). Agencies adopt the peer support approach based on four key elements. First, peers are ‘identity models’ for criminalized individuals; pro-social peers support the idea that changing is possible. Second, there is an assumption that people with criminal histories see professionals as authority figures. Therefore, people with criminal histories may be more likely to trust people with a similar background. Third, government and funding sources consider the peer support model as cost-effective. Finally, the model can help build social capital and resilience within marginalized communities

(Fletcher & Batty, 2012). While little evidence-based research indicates peer mentoring is an effective means of supporting criminalized women, governments in the UK are increasingly recommending peer mentoring programs (Wincup, 2019).

Evidence that does exist suggests that peer mentoring can be a promising way of supporting criminalized persons (Barrenger et al., 2019; Nixon, 2020). However, agencies may need to find ways to support peer workers in their employment (Fletcher & Batty, 2012). Nixon (2020) found that peer workers were inconsistently validated by criminal justice professionals, impeding their desistance and the ability to work with criminalized individuals. Furthermore, Fletcher and Batty (2012) found that peer workers had some difficulty working within a traditional workforce and occupied a ‘grey’ area of feeling like neither staff nor service users. Thus, there is a need to carefully implement and evaluate peer support programs, including solid training for peer workers and professional staff alike. Peer programs require a great deal of managerial maintenance and support (Fletcher & Batty, 2012).

Given these challenges, peer support/mentoring programs may not be as simple as suggesting that someone who has been there can support others in similar circumstances. However, because of the potential for peer mentoring, addressing some of the identified issues is necessary.

Many women interviewed felt a peer support model of service delivery would be helpful, feeling that a peer—a fellow criminalized woman—who has been through the criminal justice system would better understand their concerns. I asked Jane (aged 30-35) what she believed would help women be released from prison. She replied:

If they actually see the benefits that some other people are getting. Like yeah, I've been in and out (of jail) so many times and if they can see a year down the road that, hey, she didn't go back. Look at how far she's come. And you know, like sometimes that helps. I've always wanted to go back and do kind of like an addiction (group), just be like a spokesperson, I guess for people in jail. Yeah. For the fact that I've been there. I've been a drug addict. Yeah, I've been in and out of jail. Yeah. I've done all the crimes. Yeah. I've done my time. Yeah, and sometimes it's easier to hear somebody like me go in and talk to people, and it actually hits home more than somebody like you. Yeah, you know what I mean?

Jane speaks to a need for peer support services, suggesting that talking to someone who has “been there” and successfully made pro-social changes in their life is helpful. Likewise, Gloria (aged 40-45) stated that a peer support worker would be a practical addition to a supportive housing model. When asked what she would put in place for women leaving prison, she states,

Well, I want them to be safe. That would be my first priority is to have them feel safe leaving (prison.) Maybe meet them if I was the one going personally. You know, have it so I can advocate and take them with me and bring them to a safe place, whether it's a halfway house or a clean place. Yeah, and have peer support or a worker there on the floor. Yeah, 24/7. Yeah. It's an office, (in the housing unit) you know where you can go.

In her ideal scenario, Gloria can see herself as providing some peer support. She wants to meet women when they come out of prison and help them transition to safe housing. She also wants the housing option to provide 24-hour on-site peer support. Gloria's assertion for peer support at multiple stages of release, both right away and ongoing as a transition into housing speaks to the need for varying levels of support and intervention at various times during the release process. As Gloria sees it, release from prison is not a one-time event but a process requiring peer support.

Katie (aged 30-35) shared that the support from other women helped her to attend therapeutic groups. During a conversation about her attendance at a group focussed on addiction,

she said, “I asked (name redacted), and she said can anyone go. And then (name redacted) was going. And I was like I didn't know you're were going there. You should have told me. I would have went with you. I only stopped cuz I was going alone.” Katie began going to the group again because she had some familiar women to go with her. While Katie’s example is not a formal peer support service, she speaks to the need to have other supportive women who have experienced similar difficulties,

My interviews with women echoed Pollack’s (2009) findings; many formerly incarcerated women reported that only peers could genuinely understand the prison experience and that of being released from prison. They believed peers could understand their experience in a more nuanced manner that professionals could not. While many women stated the importance of a peer network, their release conditions may leave developing peer relationships challenging. A common parole condition is a stipulation prohibiting contact with others with a criminal history. The parole condition can impede women’s ability to maintain positive friendships with other criminalized women (Pollack, 2009).

Interviews with women support the idea that many women see themselves as potential “identity models” (Fletcher and Batty. 2012, p. 2) for other women entrenched in the criminal justice system. Numerous women stated they would like to share their own experiences with others to give back to the community. Interviewed women did not indicate they would have found peer support helpful for themselves, other than Katie, who stated that it would be good to have a “buddy” to attend meetings. Women interviewed saw themselves as the provider of peer support services rather than as the recipient of such services, as illustrated in the quotes from Gloria and Jane above. Women’s views of themselves as workers suggest that they find meaning

in helping other women rather than seeing a benefit in being helped by a peer worker. Maruna (2001) suggests that giving back to others is a crucial component contributing to long-term desistance. Likewise, Heidemann et al. (2016) found that participating in activities to support others helped formerly incarcerated women develop a sense of value and self-worth. Thus, I see women's assertion that they would like to be a peer support worker as a part of a cognitive shift on the desistance journey. Additionally, women see themselves as far enough along their desistance or recovery path to feel they do not need support from peers. In essence, women believe that they already have the knowledge needed to support others rather than the need to learn from other women in similar situations¹⁹.

Women's assertion that they would like to give back to the community is in keeping with desistance literature that suggests that giving back can be a part of the desistance process (Maruna et al., 2004). Peer work, which engages formerly incarcerated women in supporting women who have also been incarcerated, improved the helpers' self-efficacy, pro-social activity, and commitment to their desistance and recovery (Heidemann et al., 2016; Nixon, 2020). On the other hand, Nixon (2020) also found that as some peer workers continued to work within the criminal justice system, they found it necessary to distance themselves from their criminal past fully. They felt that distance from their past was needed to completely integrate a desistance mindset, which means giving up peer support-related work.

Formerly incarcerated women were clear on what they believed would help them during the process of being released from prison: practical support, such as housing and services

¹⁹ While it could be argued that for some women, the desire to be a peer support worker may indicate that they do not want to focus on themselves, but rather externally on others; or that they are unwilling to access support, for women in my study, the desire to be a peer support worker was tied to the idea that it would help them along their own journey to desistance.

designed with them in mind to address their unique needs. Women expressed a need to be “set up” when leaving prison—having immediate needs addressed before release so they can go about the business of a lifestyle change. Women wanted to change and stated the change happens first within themselves. Although there are many services in place that can help the change, ultimately, as they state, “you have to want it.”

What Service Providers Say Women Need

Service providers were much more likely to identify systemic issues that challenge formerly incarcerated women in the process of desistance than were the women themselves. While formerly incarcerated women stated that they needed help and services, they still believed they had to make the changes needed to live a crime-free lifestyle. On the other hand, service providers believed that systems needed to change to support women in the desistance process while deflecting the question about what women needed to do to support their reentry. Rather than focus on the individual woman’s needs, they framed the discussion of desistance journeys within the context of services, systems, and communities that could be improved. In this section, I discuss what service providers stated that formerly incarcerated women need. I return to a discussion of the tensions between what women stated and what service providers stated during the conclusion of this chapter.

The majority of service providers interviewed had minimal knowledge of the process of release from prison or the services offered in the local women’s prison. Nine of sixteen service providers interviewed had delivered direct services at the Newfoundland and Labrador Correctional Centre for Women. Of those nine, three service providers worked weekly in the local women’s prison as an official duty of their job. Others interviewed provided services as an

add-on service because the service provider and their agency believed it was an underserved population. Therefore, most service providers did not fully understand the prison services, other than the information received from clients and their limited observations. In general, community-based service providers sensed that the Newfoundland and Labrador Correctional Centre for Women services were inadequate and unhelpful, in contrast to what formerly incarcerated women said.

Service providers felt women needed supported housing, increased mental health and addiction services, and fewer barriers to access services. Finally, service providers stated that systemic issues such as poverty and racism adversely impact women.

Supported housing

Service providers identified housing as a critical component of supporting women in desistance and a pro-social lifestyle. However, service providers stated that women do not just need a house but need supported housing, including wrap-around services to help with social and life skills, mental health, and substance use issues. Supportive housing, broadly defined, is independent housing linked to service providers who can provide mental health services and concrete supports that foster eviction prevention (Rog, 2004).

Pearl (aged 25-30, two years of occupational tenure) states:

Sometimes if it comes down to like, they just need a roof over their head. That can be kind of a challenge, right, and on where their family is. Sometimes they're kind of at the mercy of whatever their familial support is because that's kind of where they can get housed. So it would be great to see a halfway house in St. John's for women or some kind of supportive housing.

Pearl recognized the need for a house and that women may not have sound natural supports systems. She suggests that supported housing is needed whereby women can access services to

support their pro-social goals. All service providers stated that housing was a significant barrier for women. While all interviewed women were released from prison into some sort of housing arrangement, most were released to a halfway house. From there, halfway house staff helped women find housing in the community. Service providers have worked with a diverse group of women over many years and strongly advocate that housing remains a fundamental barrier for women leaving prison.

Increased Mental Health and Addiction Services

Service providers stated that more mental health and addiction services are needed to adequately address the needs of criminalized women in the community and prison. When I asked service providers if there are sufficient mental health and addictions services, they all stated that there are not enough services, citing wait times and lack of funding as problems. For example, Grace (aged 45-50, 15 years occupational tenure) stated that there are year-long waits for psychiatry referrals. Furthermore, she stated that out-of-province treatment might be an option for some women. However, funding is difficult to arrange as funding requires advocacy from a psychiatrist to the Department of Health and Community Services. Likewise, service providers stated that there are inadequate services available in prison. Faye (aged 40-35, 15 years occupation tenure) suggested that prison services must be available “on-site and 24/7,” meaning that a mental health service provider should be in prison at all times to respond to the needs of women.

Service providers were able to name many services offered by Eastern Health²⁰ However, many service providers believed these services could not meet the needs of criminalized women.

²⁰ Eastern Health is a regional health authority providing inpatient and outpatient mental health and addiction services as well as services for physical health.

Sue (aged 40-45, 12 years occupational tenure), a service provider, stated that the services are available, but women she works with believe these services are not useful. Sue explained that women had not experienced mental health services at the hospital as helpful; “It is not one size fits all.” Sue implies here that the mental health services offered at the hospital do not account for individual needs but rather provide a blanket service in an effort to address everyone’s needs. Similarly, Nina (aged 25-30, 5 years occupational tenure) indicated her client feedback makes it challenging to decide where to refer clients, stating

I find it hard to think of where to (refer) when people talk about wanting to go to, you know, rehab or detox. I hear it’s not great, and I don’t have something that I feel like is up my sleeve where I can be like, here you go, here’s a great solution.

Service providers felt that, while there are services that provide mental health and addiction support, these services do not meet the unique needs of criminalized women, particularly those who have complex mental health and addiction issues²¹.

Fewer Barriers

Interviewed service providers identified several barriers for women trying to access services in the community. These barriers include having to make appointments, waitlists, and the requirement to be abstinent from drug use.

Many services in the community require a referral or the ability to make and show up for appointments. Services providers stated that these requirements could be a challenge for some

²¹ Throughout interviews, I experienced a sense from service providers that criminalized women are an extra difficult population to serve. Service providers asserted that there are inadequate services in place to address the needs of criminalized women. While formerly incarcerated women interviewed stated that the quality of services are good, just not enough of the services. The difference in service-providers versus women’s responses may be explained by who I interviewed versus who service providers are referring to when responding to interview questions. I interviewed women who were actively engaged in desisting. Service providers are working with women who may be still in active addiction, crime etc., thus providing contrasting perspectives – they are perhaps speaking about women who do not feel they are engaged in the process of change.

criminalized women, particularly those who are street entrenched or homeless. For some women, merely making a phone call or needing a referral can be a barrier. As service providers stated, the more hoops people have to jump through, the more challenging they find accessing services. For example, some women may not have a phone, or when they have access to a phone, such as a friend's or community service, service providers may not be immediately available. As Pearl (aged 20-25, 2 years occupational tenure) states:

I think the barriers specific to making phone calls or needing a referral or like the specifics that women have to undergo. Be it maybe paperwork, be it forms, be it a referral, be it like a phone call. Whatever those little barriers are. They are hurdles that they have to get over to access those services or get that first point of contact. I think they are hugely overwhelming for women, especially when they're in transition or their couch surfing, or they're like working a job, or they're trying to they're running all over the place, and you don't have a phone.

Pearl acknowledges that the challenge for women is arriving at that first point of contact with service providers. Compounding the problem of making the first contact is frustration with waitlists for services. Grace (aged 45-50, 15 years occupational tenure) says, "I have a 26 person waitlist, with probably 8 to 12 months wait time. Psychiatry only takes referrals from GPs (general practitioners), and they have a two-year waitlist." Waitlists and difficulty making the first contact evidence the need for a variety of services available to women at differing levels of ability, motivation, and need. Meeting women where they are, both literally and figuratively, is a critical component in working with the population. Street-based work is essential in working with women who are homeless or street entrenched.

Services provided by those interviewed represented a mix of approaches to working with women, fitting with the diversity of criminalized women's needs. Services included drop-in, case management, street-based out-reach, counselling (both drop-in and by appointment), prison in-

reach, therapeutic group work, social/recreational activities, employment support, and housing support. The provision of a wide variety of services means that the diversity of women's needs can be better met.

Some services offered by interview participants are provided exclusively to criminalized women, while other services are offered to women only or the public. Some women have expressed the need to have space for criminalized women only—a safe space to acknowledge experiences with court or prison and not fear stigma or judgment from others. For example, as previously noted, formerly incarcerated women expressed the need for a peer-supported service with other women who have been to prison. Nevertheless, service providers also noted that some women did not want to be referred to the Just Us Women Centre (a program within Stella's Circle) because it is for criminalized women only. Some women did not want to encounter women with criminal histories as there is a fear of falling back into the lifestyle.

Faye (aged 40-45, 15 years occupational tenure) says, “So one of the things is that Stella's Circle is one of the main referral sources, but for some of the women, they don't want to come here because they don't want to see certain people that they have been inside with, they don't want to be faced with the temptation.” The idea presented here, that some women do not want to associate with women they knew from prison, fits with theories of desistance that propose “knifing off” one's past contributes to desistance. Maruna and Roy (2007) suggest that “knifing off” the past may be a part of early desistance when it is essential to distance from people who may influence a return to old behaviours. However, they further suggest that as the desistance process continues, cognitive shifts that move away from criminal thinking are required to desist in the long term. I put forth that desistance as a process has implications for

programming for criminalized women, whereby program delivery must recognize the stages where women are and then support desistance within that context. For example, supporting “knifing off” a past associated with criminal associates may encourage women to access services with a “mixed group” of women attending. In the UK, the government created a “Together Women” program to address criminalized women’s needs to reduce offending (Hedderman et al. 2001). In practice, the five centres throughout the UK worked with both women involved in the criminal justice system and women who were deemed “at risk,” which included women with substance use issues, mental health concerns, homelessness, and victims of violence. Researchers evaluated the program and found that the mixed group of women who have committed crimes and those who have not engaged in crime positively impacted criminalized women by introducing pro-social peers (Hedderman et al. 2001). They also found less stigma associated with the program because it included both criminalized and non-criminalized women.

Another issue key for service providers to understand when working with women in the criminal justice system is substance use/misuse and addiction. Service providers identified barriers such as requiring abstinence from substance use to access programming. Vivian (aged 35-40, 10 years occupational tenure) explains:

If there’s times when there’s addictions issues involved, they (criminalized women) become even more disengaged. Not just because of the lifestyle stuff, but also I think their experiences with professionals have often been that professionals don’t want them around if they’re under the influence.

Some programs require abstinence, like in-patient treatment. However, other community-based services require refraining from substance use to attend appointments or groups. However, service providers may be flexible to meet for some services while an individual is under the influence of a substance,

Many community-based agencies are taking a harm-reduction approach that suggests abstinence from substances not be a requirement to access services. However, Vivian's quote suggests that many clients have taken the message around abstinence to heart and feel they cannot access services if they are using drugs or alcohol. Therefore, messaging must be clear and outright, stating that active substance use is not a barrier to accessing particular services.

Systemic Issues

Service providers identified broader systemic issues such as poverty, sexism, and racism that impact criminalized women's desistance process. Women are more likely than men to live in poverty and suffer poverty impacts (Fox & Moyser, 2018). Criminalized women are likely to have lower education, employment, and job skills than criminalized men and experience even more poverty and welfare dependence than men (Hannah-Moffat & Shaw, 2000). In general, women report more frequent and severe experiences of gender discrimination than men (Schmitt et al., 2002). Drug use and incarceration carry a stigma for men and women. However, the stigma and resulting sexism are much more significant for women because of gender-based stereotypes that hold women to different standards (O'Brien, 2001). Women are often stigmatized not only because of their criminal activity and incarceration but also for being "bad" women and mothers (Flavin, 2001; Greenfield & Snell, 1999; Owen, 1998). Given the stigma associated with criminal history and sexism, classism and racism, criminalized women face many challenges to having their needs met on release from prison.

Ruby (aged 50-55, 21 years occupational tenure), a service provider, offers an example of challenges associated with poverty while also sharing how public perceptions of criminal

behaviour impact service providers' abilities to advocate for women released from prison. Asked what the community needs to change to support women coming out of prison, Ruby replied:

We're fighting now for bus passes for people, and nobody supports people getting a bus pass. They don't want people committing crime, right? They don't want people, you know, doing bad things. However, they don't want to support the services that are needed to help people do things differently. So if people continue to live in poverty, the risk has already gone up. If people don't have access to resources like jobs and all that kind of stuff, the risk goes up. Look, we know all the risk factors. Yeah, but the community is not willing to really step back and look at how we need to do more.

Although Ruby speaks to the generic "they," meaning both the general public and the people who deliver public services, she alludes to a shift in the provision of bus passes for people receiving income support. Social workers can advocate for bus passes for their clients who have a number of appointments in a month. The program providing bus passes had changed, and, in consequence, bus passes are more challenging for clients to receive²². Thus, service providers experience systems that claim to be supporting people being at odds with the goal of reducing criminal activity.

Furthermore, Ruby's words also evidence a general tone within the community; in her experience as a service provider, she asserts that the public believes that people who have committed a crime do not deserve help. She believes that these public attitudes impact policymakers who decide on appropriate allocations for services. Hough and Roberts (2005) state that the public has a poor understanding of resettlement issues for former prisoners. In Canada, there is support for rehabilitation efforts. However, public opinion is very negative regarding parole, and the parole system is the least trusted aspect of the criminal justice system

²² The policy has changed since this interview and now all clients in receipt of income support will automatically receive a bus pass.

(Tufts, 2000). Thus, in Ruby's experience, the public supports former prisoners finding employment (Hough & Roberts, 2005). However, supporting these efforts to find employment with something concrete like a bus pass is viewed as providing too much help, framing those with a criminal history as the undeserving poor (Costelloe et al., 2009).

Barriers such as the inability to get a bus pass impact criminalized women's abilities to gain employment and thus begin to move away from poverty. Many criminalized women live in poverty, both before and after criminal activity involvement (Balfour & Comack, 2014). Living in poverty makes everything that much more challenging. As Ana (aged 45-50, 18 years occupational tenure) states, "poverty really drives people to do some very desperate things. Yeah, and despair and poverty are exhausting and time-consuming. So, how do you work on any of your other goals if all of your energy just goes into hustling to have enough to eat?" Poverty moves one's focus to survival, which, as Ana states, can drive people to do desperate things, including returning to a criminal lifestyle or entering the gray labour market. Sheppard and Ricciardelli (2020) found that given the dismal job prospects for former prisoners, many turned to the informal job market, such as sex work or considered returning to a criminal lifestyle to make money for survival.

Other systemic barriers facing criminalized women identified by service providers include racism and sexism. The mainstream population often regards criminalized Indigenous women as "triple deviant" (Yuen, 2011, p. 98). They have deviated from mainstream cultural norms tied to femininity and are further marginalized due to race and cultural traditions. Jackie (aged 45-50, 20 years occupational tenure) shared:

Racism is one of the things that I hear about, and stereotyping and feeling excluded. Women, you know, reporting that they feel excluded, targeted,

looked down upon, called names. Really feeling separated, especially if they're from a different part of the province. When we're working with people who are in the community and being reintegrated, I'm still hearing some of those same things, and they're feeling stereotyped that they're feeling judged. They're feeling that they're experiencing racism and especially if they are visibly Indigenous, not white-passing.

Service providers report that racism and sexism impact how others treat women and how women feel about themselves. Experiences of discrimination inform women's abilities to meet basic needs and their sense of hope for the future. Marques and Monchalin (2020) suggest that the imprisonment of Indigenous women must be understood within the context of colonialist systems that continue to seek to dismantle Indigenous ways of life. Histories of colonialism and associated trauma can overshadow criminalized women's individual-level attempts at desistance (Hale, 2020).

Conclusion

Differences exist between what women say they need for desistance and what service providers say women need. The difference is, at least in part, in the different responsibilities of each party for reentry. For example, service providers frame housing as supported housing, whereas women just want somewhere to live. Service providers say enhanced services are needed, whereas women say they need more of what they have. These may be subtle differences, but the question remains: who is responsible for making needed changes? Both groups are asserting ideas that are two sides of the same coin. There needs to be a partnership between service providers and women; both need to do their part.

Service providers take on a systemic viewpoint because they have worked with multiple women who have experienced similar issues. Therefore, service providers see the multiple instances of a particular issue as systemic. On the other hand, women see their situation and,

arguably through their incarceration, which exposes them to neo-liberal ideas of responsabilization, hold themselves responsible for their lives. For example, the women interviewed suggested that the individual has to reach out and seek support. Over and over, women stated, “you have to want it.” Women focused on the changes that they needed to make. All women interviewed stated that they wanted their life to be different when they left prison.

Formerly incarcerated women interviewed all took personal responsibility for changes that they needed to make. Women’s assertion that the individual must be invested in desistance fits with Maruna’s (2001), who suggested that for a criminalized individual to ‘go straight,’ they must generate a gradual shift in self-narrative. He states that the narrative of desisters differs from those active in a criminal lifestyle in three fundamental ways: 1) the establishment of core beliefs that characterize ‘true self,’ 2) an optimistic view of control over destiny, and 3) a desire to be productive and give back to society. Maruna (2001) suggests that those who can ‘rehabilitate’ generate a positive self-narrative stating that they are still good people though they have done wrong. Furthermore, Maruna (2001) states that successful desisters can reach back to find the ‘old me’ to find positive roles and sense themselves as intelligent and better than a common criminal. Thus, Maruna (2001) argues that desistance is not merely something that happens to a person but is an active process. Maruna’s vision of desistance is an important one for service providers to understand as they support women’s desistance. Service providers can help promote a positive self-narrative. For some women, starting to create a self-narrative is nuanced and new, yet, for others, the narrative has become a more entrenched part of the identity.

While I cannot say if all women in my study will successfully desist from crime (at the time of this writing, one woman has returned to prison), interviewees are engaged in the process of developing a self-narrative that involves change talk moving toward desistance. Furthermore, to help women achieve their goals, service providers need to work with criminalized women to explain systemic issues and how issues impact women's circumstances and ability to desist from crime. Thereby, women can understand that "failure" to desist from crime is not necessarily a personal failure but a failure of systems to provide adequate care and support.

The idea of balancing these two views, personal responsibility and systems' failure, is vital to reveal what formerly incarcerated women need to do to change their circumstances. For example, when interviewing service providers, I asked questions that focussed on criminalized women's desistance. Some service providers interpreted questions about women's role in desistance as judgmental of criminalized women. Service providers did not answer the question but pivoted to what community and government agencies needed to help criminalize women. As I went about my interviews with service providers, I adjusted the question, acknowledging that it may seem judgmental. However, I was still interested in the role that women play in their desistance journeys.

Criminalized women, conversely, were not bothered by the question and freely answered, suggesting diverse changes they needed to live a different, crime-free life. Criminalized women asserted their agency to act in particular ways related to crime-free lifestyles, while service providers focused on the contexts of such choices. I have combined both voices, providing a nuanced view of criminalized women's lives, which values both their assertions of agency and the context of their agency.

I also question service providers' (and I include myself) resistance to women's positions. There are systemic barriers, and it is my job both as a researcher and as a service provider to identify and mitigate barriers. However, I also need to listen to women telling me that they have a role to play. Dismissing women's concerns as "buying into neo-liberal rhetoric" that insists on personal responsibility and asserting that all problems are systemic denies women the agency they need to dictate their lives. The combination of issues at play here must be acknowledged. Desistance literature emphasizes personal responsibility, but there needs to be an acknowledgment that personal responsibility does not happen in a vacuum. Implications for service providers are to work with women's ideas of personal responsibility while educating them that systemic issues will impact their journey towards that "better life."

Chapter Five: Stigma and Women's Desistance

"You could do a thousand good things, but they always remember you for the bad."
Sarah, a formerly incarcerated woman, aged 55-60

Introduction

The formerly incarcerated women and service providers interviewed for the current study identified stigma as challenging for women exiting prison and beginning a path to desistance. Stigma is "an attribute that is deeply discrediting" (Goffman, 1963, p. 30). Some individuals who experience stigma also are the target of prejudice and discrimination (Link & Phelan, 1999). For example, the stigma of a criminal record can result in difficulties finding employment due to discrimination against hiring a criminalized person. Additionally, stigma can impact reentry success in the areas of housing and community access. (See Chapter Two for a more detailed discussion). The result is social exclusion (LeBel, 2012a). These experiences of stigma, discrimination and social exclusion, arguably an experience not uncommon to those with a criminal history, can result in an individual internalizing that stigma, causing feelings of deep shame, whereby an individual believes that there is something inherently wrong with them as a person (Gålnder, 2020; Goffman, 1963). Furthermore, the perception of stigmatization from others is a predictor of low self-esteem and dissatisfaction with life (LeBel, 2008). Thus, experiences of stigma can have a profound impact on the lives of the women interviewed.

The women I interviewed face multiple stigmatizing identities due to their criminal history, mental health, and addictions, and they have experienced discrimination due to these stigmatized identities. Moreover, stigmatizing identities among the women interact with gender and race to compound stigma.

Interviewed participants also explained how feelings of shame due to stigma caused them to feel undeserving of help, thus preventing them from seeking support in response to discrimination (see also Braithwaite, 2000). Therefore, feelings of shame and the experiences of discrimination challenged their process of desistance. Desistance relies on an individual's ability to make a cognitive shift from identifying with criminal behaviour to identifying with pro-social goals and lifestyles (Giordano et al., 2002; Maruna, 2001). Formerly incarcerated women experience multiple and intersecting stigmas (LeBel, 2012b) that may bar them from some forms of pro-social belonging and engagement. Moreover, discrimination will affect former prisoners' ability to engage in practical elements of the desistance process. For example, many people with criminal histories face challenges when seeking employment (Albright & Denq, 1996; Ricciardelli & Mooney, 2018; Ricciardelli & Peters, 2017). Employment is a critical element in the desistance process (Anazodo et al., 2017; Rodermond et al., 2016) and living a pro-social life (Ricciardelli et al., 2019). However, a criminal record or history of incarceration can reduce, even limit, employment opportunities.

In the current chapter, I examine how stigma shapes the desistance process, both practically and the cognitive processes at play. First, I examine multiple stigmas (criminal record, addiction, mental health, race and gender) and the challenges these compounding issues pose to desistance. I then explore how experiences of stigma impact women's abilities to access services that can aid in desistance. Finally, I examine women's experiences of internalized stigma and the impacts on desistance.

Multiple stigmas

During interviews with formerly imprisoned women and service providers, they identified stigma associated with criminal records, mental disorders, sex work, substance misuse, gender and race. These multiple stigmas overlap at times, compounding the impact of other stigmas. At other times, women can engage in stigma management by revealing only partial stigmatized identities.

Gender and a criminal record

Both formerly incarcerated women and service providers acknowledged that gender shapes the stigma associated with a criminal record. Gender intersects with a criminal record, or more specifically, a criminal history, to create an extra layer of stigma, resulting in criminalized women being perceived as doubly deviant: breaking the law and gender norms (Carlen, 1995; Lander, 2015; Leverentz, 2014). Criminalized women are seen as violating feminine norms, which dictate that women should be passive and well-behaved (Radosh, 2002). The impact of gender on a criminal record is particularly salient when women are seeking employment post-incarceration. Ana (aged 45-50, 18 years occupational tenure), a service provider, stated

So I see women who have criminal histories more marginalized. And, I think, really ghettoized then into even sex work and not to say that there's anything wrong with sex work and some women want to do that. But I know some I've worked with some who get into that because it's just like, well, that's what I could get.

In Ana's experience, criminal records are barriers to employment for men. However, men are more likely to circumvent these issues by working under the table or going into traditionally male fields where a criminal record does not impact employment as much (e.g., construction, roofing, asbestos abatement). Ana also suggests that women are "ghettoized" in sex work. While she acknowledges that sex work is not inherently problematic, sex work is a problem when

women feel they have no other choices. Moreover, another stigma is associated with sex work that adds to the stigma of gender and criminality. Camilla (aged 30-25, 8 years occupational tenure), a service provider, asserts that sex workers, particularly street-based sex workers, face stigma through “policing approaches, through surveillance.” Here Camilla suggests that women working in the sex trade are subject to extra scrutiny from police and, thus, at risk for potential arrest.

Local communities also stigmatize sex workers, describing sex work as a concern safety issue²³. Based on concerns from citizens of St. John’s, Living in Community, a steering committee aimed at creating safer communities, compiled a report, which included interviews with sex workers (all self-identifying as women), service providers²⁴, and community members. The report found that sex workers experienced stigma and discrimination, affecting their safety (Living in Community, 2020). For service providers Ana and Camilla, women with a criminal record engaged in sex work are battling stigmas that affect their ability to find alternate work and their safety within the available, viable work options. Sex work is quite diverse (including massage, dancing, escorting and street-based work) and often operates on the edge of legality. While sex work is not inherently dangerous, sex work is subject to “discourses of hate,” which lay the groundwork for stigma and violence against sex workers (Sanders, 2016).

Given that sex work as an occupation is highly stigmatized, safety is a concern for sex workers. For example, sex workers have indicated that they are reluctant to access health services due to stigma and attitudes from health service providers (Shaver et al., 2011). Lewis et

²³ Note that they are not referring to the safety of sex workers.

²⁴ The writer was interviewed as a service provider.

al. (2005) indicated that sex workers are often subject to discrimination, harassment, and assault. Sex workers' concerns were related to the criminalization and stigmatization of sex work rather than the work itself. Sex workers in Lewis and colleagues' (2005) study reported harassment and violence from members of the public, police and clients.

Criminalized women seeking more established employment options often struggle given that more 'traditional' women's work is people-focused and in positions of trust (for example, cleaning or homecare). The existence of a criminal record stigmatizes persons as law-breakers rather than law abiders, which impedes the extension of the trust necessary to hire an individual into an employment position, albeit under the table or legitimate within the formal labour market. Women in the current study are acutely aware of the stigma associated with being a woman with a criminal history and how the stigma affects their access to services and finding employment (LeBel, 2012b; Van Olphen et al., 2009). When I spoke to Jane, a formerly incarcerated woman (30-35 years of age) and asked about the services she needed, she replied:

Try to help us with jobs. Being a female is harder to get a job than for a male. Being a criminal and having a criminal background, it's harder for women than for men. Because (the jobs) are more for men.

Jane recognizes the extra challenges for women with criminal records in finding employment. Previously a homecare provider, Jane knew that she could not return to that kind of work with her criminal record. She believes that it is easier to get into work like construction when you have a criminal record, but it can be a challenging industry for women. Jane recognizes the importance of employment in meeting her goals for a pro-social life, consistent with researchers who find that employment positively affects desistance (Pager & Western, 2009; Roderman et al., 2016). Jane understands how stigma and discrimination will impact her ability to live a pro-

social life and asks that service providers help in her goals for employment in hopes of mitigating the stigma.

Racism, Colonialism and a criminal record

Like elsewhere in Canada, Indigenous people are disproportionately represented in the criminal justice system in Newfoundland and Labrador. In Newfoundland and Labrador, female Indigenous admissions to adult custody comprise 24% of all admissions (Malakieh, 2018) while making up 7% of the province's population (Chernikova, 2016). Marques & Monchalin (2020) assert that the mass incarceration of Indigenous women reflects patriarchal, colonial tactics of control designed to assimilate and control Indigenous women. Furthermore, they argue that because prison systems are designed for the needs of white men, current carceral systems do not address the needs of Indigenous women in prison. That carceral systems do not address the needs of Indigenous women is evident in Newfoundland and Labrador, where Indigenous women from Labrador serve their prison time on the island, far from their homes, families and cultural practices. While funding was announced to renovate the Labrador Correctional Centre to include space for women from Labrador, the renovations have not transpired (CBC, 2019). Allowing Indigenous women from Labrador to serve time closer to home communities would allow easier access to family and cultural supports. While this would be helpful for imprisoned women, Marques & Monchalin (2020) question why there are budgets for prisons but not to adequately fund programs that would prevent imprisonment.

In the current study, I interviewed two Indigenous women. Both discussed the importance of connection to their culture and their People as necessary to their healing after release from prison. However, aside from one woman stating that the language barrier was a challenge,

neither specifically mentioned racism. I question if the two Indigenous women interviewed did not mention racism because such experiences are ingrained in their commonality that they are a way of life rather than an unusual experience for these women. Service providers, conversely, are more likely to see the systemic patterns of racism/colonialism while working with many Indigenous people. As a service provider working within the prison, many Indigenous women have told me about their experiences of racism, including name-calling, isolation, and bullying by other prisoners, but without speaking to issues of systemic racism or how such practices or experiences affect desistance. Instead, women speak about the experiences that impact their daily lives while living in prison.

One service provider interviewed identified racism as an issue for women with a criminal record when released from prison. Jackie (aged 45-50, 20 years occupational tenure), a service provider, shares:

When we're working with people in the community and being reintegrated, I'm still hearing that they're feeling stereotyped. That they're feeling judged. That they're feeling they're experiencing racism or especially if they are visibly Indigenous, not white-passing. So yeah, I'm seeing that I'm also seeing barriers like, you know, they have a criminal record, so that impacts employment.

Jackie's words reveal the interpretation of the community members placing a "triple deviant" stigma on women identifying as Indigenous (Yeun, 2011). Criminalized Indigenous women transgress traditional notions of femininity by nature of Indigeneity and through participation in criminal activity and/or drug use (Dell & Kilty, 2013). Jackie, recognizing how stigma affects her clients, describes challenges supporting Indigenous women in obtaining employment, which she sees as a component of the process of community reentry.

Mental health and a criminal record

While most people living with mental disorders do not have a criminal record, mental disorders are prevalent among criminalized women. Incarcerated women experience high rates of mental health problems, including Post Traumatic Stress Disorder, Major Depressive Disorder, General Anxiety Disorder, substance use, Schizophrenia, and other mood and personality disorders (Brown et al., 2018; Kilty, 2012; Stanton et al., 2016). In the current study, all women interviewed self-identified with a mental health concern; but not necessarily that they had been diagnosed by a mental health professional. However, they identified their mental health as a concern in daily living.

In the current study, I find that mental illness connects and interacts with a criminal record in two ways. First, experiencing stigma and discrimination can impact mental health by exacerbating symptoms of mental disorders. Second, the ability to hide a stigmatizing identity can provide opportunities for creative stigma management. I will discuss both these intersections of mental disorder symptoms and criminal records below.

Experiences of discrimination due to a criminal record can exacerbate psychological distress (Turney et al., 2013). For example, in a discussion about employment goals, Laura, a formerly incarcerated woman (aged 40-45), states, “I don’t know....the employment thing. It probably got a lot to do with me because I am nervous about people knowing. It’s not hard to Google.” Here, Laura is worried about the stigma associated with her criminal justice involvement if uncovered. Convicted of serious charges, Laura worries about potential employers searching her name on the internet, revealing news articles including pictures and details of her conviction. Laura is so anxious about employers finding out about her criminal

history that she is reluctant to seek employment. Thus, the idea of disclosure amplifies the symptoms of her mental illness. Other women shared similar experiences and described the effects of such an experience on their mental health, for instance, the stress of asking for time off to go to a probation appointment. The stress and worry about disclosing or discovering criminal history were harmful to mental health and well-being. Ricciardelli and Spencer (2014) similarly found that some sex offenders are in a constant state of apprehension and anxiety at the prospect of their crimes being revealed. While women in this study were not convicted of sex offences, their crimes carry the stigma that contributes to a precarious existence while waiting on what they see as inevitable disclosure of their crimes,

On the other hand, for some women, multiple stigmatizing identities can allow them to creatively manage disclosure, choosing to whom they can safely reveal a stigmatizing identity. For example, some women chose to hide their criminal history but presented another stigmatized identity, such as a mental disorder. At least in part, for some women, revealing they had a disorder was easier, or perhaps less stigmatizing, than revealing their criminal history. Grace (45-50, 15 years occupational tenure) provides employment support for individuals with mental health concerns shares a story about a client she tried to help obtain employment for over a year:

I met with her and built that therapeutic relationship, then one day, she was like, I have to tell you something. I was like, what are you gonna tell me? She's like, I have a criminal record. I was like, oh...., now I know why you can't get a job! Why aren't you telling me this like months ago?

Grace explains she was puzzled by her client being underemployed and continuing to be underemployed. Eventually, the client disclosed having a criminal record. Grace shared that her client would go for interviews and be offered the job, but she would not return once they asked for a record of conduct. Grace explains that her client was so ashamed of her criminal record that

she would not disclose it to service providers whose role was to help her and support her in her endeavours. Grace's story reveals the extent of her client's shame and embarrassment tied to her criminal past, making disclosing itself a barrier to her support seeking and employment attainment. Contrastingly, she was willing to disclose her mental disorder to access employment support services. Thus, for Grace's client, the revelation of her mental disorder was less stigmatizing than her criminal record.

On the other hand, some interviewees with an incarceration history were reluctant to share their mental health histories due to poor past experiences. Erica, a formerly incarcerated woman (aged 50-55), shares:

My first job I went to (after leaving prison) I think that as soon as I told her (something changed). I was doing so good, but not letting her know about my personal life, about the bipolar, right? As soon as I let her know, the supervisor that I was bipolar. I was treated different. I was, you know, kind of pitied, right?

In Erica's experience, sharing about her mental disorder at her job did not go well. While her employer did not fire her, she felt that her employer treated her differently because of her mental disorder. While often women are encouraged to disclose mental disorders as they may require accommodations, there remains the fear of discrimination. Discrimination is not always about not getting a job or losing a job but being treated differently, including being pitied. Thus, disclosing mental illness may not be an option for some women, even though they may need services or accommodations.

Women reported a seeming "hierarchy of stigma" that was somewhat tied to the visibility of the stigma. Given that some stigmatizing identities are visible, others – those that are arguably invisible – can be disclosed at the choice of the bearer or can be 'outed.' Both a criminal history

or a mental disorder are arguably invisible. Variable among our participants was which, their criminal record or mental disorder, was more or less problematic. The ability to determine which stigmatizing identity is more impactful, combined with the choice for disclosure, is a form of stigma management. Women control the information they share, with whom they share it, and for what purposes. For instance, a criminal record is required to access some services, such as the Just Us Women's Centre or Elizabeth Fry societies. For other services, such as some employment support programs, a mental disorder is a prerequisite.

Stigma impacting access to services

Basic needs

Stigma and resulting discrimination associated with a criminal record are widely recognized to have impacts on basic needs such as housing (Berry & Wiener, 2020), employment (Ricciardelli & Peters, 2017), and relationships (Pollack, 2009). Most women felt that stigma is inescapable as their criminal history is easily known. Women have stated that discrimination and stigma are a reality in living in a small town—Lilian (aged 55-60) shares, “It’s nothing but trouble out in (town redacted). Everybody knows your business, and what they don’t know, they make up. I’ll visit, but I won’t live there again.” For Lilian, the idea that everyone talks about her in a stigmatizing manner means that she cannot live in her hometown again. The inability to live in her hometown limited her social network and meant that she lost her housing.

However, living in the city does not necessarily mean anonymity. Robyn (aged 20-25) states, “sometimes I just find the stigma of being on probation [is daunting]. Having to go to an appointment and having to get time off work for that.” Robyn has always been able to find work as she works in an industry receptive to hiring people with criminal records. However, she still

experiences stigma when needing to go to mandatory probation appointments because of the time off work required. These experiences of stigma impact women's motivation to seek housing and employment for fear of facing more discrimination.

When women do seek housing, they are likely to face discrimination. When asked about the challenges in being released from prison, Judy (aged 60-65) stated, "like, I guess, landlords don't want to rent to people like us." Jackie, (aged 45-50, 20 years occupational tenure), a service provider, shared difficulties for women she has worked with:

Even getting references for housing? Well, who's your last landlord? My last landlord was two years ago. Yeah, but I want your most recent one. Where were you living? I was actually incarcerated, and so right away, right away, you just lost your housing.

Housing is challenging to obtain while in prison in preparation for release (See section on housing in Chapter 4). When released, women face barriers in meeting their most basic housing needs due, at least in part, to the stigma associated with a criminal record and incarceration.

In addition to housing, another basic need is relationships with family, friends, and the community in which one lives. Relationships provide emotional support and a sense of belonging. A feeling of isolation post-prison is common for many formerly incarcerated individuals (Nugent & Schinkel, 2016; Pollack, 2009). Women reported having difficulties connecting with the community due to their criminal past. Sarah (aged 55-60) states:

Yeah, and I find no matter you could do a thousand good things, but they always remember you for the bad. And say another thing too, if I wanted to do volunteer work. I can't even do that because I got to have a criminal check.

Sarah here is aware that people in her life and community stigmatize her due to a criminal record. She finds stigma challenging because she wants to be involved in the community through volunteer work but feels that a criminal record will prevent her. The desire to give back to the

community was common for women interviewed. Most stated that they would like to do something that meaningfully contributes to their community as they know they have “taken” something from the community due to criminal activity. However, all women recognized that stigma associated with a criminal record might challenge their efforts to give back. Women did not even try to volunteer as they believed that a criminal record would prohibit any volunteer activities. Feeling stigmatized becomes paralyzing, meaning that women will not engage in any activities, such as searching for employment or volunteer work, for fear of stigmatization (after the awkward navigation of disclosure),

The need to give back, central in desistance literature, suggests that the process of desistance involves repairing harm done. Maruna (2001) found that desisters were focused on giving back to others and wanted to accomplish or have ‘something to show’ for their lives. McNeil and Maruna (2007) suggest that the current manifestation of the criminal justice system impedes the ability to give back, as Sarah’s example shows. The stigma associated with a criminal record impedes her ability to participate fully in the desistance process, which requires meaningful participation in her community.

Women also face less formal discrimination and stigmatization from community members, friends, and family. My conversation with Lilian (aged 55-60) explored informal stigmatization.

Amy: You feel like people are talking about you?

Lilian: Yeah, like Lilian done this and she done that and what is she doing in this area? Yeah. No, I just did not feel comfortable there, you know.

Lilian feels excluded from her home community, which is small. Although she believes that people are talking about her and the crime she committed – her crime was high profile in the

local media- Lilian has few meaningful relationships with people in her life where she feels non-judgmental support. She goes on to say:

Yeah, supports are the big thing. I think... You know, I know personally for me. (Supports) would be somebody like I could just go to and sit down and they understand like, you know. They're not judging me for what I've been through, what I'm going through. And there is a lot more people like me. They really do need support to help get through daily life.

Lilian's words highlight the challenges in developing relationships and supports. Lilian wants someone to be able to confide in, who will understand and accept her without judgment.

Unfortunately, she does not have supportive relationships in her life outside of professional supports as she feels that professionals do not judge her. Judy (aged 60-65), too, felt that professionals provided non-judgmental support to women in prison. In talking to Judy about what supports helped when incarcerated, she states:

They didn't have any self-worth. And you guys (Stella's Circle staff) gave them that. And that it's worth something. No matter what you've done, no matter what your background you're a human being, you're loved. Because there's nothing worse. I can't think of any other feeling that's harder than feeling unloved.

Judy states that being treated like a human being and being loved is essential in moving toward a pro-social life. However, without professionals visiting the prison, women often do not experience these feelings of acceptance.

Nevertheless, women need relationships beyond those provided by professionals. They need to be able to connect with family and friends. The ability to connect can be challenging for some women due to conditions placed on them by the criminal justice system. For example, women's parole conditions often prohibit associating with others involved in the criminal justice system (Turnbull & Hannah-Moffat, 2009). While parole officers will usually approve contact

with other criminalized individuals while receiving services in professional settings, some women may still worry about how it looks to their parole officer. Service provider Ellen (aged 35-40, 12 years occupational tenure) suggests that some women may not use her services because they are afraid of what is reported to parole, including associating with other women accessing services. She states that some women fear that service-providing agencies are seen as “A good place to get your drugs. It’s a good place to get back into the scene. [Service providers] know you a lot, and they can report different things.” Prohibiting association with other criminalized women means that the connections made at service agencies (or in prison) cannot continue in the community, limiting social connections and furthering isolation (Pollack, 2009). Insisting that women only form relationships with pro-social individuals ignores the stigma associated with a criminal record impeding developing relationships (Turnbull & Hannah-Moffat, 2009).

Most women interviewed in the current study did not identify a robust social support network outside of professionals and agencies. However, many women were motivated to access services such as the Just Us Women’s Centre due to the availability of social activities. Women accessing social events at the Just Us Women centre know that the events will be safe and sober, enabling them to meet others with similar desistance goals. Lillian (aged 55-60) shares, “It’s nice to get out and come and visit on Monday’s peer group. You come here, and there’s nobody looking down on you, hmm you’re not... I’m not singled out as a person.” Lillian feels that the social group is a safe place because she is not stigmatized or “looked down on.” She sees the value of social connections.

Katie (aged 30-35) emphasized the importance of engaging socially. She states, “there is just so much out in the world. And I was in a basement for so many years.” She credited having

a group of friends to engage in activities such as hikes, a fire on the beach or going to a movie as a means to abstain from drug use and move forward in her life.

If women cannot or are reluctant to access basic needs such as housing, employment, or relationships due to stigma, desistance is increasingly difficult. Participants are very aware of the stigma associated with a criminal record, substance use, mental disorders, and gender. They had many experiences whereby stigma impacted their attempts to engage in community, work or obtain housing. Interviewees maintained they were committed to a crime-free life and not returning to prison. However, without adequate housing, opportunities for employment, and supportive relationships, the desistance journey is fraught with difficulties and, for some, may seem impossible.

The stigma associated with specific agencies

Stigma can also be associated with agencies that provide services to particular populations, such as those with criminal records or substance use. Ricciardelli & Moir (2013) found that stigma was attached to a particular unit in prison that protected sex offenders. However, non-sex offenders may be on the same unit, the stigma attached to the unit extended to any prisoner on the unit. Structural stigma²⁵ is connected to an institutional structure that reinforces the stigma of anyone associated with that particular stigmatized unit. Ricciardelli & Moir (2013) found that stigma attached to the institutional structure reinforced and intensified stigma. I found similar structural stigma associated with institutions and services that work with addicted or criminalized populations. For example, most women interviewed did not access

²⁵ I am using the term structural stigma here as used by Ricciardelli and Moir (2013), who identify specific stigma attached to particular structures, such as a prison unit or in the case of the current study, an institution-based health care system. I recognize that structural stigma has also been defined by Hannem and Bruckert (2012) as “the result of a carefully calculated decision at an institutional or bureaucratic level to manage a particular population...” (p. 24)

services at Eastern Health, an institution-based mental health and addictions service provider. Most women stated that the services at Eastern Health “weren’t for them.” Service providers stated that many women shared with them that they had experienced prejudice and discrimination from mental health professionals working within the formalized health care system. Vivian (aged 35-40, 10 years occupational tenure), a service provider, explained that many women she works with are reluctant to share their circumstances, such as being involved in sex work or crime, due to a fear of judgment. She shares that she has seen clients “dismissed for certain things, or labelled as drug-seeking or as resistant to treatment.”

Likewise, Ellen (aged 35-30, 12 years occupational tenure), a service provider, noted that criminalized women are treated differently in her experience because they are perceived as “against the stereotype of what a female should be.” When I asked Ellen about barriers that prevent criminalized women from accessing services, she stated:

I do think probably the number one barrier is that generally, women in prison are just not cute, and society doesn’t like them. They are not endearing. They’re not the stereotypical feminine little girl that fits the mould. They are generally rough and ready. They use harsh language. They’ve done things people don’t like. They have tried to be a survivor and are generally unlikeable in lots of ways. And then we know that if you have people like that, often, it’s hard to go above and beyond. They can be quite mean at times as a means of survival, and I think that that is often what prevents them from getting help.

Ellen states here many criminalized women are survivors, which affects how they interact with others (e.g., they may not be polite or “likable”). She posits that such interactions can alienate some service providers in more formal settings. Ellen suggests that service providers need to go “above and beyond” with their efforts to provide needed help for criminalized women. However, given the stigma associated with criminalized women and behaviour that may validate the stigma, Ellen implies that service providers are unwilling to put in the extra effort. For example,

the lack of effort can look like strictly adhering to policies that discharge clients after missed appointments, when there may be room for flexibility.

In addition to stigma and discrimination experienced by criminalized women in formal settings, Gloria (aged 40-45), a formerly incarcerated woman, identified problems with Eastern Health's documentation policies; "there's a lot of paperwork. They keep records of everything they do, right." As a woman who has been involved in the criminal justice system for a long time, Gloria is aware that notes from her involvement with mental health professionals can be subpoenaed to court. Moreover, documentation from mental health professionals often contributes to labelling individuals with mental disorders, strengthening attached stereotypes and associated stigma (Corrigan, 2007). These policies of documentation and labelling can challenge the desistance process. Envisioning a replacement self is difficult when interactions with professionals imply your history of criminal activity, which may be related to mental health and addiction, will be attached to your name and accessed by other treatment providers within Eastern Health. Grace (aged 45-50, 15 years occupation tenure), a service provider, provided an example of a client trying to access psychiatric services but was termed "pill seeking" because of a criminal past and was denied treatment.

These examples demonstrate how some service providers judge a criminal past. It seems that some service providers struggle to see that some criminalized individuals are on a desistance process trying to distance themselves from their criminal history and envision a future self. Some service providers stated that people with criminal histories refuse to "take responsibility" for their actions because they speak about their criminal history as "not really them." Some service providers see that "knifing off" the past is a means for criminalized women to refuse

responsibility for their past actions. For a woman trying to desist by separating herself from her past, it seems she cannot escape her documented history. Desistance is relational; a part of the process requires others to see the new replacement self (Nugent & Schinkel, 2016). Given these experiences with some institutions, the desistance process (i.e. the new placement self) is not seen, discouraging the desister.

Aside from the challenges with service providers noted above, some women are reluctant to access services from some agencies to avoid interacting with other people accessing services at the agency. For example, when asked why some women may not access services. Gloria (aged 40-45), a formerly incarcerated woman, stated:

Yeah. Yeah, and with you guys (a women serving agency), you know, some women might not want to come because they're intimidated by other women. For years I didn't like women at all. Like, well, (I felt) you're all fucking vindictive. You're all like stab you in the back. Yeah, two-faced.

Gloria takes a specific attitude toward women, whom she sees as untrustworthy. Her attitude toward women may be an example of internalized sexism that forms hostility towards other women (Bearman et al., 2009). Given that women are subject to stigmatization, some women turn to blame other women for their own marginalization, suggesting, as Gloria does, that women are “two-faced” and “back-stabbers.” Blaming other women allows one to view themselves as not a part of that marginalized group and thus feel that one is not subject to the same stigma and discrimination (Cowan, 2000). Thus, Gloria sees other women as the backstabbers, and she does not count herself among them. She is worthy of trust because she situates herself outside of the stigmatized group. Therefore, given that she views other women negatively, Gloria does not want to participate in a service where she will have to engage with other women.

Additionally, while she does not explicitly state that she does not trust *criminalized* women, Gloria references women who attend a program for her population. Thus, part of the reluctance to trust women may be the internalization of stigma about criminalized people prevalent in general society (Greer, 2000; Severance, 2005). Furthermore, researchers have found that incarcerated women report that their relationships in prison are fraught with betrayal, rumours, and conflict (Greer, 2000; Trammel, 2009). Thus, Gloria's assertion that women are "back-stabbers" may be based on a history of relationships with other criminalized women, creating problems when trying to access support in the future.

Accessing services for criminalized women might be a barrier for some trying to distance themselves from other criminalized women. Some service providers echoed the sentiment stating that they were reluctant to refer women to an agency for criminalized women. Faye (aged 45-50, 15 years occupational tenure), a service provider, explains:

So one of the things is that Stella's Circle is one of the main referral sources, but for some of the women, they don't want to come here because they don't want to see certain people that they have been inside with. They don't want to be faced with the temptation, so it might do a referral that's an Eastern Health referral that, from my own experience, I would know that there is not a high criminal element in that group. Yeah, so it doesn't sound very nice but just remove them from the (criminalized) people.

Faye's statement echoes others' words about internalized stigma. In her experience, clients want to distance themselves from stigmatized groups to disassociate themselves from a marginalized population—a movement that resonates with desistance theory and processes. Maruna and Roy (2007) suggest that "knifing off" the past may be a part of early desistance when it is essential to distance from people who may influence a return to old behaviours.

On the other hand, as discussed in Chapter Four, some women indicated challenges in accessing co-ed services due to bad experiences with men. Still, other women indicated that they did not want to be associated with people living a particular lifestyle, such as those involved with drugs/alcohol or crime. For instance, Maggie (aged 55-60), a formerly incarcerated woman, does not “want to be involved with people who are trouble. I stopped drinking and smoking.” Maggie associates drinking and smoking with “people who are trouble,” utilizing stereotypes surrounding substance abuse. Although Maggie has a history of substance use, she separates herself from the stereotypes of substance users. The separation may prohibit her access to services for her history of substance misuse as she does not want to be associated with other substance users. Maggie is engaged in desistance processes whereby she separates herself from her old life, her old self. However, limiting her access to services to avoid “those people” also limits her ability to get support in envisioning a replacement self and meeting future goals. Maggie did identify that isolation and loneliness were problems for her; thus, limiting her social networks can exacerbate issues such as isolation.

Internalizing stigma: feeling not deserving

After experiencing stigma and discrimination from communities, professionals, potential landlords, employers, and family, individuals often turn stigma inwards and start to believe that they deserve poor treatment from others (Moore et al., 2016). When asked why some women do not reach out for help, Joy (aged 60-65), a formerly incarcerated woman, and I had this conversation:

Joy: because they don't want to be downgraded? You don't want to make people feel like that. (Like) you're stupid, and that you don't deserve the help. That was me years ago. Okay, I'd say, oh, I don't deserve that.

Amy: Oh, okay. You felt like you didn't deserve help?

Joy: Even now, at times, like I literally has to tell myself. Yeah, you deserve what you got. So I dearly love having my own apartment.

Here Joy explains that criminalized women feel “downgraded” through interactions with others, particularly professionals who are supposed to provide help. The degrading interaction with others is the process of disintegrative shaming, as proposed by Braithwaite (1989). Criminalized women are treated as if they are bad people rather than good people who have done a bad deed. Disintegrative shaming treats criminalized people as inherently bad and does not promote rehabilitation of the bad behaviour but instead contributes to the cycle of criminal acts.

Feedback from others fuel the internalized stigma and shame. Most women expressed that their families or other people in their lives do not let them forget their criminal past or other stigmatizing factors (such as addiction or engaging in sex work). Judy (aged 60-65) shares, “My family still to this day, and I’m going to be (age redacted) in a few months, and they’re still doing it. Yeah, still going back to ‘you were an exotic dancer. You were an alcoholic’.”

Likewise, Joy (aged 60-65) relayed:

Joy: It’s scary. I’ll tell you about this morning. I was after getting out of the shower. So, of course, I’m wrapped up in towels, and there’s a knock on the front door. And I said who is it? And he said sheriff’s officer. And I said, well, you better hang on now. I got to go put on something. Yeah, and it wasn’t for me at all. They were looking for the woman in the front part of my building.

Amy: That was scary for you to have them come to your door? It brings stuff back?

Joy: Oh, my sister was out on the front doorstep behind, and she said, ‘what did she do now?’

Amy: It sounds like that’s a big part of it for you is that people kind of keep bringing it up to you a little bit.

Joy: Yeah. If I do anything wrong sometimes with my sisters. Yeah. Yeah. They bring it up, bring it up, bring it up, bring it up and rehash it.

Judy and Joy's stories reveal how family members continually bring up past criminal events, making it challenging to move past the stigma of their past actions. The reminders contribute to internalized stigma and feelings of shame. As Joy states, they "bring it up, bring it up," continually reminding women of their wrongdoing. What is more, the families of these women do not engage women in discussing what they are doing well or how they have changed. Consequently, women have trouble moving on to a replacement self and suffer the shame of reminders of the past. The process of desistance involves envisioning a replacement self, a self that is engaging in pro-social activities. The process of envisioning the replacement self will undoubtedly be challenged if the family continually reminds the individual of their old self in a stigmatizing fashion, such as the examples provided by Joy and Judy. An alternative would be families and others reminding desisters of their past in a positive manner (e.g., 'look how far you have come').

Desisters could feel supported and see that others believe in them. I asked Laura (aged 40-45) what she had needed to make the changes she did in her life. She needed support, "someone to say, yes, you can do that. It's nice to have people who give you that confidence that you don't really have in yourself all the time." As Laura states, she does not always have the confidence to continue to make positive changes in her life. She relies on others for support and to remind her of how far she has come. Using a positive support model to help desisters see how far they have come means that reminders of the past can help cement that the old way of life is no longer desirable. Supportive people can help desisters reflect on their criminal past to promote desistance, suggesting to the desister that you are not that past person anymore.

The process of desistance is relational; it involves the acceptance and recognition of desistance by other people (Nugent & Schinkel, 2016). Unfortunately, for many women interviewed, people in their lives do not recognize changes made or assume that the changes are a momentary blip and the person will return to their old, deviant self.

On the other hand, does shame and reminders of a troubled past prompt people not to commit the same mistakes/acts? As Katie (aged 30-35) shares here: “Shame’s a big part of it. You don’t want to face the reality of it. Yeah, or re-live it, but you got to re-live it and get through in order to get past it.” Katie believes that the process of desistance, referred to as getting “past it,” involves living with and dealing with the shame that comes with criminal acts. Braithwaite (1989) suggests there are two types of shaming: reintegrative and stigmatizing. In reintegrative shaming, a person is shamed for the acts committed and maintains a sense of worth. In stigmatizing shaming, both the person and the act are deemed shameful. Reintegrative shaming is more helpful than stigmatizing shaming in the desistance process. Katie and other women in the current study are subject to stigmatizing shaming from family, friends and the community at large. However, in the midst of stigmatizing shaming, there are some messages of reintegrative shaming. These reintegrative messages are from professionals who suggest that Katie needs to deal with her past to move on with her life.

Katie’s quote suggests that she believes a part of her is worthy of moving on from her past. In other words, Katie does not wholly tie her identity to her past actions. Instead, she strives to become a new person once she can “get past it.” Katie’s desire to confront her past is an example of what Maruna (2001) terms tragic optimism, the idea that something good, a new life, can come out of a troubled past. What is more, is that Katie is able to see that she has control

over her destiny, a component of desistance (Maruna, 2001). Katie actively engaged in therapy as a part of her mission to work through her history and “get past it.” She was also actively engaged in social activities with supportive friends who knew about her past and supported her by engaging in pro-social activities. Katie was making plans to return to school and find employment. In addition to adding these new things to her life, Katie had a positive attitude and stated that she was happy. She reflected on her past and took needed strengths, such as resiliency, that would support her in her new life. Engaged in the process of creating a new life, Katie was aware that stigma could impact opportunities. However, she displayed optimism that through her own hard work, the support of professionals and her positive friend network, she would move past her criminal history towards a pro-social life.

Discussion

Multiple stigmas affect an individual’s ability to desist. Practical elements of desisting, such as obtaining safe housing, meaningful employment, and supportive relationships, are impacted by stigma. Criminal records impede the ability to find housing or employment because landlords or employers discriminate. In addition to the stigma associated with a criminal record, women have experienced stigma due to mental disorders, drug use, race, and gender. Again, these experiences impact their ability to desist from criminal behaviour. For example, participants said they stopped looking for employment because they knew the potential for discrimination. Many women stated that the potential for discrimination and stigmatization kept them from asking for help from service providers because they felt undeserving. Others did not want to engage with particular agencies due to the stigma associated with the population served by that agency.

Therefore, women stated that the experiences of discrimination prevented them from utilizing professional services, such as therapy and employment counselling, that may enable the desistance process. Women needed help to make changes in their lives, but that stigma and shame made reaching out for help challenging. Services can help with desistance. The desistance process relies on an identity shift from a criminal identity towards a pro-social identity. Counsellors can aid clients in making the shift (Morash et al., 2019). However, feeling undeserving means that women did not always acquire or seek the help they needed. Furthermore, women's experiences of stigma and discrimination result in isolation, impeding relational elements of desistance, such as finding new social groups. As a result, women find themselves in liminal spaces between distancing themselves from their old lifestyle, including friends, and unable to create a new lifestyle, including new friendships (Nugent & Shinkel, 2016).

A crucial part of the desistance process is for others to see the change to self. Discrimination that formerly incarcerated women experience invalidates the changes made because they know that they are stigmatized as that old, criminal version of themselves. Maruna (2001) emphasizes the importance of having "someone (who) believes in you and makes you realize your value" (p. 96). Many women have someone who believes in them: service providers, counsellors, and prison staff. However, others in their lives, such as family, counteract these messages. Family and friends may be wary of changes and wait for the old behaviour to return. The challenge is helping people, both those directly engaged in the process, their family and friends, to understand that the process of desistance is not linear. Frequently people will re-offend or return to old behaviours before fully making the identity shift to a pro-social lifestyle. The cyclical desistance/persistence process may be exacerbated if the individual feels like no one

supports the changes. Thus, it becomes essential to help family, friends, and the public understand how they can support desistance by supporting change.

On the other hand, in her study of desisting women, Gålnander (2020) found that when others relayed positive messages to women about their pasts, some women perceived these comments as insults or backhanded compliments. She found that when others recognized women in her study as improving their lives, they continued to feel like ‘deviant outsiders’ as if their past would tarnish them forever (Gålnander, 2020, p.1316). She stated that being recognized as having made changes for women in her study, being “better than before,” confirmed that actions in their past were wrong or bad. I did not find similar experiences for women in my study. They stated that they needed validation from others to acknowledge growth, change, and support to keep going. Women in my study recognized the possibility of sliding back into old behaviours and felt that positive encouragement, including recognition that they are better than they were before, would aid in the desistance process and lessen the impacts of stigma from others who do not see the changes. The contrast between the current study and Gålnander’s (2020) study may be due to where women are within the desistance process. For women at the beginning stages of desistance, hearing positive reinforcement regarding changes can be validating. However, for women who have desisted for years, rehashing the past, even intended as positive, might be an unpleasant reminder of their old self. That being said, women in my study were at varying stages of desistance, with one woman having desisted successfully for 15 years.

Braithwaite (2000) suggests that shame can be helpful in desistance. He proposes that reintegrative shaming is a tool that can be used to promote rehabilitation and desistance. Reintegrative shaming is respectful communication that tells the wrongdoer that they have done

an immoral act but remain a good person. However, women in the current study suggested that shame is a barrier to asking for help as they felt undeserving. Furthermore, their treatment by some was dehumanizing. They have experienced some service providers (including prison staff) who treated them with dignity and “like a human.” However, that women feel it is noteworthy that people treat them with dignity is sad and disturbing. The noteworthiness is indicative that women in the current study usually do not expect to be treated humanely. Thus, most women have experienced shaming as a tool that continues to punish them long after they complete their formal sentence.

Walking the path to desistance is a tightrope, trying to distance from the past while accepting responsibility for the past actions and knowing that others do not understand the journey. There is a threat of stigmatization in accessing some supports. There is a dilemma in knowing that some support networks may not help because of encountering others who may be triggers to revert to the old behaviour. Women need peers but are also likely to discriminate against others who are on the same journey towards desistance. Desistance is complicated, contradictory, and confusing.

Conclusion

Formerly incarcerated women’s experiences of stigma and discrimination can make the process of desistance seem futile. The process of desistance requires a cognitive shift, thinking about old criminal activity in a way that no longer feels useful, viable or a part of one’s life. Furthermore, the process of desistance requires thinking about a new life, not only a move away from a criminal lifestyle but a move towards a new, pro-social life that is better. Like other formerly incarcerated individuals (Sheppard & Ricciardelli, 2020), women in the current study

have modest goals for living a “good life.” Women want to engage with their families, including children. They want to have friends and be active in their communities. Many women would like to work or further their education. Women want to live in safe, affordable housing that they can call home. These are achievable goals that anyone would share. However, many women in the current study feel that these goals are impeded due to stigma and discrimination. Women feel “marked” by stigma, and therefore, some feel undeserving of the simple goals identified. Others feel that the mark is so visible that others will always judge them, making employment and other forms of community engagement impossible.

Desistance is an individual’s journey through a cognitive process requiring meaningful self-reflection. The desistance journey does not occur in isolation but rather in a context whereby judgment, stigma, and discrimination impact self-perception. Desistance, therefore, needs to be seen as a community’s journey alongside the desister, providing needed support and feedback.

Chapter Six: Desistance and Recovery from Addiction

“I was in a basement for so many years. Never seen the sunlight..” Katie, a formerly incarcerated woman, aged 30-35.

Introduction

Within Canada, criminal activity and drug/alcohol use are connected in ways that include criminalizing some drugs, such as those considered “hard drugs” like cocaine and heroin. The criminalization of some drugs can lead to criminal charges such as possession of or trafficking of illegal substances. However, even those substances considered legal, like alcohol, can contribute to illegal behaviour (i.e., driving while impaired). In addition, substance use is indirectly related to crime. Some people engage in criminal activity to obtain drugs or while under the influence of substances. Young et al. (2021) showed that more than 42% of Canadian crimes resulting in a custodial sentence between 2006 and 2016 would probably not have occurred if the perpetrator had not been under the influence of or seeking alcohol or other drugs. Of particular interest for the current study, incarcerated women have high rates of substance use in Canada. Correctional Services Canada staff assessed federally sentenced women and found that for 47% of women in the study, their crimes were related to their substance use (Farrall MacDonald, 2014). Furthermore, women in prison are up to 10 times more likely to have a drug addiction than women in the general population (Fazel et al., 2006; Henderson, 1998). In their study of provincially sentenced women, Buchanan et al. (2011) found that 82% of participants self-identified as substance users,

Some people working within the criminal justice system recognize that problems associated with substance use should be diverted from the criminal justice system and towards social service agencies. The Canadian Association of Chiefs of Police has proposed

decriminalizing the possession of illicit substances. They state that diversions to health care are a more appropriate means to approach substance abuse (Canadian Association of Chiefs of Police, 2020). Furthermore, the Government of Canada has established funding for drug courts throughout the country. These courts are designed to bring together treatment services and the criminal justice system to more effectively meet the needs of people who engage in criminalized activities and have a substance use problem (Department of Justice, 2021). Crime and substance use/misuse are connected, and there is a small body of literature that focuses on drug use and desistance (See Bachman et al., 2016; Best, 2019; Best et al., 2017; Colman & Vander Laenen, 2012; Marsh, 2011; Schroeder et al., 2007; Van Roeyen et al., 2017; Wooditch et al., 2014). However, there is no literature focusing specifically on women's experiences of desistance and recovery from addiction. Furthermore, while some existing literature included women as participants, there is a lack of a gendered analysis of how desistance and recovery connect.

Women I interviewed see recovery from addiction and desistance from crime as the same process. While drug use is not a crime, participants believe their addiction and criminal activity are linked such that once the addiction stops, crime will also cease. Furthermore, some women in the current study stated that addiction led them to prison. For instance, Jane (aged 30-35), a formerly incarcerated woman, shares, "I started getting in trouble after (a loss in my family). I got into drugs, selling drugs, doing drugs and keep my habit going, and then I went in (Newfoundland and Labrador Correctional Centre for Women) (date redacted) of last year." As illustrated here, women see addiction, not criminal activity, as the cause of problems in their lives. The majority of women in the current study, 13 out of 16, connect their criminal behaviour to substance use. Either they committed a crime in pursuit of obtaining the substances (i.e. shoplifting to pay for drugs), or they committed a crime while under the influence of substances

(i.e. assaults committed while intoxicated). During interviews, I asked women what changes they wanted to make when leaving prison to help ensure they do not return to prison. All women with addiction issues stated that they wanted to stop alcohol/drug use as they believed that was the cause of their entry into criminal activity and prison. From these conversations, I propose that women see recovery from addiction and desistance from crime as two parts of the same process. Desistance and recovery from substance use are processes whereby people are engaged in the cessation of problematic behaviour.

Throughout the current chapter, I use the term addiction because it is the word participants use to describe their problematic substance use. For women, the word addiction implies a loss of control over their substance use and, further, a loss of control over their lives, ultimately leading to a prison sentence. Therefore, for participants, substance use is not merely substance use or misuse. For them, drug and alcohol use is an addiction that controls their life (See also Marsh, 2011). More accurately, the addiction becomes their life in that women spend all their time either trying to obtain or use drugs/alcohol. Jane (aged 30-35) shared, “something clicked in my head that I’m done with that life.” She means that she no longer wants to continue the cycle of drug use and criminal activity that had consumed her for five years. Jane and other women in this study inextricably link recovery from addiction and desistance from crime, meaning that no longer using alcohol or drugs means no more criminal activity.

In the current chapter, I share formerly incarcerated women’s experiences with addiction and how they see their addiction as connected to desistance processes. In addition to women’s voices, I will also impart experiences of service providers working with criminalized women and how they see addiction affecting women’s lives. I explore four themes connected to recovery

from addiction and how recovery interacts with desistance processes. First, many women see their prison sentence as the beginning of the recovery process, viewing prison as a proxy rehab/detox. Given that prison can be the first step in recovery from addiction for some women, I explore the barriers to recovery and treatment options when leaving the prison system. I then present women's agentic view of change: they state, "you have to want it." Women uttered this phrase repeatedly during interviews when asked about the process of change, placing the individual at the centre of any change. Said differently, even if there was easily accessible treatment on every corner, to make change happen, *you* have to want it. Finally, I examine women's views of their future. I connect each of these themes with the desistance process woven throughout women's narratives of recovery.

Prison as detox/rehab

Nine participants stated that going to prison helped with their recovery. For these women, the prison was a forced detox that allowed them to abstain from substances when they felt unable to abstain on their own or as would be experienced in a more traditional detox program where clients have the option of leaving. Monica (aged 30-35) shared, "I was out, and I wanted to go back there (to prison). It was my choice to go back there and want to do all the time (meaning, complete her sentence in prison). It is kind of sad when it reaches that point, though." Monica had been at the Newfoundland Labrador Correctional Centre for Women on remand before her release to the community on house arrest. She wanted to return to prison, feeling that prison was the only way she could "dry out" from substances. Monica elaborates that her reality is "sad, though," implying that she could not abstain from substances on her own. She felt deeply that her addiction was extreme and out of her control. Prison, for Monica, helped control her use of drugs given their limited access at the Newfoundland and Labrador Correctional Centre for Women.

Monica's choice to complete her sentence in prison rather than on house arrest is her first step towards desistance and recovery; she began the process of openness to change (Giordano et al., 2002). While in prison, Monica asserts she chose to abstain from drugs and deal with her addiction issue; she was open to change and ready to work towards recovery from addiction and desistance.

It is not uncommon for illicit drugs to find their way into a prison (Mullaly, 2011, 2017) or for prisoners to misuse prescribed medication (Tamburello et al., 2017). At the Newfoundland and Labrador Correctional Centre for Women, occasionally, drugs enter but not in amounts large enough to sustain a long-term drug habit. Prisoners, on occasion, do attempt to misuse prescribed medication. They either "hoard" medication prescribed, trade it to other women or save enough for a high. On the one hand, Monica describes prison as a place that forces her to give up her substance use, providing structure and motivation when she lacks control. However, Monica has more agency and control over drug use than she credits herself; she chooses to stay away from the illicit trade. Prison provides the structure she cannot receive elsewhere but needs for her addiction, despite making positive choices towards recovery and desistance.

Monica shared that prison as a method of detox was helpful. Further, more than merely providing a space to avoid substances, most women stated that their prison time helped them "get clean"²⁶ and, thus, "clear their head." For example, Gloria (aged 40-45) stated, "to be cleared of everything (alcohol and drugs) and be sitting there for those two and a half months. It made me

²⁶ I recognize the problematic nature of the term "clean" when referring to abstaining from substance use. The Editorial Team for *Substance Use* suggest refraining from using slang and idioms such as "clean/dirty" when talking about substance use. However, they also encourage more research and consultation with individuals affected by drug and alcohol use (Broyles, et al., 2014). Given that "clean" is the term used by women interviewed I honour their voices and use their words.

realize; you do need help. Okay. You got a problem.” Gloria was on remand for two and a half months before her release to a sentence of house arrest. Prison let Gloria abstain from drugs and alcohol use, allowing her to think about her life and what may require change. She recognized that alcohol and drugs were a problem and that she needed help to address her addiction. She was able to make a plan to maintain sobriety after leaving prison and develop further life goals, including her return to school. According to Gloria, the impact of a “clear head” helped her think correctly, thus shaping her cognitive processes in her desistance journey.

For Monica and Gloria, prison served as a proxy detox/rehabilitation centre, representing the essential physical component of detoxing. After detoxing, women see themselves as no longer physically impacted by the drugs. In recognizing that drugs and alcohol “clear” their system, women feel they can think without the impact of drugs on their cognitive function. Clear thinking means they can make plans for change for the first time in a long time, including recovery from addiction and the criminal lifestyle that accompanied their drug/alcohol use. The idea of a “clear head” is critical to cognitive-based theories of desistance. Without the ability to clearly conceptualize a new identity and lifestyle—to formulate a position for the future—the desistance process will not work.

While prison may help some women, like Monica and Gloria, detox from substances, it is not an easy process. Robyn (aged 20-25) shared that she used prison as an opportunity to abstain from substance use and make plans for her future. However, she stated that it was difficult to stay in a recovery mindset when other women in prison did not have the same goals. Robyn lamented that some women attended groups because they were bored or to get the incentives offered for attendance at groups:

You hear them (other incarcerated women) in the meetings or in groups or therapy or whatever. The thing was, as soon as the workers are out, you guys (service providers) are gone or whatever, and it goes back to normal they're just shit-talking it, or you know. What I mean is they don't take any of this seriously.

For Robyn, hearing that other women did not take recovery and the work involved in therapeutic groups seriously was discouraging and made her question her own recovery goals. Monica also shared that it was challenging to hear other incarcerated women talk about their plans to use drugs when released. Recovery from addiction is not a solitary process and often involves reaching out to others in the recovery community for support and encouragement. Thus, for women in prison who felt that others around them were not engaged in similarly recovery-oriented goals, the process of recovery was difficult and isolating.

In addition to problems with other incarcerated women, Robyn felt that the lack of supports in release planning impeded her own plans for release. Robyn stated she was committed to sobriety while in prison and planned to stay sober when released. However, she criticized the lack of help actualizing plans at release. She spent much time making plans, writing goals and adhering to what she learned in therapeutic groups. However, her preparation was for naught when she was released without safe, sober living arrangements. Robyn was released from prison to live with a former boyfriend, who was supportive, but with whom she used drugs and alcohol. Living with her former boyfriend, who used substances, caused her to return to alcohol and drug use, which led to criminal behaviour, although she did not return to prison. Robyn is currently in recovery and is proud to state that she is no longer under any court order, having desisted successfully for four years. However, she believes her recovery process would have been smoother and without relapse had she been able to leave prison for safe, sober housing.

Vivian (aged 35-40, 10 years occupational tenure), a service provider, echoes Robyn's thoughts about the lack of planning. Vivian worked with people who have had challenging housing histories. She has worked with many people released from prison into homelessness. In her experience, most released women are committed to working on their recovery and want to desist from crime. Vivian stated that most of her clients saw prison as a place to detox, to get "clean," and a place to think about new goals. She believes prison could be a good time to work with clients to teach coping skills and help them to develop goals if they are in a "good headspace." However, if inadequate supports are in place for when the person is released from prison, work inside prison is fruitless. I had a detailed conversation with Vivian about supports in and out of prison:

Vivian: It's an absolutely good opportunity to teach people skills and talk about other ways that their life could look. But unless you have services that are going to be available as soon as people are released to help them practice those skills in the real world because you can't practice them in jail. You can practice a little bit but you're not going to have...

Amy: It's not the real world. It's a safe place to practice it...

Vivian: It is, but unless you have the support, can you practice and stuff once you're out? To me, it's the same as any kind of treatment without follow-up care. Yeah, and you got to learn how to use the stuff in your real environment, especially if you're going back to the stuff you left. Yeah, and if you've got added stressors. Like, you know, there's a lot of stress. I mean, obviously, being incarcerated is stressful in many ways. But there's also a lot of things that you don't have to worry about when you're incarcerated. You don't have to worry about food, or you know, your medication or ...

Amy: Even just basic safety for a lot of women like (Vivian: 100%) you know as much as I know, prison can be a dangerous place. But it's often more dangerous at home, especially for women.

Vivian: I think that's it. I think the services that follow people's incarceration need to line up with what people actually did while they were incarcerated. Like any programming that people learn, needs to flow into community, right? So you can't have people teaching something or have programming on the inside and discharge planning that doesn't match up with what's actually going to happen when they get out. I think it needs to be very intensive initially and

outreach-based with a focus on like finding safe and affordable housing for people as quickly as possible and continuing on with like practicing and using skills once they get out.

My conversation with Vivian highlights problems within the rehabilitative model of prison. Both formerly incarcerated women and service providers interviewed acknowledged that there is help within the Newfoundland and Labrador Correctional Centre for Women. As I explored in Chapter Four, women stated that the services are meaningful and of good quality. They stated that prison can help clear their mind and teach them new skills to help them on the path to recovery. However, as Vivian points out here, when the prison programming, discharge planning, and community living do not align, the recovery and desistance process derails. Vivian's ideas are consistent with Ricciardelli et al. (2019), who found that releasees who participated in programming while in prison felt that programs did not transfer in the community on release. For some prisoners, including those in the current study, prison can be a time to learn new skills, gain insight into the self and begin a process of change toward a pro-social life. However, without supports in place to help those who want to change work through some barriers, the time spent working on themselves feels fruitless,

Not all interviewed women with addiction issues stated that prison was helpful in their recovery. Judy (aged 60-65) was sentenced to a prison term on old charges, meaning that she had committed the crime years ago, and the court system was not immediate in her sentencing. Being sentenced for an older or historical charge means that for Judy, her life was severely disrupted. She stated, "I can say I went there sober, straight, working, had my apartment all lovely." While Judy was able to keep her apartment to return to on release from prison, she does not feel prison provided any rehabilitative help to support her already pro-social life. Judy stated that she was "a recovering alcoholic" when she went to prison, and she did not receive any treatment or support

in her recovery. She described being treated inhumanely, comparing the prison to a concentration camp, and as a result, her mental health deteriorated while in prison. I asked Judy if she felt worse off for being in prison. She stated, “no, not worse, but like Joan of Arc, saying, something in there has got to change.” Judy was able to channel her anger at being in prison towards something productive. She was able to advocate for increased treatment for women in prison. Judy was in prison nearly 15 years ago when there was no formal therapeutic programming in place. Interviewees, who had a more positive experience, were able to avail of therapeutic programming related to addiction, in part, due to Judy’s advocacy.

Thus, for Judy, prison paused the desistance process already underway. Before prison, Judy lived as her “replacement self,” she was working, had an apartment, and lived a pro-social lifestyle. Judy’s experience of imprisonment affected her mental health, making her feel worse about herself. However, Judy stated that she came out of prison “a fighter,” meaning that her prison experience did not cause her to fall back into old behaviours. Judy’s desire to help other women in prison fits with Maruna’s (2001) understanding of desisters who desire to be productive and give back to society. Judy was released from prison into her desistance focused life, with a new meaning and purpose; to help other women in prison.

Barriers to Recovery and Desistance

All participants experiencing addiction sought treatment for addiction in various forms. Three women used self-help groups such as Alcoholics Anonymous or Narcotics Anonymous. One woman sought treatment through the health care system within Newfoundland and Labrador, which offers both inpatient and outpatient treatment. Ten women stated that they preferred services offered by non-profits, such as those with Stella’s Circle. Two Indigenous

women stated that they benefited from traditional healing-based cultural practices. Finally, one woman stated that she was able to abstain from drug use on her own by keeping active in school and her social life, including social-based programs offered at non-profits. She did not seek any formal addiction therapeutic treatment. While women were engaged in various activities and treatments to varying degrees, they did highlight several barriers to recovery from addiction. Service providers also shared barriers they have encountered when advocating for treatment services for clients. Barriers include a lack of safe housing and waitlists for treatment. I examine each below.

Safe and Sober Housing

As discussed at length in Chapter Four, there is a lack of affordable, safe housing for women when they leave prison. Housing issues also arose when women spoke about their struggles with addiction. For many women, they spoke about being released and “going back to the same place.” For example, Robyn (aged 20-25) returned to live with an ex-partner with whom she used drugs. She stated that she tried to abstain from drug and alcohol use, but it was difficult while living with someone who continued to use. Another example, Beth (aged 20-25), an Indigenous woman, shared that she wanted to return to her home community but that it is hard to be in a community where there is a lot of alcohol and drug use. She states:

I just feel, like, because back home is just a lot of alcohol and too much. I’ve heard since I been in jail like there used to be a lot of people smoking weed. But now they don’t do that. There’s people selling coke there, and I don’t want to be going, to be a part of that. I don’t want to be around it. And I know that’s hard. Yeah, and drinking for me that was the biggest addiction. Yeah, I don’t like to be around it.

For Beth, returning home is important; her family, community, and culture are at home.

However, she also knows she is returning to a place where drug and alcohol use is common. In

fact, Beth heard that cocaine, arguably a more dangerous drug, has replaced marijuana. Hearing about the introduction of cocaine in her community worries Beth because she does not want to be involved with “harder drugs.” Furthermore, there is limited housing in her home community, meaning that Beth will have to live with family members who use alcohol and drugs. She does not have the opportunity to have her own place, providing a safe haven in her community.

On the other hand, “going back to the same place” can also mean generally going back into an unsafe community and living environment. For example, while Gloria (aged 40-45) and Monica (aged 30-35) did not return to the same communities or homes, they worried about returning to the same lifestyles. Gloria left prison and went to a friend’s home, where she quickly left as there was drug paraphernalia visible in the apartment. Monica left prison and went to a different community to get away from drug-using friends. She says:

If I went back to (location redacted), the same things would happen—same crowd. I needed to go to a different location, and you’re used to your groups; you’re used to your support (that I had in prison). So I was might as well make a fresh start, right?

However, she was homeless on release and had to go to a shelter. For Monica, this was a scary time because she was in an unfamiliar community. Nevertheless, Monica believed that she needed a “fresh start” in a place where she knew no one to continue with the recovery process she started while in prison.

Beth, Monica, Gloria and Robyn are all engaged in the cognitive process of desistance. They are trying to distance themselves from their old life, as exemplified by Beth stating, “I don’t want to be around it,” and Monica refusing to return to her hometown. Monica is beginning to envision her replacement self as she undergoes “a fresh start.” She sees all that can be different for her, even in prison, where she engaged in therapeutic groups and support. She

knows she can be supported on release. Monica, Robyn and Gloria were also trying to distance themselves from their pasts by finding new places to live, but all struggled to find safe, sober housing.

For all of these women, safe, sober housing is crucial to recovery when released from prison. Without a safe, sober home, seeking treatment seems futile, impeding the recovery and desistance processes. Women are returning to unsafe housing, and communities can encourage the resumption of a lifestyle that links criminal activity and addiction.

Waitlists

Another barrier to continuing recovery on release from prison is the waitlists for treatment centres. Several service providers identified that waitlists for treatment are problematic, as people need to access treatment when they are ready and willing to go. Delays in treatment may mean that people slide back into drug/alcohol use, and for interviewees, also returning to a criminal lifestyle. Willingness to go to treatment is openness to change, the first step in the desistance process described by Giordano et al. (2002). Therefore, assisting women to attend treatment would be beneficial on the journey to desistance. Jackie (aged 45-50, 20 years of occupational tenure), a service provider, shares what she believes would help women on release from prison:

The ability to not be on this long waitlist for treatment. So that when you're when you think you're clean, when you've been not using because you've been incarcerated for six months, and you get out, and you want to continue that, and so treatment is where I'm going but there's a long waitlist. So trying to then you get back (to your home community), and you may end up using again, which can further delay getting into treatment.

Jackie sees that women in prison are serious about recovery from addiction and want to access treatment centres when released. However, waitlists often mean that there is no seamless

transition from prison to an inpatient treatment facility. Jackie sees this transition as a critical component to support women's recovery efforts because they often return to places where drug and alcohol use is common. Moser et al. (2015) suggest that the continuity of care model, as suggested by Jackie, is an effective method to support any treatment efforts made while in prison. Ruby, (aged 50-55, 21 years of occupational tenure), a service provider, shared evidence of this model working within her program. She works within a treatment setting whereby released prisoners are mandated to participate as a condition of their release. I asked her about some of the challenges in working with criminalized women, to which she replied:

I don't see it as any different than anybody else, aside from the obvious that they have conditions that apply while they're here because of their correctional sentencing. So sometimes (we are) a little bit more strict. I don't see that as a deterrent, though, because it can help people stay on track, especially if they have addictions because sometimes we know that external influence can help people get to a place where they start to internalize their reasons for wanting change. So, yeah, I don't see that as a deterrent. I think that's actually helpful for some women,

Ruby's words reveal that in her experience, an external influence, such as parole, can encourage people to think about their reasoning for making a change. Her view is consistent with former prisoners who described the prison as a detox space, an opportunity to think and make changes. However, Ruby extends women's assertion that prison is a proxy detox/rehab centre to include community-based treatment programs. She suggests that women can continue the recovery process and desistance in the community under supervision, which can be helpful. Ruby's work exemplifies how continuity of care can extend from the prison into the community.

Agentic View of Change

When talking about changing their addictive and criminal behaviour, women consistently stated, "you have to want it." 'Wanting it' fits with cognitive theories of desistance, which view

desistance as a cognitive and deliberate thought process rather than something that just happens. Interviewees see themselves as the agents of change in their lives. Laura (aged 40-45), a formerly incarcerated woman, states, “It is in yourself to make a change. No one is coming knocking on your door asking if you want help. You have to take that first step.” Laura sees that there is help available but that the individual must be the agent of change. Likewise, Jane (aged 30-35) states, “you guys are there and are good. But we have to do the work.” Both of these women see value in reaching out to professional supports and help, but ultimately, it is their responsibility to make changes needed in their lives. Thus their addiction is individualized into a personal problem rather than a community or societal issue. Women’s views of themselves as agents of change in their lives fit with Maruna’s (2001) theory of desistance, whereby desisters maintain an optimistic view of control over one’s destiny. Most women stated they have been able to take charge of their lives with a plan, including long-term goals, such as employment and children, and everyday schedules that included fun and social activities. Katie (aged 30-35) shared:

It’s just.... there’s so much more out in the world, and my God, yeah. I was in a basement for so many years. Never seen the sunlight. Until like this year. So I had an amazing summer. The best one in so long. I had a group of people like. We did everything. Just go and have bonfires; just go....We used to go on hikes up somewhere off the highway. It would kill us. (laughter) You couldn’t breathe. Yeah, we did everything, went bowling, went swimming. Movie nights. Out with the kids in (redacted) swimming. Just every day, we’re doing something.

For Katie, she is taking charge of life by participating in daily, fun activities that she missed out on in the past due to her lifestyle. Likewise, Monica (aged 30-35) has a daily routine that helps her “manage.” She explains:

Well, I mean you are going to school, and you're out and then, you're gone for a walk. You're keeping yourself active, and by the time you go home and you clean up. You tired, right? It's time for bed.

These women take charge of their lives and live the “normal,” quotidian life that many women identified as their goal. Their lifestyle is new and thus, the feeling of taking charge to live “normally” feels empowering.

Young (1994) has defined empowerment as “the development of individual autonomy, self-control, and confidence and/or the development of a sense of collective influence over social conditions in one's life” (p. 49). For women in this study, empowerment is the first part of the definition, the start for developing self-control and self-confidence in their ability to take charge in their lives. They are missing the second half, a sense of collective influence over the social conditions of life. Often women do not recognize that social contexts can limit their ability to make choices, no matter how much they want it. Certainly, women recognized that they were poor and that employment with a criminal record and being a woman would be challenging. However, they internalized the idea of self-responsibility in terms of their addiction/criminal lifestyle. The internalization of self-responsibility can be problematic as women often do not see that the system has failed them but rather see themselves as the failure. That can be challenging to the recovery and desistance process that relies on feelings of optimism and mastery over one's destiny (Maruna, 2001).

Service providers here can step in to support women in their journey towards desistance and recovery. Service providers certainly see systemic barriers, such as poverty, that impede women's successful desistance. Pearl (aged 20-25, two years of occupation tenure), a service provider with, envisions a more welcoming and supportive community for women with additions. She shares what she would like to see:

I guess it would be great to see more options for people who are struggling with addictions or substance use. So more housing for those people. More programs for those people. More recovery centers for those people that are really low barrier. Really supportive. Less criminal charges for those people. Like I know, it's complicated. More fucking, even like parks. We need better schools. We need more resources for things like education and Creative Expressions and art and those kinds of things. Those are all kind of like, in my opinion, things that help enrich people's lives and build a stronger sense of community so that people are less inclined to or when they do get engaged with things like substances or violent relationships or whatever. It may be they are less isolated, or they're less inclined to just kind of keep it in and like continue to re-enter that cycle. Yeah, the more likely they are to kind of engage in a community and engage with each other and build friendships. And like I said, that opening up. Kind of less like I'm a fucking victim, and I am like wounded, and I can't break this and more like I'm open to like whatever comes next.

Pearl has several ideas to support women with addiction issues, which address a sense of belonging to a community. Importantly for Pearl, too, is for women to feel empowered and “open to whatever comes next.” Service providers' roles are in advocating for women and helping women to see that if they do “fail” at recovery or desistance, it is likely a systemic failure and not necessarily the woman's.

Envisioning the future

The journey towards desistance means envisioning a replacement self after exposure to a ‘hook.’ A ‘hook’ may be a job, school, a relationship or anything else that creates a positive development in the life of the desister (Giordano et al., 2002). For interviewees, the hook was what they considered to be a “normal life.” Sophie (aged 45-50) stated, “I want to stay healthy, stay strong. I want to see my grandkids graduate with their high school.” Laura (aged 40-45) says, “I wanted things better. Yeah, I want a better life, a regular life. Not a drug-using life.” Gloria (aged 40-45) shared, “my current goals are just to be the best mom... getting a better education, getting back into the workforce.” Katie (aged 30-35) stated her goals were to get her driver's licence and that she “plans on getting my trade. My apartment is my first thing.” These

are achievable, modest goals for a “normal life,” working, family, an apartment – the ‘hooks’ for desistance that can lead women to seek addiction treatment and move toward desistance.

These goals for a “normal life” are reasonable and achievable. However, many women also shared the challenges in obtaining such a life once they are “clean.” Because addiction and criminal lifestyle are so enmeshed, women expect that once they stop using substances, life will be manageable and “normal.” However, as noted in other chapters, some normalcy, such as obtaining a job, is not easy. Furthermore, women also noted that abstaining from substances exacerbated symptoms of mental disorders because they have been self-medicating. Women noted increased anxiety, depression, and symptoms related to potentially psychological traumatic event exposure. Most women in prison have experienced exposure to trauma, and often drug/alcohol use how they cope (Covington, 2011; Matheson et al., 2015). For example, Katie (aged 30-35) shared, “I have dealt with some trauma as a child, which led to my drug use, I guess. I have been kind of numbing my pain since I have been 15.” Thus, abstaining from drugs and alcohol means that women have to feel what they have been numbing (Loucks, 2004; Richie, 2001). This “hook” of quotidian, “normal” life does not always live up to its promise for some women. Women are still likely to live in poverty even after recovery. Women are likely to experience stigmatization due to their past, including struggles with family relationships and difficulties with employment. While the hook may be disappointing, most women can still make it to the final stage, seeing their old selves as no longer viable. Interviewees explained they were “not that old person.” As Jane (aged 30-35) states:

That it’s not the life for me, I was never that person. Like people in there (Newfoundland and Labrador Correctional Centre for Women), when I went there, people knew that I was going in there. They’re intimidated and things like that, and I’m not an intimidating person. I didn’t want to be the

person that I was. Yeah, I was mean and nasty. And that's not who I am. So I just took a 180 turn.

Jane clearly states that she did not like the person she was in prison and engaged in a criminal/addiction lifestyle. Thinking of herself as “mean and nasty” made her re-evaluate and decide that things in her life needed to change. For Jane, she skipped over the step of envisioning a new self because it is challenging to see a new self in the new normal, which is still not great.

Discussion

Interviewees believe that their criminal activities and their addiction are the same behaviours. Therefore, they saw the prison as a proxy detox, a way of taking a first step on the path to recovery and desistance. My findings regarding some women experiencing prison as a helpful detox/rehab centre and some women seeing prison as a disruption to life echo Harding and colleagues' (2019) ideas that prison is a positive for some imprisoned people and negative for others. In their study of 22 former prisoners' reentry process, Harding et al. (2019) stated that prison is a turning point for some, an opportunity to desist from crime and substance use and re-think goals and identity. The key is to understand for whom prison is a turning point and for whom it is a source of continuing disadvantage. Understanding women's differing responses to prison is key to those working as service providers within the criminal justice system. Understanding the differing responses can guide a work plan for each woman.

For some women in the current study, drug/alcohol treatment is the first step towards desistance. Obtaining treatment indicates a willingness and openness to change, as described by Giordano et al. (2002). Interviewees saw prison as helping with that first stage of treatment. Many stated that prison enabled them to “get clean,” clearing their head as they began the process of desistance and a lifestyle change. The openness to change leads women to see the next

stage in the process, which is the hook. A 'hook' may be a job, school, a relationship or anything else that creates a positive development in the life of the desister. The combination of the desisters' willingness to change and the attitude towards the 'hook' fosters desistance (Giordano et al., 2002).

Women also struggle to find their identity but know that they are not the same as they were once. The struggle in finding a new identity is where service providers and therapists who understand this process can help by helping to create a replacement self. Women need support in working through symptoms of potential psychological trauma exposure and mental disorders. They need support in identifying goals for employment and schooling. They need advocacy for housing and employment so that life can be a little easier and "normal."

Interviewees explain that recovery from addiction means not coming back to prison. Women see recovery and desistance as synonymous. VanRoeyen et al. (2017) suggest that recovery and desistance are dual processes related through dynamic interplay. They caution against researchers conceptualizing desistance and recovery as the same process. As a researcher, I separated the concepts of recovery and desistance; however, women in this study see these processes as one. Desistance is enmeshed in the recovery process because women's lives are complicated and not easily separated into discrete behavioural parts. Many women inextricably link crime and addiction, and they believe crime will cease once they are in active recovery.

Colman & Vander Laenen (2012) similarly found that people engaged in both recovery from drug use and desistance felt that desistance resulted from recovery. In their study, respondents described recovery as coming first. While in my findings, women state that crime will cease once their addiction is under control, for them, recovery is, at least in part, "not

coming back to jail.” A significant difference may be the idea of “going back to jail,” in the Colman and Vander Laenen (2012) study, participants did not have an incarceration history. The cognitive shift imperative in desistance processes involves re-thinking the future self and distancing from the past self. For interviewees, the past self is an “addict” who used drugs and/or alcohol, but also the past self is a “criminal” who engaged in criminal actions required to obtain drugs.

Furthermore, prison is a significant addition to a past identity beyond criminal activity, whereby “not going back to jail” is a vital piece of distancing from the past. The future self is seen as “clean,” meaning not using problematic substances²⁷ and not imprisoned. Thus, for women, recovery and desistance appear to be the same process.

Conclusion

In my research journal, I wrote about a woman at Newfoundland and Labrador Correctional Centre for Women who told me that coming to prison saved her life. She had been in a substance use treatment centre but left, returning to using drugs and drinking. While under the influence of alcohol, she committed a serious and dangerous crime and was happy that she was sent to prison. She believed that prison was the only thing that would save her because she could not leave and use drugs or alcohol. She told me that she was thinking clearly for the first time in years.

²⁷ Most women do not aspire to abstain from all substances. Most women see problematic drug use as opioids, cocaine and alcohol. Many women state that they will continue to use marijuana. This is in keeping with a harm reduction approach to addiction, which posits that complete abstinence from substances is not always feasible, and thus, reducing the harmful impacts of problematic behaviour is the best approach in supporting people’s recovery.

When women tell me that prison saved their lives, it can be hard to hear. Prison is not a pleasant place. They are living in an institution with few comforts. They are far from family and friends. Nevertheless, women deeply entrenched in addiction state that they need a place that they cannot leave to survive and for eventual recovery. That does not mean that punishment is what they want (or need). It does not mean that they should not have access to family or services or decency or comfort. It means that they need to “get away” to recover. For women deeply entrenched in addiction, going to prison is a surrender of control. Women seek security (in the warmest sense of that word), and ironically, prison is where they can find security.

Interviewees believe that desistance and addiction are inextricably linked, such that when I asked about desisting from criminal behaviour, they talk about recovery from addiction. For them, recovery does not come first; desistance and recovery from addiction are the same things. Many women shared that prison was that first step towards change as it allowed them to detox from drugs and think clearly. By no means are recovery and desistance easy processes. There remain barriers to living pro-social lives, yet women have managed to live the “normal” lives that they have set as goals for themselves. The fact that women recover from addiction and desist from criminal activity is a testament to their motivation for change, their desire to “want it.” Despite systemic barriers, women in the current study see themselves as agents in their own destiny. They “want it,” and they get it.

Chapter Seven: Ways Forward: Implications for Policy and Practise

“Nobody’s going to come knocking at your door and ask if you need help. No, that’s not going to happen. Right? Yeah, you gotta be able to at least make a phone call.” Laura, a formerly incarcerated woman, aged 40-45.

Introduction

During interviews with service providers who work with criminalized women, I discovered they knew little about what goes on in prison. For example, service providers believed that someone in the system helps with release planning but were unsure how it worked. Given that most service providers I interviewed do not provide direct service delivery within the prison, my finding should be unsurprising. Foucault (1995) observed that punishment has become hidden; what was once a public spectacle is now locked behind bars and secretive. What is more, researchers seeking access to prisons face multiple barriers in obtaining access to closed institutions (Reiter, 2014). Lack of access to prisons means challenges in understanding what happens in prisons for those who have never been imprisoned or worked within the system. However, information about what happens in prison trickles out from those who have been to prison. They are the experts regarding prison life. In the current study, formerly incarcerated women share their experiences of prison. Given that prison can be a mystery to those outside supporting women coming out of prison, it is crucial to hear women’s voices for service providers to advocate and provide the service needed.

Both women who have experienced prison and the service providers who support them shared how women leaving prison can be better supported in achieving their goals of desistance. In the current chapter, I examine how former prisoners’ ideas and suggestions can influence policy and practice. First, I examine policy implications for housing, including halfway houses for women. I then examine harm reduction practises and how these practises help and hinder

women's desistance processes. I follow this by discussing specialized services aimed at criminalized women before addressing the stigma associated with criminalized women. I conclude the chapter with a reflection on my social work practice and how my research impacts how I will practise in the future.

Housing

The lack of safe, affordable housing was brought forth as an issue that impacts women leaving prison. Several research participants suggested the need for a dedicated halfway house for women in Newfoundland and Labrador. As discussed earlier in Chapter Two, there is a dearth of literature that examines halfway houses' effectiveness generally, and even less that examines how halfway houses impact women. However, there is an assumption that halfway houses are helpful. Given that women need a place to live after being released from prison, it may seem that the development of a halfway house for women in Newfoundland and Labrador is logical. However, a halfway house is not necessarily the answer as there are problematic aspects of halfway houses in their position as an extension of the prison system

. A challenge in providing housing for women post-prison is the tension between supporting women in their needs and staff's accountability to prison structures if women are on parole or a temporary absence. Maier (2020a) suggests that halfway houses have become an integral part of the broader Canadian state-wide punishment system. She argues that the halfway house's enmeshment in state punishment has led to a widening nature of workers' supervision responsibilities. Staff enforce rules, report any resident infractions, and progress to parole officers (Maier, 2020b).

Halfway house staff then can contribute somewhat to difficulties for released prisoners. Conceptualized as the “pains of release,” there are many, often invisible, challenges and punishments accompanying release from prison (Travis, 2002). These challenges after release from prison include scrutiny from the staff at halfway houses, which some women report as adding stress on release due to the high level of monitoring from staff (McKendy & Ricciardelli, 2020). Monitoring from halfway house staff prioritizes requirements from parole officers, which some releasees feel is to the detriment of their own goals, such as mothering or employment (Opsal, 2012).

Another challenge for women in halfway houses is acquiring needed support for drug and alcohol addictions. Recovery from drug and alcohol use is often cyclical, meaning that people in recovery return to misusing substances while also exploring how recovery can work for them. Slips and relapses back into drug/alcohol use are an expected part of recovery. However, the use of alcohol and drugs may violate parole conditions which put halfway house staff in the position to report what they see, although slips and relapses are standard and an expected part of recovery. Given that staff are required to report drug and alcohol use, women may be reluctant to disclose use, impeding their recovery. They may not reach out for support for fear of being reported as a parole violation. A critical tenant of the harm reduction approach to substance use is that services must be user-friendly and relevant to the service user (MacMaster, 2004). For criminalized women, services must be flexible in treating substance use, recognizing that a slip back into drug use is a part of recovery. This philosophy may conflict with the duties required by halfway house employees.

Given that halfway house staff have responsibilities to report to parole officers, Maier (2020a) suggests that researchers and practitioners think about halfway houses as “open prisons,” allowing us to critique halfway houses as a part of the penal system. Thus, the suggestion to think about halfway houses as an “open prison” problematizes suggestions for women’s housing when released from prison. We must consider the implications for released women; halfway houses are not merely a housing option. Instead, they are an extension of prison whereby women are still under carceral control. On the other hand, the province of Newfoundland and Labrador lacks a halfway house for women only, and many women in the current study stated that they need a women’s only halfway house. The current reality is that Correctional Services Canada or the Newfoundland and Labrador Correctional Centre for Women often requires women who wish to be released on parole or temporary absence to live in a staffed facility. Without a halfway house, women’s options are limited, and thus, some women stay in prison longer than necessary. Therefore, although halfway houses can be problematic, there is a need for a staffed halfway house for women in Newfoundland and Labrador.

A further complication in advocating for a halfway house for women in Newfoundland and Labrador is that many women released from remand or provincial prisons would not qualify for parole or a temporary absence that would enable them to go to a halfway house. Thus the halfway house would be out of reach for these women, who still require housing. Given the complicated nature of a traditional halfway house instead, I suggest that what is needed is a hybrid model. The hybrid model would consist of elements of a halfway house that meet the needs of Correctional Services Canada and the Newfoundland and Labrador Correctional Centre for Women with a safe, sober (with a harm reduction philosophy), supported housing

arrangement for women post-prison. Such an arrangement would allow women released from prison, without the benefit of a temporary absence or parole, safe housing.

Furthermore, a staffed supported housing arrangement could provide parole or temporary absence options while maintaining a harm reduction and supportive philosophy. The staffed housing arrangement can work with Correctional Services Canada, provincial prison staff and released women to address slips back into drug/alcohol use through counselling and appropriate support. A supportive housing arrangement would enable women to transition back into the community, ensure supports are in place, and transition to independent housing while adhering to correctional agencies' needs for supervision²⁸.

In addition to the recommendation for a hybrid halfway house/safe housing option for women released from prison, I suggest a need for change when considering parole conditions for alcohol and drug use. Policymakers and the Parole Board need to understand that recovery from addiction includes slips and relapses back into drug use. We need to consider how parole and halfway houses can support recovery rather than penalize a normal part of the recovery process. There seems to be some understanding from parole officers that parolees will slip or relapse on their journey towards recovery. For example, Ricciardelli and McKendy (2021) found that parole officers did not revoke/suspend paroled women right away after having been found using alcohol or drugs. Parole officers engaged parolees in a series of interventions, including

²⁸ One of the challenges to such a model is how it would be funded. A traditional half way house is funded based on bed space, meaning that the halfway house is funded by either Correctional Services Canada or a provincial government based on how many beds are filled at a given time. This model works for men's facilities, based on numbers. However, as female prisoners are fewer in numbers, there may be times when a house is not at capacity. Meaning that a model based on per capita funding challenges the ability for a half way house for women to maintain programming and staffing. Furthermore, a hybrid model, as I have suggested, means that not all women would be in the care of Correctional Services Canada or a provincial prison. Therefore, an alternate funding arrangement must be considered to provide adequate, safe housing for women leaving prison.

therapeutic counselling, indicating that they understand that maintaining abstinence is not an easy process. However, that refraining from alcohol/drug use is a parole condition at all demonstrates a lack of understanding of the process of addiction. In having alcohol and drug restrictions in parole orders, the Parole Board criminalizes an activity that is not a crime (alcohol use/prescription medication misuse) and criminalizes a normal part of recovery; slips and relapse. As addressed in the next section, an understanding of harm reduction approaches would benefit correctional services systems in supporting those with addiction issues.

Harm reduction

Service providers spoke about the importance of a harm reduction approach while working with criminalized women. Vivian, a service provider with ten years of occupational tenure, suggested that although a harm reduction approach is essential, women accessing services do not necessarily know what programs include such an approach. She stated that many women she works with believe that they cannot access services if under the influence of alcohol or drugs. However, this is not always the case. Thus, service providers need to be open and honest about their ability to work with people who are actively using drugs or alcohol.

A harm reduction approach requires meeting clients ‘where they are,’ meaning that service providers recognize that some clients want to access services but may not be ready to stop using harmful substances or stop engaging in risky behaviour (MacMaster, 2004). While recognizing that some clients might not be ready to stop using substances is essential, it is also vital that support exists for those ready to change their substance use. Recognizing some women are making changes in their substance use means creating safe, sober spaces. Therefore, some services may require that participants refrain from drug use. For example, a therapeutic

addictions group where women are trying to change their substance use would require that women do not access the group while under the influence of substances. Having participants that appear under the influence attend such a group can be harmful to others in attendance as it can trigger cravings to use substances. At the same time, formerly incarcerated women need services such as drop-in and groups to access connections, support, and fundamental (tangible) services such as telephones, computers, and hygiene products, whereby sobriety may not be as important. Services that assist in finding housing can be more flexible around substance use and not require sobriety at the moment. On the other hand, other women are ready to engage in therapeutic work, whereby counselling appointments may be appropriate, and sobriety is required for the duration of that appointment.

There are a wide variety of women accessing services with a wide variety of needs. In response, services need to be flexible and wide-ranging. For example, in her assessment of UK-based programming designed to provide “supported desistance” to criminalized women, Barr (2018) found that services needed to be relational and provided based on each individual’s needs. Therefore, careful assessment of individual needs will require a harm reduction approach. Such a flexible approach acknowledges the diversity of women who access services and consideration for what purpose.

Specialized services for criminalized women

Interview participants suggest that women leaving prison and criminalized women, in general, need support and services. However, some service providers stated that women had expressed discomfort in being referred to an agency that only works with criminalized women. They suggest that a mixed group of women might decrease the stigma associated with programs

for criminalized women. While I agree that stigma can be associated with a criminal past and see the value of a mixed group, I question if criminalized women can get their needs met if programming becomes more open to those without a criminal history. Are women less likely to address an issue related to prison stays or a criminal lifestyle in a mixed group? For example, the Just Us Women's Centre, Stella's Circle in St John's, Newfoundland and Labrador, was started due to a lack of services for this specific population, criminalized women. There are existing services for women, but a needs assessment revealed that criminalized women, in particular, were not having their needs met (Boland & Morton Ninomiya, 2009).

Given that criminalized women are a group that endure a great deal of stigma, I suggest that specialized services are needed that provide non-judgmental support. Furthermore, expertise in issues that impact criminalized women is needed. Understanding the criminal justice system, courts, parole and record suspension is required while supporting criminalized women. For example, women in the current study stated that they appreciated the services provided by the Just Us Women's Centre both in the prison and community because staff had an understanding of the justice system and the issues that criminalized women face. Furthermore, some women stated that they liked that other criminalized women at the Just Us Women's Centre were supportive.

On the other hand, service providers such as those at Just Us Women's Centre (and I count myself among them) also need to understand the nuances of desistance processes, including a rejection of identifying with other criminalized women. The idea that some women reject identifying with other criminalized women was a key learning for my social work practice. While certainly, I have heard women state that they do not like other women, I did not connect

their feelings to the desistance process whereby they may distance themselves from their criminal background. The new insight will impact my practice as I endeavour to create a safe and supportive environment for women to engage in their processes of desistance.

Addressing Structural Stigma

Structural stigma is inequity and injustice embedded in social institutions' rules, policies, and procedures, such as health care or the criminal justice system (Livingston, 2021). Structural stigma impacted women in my study who experienced difficulties obtaining employment and housing and challenges receiving supportive health care. Combating structural stigma is difficult. However, there is evidence that individuals and institutions can make strides to challenge the injustices embedded within our systems. For example, the Mental Health Commission of Canada has created a document sharing examples of approaches that address structural stigma in Canada (Knaak & Sukhera, 2021). One such example is a multi-disciplinary team within hospitals to help support patients with substance use concerns. Their approach involves education for staff as well as a patient-centred focus whereby the patient is a participant in their health care plan.

Furthermore, Knaak & Sukhera (2021) suggest that education within medical professions is key to addressing structural stigma. As a social worker, I have participated in education for multi-disciplinary students at Memorial University. Students from medical, social work, nursing, psychology, and pharmacy schools come together for a two-day workshop to learn about interdisciplinary practice, including challenges therein. I spoke at these workshops to share my experience as a social worker. I take this opportunity to discuss the stigma associated with women in the criminal justice system. Women have shared that they often feel judged by medical professionals. Thus, this is an excellent opportunity to begin a process of addressing structural

stigma. Another way for professionals to address structural stigma is to examine our implicit biases, learn to challenge these biases, and understand how these biases are enacted within the systems where we work.

Many women in my study reported facing stigma in relation to their criminal history. Furthermore, they reported that they often turn the stigma from others inward to experience self-stigma and feelings of shame. In the current study, women reported feeling undeserving of support from others, meaning that desistance processes were impeded because women felt that they could not access the services needed. Enhancing self-esteem and self-empowerment can reduce the negative impacts of self-stigma (Evans et al., 2018). Therefore, service providers can help women to combat self-stigma by encouraging positive activities and achievements. For example, Evans et al. (2018) found that educational achievement while in prison reduced self-stigma and enhanced motivation to move away from the self-fulfilling attitude that accompanies self-stigma (i.e. once a criminal, always a criminal). Likewise, researchers have found that arts-based programs offered in prisons enhance feelings of empowerment, self-esteem, and confidence (Brown & Lewis, 2004; Merrill & Frigon, 2015; Nugent & Loucks, 2011) and have the potential to assist prisoners in moving through the process of desistance (Sheppard & Ricciardelli, 2016).

Another means of supporting women in developing achievements is fostering peer support models to help women help other women. Service providers can help women develop (self) advocacy skills, facilitating peer support groups and appropriate boundaries. Service providers can educate themselves and then refer criminalized women to existing consumer use

groups for service provision (CHANNAL, Elizabeth Fry Societies, the MAD movement, prisoner rights groups or convict criminology).

Building on the idea of helping women to explore achievements through education or arts, I turn to Maruna's (2011) thoughts about rituals and how rituals can assist with reintegration. Maruna (2011) argues that rituals serve a purpose in society: to create solidarity. Lacking in reintegration processes is a familiar ritual that may create a sense of solidarity throughout the reintegration process. Unlike punishment, where there are many familiar rituals, such as court or prison, Maruna (2011) asks what would be needed to develop rituals of reintegration powerful enough to counteract the degradation of punishment. He states that contemporary western societies have been poor at reintegrating and re-accepting people who have committed crimes back into society. Thus, rituals for rites of passage could be a valuable means to bring people back into communities. He suggests that reintegration rituals could include symbolic and emotive acts such as expressions of remorse from the person who committed a crime and messages of hope to that person from the community. Rituals must involve the community, emphasizing a community of care, not just professionals or volunteers, but the public to witness as there is often no media to show reintegration. Maruna (2011) suggests shifting from a focus on risk to looking at challenges and achievement. Focusing on rituals related to achievements is where I see possibilities for rehabilitation. Service providers can incorporate rituals into existing programming, with an emphasis on hope for the future. We can support criminalized women with some measure of public exposure about their redemption. I am not proposing that individual women need to share their stories of redemption publicly. However, I suggest that service providers and academics share women's stories of redemption anonymously in public ways to reduce stigma.

My social work practice

My wish to help criminalized women with whom I work daily drives the current study. I want to understand how women view their processes of working toward desistance. I understand that not all women I work with are ready to make significant changes. However, I want to help those ready to do so while supporting women who are not ready for change, hoping that they have a trusting relationship with me when they are ready for change. Therefore in the current section, I examine how the present research has impacted my professional social work practice.

To begin, I see a need to balance between personal and structural reasons for desistance. Feminist criminologists have been critical of how prison programming targets the individual, making her responsible for choices without recognizing the context in which she makes those choices (Barr, 2019; Hannah-Moffat, 2001; Pollack, 2007, 2009). They argue that neo-liberal rhetoric encourages taking responsibility for self without understanding the context of women's lives. For example, Pollack (2009) found that women on parole were expected to distance themselves from "associates" deemed by CSC to be problematic. This act of "taking responsibility" means that many women may be distanced from family and friends who may provide positive support.

Furthermore, Hart (2017) found that the responsabilization agenda has not fully been communicated to women, meaning that prison staff believed that women needed to participate in release planning by actively reaching out. However, women were waiting for available services to make contact with them. Thus, while there is an expectation of taking responsibility, women may not be aware of expectations. What is more, women in prison are used to being told what to do and thus may be reluctant to take an active role in their case planning,

In the current study, formerly incarcerated women spoke about their need to take responsibility for their actions and future. On the other hand, like feminist criminologists, service providers pointed out systemic issues at play that may impact women's choices. Service providers were critical of systems that did not provide adequate resources or understanding of women's lived realities. Women did identify issues such as housing, poverty and sexism but still saw the solutions to these problems as in the realm of individual work. Women interviewed emphasized that they have to reach out and have to "want it." On the other hand, service providers stated that we, the service providers, have to reach out to women.

As a social worker, I engage women at the individual level. Women come to me because they want to make a change and, in some cases, "take responsibility" because they have bought into the rhetoric from the criminal justice system. Women are struggling, sometimes because of the choices they make. Sometimes helping a shift in thinking or developing interpersonal skills can help make them more employable or help facilitate relationships with family. However, I also recognize that they make choices in contexts where choices are limited and may not be seen as the right choice. I see that the system has to change. A part of my role as a social worker is to advocate for that change. However, systems are slow to change. Therefore, we cannot dismiss women who say that they want their lives to be better because we operate in oppressive systems based on sex, class and race, which can impede (but not entirely prevent) their ability to make changes in their lives. I have witnessed many women make positive, life-affirming changes in their lives! Therefore, as a service provider, I need to support personal agency within the larger systems that diminish criminalized women's opportunities for future growth.

Women's ideas of personal responsibility for making change fit with desistance literature. Maruna's (2001) theory of desistance suggests that for a person to 'go straight,' they must generate a gradual shift in self-narrative. Those who can 'rehabilitate' generate a positive self-narrative that states that they are still good people even though they have done wrong. Thus, within Maruna's framework for desistance, there is a great deal of emphasis on the work of the individual. Indeed, there are systemic barriers, and it is my job both as a researcher and as a service provider to identify and mitigate barriers. However, I also need to listen to women telling me that they have a role to play. Maruna (2001) argues that an optimistic view of control over destiny is needed to engage in the desistance process. Given the importance of a sense of control over one's destiny, women's assertions that "you have to want it" and their belief in their abilities to make changes are crucial in the process of desistance.

I am arguing that service providers need to acknowledge that a combination of issues is at play. Some desistance literature emphasizes the personal responsibility needed for change, but there needs to be an acknowledgment that the person's ability to change does not happen in a vacuum. Implications for service providers then are to work with women's ideas of personal responsibility while helping them see the systemic issues that will impact their journey towards a "better life." One such way of helping women see systemic issues can be "bearing witness" to the lived experience of criminalized women, seeking to understand their values, the meaning ascribed to criminal behaviour, and goals for the future (Anderson, 2016). With the knowledge gleaned from bearing witness to desisting and criminalized women, service providers can help at the individual level while advocating at the macro level. At the same time, women still need to do the work and take advantage of opportunities, such as employment or development pro-social

relationships. Thus, service providers can support women in doing the work of change while helping women seek out growth opportunities.

The research process has helped me shift my practice as I have engaged with my research data over the last few years. I have been more aware of “change talk” that hints at the process of desistance. For example, when talking to women in prison about their criminal activities, they will often say, “that’s not me.” Before researching desistance, this was a confusing sentiment and easily misconstrued as “not taking responsibility” for past actions. However, now I can see these words hint at desistance whereby a woman separates herself from a past criminal lifestyle. Interpreting women’s words through a desistance lens can help allow me to support that desistance process. After hearing, that the criminal acts are “not me,” I can shift a conversation to a discussion of the “real person” and help them to uncover the core beliefs that characterize ‘true self,’ and a desire to be productive and give back to society (Maruna, 2001).

Conclusion

The desistance process can be challenging. However, women in my study were able to engage in desistance for long periods successfully. At the time of this writing, only one woman returned to prison. Some women in the current study have desisted for years, while others were beginning their journey. It is a challenging process for formerly incarcerated women, and it is also a challenging process for service providers supporting these women. Information from women can be contradictory. For example, some women stated that they did not like other women, and some stated that they did not want to be around men. These sentiments often came from the same women! People are contradictory. They often change opinions from moment to moment based on what is happening at that time. Women’s changing opinions does not mean

that women do not know what they need or want, but it means that needs and wants change and are complicated.

So what are service providers to do? The best we can. We can help where and when we can. We can offer a wide variety of services, recognizing the heterogeneity of women. We can help people to resolve some of the barriers they place on themselves. We can recognize systemic issues and advocate to make changes to systems. As Laura (aged 40-45), a formerly incarcerated woman, stated, “nobody’s going to come knocking at your door and ask if you need help. No, that’s not going to happen. Right? Yeah, you gotta be able to at least make a phone call.” Service providers need to be there to answer the call.

Chapter Eight: Bringing It All Together: Discussion and Conclusion

And the [other] women that come in like a lot of them are like myself, you know, I don't know their stories. They don't know my story, but everybody is just here to get support and deal with [their needs], you know. It's nice to get out and come and visit.- Lillian, a formerly incarcerated woman aged 55-60

In previous chapters, I have shared what formerly incarcerated women stated that they need to support their desistance, how stigma shapes their ability to engage in desistance and the effects of drug and alcohol use on women's desistance processes. In the current chapter, I turn back to three theories of desistance to examine provincially imprisoned women's experiences with desistance within these theoretical frameworks. Desistance is, simply put, a process whereby an individual moves away from crime and toward a pro-social lifestyle. Women in the current study have engaged with the process of desistance, but their journeys have not been simple. Therefore, I examine their experiences through the lens of three theoretical considerations to elucidate their experiences through the desistance process,

I look first at theories that emphasize the individual's cognitive processes, Giordano and colleagues' (2002) theory of cognitive transformation and Maruna's (2001) theory of self-narrative. In addition, I also explore theoretical understandings of desistance that challenge the focus on individual change and centre systemic issues impeding women's desistance efforts. Barr (2019) reconceptualizes desistance as a move away from androcentric ways of looking at desistance and towards frameworks that centre women's lives. In the current chapter, I examine how women in the current study fit (and do not fit) within these theories to more fully understand desistance processes for women in short-term provincial prisons. In addition, I discuss limitations to the current study and suggest areas for future research. I conclude with my

theoretical considerations of desistance based on what I have learned from formerly incarcerated women and service providers interviewed.

Cognitive Theory of Desistance (Giordano et al., 2002)

Giordano and colleagues (2002) identify a four-stage cognitive process in the movement toward desistance. First, the individual must be open to change (e.g., the individual tires of their old lifestyle and desires ‘going straight’). The second stage is exposure to a ‘hook.’ A ‘hook’ may be a job, school, a relationship or anything else that creates a positive development in the life of the desister. The combination of the persons’ willingness to change and the attitude towards the ‘hook’ fosters desistance. Thus, it is not just the offer of a job that provides an impetus to lead a life of desistance. One needs to want to live a crime-free lifestyle, invest in the job, and believe the job is meaningful and contributes to a crime-free life.

The third stage of cognitive transformation in the process of desistance is envisioning a replacement self (e.g., a new pro-social version of themselves). The shift in identity is vital in allowing for new cognitive constructs that encourage the person to think about themselves as someone who does not engage in criminal behaviour. Once established, the new identity guides desistance behaviours (i.e., a criminal lifestyle is no longer compatible with the new identity). Thus, the ‘hook’ begins the process of creating a new identity, and “a solid replacement self may prove the stronger ally of sustained behaviour change” (Giordano et al., 2002, p. 1002).

The final stage in cognitive transformation is how the desister views their former criminal lifestyle. The ‘capstone’ of the process of change is when the desister no longer sees their old criminal behaviours as “positive, viable, or even personally relevant” (Giordano et al., 2002, p. 1002).

1. Openness To Change

Women in the current study expressed openness in changing their criminal lifestyle. They engaged in “change talk,” meaning that women used words indicating the desire to change. Change talk included conversations about new people in their lives, goals for the future, and distancing from bad influences and positive activities such as starting school or sober socializing. All women stated that they did not want to be involved in the criminal justice system. Instead, they desired to live a new, “normal” life, including meaningful relationships, employment, and a safe place to call home and connect to the community.

2. Exposure To A Hook

As mentioned above, Giordano et al. (2002) suggest that openness to change is a basic need for a cognitive shift, but that exposure to a hook for change is central to the desistance process. The hook can be a job or a relationship but must be meaningful to the individual, influencing them to see a positive shift in their lives. Giordano et al. (2002) suggest that the hook is an integral part of the desistance process because it focuses on “the relationship between actor and environment” (p. 1001).

Women in the current study did not speak about what might be considered powerful hooks, such as a job or marriage. In fact, many women in the current study suggested that their environment did not change on release from prison and indicated that returning to the same environment challenged their ability to desist. For example, women reported a lack of safe and sober housing on release from prison. They reported experiencing stigma when trying to find employment. They reported unsupportive family and friend networks. Nevertheless, women were still able to engage in the process of desistance.

I suggest that their current environment did not provide the hook for women in the current study. Instead, the hook was a vision of a future “normal” life that may include a supportive family, a job and a safe place to live. For women in the current study, the hook is not readily available but is a vision of possibilities for the future. Some women had pieces of a vision of a “normal life,” such as meeting new friends, which makes obtaining the full vision of normal life seem achievable. However, a hook, in the traditional sense, was not readily apparent.

3. Envisioning A Replacement Self

While I have suggested that women engaged with a vision of a new normal life as a possible hook for change, they struggled to envision a replacement self. Most women in the current study struggled with this step for a couple of reasons.

First, I suggest that a vision of a replacement self is challenging to see because most women did not identify with a criminal lifestyle even though they were involved with criminal activity. Said another way, women saw their authentic self as an older version of themselves before the criminal activity started. Thus, “a normal life” is not something new but rather what they see as a return to how things were prior to criminal activity.

What is more, when women begin to engage in the desistance process, particularly for those who have substance use problems, they often find that life continues to be a struggle, indeed exacerbated by problems related to a criminal and incarceration history. Given their struggles, post-prison, and on the path to desistance, a replacement self is challenging to envision. Instead, turning backwards to a former self, pre-criminal activity, allows women to see their real identities rather than a vision of an unknown future. Women saw their authentic selves

as existing and coping before criminal involvement. As a result, women can see that they can return to that authentic self rather than seeing a new self.

4. Criminal Behaviour No Longer Relevant

As stated in the previous section, women in the current study did not see their criminal past as who they truly are. I argue that they never did believe that their criminal activity was viable or positive. Instead, for most women in my study, criminal activity was a means to meet other needs, such as alcohol or drugs or was a result of using alcohol/drugs or criminal activity due to unregulated mental disorders, such as in the cases of assaults and arson.

For women in the current study, criminal behaviour was a by-product of other lifestyle issues, including unhealthy relationships with partners and substance abuse. Therefore, they never saw criminal behaviours as viable, positive or relevant. Instead, most women saw prison as both the rock bottom resulting from a poor lifestyle and as the refuge that has the potential to help them make the changes needed to their lives (See also: Bucerius et al., 2021),

Some women in the current study see prison as a helpful environment. Most women spoke about their experiences in prison favourably. Indeed, it is not a pleasant place, it is cold and institutional, but many women spoke about being treated well by correctional officers and support staff. They spoke about accessing some services and that prison can be a place to detox, clear their heads, and think. Therefore, some women see prison as helpful in their desistance process.

Women believing that prison is helpful is in keeping with findings from other researchers. Michalsen (2019) found that while the prison was not a pleasant experience, many women reported incarceration as a time of reflection, allowing them time to think about their

priorities and goals. Similarly, Yuen (2011) found that Indigenous women participating in traditional ceremonies in prison found safe spaces for healing. While these ceremonies occurred in an oppressive environment, women could find a safe and secure emotional space to begin developing trusting and supportive relationships on the path to healing. In essence, for some incarcerated women, the prison provided space and time to begin a cognitive process leading to desistance.

Theory of Self-Narrative: (Maruna, 2001)

Maruna (2001) offers a theory of desistance that suggests that for a criminally involved person to ‘go straight,’ they must generate a gradual shift in self-narrative. He states that the narrative of desisters differs from those active in a criminal lifestyle in three fundamental ways 1) the establishment of core beliefs that characterize ‘true self,’ 2) an optimistic view of having control over their future, and 3) a desire to be productive and give back to society. Those who can ‘rehabilitate’ generate a positive self-narrative that states that they are still good people even though they have done wrong, often reaching back to find the positives in the ‘old me.’ Furthermore, they have a sense of themselves as intelligent and better than a common criminal. Thus, Maruna (2001) argues that desistance is not merely something that happens to a person but is an active process.

1. Core Beliefs That Characterize The ‘True Self’

Maruna (2001) suggests that those engaged in the desistance process will reach back to the “old me” that existed before criminal activity. In reaching back to find the old self, successful desisters see their true identity, their core being, does not include criminal activity. Thus, desistance involves tapping back into the true identity and true self. As I previously highlighted,

women in the current study did not identify themselves as criminals. Like desisters in Maruna's (2001) study, they saw themselves as victims of circumstances that led them down a criminal path. Most women wanted to distance themselves from identities associated with criminal behaviour. For example, a formerly incarcerated woman, Jane (aged 30-35), stated, "I was never that person. Like people in there (Newfoundland and Labrador Correctional Centre for Women) know why I was going in there. They're intimidated, and things like that, and I'm not an intimidating person." Jane shares here that others perceive her as intimidating due to her involvement in criminal activity, but that is not how she sees herself and what is more, she does not want others to see her in that light. Women are clear in what they do not want; criminal activity and drug use. However, they are less clear on how they can achieve a life free of drug use and criminal activity. They are able to draw on a sense of identity where they see their authentic self as "not criminal," however, they do not have a good sense of who their authentic self is beyond who they are not.

2. Optimistic View Over Control Of Destiny

Women maintained an agentic view of change, meaning that they saw themselves as responsible for making the changes needed to move away from criminal lifestyles and toward a new, pro-social life. When I asked formerly incarcerated women how service providers could help with pro-social change, all women stated, "you have to want it." They further stated that service providers could not do anything to help without the initial desire from the individual. This idea fits with Maruna's (2001) idea of desisters needing an optimistic view of their ability to control their own destiny. In essence, women believe that they are the agents of their own desistance process; desistance is not something that just happens; *you* have to make it happen. Despite the multiple barriers identified by both formerly incarcerated women and service

providers, women believed that they have the power to make changes in their lives. Most women in the current study were able to do so.

3. Desire To Be Productive And Give Back to Society

All women in this study stated that they wanted to be productive and give back to the community. Women interviewed had an acute sense that they have “taken” from society through the commission of crimes and now want to “give back” as a part of their journey towards a better life. Some women wanted to find employment or return to school as a means of being productive. For other women, employment was not a realistic goal due to age or mental health status. However, they still wanted to give back to the community through volunteer work or connection to peers through positive social activities, such as attending groups at Stella’s Circle. All women in the study expressed that they needed meaning in their lives and a sense of connection to the community to work towards desistance.

Beyond a sense of being productive, many women expressed that connection to community and peers can provide a sense of spirituality, which is vital to the desistance process. Women reported having feelings of peace, calm, community when attending groups at the Just Us Women’s Centre. While imprisoned, women spoke about needing to find meaningful activities to engage in both in and outside prison. I wrote in my research journal about a shift I needed to make in my thinking about what women in prison need after introducing a creative writing group:

An “othering” that happens in empathy for marginalized, vulnerable women. Like they are still not ‘like’ us. In recognizing my privilege, I often assume that women in prison will not be “into” stuff like journaling, vision boards, collage- it seems like bullshit when there are more urgent needs. But they love these activities when presented. Yes, we need bread, but we need roses too.

Women in prison responded with great enthusiasm to the creative writing group when I doubted it would be of interest. I believed that women would be more focused on basic needs such as readying housing and income for release from prison. However, women were able to find meaning through poetry and short stories in their prison experiences that helped them in cognitive transformations and moves towards desistance. In my journal, I referenced the Bread and Roses strike whereby women fought for fair wages and decent working conditions, with the belief that women needed their basic needs met, but they also needed to have some of the good things in life that make life worth living (Ross, 2013). I see this as accurate for women in my study as well. The path to desistance is mired when basic needs are unmet, but women also need roses, good things in their lives, to make desistance a worthwhile endeavour.

Social Harms Approach (Barr, 2019)

Giordano and colleagues (2002) and Maruna's (2001) theories of desistance posit that desistance is possible when individuals with criminal histories make fundamental cognitive shifts. Feminist criminologists have critiqued theories highlighting cognitive shifts for their emphasis on the individual while ignoring the social processes that may impede an otherwise willing desister (Barr, 2019; Comack, 2018; Hart, 2017; Sered, 2020). These scholars point to women's histories of poverty, trauma, and mental health/addiction issues that can be the pathway for women's criminal activity as a continuing barrier for women's desistance. In essence, the question is, how do women desist from crime when the very pathways to crime continue to create problems in women's lives? Below, I examine Barr's "social harms" approach to desistance in relation to the current study.

Barr (2019) argues for a “critical desistance lens,” which must ground desistance research and practise within the structural conditions in which desistance does or does not occur when considering women’s desistance processes. She argues that women’s experiences of desistance can mean challenging gender norms, just as deviance often does. For example, research indicates that becoming a mother is a significant desistance-inducing social bond for women who break the law (Bersani et al., 2009; Giordano et al., 2002; Uggen & Kruttschnitt, 1998). However, Barr (2019) found that for most women in her study, criminal activity happened *after* becoming a mother and was often related to providing for children. Barr (2019) challenges the traditional notion that women require stability, for instance, with their children and husbands, for successful desistance. Instead, in her study, she found that desistance was a largely independent venture, meaning that women in her study avoided romantic relationships, at least temporarily. Thus, for Barr (2019), desistance stories can be seen as resilience and survival in the face of “normal” (patriarchal, neoliberal) expectations such as marriage and family.

Further, Barr (2019) argues that researchers working with criminalized women must question the conditions in which their criminalization, punishment and post-criminal justice system contact occur. She articulates a social harms approach, whereby she reimagines desistance. Barr (2019) sees desistance not as a concept that involves a move away from crime but as a concept that involves a move away from harm, whether these harms are interpersonal (violence, trauma) or from relations with the state (inadequate mental health services, poverty).

Barr’s (2019) social harms approach to desistance may be a helpful framework for an academic understanding of some aspects of women’s desistance in the current project. However, evidence from my interviews with service providers suggests that they are already working from

a social harms approach in their daily work with criminalized women and other marginalized groups. Service providers identified social harms, such as poverty, lack of community connections, racism and sexism as barriers to women's health, well-being and safety. Service providers are less concerned with the process of desistance as a concept and are more concerned with helping people move away from harm and meet their goals, which may include desistance from crime. Women themselves identified some of these issues and the harmful impacts of addiction on their criminal lifestyle. Thus, I see Barr's (2019) social harms approach supporting how service providers in the current study have already been working with criminalized women, helping them move from social harms by working with individuals and systemic advocacy.

I have looked at how women released from a provincial prison fit within theoretical frameworks of desistance. Women are at various stages within the process of desistance. Some have desisted for many years, while others are at the beginning go of their journeys. However, the experiences of prison, release from prison and reentry into communities have elucidated many aspects of women's desistance processes, including how women think about desistance. In the next section, I discuss future directions for research,

Future research

In the current project, I examined the impacts of reentry on desistance processes for criminalized women leaving a small provincial prison. There is a lack of research regarding provincial prisoners' experiences within Canada, and the current research project contributes toward filling that gap. Based on the findings within the project, there remains much room for future research. To begin, I uncovered a significant connection between addiction and criminality for women. Several women attributed prison as a helpful "detox" centre that allowed them to

abstain from drug use, allowing them to think clearly. Given this finding, I suggest more research on the relationship between drug/alcohol use and desistance and, further, how prison may help or hinder the process of recovery/desistance.

Furthermore, I focussed on women who have been to prison. Future research can focus on desistance processes for criminalized women who do not go to prison, as this is a substantial group of those involved in minor criminal activity. In examining desistance (and persistence) processes for women involved in criminal activity, might it be possible to develop intervention strategies for those who eventually become incarcerated? For example, working within the prison system, I have encountered women who questioned if someone intervened in their early criminal activity (shoplifting), would they now be incarcerated? They posit that they would not be incarcerated if they had been able to get the help needed prior to becoming more heavily involved in shoplifting.

Finally, many women suggested the benefits of a peer model to support former prisoners on release. There is some evidence suggesting that peer mentoring can be a promising tool for supporting criminalized persons (Barrenger et al., 2019; Nixon, 2020); however, little data indicates that peer support can be helpful for criminalized women in particular (Wincup, 2019). Although little research supports peer support as a helpful model for criminalized women, it is nevertheless a worthy endeavour to pursue with an evaluative component to examine impacts on desistance and successful reentry post-prison. Women in my study spoke about the need for healthy, positive relationships that can support them post-incarceration and into the future. They suggest that it is helpful to talk to someone who has had similar experiences and successfully made pro-social changes in their life. Women need a positive social network on release from

prison (Pollack, (2009). Peers can enrich a positive social network so that other supports, such as professionals, family, or non-criminalized friends, cannot because they have had similar experiences within the criminal system,

Limitations

Any study is not without limitations, the current study included. Limiting my study is the small sample size (17 formerly incarcerated women and 16 service providers). While these interviews have provided a rich narrative of experiences of desistance, reentry and supporting criminalized women, I cannot generalize to broader understandings of criminalized women's desistance process. The current research sample is formerly provincially incarcerated women, a segment of a larger group of criminalized women. Most criminalized women will not be sentenced to a prison term. Therefore the current project may not support an understanding of a more general criminalized population.

Furthermore, while all women in the current study were engaged in the desistance process, the sample was recruited from an agency that provides supports and help to criminalized women. Thus, these experiences do not speak to women who desist on their own without the help of service providers. Furthermore, I cannot speak to experiences of women who might want to desist, are struggling, but are not connected. However, it is worth noting that the women who access the services do so voluntarily. Therefore, the study can speak to women's active engagement with the desistance process through accessing services. Additionally, I focused on women engaged in the desistance process and did not interview women who did not want to change. Thus, I cannot draw a comparison between desisters and persisters.

Finally, I recognize the small sample of women identifying as Indigenous. Given that interviews occurred outside of prison and in the St. John's area, it was challenging to interview formerly incarcerated Indigenous women as many who leave prison do not move to the greater St. John's area. Given the disproportionate numbers of Indigenous women incarcerated, there is room for future research with women returning to the Labrador region post-prison. Indigenous women, particularly women returning to Labrador, have unique needs that need further research and attention. One Indigenous woman in my study noted that there are housing shortages in Labrador, impacting women's ability to live safely. Having worked in the prison system as a service provider, many women from Labrador have shared that they want to return to their home communities as they feel connected to family and culture. However, they also recognize that their home communities can be sources of strife due to violence and substance use. Many women from Labrador struggle with the desire to return home while knowing that home may not be a safe place to support their recovery from addiction and that home may be dangerous. Intergenerational trauma and colonialism significantly impact some Indigenous women's ability to be safe in their home communities. Grekul (2020) suggests that Indigenous women are caught in a cycle of victimization, criminalization, and incarceration due to patriarchal and colonial systems that inform daily living for Indigenous women. She suggests using Comack's (2018) concept of 'trauma trails,' meaning that Indigenous women's pathways to crime are rife with personal, intergenerational and historical experiences of trauma, to consider how Indigenous women become criminalized and incarcerated. I echo Grekul (2020) and Comack (2018) to suggest researchers take a trauma-informed approach to examine the needs of criminalized Indigenous women within Newfoundland and Labrador,

Conclusion

Women in the current study are engaged in the desistance process, and their experiences fit within aspects of theoretical frameworks used to describe desistance. For women in the current study, drug and alcohol use is a significant factor in criminal activity. Moreover, women would define themselves as having an addiction rather than characterizing themselves as merely misusing substances. For women in the current study, addiction means a lack of control over their alcohol/drug use, leading to a lack of control in all aspects of life, including criminal activity. Women engaged in the desistance process by exercising some measure of control over their lives. However, the key to that control was addressing their addiction.

Women have engaged in cognitive processes associated with desistance. Again, they state, “you have to want it,” meaning that the individual needs to commit to a change in lifestyle and that no amount of help or support will compel someone to make a change without their own will. However, given the intense levels of addiction for women interviewed, they have also shared that they could not think clearly, in other words, engage in a cognitive process, until going to prison forced them to detox. Thus, desistance is a complicated process for women whereby one’s will can be clouded by substance use. However, women state that will and desire to change are essential in making changes in substance use and, therefore, criminal activity.

Nevertheless, women can engage in a desistance process, even when social harms and barriers remain. For women, their connection to services such as Emmanuel House and the Just Us Women’s Centre mitigates some social barriers. These services can provide access to safe, secure housing, community connections and some concrete help that can help supplement income, such as food, clothing, hygiene products. However, large-scale systemic barriers remain.

In the face of systemic barriers, women engaged in the desistance process, citing their agency as the means to do so: over and over, women stated, “you have to want it.” For many women, changing a criminal lifestyle and moving towards a new, pro-social lifestyle means dealing with their addiction issues and abstaining from drugs or alcohol. For all women, moving towards desistance means accessing supports through professionals and informal means such as friends and peer networks. However, they are clear; they must do the work, including making a cognitive shift moving towards pro-social behaviours and a vision of a new self.

Given the evidence provided by formerly incarcerated women and services providers interviewed for the current study, I argue that an understanding of provincially sentenced women’s desistance must include both a theory of cognitive transformation and an approach to understanding social conditions in which women live. Resulting from these interviews is a discussion of what women say they need to support their desistance process: adequate housing on release, transportation and support for mental health and addiction issues. They need services that are in tune with their lives, suggesting services need to be gender and trauma-responsive as well as peer-led. In general, most women thought that the services provided in prison were good quality but that there were not enough of them, suggesting a need for more contact with counsellors and support in release planning. Furthermore, women stated that there are good quality services in the community. However, service providers need to promote better what is available and perhaps increase the number of hours women have access to service providers and the associated services.

On the other hand, service providers were more likely to identify systemic issues that barred women from achieving their goals of a crime-free lifestyle. Service providers identified

long waitlists, problematic policies and systemic difficulties like poverty and racism. In general, service providers believe that the system needs to change to meet women's needs. In contrast, formerly incarcerated women spoke about their responsibility to access services. Thus, to support women's desistance, I argue in favour of a partnership between service providers supporting criminalized women and criminalized women themselves. Women can take responsibility for working towards desistance, and the role of service providers is to support individual changes but also to identify and advocate for change to systemic barriers.

References

- Acker, J. (2009). From glass ceiling to inequality regimes. *Sociologie Du Travail*, 51(2), 199-217.
- Adelberg, E., & Currie, C. (1987). *Too few to count: Canadian women in conflict with the law*. Press Gang Publishers.
- Albright, S., & Denq, F. (1996). Employer attitudes toward hiring ex-offenders. *The Prison Journal*, 76(2), 118-137.
- Anazodo, K. S., Ricciardelli, R., & Chan, C. (2019). Employment after incarceration: Managing a socially stigmatized identity. *Equality, Diversity and Inclusion: An International Journal*, 38(5), 564-582
- Anderson, L. (2006). Analytic autoethnography. *Journal of Contemporary Ethnography*, 35(4), 373-395.
- Anderson, S. E. (2016). The value of ‘bearing witness’ to desistance. *Probation Journal*, 63(4), 408-424.
- Anderson-Nathe, B., Gringeri, C., & Wahab, S. (2013). Nurturing “critical hope” in teaching feminist social work research. *Journal of Social Work Education*, 49(2), 277-291.
- Arditti, J. A., & Few, A. L. (2006). Mothers’ reentry into family life following incarceration. *Criminal Justice Policy Review*, 17(1), 103-123.
- Atkinson, P., Coffey, A., & Delamont, S. (2003). *Key themes in qualitative research: Continuities and changes*. AltaMira Press.

- Bachman, R., Kerrison, E., Paternoster, R., O'Connell, D., & Smith, L. (2016). Desistance for a long-term drug-involved sample of adult offenders: The importance of identity transformation. *Criminal Justice and Behavior*, 43(2), 164-186.
- Balfour, G., & Comack, E. (Eds.). (2014). *Criminalizing women: Gender and (in) justice in neo-liberal times*, 2nd ed. Fernwood Publishing.
- Balfour, G. and Hannah-Moffat, K. and Turnbull, S. (2018). Planning for precarity? Experiencing the carceral continuum of imprisonment and reentry. *Studies in Law, Politics and Society* 77, 31-48.
- Balis, A. (2007). Female prisoners and the case for gender-specific treatment and reentry programs in Greifinger, R. (Ed.) *Public health behind bars* (pp. 320-332). Springer.
- Banks-Wallace, J. (2008). Eureka! I finally get IT: Journaling as a tool for promoting praxis in research. *ABNF Journal*, 19(1), 24-27.
- Barak, G., Leighton, P., & Flavin, J. (2010). *Class, race, gender, and crime: The social realities of justice in America*. Rowman & Littlefield Publishers.
- Barker, M., & Langdrige, D. (2010). Silencing accounts of silenced sexualities. In R. Ryan-Flood & R. Gill, (Eds.), *Secrecy and silence in the research process: Feminist reflections*. (pp. 67-79). Routledge.
- Barr, Ú. (2018). Gendered assisted desistance: a decade from Corston. *Safer Communities*, 17(2), 81-93.
- Barr, Ú. (2019). *Desisting Sisters*. Springer.
- Barrenger, S. L., Hamovitch, E. K., & Rothman, M. R. (2019). Enacting lived experiences: Peer specialists with criminal justice histories. *Psychiatric Rehabilitation Journal*, 42(1), 9–16.

- Barrett, Allenby & Taylor. 2010. Twenty Years Later: Revisiting the Task Force on Federally Sentenced Women. Ottawa: Correctional Services Canada. Retrieved from December 4, 2021, from, <https://www.csc-scc.gc.ca/research/005008-0222-01-eng.shtml>
- Bateman, T., & Hazel, N. (2014). *Resettlement of girls and young women: Research Summary*. University of Salford. <http://usir.salford.ac.uk/id/eprint/33029/>
- Bearman, S., Korobov, N., & Thorne, A. (2009). The fabric of internalized sexism. *Journal of Integrated Social Sciences*, 1(1), 10-47.
- Belknap, J. (2014). *The invisible woman: Gender, crime, and justice*. Cengage Learning.
- Benedict, A. (2014). Using trauma-informed practices to enhance safety and security in women's correctional facilities. *National Resource Centre on Justice-Involved Women: COREAssociates*.
- Bernier, J. R. (2010). It's like jumping out of a plane without a parachute: Incarceration and reintegration experiences of provincially sentenced women in Atlantic Canada. Doctoral Dissertation.
- Bernier, J. R., & MacLellan, K. (2011). *Health status and health services use of female and male prisoners in provincial jail*. The Atlantic Centre of Excellence for Women's Health.
- Berry, M. C., & Wiener, R. L. (2020). Ex-offender housing stigma and discrimination. *Psychology, Public Policy, and Law*, 26(2), 213–232. <https://doi.org/10.1037/law0000225>
- Bersani, B. E., Laub, J. H., & Nieuwbeerta, P. (2009). Marriage and desistance from crime in the Netherlands: Do gender and socio-historical context matter? *Journal of Quantitative Criminology*, 25(1), 3-24.

- Best, D. (2019). *Pathways to Recovery and Desistance* (p. 232). Policy Press.
- Best, D., Irving, J., & Albertson, K. (2017). Recovery and desistance: what the emerging recovery movement in the alcohol and drug area can learn from models of desistance from offending. *Addiction Research & Theory*, 25(1), 1-10.
- Blanch, A., Filson, B., Penney, D., & Cave, C. (2012). *Engaging women in trauma-informed peer support: A guidebook*. National Center for Trauma-Informed Care. Retrieved December 4, 2021, from <http://www.theannainstitute.org/Andrea%20Blanch%20TIWA/EngagingWomeninTIPeerSupportGuidebook.pdf>.
- Bloom, B., Owen, B., & Covington, S. (2004). Women Offenders and the Gendered Effects of Public Policy. *Review of Policy Research*, 21(1), 31-48.
- Boland, B., & Morton Ninomiya, M. (2009). *Time better spent: Seeking justice for women in the criminal justice system*. Stella's Circle.
- Bonta, J., & Motiuk, L. L. (1987). The diversion of incarcerated offenders to correctional halfway houses. *Journal of Research in Crime and Delinquency*, 24(4), 302-323.
- Bordo, S. (2003). *Unbearable weight: Feminism, western culture, and the body*. University of California Press.
- Bosworth, M. (1999). *Engendering resistance: Agency and power in women's prisons*. Routledge.
- Bradbury, T. (2018, May 18). HMP's 'complete inadequacy' leads to harsh words from St. John's judge and reduced jail term for Newfoundland man. *The Telegram*. Retrieved December 4, 2021,

from, <https://www.saltwire.com/atlantic-canada/news/hmps-complete-inadequacy-leads-to-harsh-words-from-st-johns-judge-and-reduced-jail-term-for-newfoundland-man-211179/>

Braithwaite, J. (1989). *Crime, shame and reintegration*. Cambridge University Press.

Braithwaite, J. (2000). Shame and criminal justice. *Canadian Journal of Criminology*, 42(3), 281-298.

Brinkmann, S., & Kvale, S. (2015). *Interviews: Learning the craft of qualitative research interviewing* (Vol. 3). Sage.

Brooks, A. (2007). Feminist standpoint epistemology: Building knowledge and empowerment through women's lived experience. In S Hesse-Biber & P. Leavy (Eds.), *Feminist research practise*. (pp. 53-83). Sage Publications.

Brown, G.P., Barker, J., McMillan, K., Norman, R., Derkzen, D., Stewart, L.A., Wardrop, K. (2018). *Prevalence of Mental Disorder Among Federally Sentenced Women Offenders: In-Custody and Intake Samples*. Ottawa: Correctional Services Canada. Retrieved December 4, 2021, from, <https://www.csc-scc.gc.ca/research/r-420-en.shtml>

Brown, J., & Lewis, S. (2004). An Evaluation of Dancing Inside: a Creative Workshop Project Led by Motionhouse Dance Theatre in HMP Dovegate Therapeutic Community, Year Two Programme. *Two-year programme. Forensic Psychology Research Unit, Surrey University*. Retrieved June 20, 2021, from <http://www.artsevidence.org.uk/media/uploads/evaluation-downloads/mh-surrey-yr2-2004.pdf>

Browne, A., Miller, B., & Maguin, E. (1999). Prevalence and severity of lifetime physical and sexual victimization among incarcerated women. *International Journal of Law and Psychiatry*, 22(3), 301-322

- Broyles, L. M., Binswanger, I. A., Jenkins, J. A., Finnell, D. S., Faseru, B., Cavaola, A., ... & Gordon, A. J. (2014). Confronting inadvertent stigma and pejorative language in addiction scholarship: A recognition and response. *Substance Abuse*, 35(3), 217-221.
- Bucerius, S, Haggerty, K, & Dunford, D. (2021). Prison as temporary refuge: Amplifying the voices of women detained in prison. *British Journal of Criminology*, 61(2), 519-537.
- Buchanan, M., Murphy, K., Martin, M. S., Korchinski, M., Buxton, J., Granger-Brown, A., ... & Martin, R. E. (2011). Understanding incarcerated women's perspectives on substance use: Catalysts, reasons for use, consequences, and desire for change. *Journal of Offender Rehabilitation*, 50(2), 81-100.
- Burns, A. (2006). Moving and moving forward: Mushuau Innu relocation from Davis Inlet to Natuashish. *Acadiensis*, 35(2), 64-84.
- Butler, J. (1993). *Bodies that matter: On the discursive limits of 'sex.'* Routledge.
- CAEFS, 2018. Canadian Association of Elizabeth Fry Societies. Retrieved May 14, 2021, from <http://www.caefs.ca/>
- Callan, V., & Gardner, J. (2007). The role of VET in recidivism in Australia. In S. Dawe (Ed.). *Vocational education and training for adult prisoners and offenders in Australia*, (pp. 34-46). National Centre for Vocational Education Research.
- Calathes, W. (1991). Project Green Hope, a Halfway House for Women Offenders: Where Do They Go From Here?. *Journal of Contemporary Criminal Justice*, 7(2), 135-145.
- Canadian Association of Chiefs of Police. (2020). "Findings and recommendations report: Decriminalization for Simple Possession of Illicit Drugs: Exploring Impacts on Public Safety and

Policing.” Special Purpose Committee on the Decriminalization of Illicit Drugs. Retrieved May 20, 2021, from https://www.cacp.ca/index.html?asst_id=2189

Canadian Mental Health Association. (2020). Get Real: Your mental health. Retrieved May 14, 2021, from <https://mentalhealthweek.ca/yourmentalhealth/>

Caputo, G. A. (2014). *A halfway house for women: Oppression and resistance*. Northeastern University Press.

Carlen, P. (1995). ‘Virginia, Criminology and the Anti-Social Control of Women’ in T. Blumberg and S. Cohen (eds) *Punishment and Social Control* (pp 117-132). Aldine de Gruyter

CBC, (March 2016). 'Desperate measures': Spike in female inmates proves prison system is not working, expert says. Retrieved June 11, 2021, from <https://www.cbc.ca/news/canada/newfoundland-labrador/hmp-women-1.3472259>

CBC (April 2019). Labrador corrections gets a \$1M expansion to house female inmates. Retrieved May 23, 2021, from, <https://www.cbc.ca/news/canada/newfoundland-labrador/labrador-jail-budget-1.5100342>

Chabon, S. S., & Lee-Wilkerson, D. (2006). Use of journal writing in the assessment of CSD students' learning about diversity: A method worthy of reflection. *Communication Disorders Quarterly*, 27(3), 146-158.

Chamberlen, A. (2016). Embodying prison pain: Women’s experiences of self-injury in prison and the emotions of punishment. *Theoretical Criminology*, 20(2), 205-219.

CHANNAL (2021). About CHANNAL. Retrieved November 29, 2021, from <https://www.channal.ca/about>.

- Charmaz, K. (2014). *Constructing grounded theory*, 2nd edition. Sage.
- Charmaz, K., & Bryant, A. (2011). Grounded theory and credibility. In D. Silverman (Ed.) *Qualitative research* (3rd ed., pp 291-309). Sage.
- Chartrand, V., & Kilty, J. M. (2017). Corston principles in Canada: Creating the carceral other and moving beyond women in prison. In *Women's imprisonment and the case for abolition* (pp. 109-128). Routledge.
- Chernikova, E. (2016). *Aboriginal peoples: Fact sheet for Newfoundland and Labrador*. Social and Aboriginal Status Statistics Division, Statistics Canada. Retrieved May 14, 2021, from <https://www150.statcan.gc.ca/n1/en/pub/89-656-x/89-656-x2016002-eng.pdf?st=gYI-cYGU>
- Chesney-Lind, M. & Morash, M. (2013). Transformative feminist criminology: A critical re-thinking of a discipline. *Critical Criminology* 21(3), 287-304.
- Cimino, A., Mendoza, N., Thieleman, K., Shively, R., & Kunz, K. (2015). Women re-entering the community: Understanding addiction and trauma-related characteristics of recidivism. *Journal of Human Behavior in the Social Environment*, 25(5), 468-476.
- Clarke, A. E. (2007). Feminisms, grounded theory, and situational analysis. In S. Hesse-Biber (Ed.), *Handbook of feminist research: Theory and praxis* (pp. 354-371). Sage.
- Clow, K. A., Ricciardelli, R., & Cain, T. L. (2012). Stigma-by-association: Prejudicial effects of the prison experience for offenders and exonerees. In D. Russell and C. Russell's (Eds.) *The Psychology of Prejudice: Interdisciplinary Perspectives on Contemporary Issues* (pp. 127-154). Nova Science Publishers.

- Cobbina, J. E. (2010). Reintegration success and failure: Factors impacting reintegration among incarcerated and formerly incarcerated women. *Journal of Offender Rehabilitation*, 49(3), 210-232.
- Codd, H. (2013). *In the shadow of prison: Families, imprisonment and criminal justice*. Routledge.
- Cole, E. R. (2009). Intersectionality and research in psychology. *American Psychologist*, 64(3), 170.
- Colman, C., & Vander Laenen, F. (2012). "Recovery came first": Desistance versus recovery in the criminal careers of drug-using offenders. *The Scientific World Journal*, 2012.
- Collins, P. H. (1998). Intersections of race, class, gender, and nation: Some implications for Black family studies. *Journal of Comparative Family Studies*, 1, 27-36.
- Collins, P. H. (2015). Intersectionality's definitional dilemmas. *Annual Review of Sociology*, 41, 1-20.
- Comack, E. (1996). *Women in trouble: Connecting women's law violations to their histories of abuse*. Fernwood Publishing.
- Comack, E. (2018). *Coming Back to Jail: Women, Trauma and Criminalization*. Fernwood Publishing.
- Connell, R (2009). *Gender*, 2nd ed. Polity Press.
- Connell, R (2018). Conclusion: Reckoning with Gender. In J. Messerschmidt, M. Messner, R. Connell, & P. Martin (Eds.), *Gender reckonings: New social theory and research* (pp. 331-346). New York University Press.
- Cook, S. L., Smith, S. G., Tusher, C. P., & Raiford, J. (2005). Self-reports of traumatic events in a random sample of incarcerated women. *Women & Criminal Justice*, 16(1-2), 107-126.

- Correctional Services Act. (2018). St. John's, Canada: Queen's Printer. Retrieved May 14, 2021, from <https://www.assembly.nl.ca/Legislation/sr/statutes/c37-00001.htm>
- Correctional Services Canada (2014). *Research results: Aboriginal Offenders*. Retrieved May 14, 2021, from <http://www.csc-scc.gc.ca/publications/005007-3027-eng.shtml>
- Correctional Services Canada (2018). Community-Based Residential Facilities (CBRFs). Retrieved May 14, 2021, from <https://www.csc-scc.gc.ca/facilities-and-security/001-0001-eng.shtml>
- Correctional Services Canada (2019). Types of Release. Retrieved August 21, 2021, from <https://www.csc-scc.gc.ca/002/007/002007-0002-en.shtml>
- Corrigan, P. W. (2007). How clinical diagnosis might exacerbate the stigma of mental illness. *Social Work*, 52(1), 31-39.
- COSA. (2015). *COSA Canada*. Retrieved May 14, 2021, from <http://cosacanada.com/>.
- Costanza, S. E., Cox, S. M., & Kilburn, J. C. (2015). The impact of halfway houses on parole success and recidivism. *Journal of Sociological Research*, 6(2), 39-55.
- Costelloe, M., Chiricos, T., & Gertz, M. (2009). Punitive attitudes toward criminals: Exploring the relevance of crime salience and economic insecurity. *Punishment & Society*, 11(1), 25-49.
- Covington, J. (1985). Gender differences in criminality among heroin users. *Journal of Research in Crime and Delinquency*, 22(4): 329-354.
- Covington, S. (2002). Helping women recover: Creating gender-responsive treatment. In S. Straussner, & S. Brown, (Eds.). *The handbook of addiction treatment for women: Theory and practice* (pp. 52-72) John Wiley & Sons.

- Covington, S. (2008). Women and addiction: A trauma-informed approach. *Journal of psychoactive drugs*, 40(5), 377-385.
- Covington, S. (2011, October). *Trauma matters: Changing the world without work*. Paper presented at the 14th National Conference on Adults and Juvenile Female Offenders, Salt Lake City, Utah, USA.
- Covington, S., & Bloom, B. (2007). Gender-responsive treatment and services in correctional settings. *Women & Therapy*, 29(3/4), 9-33.
- Cowan, G. (2000). Women's hostility toward women and rape and sexual harassment myths. *Violence Against Women*, 6(3), 238-246.
- Crenshaw, K. (1991). Mapping the Margins: Intersectionality, Identity Politics, and Violence against Women of Color. *Stanford Law Review*, 43(6), 1241-1299.
- Crowder, R. (2016). Mindfulness based feminist therapy: The intermingling edges of self-compassion and social justice. *Journal of Religion & Spirituality in Social Work: Social Thought*, 35(1-2), 24-40.
- Daigle, M., Alarie, M., & Lefebvre, P. (1999). The problem of suicide among female prisoners. *Forum on Corrections Research* 11(3), 41-45. Correctional Services Canada.
- Daly, K., & Chesney-Lind, C. (1988) Feminism and criminology. *Justice Quarterly* 5. 497–538.
- Dankoski, M. E. (2000). What makes research feminist? *Journal of Feminist Family Therapy*, 12(1), 3-19.

- Dell, C. A., & Kilty, J. M. (2013). The creation of the expected Aboriginal woman drug offender in Canada: Exploring relations between victimization, punishment, and cultural identity. *International Review of Victimology*, 19(1), 51-68.
- Department of Justice. (2021). *Drug Treatment Court Funding Program*. Retrieved May 20, 2021, from <https://www.justice.gc.ca/eng/fund-fina/gov-gouv/dtc-ttt.html>
- Derken, D., Barker, J., McMillan, K., & Stewart, L. (2017). *Rates of current mental disorders among women offenders in CSC*. Ottawa: Correctional Services Canada. Retrieved May 14, 2021, from <https://www.csc-scc.gc.ca/research/err-16-23-eng.shtml>
- DeVault, M. L., & Gross, G. (2007). Feminist interviewing: Experience, talk, and knowledge. in S. N. Hesse-Biber (Ed.), *Handbook of feminist research: Theory and praxis* (pp. 173-197). Sage,
- Diamond, P. M., Wang, E. W., Holzer, C. E., & Thomas, C. (2001). The prevalence of mental illness in prison. *Administration and Policy in Mental Health and Mental Health Services Research*, 29(1), 21-40.
- Dodd, S., & Epstein, I. (2012). *Practice-based research in social work: A guide for reluctant researchers*. Routledge.Gio
- Dodge, M., & Pogrebin, M. R. (2001). Collateral costs of imprisonment for women: Complications of reintegration. *The Prison Journal*, 81(1), 42-54.
- Dowell, D. A., Klein, C., & Krichmar, C. (1985). Evaluation of a halfway house for women. *Journal of Criminal Justice*, 13(3), 217-226.
- Dupont, I. (2008). Beyond doing no harm: A call for participatory action research with marginalized populations in criminological research. *Critical Criminology*, 16(3), 197,

- Evans, A., & Coccoma, P. (2014). *Trauma-informed care: How neuroscience influences practice*. Routledge.
- Evans, D. N., Pelletier, E., & Szkola, J. (2018). Education in prison and the self-stigma: Empowerment continuum. *Crime & Delinquency*, 64(2), 255-280.
- Epstein, C. F. (2007). Great divides: The cultural, cognitive, and social bases of the global subordination of women. *American Sociological Review*, 72(1), 1-22.
- Fader, J. J., & Traylor, L. L. (2015). Dealing with difference in desistance theory: The promise of intersectionality for new avenues of inquiry. *Sociology Compass*, 9(4), 247-260.
- Faith, K. (2011). *Unruly women: The politics of confinement & resistance*. Seven Stories Press.
- Farrell MacDonald, S. (2014). *Lifetime substance use patterns of women offenders* (RS 14-24). Ottawa, Ontario: Correctional Service of Canada.
- Farrall, S., & Calverley, A. (2005). *Understanding desistance from crime*. McGraw-Hill Education (UK).
- Fazel, S., Bains, P., & Doll, H. (2006). Substance abuse and dependence in prisoners: a systematic review. *Addiction*, 101(2), 181-191.
- Fereday, J., & Muir-Cochrane, E. (2006). Demonstrating rigor using thematic analysis: A hybrid approach of inductive and deductive coding and theme development. *International Journal of Qualitative Methods*, 5(1), 80-92.
- Fine, M., & Torre, M. E. (2006). Intimate details: Participatory action research in prison. *Action Research*, 4(3), 253-269.

- Flavin, J. (2001). Of punishment and parenthood: Family-based social control and the sentencing of black drug offenders. *Gender & Society*, 15(4), 611-633.
- Fletcher, D., & Batty, E. (2012). *Offender Peer Interventions: What do we know?* Sheffield: Sheffield Hallam University Centre for Regional Economic and Social Research. Retrieved May 14, 2021, from <https://www4.shu.ac.uk/research/cresr/ourexpertise/offender-peer-interventions-what-do-we-know-0>
- Fortune, D., Thompson, J., Pedlar, A., & Yuen, F. (2010). Social justice and women leaving prison: Beyond punishment and exclusion. *Contemporary Justice Review*, 13(1), 19-33.
- Fortune, C., Willis, G., & Ward, T. (2012). The rehabilitation of offenders: Reducing risk and promoting better lives. *Psychiatry, Psychology and Law*, 19(5), 646-661.
- Fortune, D., & Arai, S. M. (2014). Rethinking community within the context of social inclusion as social justice: Implications for women after federal incarceration. *Studies in Social Justice*, 8(1), 79-107.
- Foster, H., & Hagan, J. (2007). Incarceration and intergenerational social exclusion. *Social Problems*, 54(4), 399-433.
- Foucault, M. (1995). *Discipline and punish: The birth of prison*. Vintage.
- Fox, D., & Moyser, M. (2018). *Women in Canada: A Gender-based Statistical Report*. Statistics Canada. Retrieved May 14, 2021, from <https://www150.statcan.gc.ca/n1/pub/89-503-x/89-503-x2010001-eng.htm>

- Frigon, S. (2003). Body talk: Chronicles of women's experiences in prison. In Martinez & M. Stuart. (Eds.), *Out of the ivory tower: Feminist research for social change*. (pp. 131-153). Sumach Press.
- Gålnander, R. (2020). 'Shark in the Fish Tank': Secrets and Stigma in Relational Desistance from Crime. *The British Journal of Criminology*, 60(5), 1302-1319.
- Gaetz, S., Scott, F., & Gulliver, T. (2013). *Housing First in Canada: Supporting Communities to End Homelessness*. Canadian Homelessness Research Network Press. Retrieved May 14, 2021, from <https://www.homelesshub.ca/sites/default/files/HousingFirstInCanada.pdf>
- Giordano, P. Cernkovich, S. A., & Rudolph, J. L. (2002). Gender, crime, and desistance: Toward a theory of cognitive transformation. *American Journal of Sociology*, 107(4), 990-1064.
- Giordano, P. C., Cernkovich, S. A., & Lowery, A. R. (2004). A Long-term follow-up of serious adolescent female offenders. In M. Putallaz & K. L. Bierman (Eds.), *Duke Series in Child Development and Public Policy. Aggression, Antisocial behavior, and Violence Among Girls: A Developmental Perspective* (pp. 186–202). Guilford Publications.
- Giordano, P., Deines, J., & Cernkovich, S. A. (2006). In and out of crime: A life course perspective on girls' delinquency. In K. Heimer & C. Kruttschnitt (Eds.), *Gender and Crime: Patterns in Victimization and Offending* (pp. 17-40). New York University Press.
- Glaser, B. (1978). *Theoretical sensitivity. Advances in the methodology of grounded theory*. Sociology Press.
- Glaser, B. G. (2001). *The grounded theory perspective: Conceptualization contrasted with description*. Sociology Press.

- Glaser, B. G. & Strauss, A. L. (1967). *The Discovery of Grounded Theory; Strategies for Qualitative Research*. Aldine,
- Gobeil, R., Blanchette, K., & Stewart, L. (2016). A meta-analytic review of correctional interventions for women offenders: Gender-neutral versus gender-informed approaches. *Criminal Justice and Behavior*, 43(3), 301-322.
- Goffman, E. (1963). *Stigma: Notes on the management of spoiled identity*. Simon and Schuster.
- Grammond, S., (2013). Equally recognized: The Indigenous peoples of Newfoundland and Labrador. *Osgoode Hall Law Journal*, 51(2), 469-499.
- Green, G., Hayes, C., Dickinson, D., Whittaker, A., & Gilheany, B. (2003). A mental health service users perspective to stigmatisation. *Journal of Mental Health*, 12(3), 223-234.
- Greenfeld, L. A., & Snell, T. L. (1999). *Women offenders*. US Department of Justice, Office of Justice Programs, Bureau of Justice Statistics. Retrieved May 14, 2021, from <https://www.bjs.gov/content/pub/pdf/wo.pdf>
- Greer, K. R. (2000). The changing nature of interpersonal relationships in a women's prison. *The Prison Journal*, 80(4), 442-468. doi:10.1177/0032885500080004009
- Grekul, J. (2020). Prisoning Indigenous Women: Strength and Resilience in the Face of Systemic Trauma. *Aboriginal Policy Studies*, 9(1).
- Grella, C. (1999). Women in residential drug treatment: Differences by program type and pregnancy. *Journal of Health Care for the Poor and Underserved*, 10(2). 216-29.

- Griffiths, C. T., Dandurand, Y., & Murdoch, D. (2007). *The Social Reintegration of Offenders and Crime Prevention*. Ottawa, Ontario, Canada: National Crime Prevention Centre. Retrieved May 14, 2021, from <https://www.publicsafety.gc.ca/cnt/rsrscs/pblctns/scl-rntgrtn/scl-rntgrtn-eng.pdf>
- Growns, B., Kinner, S. A., Conroy, E., Baldry, E., & Larney, S. (2018). A systematic review of supported accommodation programs for people released from custody. *International Journal of Offender Therapy and Comparative Criminology*, 62(8), 2174-2194.
- Hale, R. (2020). Good intentions: Women's narratives of post-release anticipatory desistance in the context of historical and contemporary disadvantage and trauma. *Feminist Criminology*, 15(5) 519 –544.
- Hamilton, Z. K., & Campbell, C. M. (2014). Uncommonly observed: The impact of New Jersey's halfway house system. *Criminal Justice and Behavior*, 41(11), 1354-1375.
- Hannah-Moffat, K. (2000). Prisons that empower. *British Journal of Criminology*, 40(3), 510-531.
- Hannah-Moffat, K. (2001). *Punishment in disguise: Penal governance and federal imprisonment of women in Canada*. University of Toronto Press.
- Hannah-Moffat, K., & Innocente, N. (2013). Canadian women exiting prison. In B. Carlton, & M. Segrave, (Eds.) *Women exiting prison: Critical essays on gender, post-release support and survival* (pp 77-97). Routledge.
- Hannah-Moffat, K. & Shaw, M., (Eds.) (2000). *An ideal prison? Critical essays on women's imprisonment in Canada*. Fernwood Publishing.
- Hannem, & Bruckert. (2012). *Stigma Revisited : Implications of the Mark*. University of Ottawa Press.

- Haraway, D. (1988). Situated knowledges: The science question in feminism and the privilege of partial perspective. *Feminist Studies*, 14(3), 575-599.
- Harding, D. J. (2003). Jean Valjean's dilemma: The management of ex-convict identity in the search for employment. *Deviant Behavior*, 24(6), 571-595.
- Harding, D. J., Morenoff, J. D., & Wyse, J. J. (2019). *On the outside: Prisoner reentry and reintegration*. University of Chicago Press.
- Harding, S. (2004). A socially relevant philosophy of science? Resources from standpoint theory's controversiality. *Hypatia*, 19(1), 25-47.
- Harding, S. (1992). Rethinking standpoint epistemology: What is "strong objectivity?" *The Centennial Review*, 36(3), 437-470.
- Hart, E. L. (2017). Women prisoners and the drive for desistance: capital and responsabilization as a barrier to change. *Women & Criminal Justice*, 27(3), 151-169.
- Hayman, B., Wilkes, L., & Jackson, D. (2012). Journaling: Identification of challenges and reflection on strategies. *Nurse Researcher*, 19(3), 27-31.
- Hedderman, C., Gunby, C., & Shelton, N. (2011). What women want: The importance of qualitative approaches in evaluating work with women offenders. *Criminology & Criminal Justice*, 11(1), 3-19.
- Heidemann, G., Cederbaum, J. A., Martinez, S., & LeBel, T. P. (2016). Wounded healers: How formerly incarcerated women help themselves by helping others. *Punishment & Society*, 18(1), 3-26.

- Helmus, L. M., & Ternes, M. (2017). Temporary absences from prison in Canada reduce unemployment and reoffending: Evidence for dosage effects from an exploratory study. *Psychology, Public Policy, and Law*, 23(1), 23.
- Henderson, D. J. (1998). Drug Abuse and Incarcerated Women: A Research Review. *Journal of Substance Abuse Treatment*, 15(6), 579-587
- Hesse-Biber, S. N. (2013). *Handbook of feminist research: Theory and praxis*. Sage.
- Hesse-Biber, S., & Leavy, P. (2007). *Feminist research practise*. Sage.
- Hidalgo, M. A., Ehrensaft, D., Tishelman, A. C., Clark, L. F., Garofalo, R., Rosenthal, S. M., ... & Olson, J. (2013). The Gender affirmative model. *Human Development*, 56(5), 285-290.
- Hodkinson, P. (2005). 'Insider research' in the study of youth cultures. *Journal of youth studies*, 8(2), 131-149.
- hooks, b. (2000). *Feminist theory: From margin to center*. South End Press.
- Hough, M., & Roberts, J. (2005). *Understanding public attitudes to criminal justice (Crime and justice)*. McGraw-Hill Education.
- Hu, C., Jurgutis, J., Edwards, D., O'Shea, T., Regenstreif, L., Bodkin, C., ... & Kouyoumdjian, F. G. (2020). "When you first walk out the gates... where do [you] go?": Barriers and opportunities to achieving continuity of health care at the time of release from a provincial jail in Ontario. *PloS one*, 15(4).
- Jenness, V., & Fenstermaker, S. (2014). Agnes goes to prison: Gender authenticity, transgender inmates in prisons for men, and pursuit of "the real deal." *Gender & Society*, 28(1), 5-31.

- Jesso, M. (2018). *Newfoundland and Labrador Correctional and Community Services: Deaths in Custody Review*. St. John's: Department of Justice. Retrieved May 14, 2021, from <https://www.gov.nl.ca/jps/files/publications-pdf-death-custody-review.pdf>
- John Howard Society of Alberta (2001). *Halfway Houses*. Retrieved May 14, 2021, from <http://www.johnhoward.ab.ca/pub/halfway.htm>
- John Howard Society of Newfoundland and Labrador. (2021). *Westbridge House*. Retrieved May 14, 2021, from <http://johnhowardnl.ca/service/west-bridge-house/>
- Johnstone, M. J. (2001). Stigma, social justice and the rights of the mentally ill: Challenging the status quo. *Australian and New Zealand Journal of Mental Health Nursing*, 10(4), 200-209.
- Jones, R. M., Patel, K., & Simpson, A. I. (2019). Assessment of need for inpatient treatment for mental disorder among female prisoners: a cross-sectional study of provincially detained women in Ontario. *BMC psychiatry*, 19(1), 1-8.
- Justice and Public Safety, nd. *Community Corrections*. Retrieved May 14, 2021, from, <https://www.gov.nl.ca/jps/faq/corrections/>
- Kendall, M (2020). *Hood Feminism: Notes from the women that feminism forgot*. Viking Press.
- Kilty, J. (2012). 'It's like they don't want you to get better': Psy control of women in the carceral context. *Feminism & Psychology*, 22(2), 162-182.
- King, T. (2008). The art of indigenous knowledge. In Knowles & Cole (Eds.) *Handbook of the arts in qualitative research*, 13-25. Sage.

- Klassen, P. (2012). *External Peer Review of Psychiatric Services in Newfoundland Corrections*. Retrieved May 14, 2021, from, http://www.justice.gov.nl.ca/just/publications/NLCorrections_Review_Klassen.pdf
- Knaak, S., & Sukhera, J. (2021). *Real-world examples of approaches that address mental illness- and substance use-related structural stigma in Canada's health-care system*. Ottawa, Canada: Mental Health Commission of Canada.
- Krueger, J. (1996). Personal beliefs and cultural stereotypes about racial characteristics. *Journal of Personality and Social Psychology*, 71(3), 536.
- Lander, I. (2015). Gender, ageing and drug use: A post-structural approach to the life course. *British Journal of Criminology*, 55(2), 270-285.
- Langner, N., Barton, J., McDonagh, D., Noël, C., & Bouchard, F. (2003). Rates of prescribed medication use by women in prison. In *Forum on Corrections Research* (Vol. 14, No. 2, pp. 10-14). Correctional Service of Canada. Retrieved December 1, 2021, from file:///C:/Users/t57ae/AppData/Local/Temp/142c_e.pdf.
- Laub, J. H., Nagin, D. S., & Sampson, R. J. (1998). Trajectories of change in criminal offending: Good marriages and the desistance process. *American Sociological Review*, 63(2), 225-238.
- Laub, J. H., & Sampson, R. J. (2001). Understanding desistance from crime. *Crime and Justice*, 28, 1-69.
- Latessa E & Allen H.E. (1995). Halfway houses and parole: A national assessment. In J. McCord and J.H. Laub (Eds.) *Contemporary masters in criminology. The Plenum series in crime and justice* (pp 303-317). Springer.

- LeBel, T. P. (2008). Perceptions of and responses to stigma. *Sociology Compass*, 2(2), 409-432.
- LeBel, T. P. (2012a). Invisible stripes? Formerly incarcerated persons' perceptions of stigma. *Deviant Behavior*, 33(2), 89-107.
- LeBel, T. P. (2012b). If one doesn't get you, another one will: Formerly incarcerated persons' perceptions of discrimination. *The Prison Journal*, 92(1), 63-87.
- Leverentz, A. M. (2006). The love of a good man? Romantic relationships as a source of support or hindrance for female ex-offenders. *Journal of Research in Crime and Delinquency*, 43(4), 459-488.
- Leverentz, A. M. (2014). *The ex-prisoner's dilemma: How women negotiate competing narratives of reentry and desistance*. Rutgers University Press.
- Lewis, J., Maticka-Tyndale, E., Shaver, F., & Schramm, H. (2005). Managing risk and safety on the job: The experiences of Canadian sex workers. *Journal of Psychology & Human Sexuality*, 17(1/2), 147-167.
- Link, B. G., & Phelan, J. C. (1999). The labeling theory of mental disorder (II): The consequences of labeling. In A. V. Horwitz & T. L. Scheid (Eds.), *A handbook for the study of mental health: Social contexts, theories, and systems* (pp. 361-376). Cambridge University Press.
- Link, B. G., & Phelan, J. C. (2001). Conceptualizing stigma. *Annual Review of Sociology*, 27(1), 363-385.
- Liston-Heyes, C., & Neokleous, E. (2000). Gender-based pricing in the hairdressing industry. *Journal of Consumer Policy*, 23(2), 107-126.

- Living in Community. (2020). *Community Dialogues Report*. City of St. John's. Retrieved May 14, 2021, from, <http://happycity.ca/2021/01/04/living-in-community-st-johns-releases-new-report/>
- Livingston, J. D. (2021). *A framework for assessing structural stigma in health-care: Contexts for people with mental health and substance use issues*—Ottawa, Canada: Mental Health Commission of Canada.
- Loucks, N. (2004). Women in prison. In G. McIvor (Ed). *Women who offend* (pp. 142-158). Jessica Kingsley Publisher.
- MacMaster, S. (2004). Harm reduction: A new perspective on substance abuse services. *Social Work*, 49(3), 356-363.
- Maidment, M. R. (2006). *Doing time on the outside: Deconstructing the benevolent community*. University of Toronto Press.
- Maier, K. (2020a). Canada's 'open prisons': Hybridisation and the role of halfway houses in penal scholarship and practice. *The Howard Journal of Crime and Justice*, 59(4), 381-399.
- Maier, K. (2020b). Intermediary workers: Narratives of supervision and support work within the halfway house setting. *Probation Journal*, 67(4), 410-426.
- Malakieh, J, (2018), *Adult and youth correctional statistics in Canada, 2016/2017*, Ottawa: Canadian Centre for Justice Statistics,
- Malakieh, J. (2019). *Adult and youth correctional statistics in Canada, 2017/2018*. Statistics Canada. Retrieved May 14, 2021, from <https://www150.statcan.gc.ca/n1/en/pub/85-002-x/2019001/article/00010-eng.pdf?st=KOu7hwIl>

Malakieh, J. (2020). Adult and youth correctional statistics in Canada, 2018/2019. Statistics Canada.

Retrieved August 15, 2021, from <https://www150.statcan.gc.ca/n1/pub/85-002->

[x/2020001/article/00016-eng.htm](https://www150.statcan.gc.ca/n1/pub/85-002-x/2020001/article/00016-eng.htm)

Marques, O., & Monchalín, L. (2020). The mass incarceration of Indigenous women in Canada: A colonial tactic of control and assimilation. In L. George, A. Norris, A. Deckert, & J. Tauri (Eds.). *Neo-colonial injustice and the mass imprisonment of Indigenous women* (pp. 79-102). Palgrave Macmillan.

Marsh, B. (2011). Narrating Desistance: Identity Change and the 12-Step Script. *Irish Probation Journal*, 8, 49-68.

Martel, J., & Brassard, R. (2008). Painting the prison 'red': Constructing and experiencing Aboriginal identities in prison. *British Journal of Social Work*. (38), 340-361.

Maruna, S. (2001). *Making good: How ex-convicts reform and rebuild their lives*. American Psychological Association.

Maruna, S. (2011). Reentry as a rite of passage. *Punishment & Society*, 13(1), 3-28.

Maruna, S., LeBel, T., & Lanier, C. (2004). Generativity behind bars: some 'redemptive truth' about prison society. In E. de St. Aubin, D. McAdams, & T. Kim, *The generative society* (pp. 131-152). American Psychological Association.

Maruna, S., & Roy, K. (2007). Amputation or reconstruction? Notes on the concept of "knifing off" and desistance from crime. *Journal of Contemporary Criminal Justice*, 23(1), 104-124.

Matheson, F; Brazil, A; Doherty S & Forrester, P. (2015). A call for help: Women offenders' reflections on trauma care. *Women & Criminal Justice*, 25(4), 241-255.

- May, V. M. (2015). *Pursuing intersectionality, unsettling dominant imaginaries*. Routledge.
- McAleese, S., & Kilty, J. M. (2019). Stories matter: Reaffirming the value of qualitative research. *The Qualitative Report*, 24(4), 822-845.
- McCall, L. (2005). The complexity of intersectionality. *Signs: Journal of Women in Culture and Society*, 30 (3), 1771-1800.
- McCorkel, J., & Myers, A. (2003). What difference does difference make? Position and privilege in the field. *Qualitative Sociology*, 26(2), 199-231.
- McGrath, A. J. (2014). The subjective impact of contact with the criminal justice system: The role of gender and stigmatization. *Crime & Delinquency*, 60(6), 884-908.
- McIvor, G., Murray, C., & Jamieson, J. (2004). Desistance from crime: Is it different for women and girls. In S. Maruna & R. Immarigeon *After crime and punishment: Pathways to offender reintegration* (pp. 181-197). Willan.
- McKendy, L., & Ricciardelli, R. (2020). The pains of release: Federally-sentenced women's experiences on parole. *European Journal of Probation*, 1-20.
- McLeod, K., Korchinski, M., Young, P., Milkovich, T., Hemmingway, C., DeGroot, M., . . . Elwood Martin, R. (2020). Supporting women living prison through peer health mentoring: A participatory health study. *CMJA Open*, 8(1), 1-8.
- McNeill, F., & Maruna, S. (2007). Giving up and giving back: Desistance, generativity and social work with offenders. In G. McIvor and P. Raynor, (Eds.) *Developments in social work with offenders* (pp 224-339). Jessica Kingsley Publishers.

- Merrill, E., & Frigon, S. (2015). Performative criminology and the “state of play” for theatre with criminalized women. *Societies*, 5(2), 295-313.
- Micucci, A., & Monster, M. (2004). It's about time to hear their stories: Impediments to rehabilitation at a Canadian provincial correctional facility for women. *Journal of Criminal Justice*, 32(6), 515-530.
- Michalsen, V. (2019). A cell of one's own? Incarceration and other turning points in women's journeys to desistance. *International Journal of Offender Therapy and Comparative Criminology*, 63(6), 940-959.
- Miller, T. & Bell, L. (2012). Consenting to what? Issues of access, gate-keeping and informed consent. In T. Miller, M. Birch, M. Mauthner, & J. Jessop (Eds.). *Ethics in qualitative research*. (pp. 53-69). Sage.
- Miller, J., & Mullins, C. (2006). The status of feminist theories in criminology. In Miller, J.; Cullen, F. T.; Wright, J.P. & Blevins, K. R. (Eds.), *Taking stock: The status of criminological theory*. (pp. 217-250). Transaction Publishers.
- Miller, N. A., & Najavits, L. M. (2012). Creating trauma-informed correctional care: A balance of goals and environment. *European Journal of Psychotraumatology*, 3(1), 17-46.
- Mitchell, J. (2004). Procreative mothers (sexual difference) and child-free sisters (gender): feminism and fertility. *The European Journal of Women's Studies*, 11(4), 415-426.
- Mohanty, C. T. (1988). Under Western eyes: Feminist scholarship and colonial discourses. *Feminist Review*, 30, 61-88.

- Monster, M., & Micucci, A. (2005). Meeting rehabilitative needs at a Canadian women's correctional centre. *The Prison Journal*, 85(2), 168-185.
- Monture-Angus, P. (2000). Aboriginal women and correctional practice: Reflections on the Task Force on Federally Sentenced Women. In M. Shaw & K. Hannah-Moffat (Eds.). *An ideal prison?: Critical essays on women's imprisonment in Canada*. (pp. 52-60) Fernwood Publishing.
- Moore, K. E., Tangney, J. P., & Stuewig, J. B. (2016). The self-stigma process in criminal offenders. *Stigma and Health*, 1(3), 206-224.
- Morash, M., Bynum, T. S., & Koons-Witt, B. (1998). *Women offenders: Programming needs and promising approaches*. Washington, DC: US Department of Justice, Office of Justice Programs, National Institute of Justice. Retrieved May 14, 2021, from, <https://www.ojp.gov/pdffiles/171668.pdf>
- Morash, M., Stone, R., Hoskins, K., Kashy, D. A., & Cobbina, J. E. (2019). Narrative identity development and desistance from illegal behavior among substance-using female offenders: Implications for narrative therapy and creating opportunity. *Sex Roles*, 1-21.
- Moser, A., Matheson, F., Grant, B., & Weekes, J. (2015). Treating addictions in correctional settings. In M. Herie, W. Skinner, G. Maté, (Eds.), *Fundamentals of Addiction*. (pp. 461-479). Centre for Addiction and Mental Health.
- Mullaly, R. (2011). 'This has been a huge mistake.' *The Telegram*. Retrieved May 24, 2021, from, <https://www.saltwire.com/newfoundland-labrador/news/local/this-has-been-a-huge-mistake-125881/>.

- Mullaly, R. (2017). Smuggling drugs inside Kinder Surprise to HMP inmate lands woman two-year jail term. *The Telegram*. Retrieved May 24, 2021, from, <https://www.saltwire.com/newfoundland-labrador/news/local/smuggling-drugs-inside-kinder-surprise-to-hmp-inmate-lands-woman-two-year-jail-term-129942/>
- Mulvey E. (1994) Assessing the evidence of a link between mental illness and violence *Psychiatric Services*, 45(7), 663-668
- Nelson-Zlupko, L., Dore, M. M., Kauffman, E., & Kaltenbach, K. (1996). Women in recovery: Their perceptions of treatment effectiveness. *Journal of Substance Abuse Treatment*, 13(1), 51-59.
- Nixon, S. (2020). ‘Giving back and getting on with my life’: Peer mentoring, desistance and recovery of ex-offenders. *Probation Journal*, 67(1), 47-64.
- Nolan, A. M., & Stewart, L. A. (2017). Chronic health conditions among incoming Canadian federally sentenced women. *Journal of Correctional Health Care*, 23(1), 93-103.
- Norris, E., Kim, M., Osei, B., Fung, K., & Kouyoumdjian, F. G. (2021). Health status of females who experience incarceration: A population-based retrospective cohort study. *Journal of Women’s Health*.
- Nugent, B., & Loucks, N. (2011). The arts and prisoners: experiences of creative rehabilitation. *The Howard Journal of Criminal Justice*, 50(4), 356-370.
- Nugent, B., & Schinkel, M. (2016). The pains of desistance. *Criminology and Criminal Justice*, 16(5) 568-584.
- O’Brien, P. (2001). *Making it in the “free world:” Women in transition from prison*. State University of New York Press.

- Olesen, V. (2005). Early millennial feminist qualitative research: Challenges and contours. In N. Denzin & Y. Lincoln, (Eds.), *The Sage handbook of qualitative research*, (3rd Ed. pp 235-278.) Sage.
- Olesen, V. (2007). Feminist qualitative research and grounded theory: Complexities, criticisms, and opportunities. In A. Bryant and K. Charmaz (Eds.), *The Sage handbook of grounded theory*, (pp. 417-435.) Sage.
- Opsal, T. (2012). 'Livin' on the Straights': Identity, Desistance, and Work among Women Post-Incarceration. *Sociological Inquiry*, 82(3), 378-403.
- Overton, S. L., & Medina, S. L. (2008). The stigma of mental illness. *Journal of Counseling & Development*, 86(2), 143-151.
- Owen, B. A. (1998). *In the mix: Struggle and survival in a women's prison*. SUNY Press.
- Pager, D., & Western, B. (2009). Investigating prisoner reentry: The impact of conviction status on the employment prospects of young men. Washington, DC National Institute of Justice. Retrieved May 14, 2021, from, <https://www.ojp.gov/pdffiles1/nij/grants/228584.pdf>
- Parole Board of Canada. (2021, August 17). Parole Board of Canada. Government of Canada. Retrieved May 14, 2021, from, <https://www.canada.ca/en/parole-board.html>
- Paternoster, R., & Bushway, S. (2009). Desistance and the "feared self": Toward an identity theory of criminal desistance. *The Journal of Criminal Law and Criminology*, 1103-1156.
- Pearson, M., Brand, S. L., Quinn, C., Shaw, J., Maguire, M., Michie, S., S. Briscoe, C. Lennox, A. Stirzaker, T. Kirkpatrick & Byng, R. (2015). Using realist review to inform intervention development: methodological illustration and conceptual platform for collaborative care in offender mental health. *Implementation Science*, 10(1), 1-12.

- Phelps, J. A., & Diamond, B. (1990). *Creating choices: The report of the task force on federally sentenced women*. Ottawa: Correctional Service Canada.
- Pink, S. (2012). *Advances in visual methodology*. Sage Publications.
- Pogorzelski, W., Wolff, N., Pan, K. Y., & Blitz, C. L. (2005). Behavioral health problems, ex-offender reentry policies, and the "Second Chance Act." *American Journal of Public Health*, 95(10), 1718-1724.
- Pollack, S. (2005). Taming the shrew: Regulating prisoners through women-centered mental health programming. *Critical Criminology*, 13(1), 71-87.
- Pollack, S. (2007). "I'm just not good in relationships " Victimization discourses and the gendered regulation of criminalized women. *Feminist Criminology*, 2(2), 158-174.
- Pollack, S. (2009). "Circuits of exclusion": Criminalized women's negotiation of community. *Canadian Journal of Community Mental Health*, 28(1), 83-95.
- Pollack, S., & Brezina, K. (2007). Negotiating contradictions: Sexual abuse counseling with imprisoned women. *Women & Therapy*, 29(3-4), 117-133.
- Radosh, P. F. (2002). Reflections on women's crime and mothers in prison: A peacemaking approach. *Crime & Delinquency*, 48(2), 300-315.
- Ramazanoglu, C., & Holland, J. (2002). *Feminist methodology: Challenges and choices*. Sage
- Reiter, K. (2014). Making windows in walls: Strategies for prison research. *Qualitative Inquiry*, 20(4), 417-428.

- Ricciardelli, R. (2014). *Surviving incarceration: Inside Canadian prisons*. Wilfrid Laurier University Press.
- Ricciardelli, R. (2015). Establishing and asserting masculinity in Canadian penitentiaries. *Journal of Gender Studies*, 24(2), 170-191.
- Ricciardelli, R., Clow, K. A., & White, P. (2010). Investigating hegemonic masculinity: Portrayals of masculinity in men's lifestyle magazines. *Sex Roles*, 63(1-2), 64-78.
- Ricciardelli, R., & McKendy, L. (2021). A Qualitative Analysis of Parole Suspensions among Women on Parole. *Canadian Journal of Criminology and Criminal Justice*, 63(1), 89-105.
- Ricciardelli, R., & Mooney, T. (2018). The decision to disclose: Employment after prison. *Journal of Offender Rehabilitation*, 57(6), 343-366.
- Ricciardelli, R., & Moir, M. (2013). Stigmatized among the stigmatized: Sex offenders in Canadian penitentiaries. *Canadian Journal of Criminology and Criminal Justice*, 55(3), 353-386.
- Ricciardelli, R., & Peters, A. M. (Eds.). (2017). *After Prison: Navigating employment and reintegration*. Wilfrid Laurier University Press.
- Ricciardelli, R., Sheppard, A & Mooney, T. (2019). Employment reentry: Unpacking the experiences and recommendations of former federal Canadian prisoners. *Advancing Corrections: Journal of the International Corrections and Prisons Association*. Edition 7, pp. 97-112.
- Ricciardelli, R., & Spencer, D. (2014). Exposing sex offenders: Precarity, abjection and violence in the Canadian federal prison system. *British Journal of Criminology*, 54(3), 428-448.

- Rice, C. (2009). Imagining the other? Ethical challenges of researching and writing women's embodied lives. *Feminism and Psychology*, 19 (2) 245-266.
- Rice, C., Harrison, E., & Friedman, M. (2019). Doing justice to intersectionality in research. *Cultural Studies ↔ Critical Methodologies*, 19(6), 409-420.
- Richardson, L. (2000). Writing: A method of inquiry in N. Denzin, and Y. Lincoln, Y. *The Sage handbook of qualitative research* (pp. 923-948). Sage.
- Richie, B. E. (2001). Challenges incarcerated women face as they return to their communities: Findings from life history interviews. *Crime & Delinquency*, 47(3), 368-389.
- Rodermond, E., Kruttschnitt, C., Slotboom, A.-M., & Bijleveld, C. C. (2016). Female desistance: A review of the literature. *European Journal of Criminology*, 13(1), 3-28.
- Rog, D. (2004). The Evidence on Supported Housing. *Psychiatric Rehabilitation Journal*, 27(4), 334–344.
- Ross, R. J. (2013). Bread and roses: women workers and the struggle for dignity and respect. *WorkingUSA*, 16(1), 59-68.
- Rueve, M. E., & Welton, R. S. (2008). Violence and mental illness. *Psychiatry*, 5(5), 34.
- Saldaña, J. (2015). *The coding manual for qualitative researchers*. Sage.
- Sampson, R.J. & Laub, J. H. (1993). Turning points in the life course: Why change matters to the study of crime. *Criminology*, 31(3), 301-325.

- Sanders, T. (2016). Inevitably violent? Dynamics of space, governance, and stigma in understanding violence against sex workers. In *Special issue: Problematizing prostitution: Critical research and scholarship*. Emerald Group Publishing Limited.
- Scheid, T. L. (1999). Employment of individuals with mental disabilities: Business response to the ADA's challenge. *Behavioral Sciences & the Law*, 17(1), 73-91.
- Schmitt, M. T., Branscombe, N. R., Kobrynowicz, D., & Owen, S. (2002). Perceiving discrimination against one's gender group has different implications for well-being in women and men. *Personality and Social Psychology Bulletin*, 28(2), 197-210.
- Schnittker, J., & John, A. (2007). Enduring stigma: the long-term effects of incarceration on health. *Journal of health and social behavior*, 48(2), 115-130.
- Schroeder, R. D., Giordano, P. C., & Cernkovich, S. A. (2007). Drug use and desistance processes. *Criminology*, 45(1), 191-222.
- Sered, S. S. (2020). Beyond Recidivism and Desistance. *Feminist Criminology*, 16(2), 165–190.
<https://doi.org/10.1177/1557085120951849>
- Severance, T. A. (2005). 'You know who you can go to': Cooperation and exchange between incarcerated women". *The Prison Journal*, 85(3), 343–367.
- Shantz, L., Kilty, J. M., & Frigon, S. (2009). Echoes of imprisonment: Women's experiences of "Successful (Re) integration." *Canadian Journal of Law & Society/La Revue Canadienne Droit et Société*, 24(1), 85-106.

- Shaver, F. M., Lewis, J., & Maticka-Tyndale, E. (2011). Rising to the challenge: Addressing the concerns of people working in the sex industry. *Canadian Review of Sociology/Revue Canadienne de sociologie*, 48(1), 47-65.
- Sheehan, R., McIvor, G., & Trotter, C., (Eds.). (2007) *What works with women offenders*. Willan Publishing.
- Sheppard, A. (2016). *Making up our own moves: Exploring, movement, dance and experiments of the body at the Newfoundland and Labrador Correctional Centre for Women* (Master's Thesis, Memorial University).
- Sheppard A. & Ricciardelli, R. (2016). Let's Dance: Exploring Dance Programs in Prisons in the Context of Reentry. *Journal of Community Corrections*, 25 (4), pp.9-15.
- Sheppard, A., & Ricciardelli, R. (2020). Employment after prison: Navigating conditions of precarity and stigma. *European Journal of Probation*, 12(1), 34-52.
- Sieter, R. P., & Kadela, K. R. (2003). Prisoner reentry: What works, what does not, and what is promising. *Crime & Delinquency*, 49(3), 360-388.
- Smith, D. (1987). *The everyday world as problematic: A feminist sociology* Northeastern University Press.
- Smith, D. E. (2005). *Institutional ethnography: A sociology for people*. Rowman Altamira.
- Social Work Services Inspectorate for Scotland. (1998). *Women Offenders: A Safer Way: a Review of Community Disposals and the Use of Custody for Women Offenders in Scotland*. Scottish Office. Retrieved May 15, 2021, from <http://www.archive.official-documents.co.uk/document/scotoff/women/women.htm>

- Stanton, A. E., Kako, P., & Sawin, K. J. (2016). Mental health issues of women after release from jail and prison: A systematic review. *Issues in Mental Health Nursing*, 37(5), 299-331.
- STRIDE. (nd). Retrieved May 14, 2021, from <https://cjiwr.com/stride/>
- Stella's Circle (2021). Retrieved May 14, 2021, from <https://stellascircle.ca/>
- Stewart, L. A., Nolan, A., Sapers, J., Power, J., Panaro, L., & Smith, J. (2015). Chronic health conditions reported by male inmates newly admitted to Canadian federal penitentiaries. *CMAJ Open*, 3(1), E97.
- Stuart, H. (2004). Stigma and work. *Healthcare Papers*, 5(2), 100-111.
- Stuart, H. (2006). Mental illness and employment discrimination. *Current Opinion in Psychiatry*, 19(5), 522-526.
- Sykes, G. M., & Matza, D. (1957). Techniques of neutralization: A theory of delinquency. *American Sociological Review*, 22(6), 664-670.
- Szeto, A. C., & Dobson, K. S. (2010). Reducing the stigma of mental disorders at work: a review of current workplace anti-stigma intervention programs. *Applied and Preventive Psychology*, 14(1-4), 41-56.
- Tamburello, A. C., Kathpal, A., & Reeves, R. (2017). Characteristics of inmates who misuse prescription medication. *Journal of Correctional Health Care*, 23(4), 449-458.
- Tanner, A. (1998). The aboriginal peoples of Newfoundland and Labrador and confederation. *Newfoundland and Labrador Studies*, 14(2), 238-252.

- Trammell, R. (2009). Values, rules and keeping the peace: How men describe order and the inmate code in California prisons. *Behavior Deviant*, 30(8), 746–350.
- Travis, J (2002) Invisible punishment: An instrument of social exclusion. In Mauer, M & Chesney-Lind, M (eds.). *Invisible Punishment: The Collateral Consequences of Mass Imprisonment*. New Press: 15–36.
- Travis, J. (2005). *But they all come back: Facing the challenges of prisoner reentry*. The Urban Institute.
- Tufts, J. (2000). Public attitudes towards the criminal justice system. *Juristat: Canadian Centre for Justice Statistics*, 12(20).
- Turnbull, S., & Hannah-Moffat, K. (2009). Under these conditions: Gender, parole and the governance of reintegration. *The British Journal of Criminology*, 49(4), 532-551.
- Turney, K., Lee, H., & Comfort, M. (2013). Discrimination and psychological distress among recently released male prisoners. *American Journal of Men's Health*, 7(6), 482-493.
- Uggen, C., & Kruttschnitt, C. (1998). Crime in the breaking: Gender differences in desistance. *Law & Society Review*, 32, 339.
- Välimäki, T., Vehviläinen-Julkunen, K., & Pietilä, A. M. (2007). Diaries as research data in a study on family caregivers of people with Alzheimer's disease: methodological issues. *Journal of Advanced Nursing*, 59(1), 68-76.
- Van Olphen, J., Eliason, M. J., Freudenberg, N., & Barnes, M. (2009). Nowhere to go: How stigma limits the options of female drug users after release from jail. *Substance Abuse Treatment, Prevention, and Policy*, 4(1), 10.

- Van Roeyen, S., Anderson, S., Vanderplasschen, W., Colman, C., & Vander Laenen, F. (2017).
Desistance in drug-using offenders: A narrative review. *European Journal of Criminology*,
14(5), 606-625.
- van Wormer, K. (2010). *Working with female offenders: A gender-sensitive approach*. John Wiley and
Sons.
- Visher, C. A., & Kachnowski, V. (2007). Finding work on the outside: Results from the “returning
home” project in Chicago. In Bushway, S. D., Stoll, M. A., & Weiman, D. (Eds.). *Barriers to
reentry?: The labor market for released prisoners in post-industrial America*. (pp 80-114).
Russell Sage Foundation.
- Walsh, E., Moran, P., Scott, C., McKenzie, K., Burns, T., Creed, F., ... & Fahy, T. (2003). Prevalence of
violent victimisation in severe mental illness. *The British Journal of Psychiatry*, 183(3), 233-238.
- Wakeman, S. (2014). Fieldwork, biography and emotion: Doing criminological autoethnography. *British
Journal of Criminology*, 54(5), 705-721.
- Ward, T. (2002). Good lives and the rehabilitation of offenders. *Aggression and Violent Behavior*, 7(5),
513-528.
- Ward, T., & Maruna, S. (2007). *Rehabilitation: Beyond the risk paradigm*. Routledge.
- Watt, D. (2007). On Becoming a Qualitative Researcher: The Value of Reflexivity. *Qualitative Report*,
12(1), 82-101.
- West, M. L., Vayshenker, B., Rotter, M., & Yanos, P. T. (2015). The influence of mental illness and
criminality self-stigmas and racial self-concept on outcomes in a forensic psychiatric sample.
Psychiatric Rehabilitation Journal, 38(2), 150.

- Weaver, B. (2019). Understanding desistance: A critical review of theories of desistance. *Psychology, crime & law*, 25(6), 641-658
- Weaver, A., & Weaver, B. (2013). Autobiography, empirical research and critical theory in desistance: A view from the inside out. *Probation Journal*, 60(3), 259-277.
- Wilson, R. J., Cortoni, F., & McWhinnie, A. J. (2009). Circles of Support & Accountability: A Canadian national replication of outcome findings. *Sexual Abuse*, 21(4), 412-430.
- Wilson, R., McWhinnie, A., Picheca, J., Prinzo, M., & Cortoni, F. (2007). Circles of Support and Accountability: Engaging community volunteers in the management of high-risk sexual offenders. *Howard Journal of Criminal Justice*, 46(1), 1-15.
- Wincup, E. (2019). Living 'good lives': Using mentoring to support desistance and recovery. *Addiction Research and Theory*, 27(1), 37-36.
- Winnick, T. A., & Bodkin, M. (2008). Anticipated stigma and stigma management among those to be labeled "ex-con." *Deviant Behavior*, 29(4), 295-333.
- Wong, J. S., Bouchard, J., Gushue, K., & Lee, C. (2019). Halfway out: An examination of the effects of halfway houses on criminal recidivism. *International Journal of Offender Therapy and Comparative Criminology*, 63(7), 1018-1037.
- Wooditch, A., Tang, L. L., & Taxman, F. S. (2014). Which criminogenic need changes are most important in promoting desistance from crime and substance use?. *Criminal justice and behavior*, 41(3), 276-299.
- World Health Organization. (2013). ROADMAP. Strengthening people-centred health systems in the WHO European Region: A Framework for Action towards Coordinated/Integrated Health

Services Delivery (CIHSD). Retrieved May 15, 2021, from,
<https://apps.who.int/iris/bitstream/handle/10665/108628/e96929.pdf>

Young, I. (1994), Punishment, Treatment, Empowerment: Three Approaches to Policy for Pregnant Addicts, *Feminist Studies*, 20/1: 33–57.

Young, M. M., De Moor, C., Kent, P., Stockwell, T., Sherk, A., Zhao, J., ... & Maloney-Hall, B. (2021). Attributable fractions for substance use in relation to crime. *Addiction*.

Yuen, F. (2011). “I’ve never been so free in all my life:” Healing through Aboriginal ceremonies in prison. *Leisure/Loisir*, 35:2, 97-113.

Zendo, S., Donelle, L., & Magalhaes, L. (2021). Health access of women in provincial correctional institutions. *Social Work in Public Health*, 1-14.

Zinger, I. (2014). *Reflections on conditions of confinement for federally sentenced women*. Ottawa: Office of Correctional Investigator. Retrieved May 15, 2021, from <https://www.ocibec.gc.ca/cnt/comm/presentations/presentations20140314-15-eng.aspx>

Zinger, I. (2017). *Annual Report: Office of the Correctional Investigator*. Ottawa: The Correctional Investigator Canada.

Appendices

Appendix A

Interview guide for formerly incarcerated women

Hi, I'm Amy, and I'm doing research as a part of my doctoral studies at Memorial University. You might know me because I work with Stella's Circle as a social worker. I'm not here today as a social worker, so if there is anything that you need help with, I'll take note of that, and when I am working as a social worker, I can help. I am here as a researcher, which means I'm interested in hearing about your experiences and what you have to say about your life. The first thing I'm going to do is review a consent form with you which will explain a little more about my research and what I'm asking you to do.

Any questions?

Review consent form with participant

Any questions before we start?

I am going to start the audio recorder. Is that ok? I'm also going to be taking notes. Is that ok? There is some paper here if you want to write or draw or colour.

These are interview prompts. The interview will be semi-structured and will be more of a conversational style. These questions will provide a starting point, but I will probe into answers by asking for details, or for the participant to share more. Language will change to reflect the words used by the interview participant,

1. Can you tell me your name, age and where you are from?
2. Can you tell me a little about yourself?

3. How long were you at NLCCW/HMP/Nova?
4. How many times have you been in prison?
5. What happened when you were released? (Where did you go? What did you do? What was helpful?)
6. What did you do to occupy your time when you were in prison?
7. If additional services were offered in prison, would have been interested in participating in them?
8. What are your goals (e.g., work, family, friends, living) for the longer term (e.g., the next 2-5 years)?
9. I'm interested in understanding how people make changes when they leave prison. Think back to when you were in prison, was there anything you wanted to be different for you when you were released?
10. What did you need to make those changes?
11. Do you think that there are services for people with mental health and addictions issues? In prison? Or in the community?
12. Have you used any services?
13. Were these services helpful? What worked? What didn't work?
14. If you haven't used these services, why not?
15. What types of services would best meet your needs?
16. What do you want service providers to know? How could they provide better services to you?

17. Do you have any mental illness or addiction issues? (was that something someone told you? What do you think?)
18. What are some of the challenges that women in prison might have in getting the help that they need?
19. What are some of the challenges that women who have been in prison might have in getting help once they are released?
20. What would keep you from asking for help if you needed it?
21. Let's say that you were in charge, what would you put in place to make sure that women coming out of prison got the help that they needed?
22. Any final thing that you want to share?

During the interview, I will check in with the participant to see how they are doing and if they would like to continue the interview. I will remind them that they are welcome to stop at any time, and I will get rid of any information that they have shared. I will also remind them that I will still support them in my role as a social worker.

Interview guide for service providers

Hi, I'm Amy, and I'm doing research as a part of my doctoral studies at Memorial University. I work with Stella's Circle as a social worker, but today I want to talk to you as a part of my research studies. The first thing I'm going to do is review a consent form with you which will explain a little more about my research and what I'm asking you to do.

Any questions?

Review consent form with participant

Any questions before we start?

I am going to start the audio recorder. Is that ok? I'm also going to be taking notes. Is that ok?

These are interview prompts. The interview will be semi-structured and will be more of a conversational style. These questions will provide a starting point, but I will probe into answers by asking for details, or for the participant to share more. Language will change to reflect the words used by the interview participant,

23. Can you tell me the type of work you do?

24. Can you tell me a little about your background? Education, where else you may have worked,

25. Can you tell me about your organization? Who you serve. What programs and services you offer. How many people work here.

26. How long have you been working with criminalized women?

27. What programs/services do you offer to criminalized women?

28. What are the challenges in working with this population?

29. I'm interested in understanding how people make changes when they leave prison.
- What can you tell me about the process of release from prison? Where do women go? What services are available for them?
30. What kinds of changes do you think women in prison need to make?
31. What kinds of changes does the community need to make?
32. Do you think that there are services for people with mental health and addictions issues? In prison? Or in the community?
33. Have women reported to you that these services are helpful? What worked? What didn't work?
34. Why wouldn't women use some services?
35. Is there anything about women in prison that you would like to know more about?
36. What are some of the challenges that women in prison might have in getting the help that they need?
37. What are some of the challenges that women who have been in prison might have in getting help once they are released?
38. Let's say that you were in charge, what would you put in place to make sure that women coming out of prison got the help that they needed?
39. Any final thing that you want to share?

During the interview, I will check in with the participant to see how they are doing and if they would like to continue the interview. I will remind them that they are welcome to stop at any time, and I will get rid of any information that they have shared.

Appendix B: Informed consent forms

Informed Consent: interviews with formerly incarcerated women

Title: Planning for change: Women's desistance processes in a short-term provincial prison.

Researcher(s): Amy Sheppard. Faculty of Sociology, Memorial University of Newfoundland, amy.sheppard@mun.ca

Supervisor(s): Rose Ricciardelli, Ph.D., Professor & Coordinator for Criminology, Department of Sociology, Memorial University of Newfoundland | 230 Elizabeth Ave, St John's, NL A1C 5S7, r Ricciardell@mun.ca, 864-7446

You are invited to take part in a research project entitled "Planning for change: Women's desistance processes in a short-term provincial prison."

This form is part of the process of informed consent, It should give you the basic idea of what the research is about and what your participation will involve. It also describes your right to withdraw from the study. In order to decide whether you wish to participate in this research study, you should understand enough about its risks and benefits to be able to make an informed decision. This is the informed consent process. Take time to read this carefully and to understand the information given to you. Please contact the researcher, Amy Sheppard, if you have any questions about the study or would like more information before you consent.

It is entirely up to you to decide whether to take part in this research. If you choose not to take part in this research or if you decide to withdraw from the research once it has started, there will be no negative consequences for you, now or in the future.

Introduction:

I am a doctoral student in the Faculty of Sociology at Memorial University of Newfoundland,

As part of my Doctoral dissertation, I am conducting research under the supervision of Rose Ricciardelli, Ph.D., Professor & Coordinator for Criminology, Department of Sociology, Memorial University of Newfoundland,

Purpose of Study:

The purpose of the study is to understand how women in provincial prisons plan for changes once they leave prison. I want to understand what women in prison need to make changes and how they think that mental health and addiction will affect their abilities to make these changes when they return home. I am going to talk to women living in prison, women who have been in prison but are now living in the community and people who provide services to women in prison. This research will help us to understand how women living in a short-term prison environment might get the help that they need.

What You Will Do in this Study:

I am asking you to participate in an interview with me. I am going to ask questions about your mental health, any substance abuse issues and your criminal history. I will ask you what you want for your future. I am going to ask you about what kinds of things have helped you in the past and what you think will help in the future. You will be able to pass on any questions that you don't want to answer. I will ask you if I can audiotape our interviews. You can choose not to. I will ask you if I can take notes. You will also be asked if you would like to do your own writing or artwork to express how you feel. You will be allowed to see my notes at any time if you like,

If you decline to be taped or allow my note taking during the interview, I will still do reflexive note-taking after the interview. I will journal my thoughts and impressions of the interview after we are done speaking. Should you wish that no notes be taken at all, I advise that you decline participation in the research project,

Length of Time:

The interview will take about an hour,

Compensation:

You will receive \$20 for participation in the interview,

Withdrawal from the Study:

You can stop participation in this study during the interview, You tell me to stop, and we will stop the interview. Any data collected will be destroyed and not used in my research. That means that the audio recording will be erased and my notes will be shredded. I will check in with you after the interview to see if you are ok with me using the information you have told me during the interview.

You can stop participation in this study after the interview. You can inform me that you no longer want me to use your interview, If you do not want to tell me, you can tell (staff from Stella's Circle to be identified) and they will inform me that you no longer want me to use your interview, You will not be able to withdraw from participation after February 1, 2020, because I will be writing up my research paper after that time, If you withdraw your interview prior to February 1, 2020, I will delete any audio recording and shred any notes from the interview,

There will be no consequences if you withdraw from this study. I will continue to support you as a social worker and you will not lose the compensation provided.

Possible Benefits:

You may get some benefits from this study. Some people find it helpful to be able to tell a researcher their story. Some people like participating in research like this because it may help other women. This study will help us to understand women prisoner's experiences better and can help to provide better services both in prison and outside.

Possible Risks:

There is potential for emotional and psychological risks such as embarrassment, anxiety and upset, During the interview, I may ask you questions that bring back bad memories, or I may ask you about things you don't want to talk about. You do not have to talk to me about anything you do not want to. If there are times that you experience anxiety or any other mental health concerns, you will be offered an opportunity to discuss any concerns with me or my mental health colleague (staff to be identified.) A counselor from Stella's Circle is available to you should you feel emotional distress due to this interview.

There are potential social risks for participants. It is possible that other women and staff will know that you are talking to me, however, what we are talking about will not be disclosed to

anyone else, and we will have a private space for the interview. The final paper will be written such that not any one individual is identifiable.

Confidentiality:

The ethical duty of confidentiality includes safeguarding participants' identities, personal information, and data from unauthorized access, use, or disclosure.

What is said during the interview will remain between us. I will be audio-recording and keeping notes during interviews. I will write the transcriptions from the recordings (which means, I will write up what I record). This information will not be shared with anyone. I will create a code known only to me so that anyone reading my notes cannot identify names. However, because this is a small community of people, who are known to each other, it is possible that you may be identifiable to other people on the basis of what you have said, I will write my final paper with pseudonyms (fake names) and change identifying details to do my best to ensure that you cannot be identified, but it is a possibility due to the small group I am interviewing,

Additionally, there are limits to confidentiality. I will not share anything you tell me during the interviews with anyone unless required to do so by legal authorities.

Anonymity:

Anonymity refers to protecting participants' identifying characteristics, such as the name or description of physical appearance.

When I write up my data, I will not use your real name, and I will change identifying details (like where you are from, your age or what you look like). However, other people may know that you have participated in the study by seeing you with me. Every reasonable effort will be made to ensure your anonymity. You will not be identified in publications without your explicit permission.

Recording of Data:

If you agree, I will be audio recording the interviews. I will also be taking notes. If you would like to write or draw something to share with me, I will also use that in my research,

Use, Access, Ownership, and Storage of Data:

- Audio recordings will be downloaded to my computer which is protected by a password the same day of the interview. The recording will then be deleted from the recorder.

- I will keep a notebook locked in a cabinet in my supervisor's office,
- I will keep information on my computer on a USB stick that will be password protected and locked in my supervisor's office.
- Your consent to participate will be kept in a separate locked drawer from the data collected,
- Data will be kept for a minimum of five years, as required by Memorial University's policy on Integrity in Scholarly Research.

Reporting of Results:

A report will be written based on the information I collect, I will do a public presentation based on my report, I will be seeking to publish in journals and present at conferences, Direct quotations that you have said may be used, but no personally identifying information will be used, I can provide a copy of the final report when it is done, If you don't want to ask me when I am done, my dissertation (research report) will be available at Memorial University's Queen Elizabeth II library and can be accessed online at <http://collections.mun.ca/cdm/search/collection/theses>.

Sharing of Results with Participants:

After the project is complete and I have written a report, I will provide the report to participants as requested. You can also make contact with (staff to be identified) with Stella's Circle to request a copy of the report. Additionally, I will host two presentations, one in the community and in prison, which will be open to participants (who will not be identified) and others,

Questions:

You are welcome to ask questions before, during, or after your participation in this research. If you would like more information about this study, please contact Amy Sheppard. Faculty of Sociology, Memorial University of Newfoundland, amy.sheppard@mun.ca or my Supervisor: Rose Ricciardelli, Ph.D., Professor & Coordinator for Criminology, Department of Sociology, Memorial University of Newfoundland, 230 Elizabeth Ave, St John's, NL A1C 5S7, rricciardell@mun.ca, 864-7446

If you have questions regarding your rights as a research participant please contact the Health Research Ethics Authority at (709) 777-6974 or info@hrea.ca

Consent:

Your signature on this form means that:

- You have read the information about the research.
- You have been able to ask questions about this study.
- You are satisfied with the answers to all your questions.
- You understand what the study is about and what you will be doing.
- You understand that you are free to withdraw participation in the study without having to give a reason and that doing so will not affect you now or in the future.
- You understand that if you choose to end participation **during** data collection, any data collected from you up to that **point will be destroyed**.
- You understand that if you choose to withdraw **after** data collection has ended, your data can be removed from the study up to February 1, 2020,

I agree to be audio-recorded

☐ Yes ☐ No

I agree with the use of direct quotations

☐ Yes ☐ No

By signing this form, you do not give up your legal rights and do not release the researchers from their professional responsibilities.

Your Signature Confirms:

- ☐ I have read what this study is about and understood the risks and benefits, I have had adequate time to think about this and had the opportunity to ask questions, and my questions have been answered.
- ☐ I agree to participate in the research project understanding the risks and contributions of my participation, that my participation is voluntary, and that I may end my participation.
- ☐ A copy of this Informed Consent Form has been given to me for my records.

Signature of Participant

Date

Researcher's Signature:

I have explained this study to the best of my ability, I invited questions and gave answers, I believe that the participant fully understands what is involved in being in the study, any potential risks of the study and that he or she has freely chosen to be in the study.

Signature of Principal Investigator

Date

Informed Consent: interviews with service providers

Title: Planning for change: Women's desistance processes in a short-term provincial prison.

Researcher(s): Amy Sheppard. Faculty of Sociology, Memorial University of Newfoundland, amy.sheppard@mun.ca

Supervisor(s): Rose Ricciardelli, Ph.D., Professor & Coordinator for Criminology, Department of Sociology, Memorial University of Newfoundland | 230 Elizabeth Ave, St John's, NL A1C 5S7, ricciardell@mun.ca, 864-7446

You are invited to take part in a research project entitled "Planning for change: Women's desistance processes in a short-term provincial prison."

This form is part of the process of informed consent, It should give you the basic idea of what the research is about and what your participation will involve. It also describes your right to withdraw from the study. In order to decide whether you wish to participate in this research study, you should understand enough about its risks and benefits to be able to make an informed decision. This is the informed consent process. Take time to read this carefully and to understand the information given to you. Please contact the researcher, Amy Sheppard, if you have any questions about the study or would like more information before you consent.

It is entirely up to you to decide whether to take part in this research. If you choose not to take part in this research or if you decide to withdraw from the research once it has started, there will be no negative consequences for you, now or in the future.

Introduction:

I am a doctoral student in the Faculty of Sociology at Memorial University of Newfoundland, As part of my Doctoral dissertation, I am conducting research under the supervision of Rose Ricciardelli, Ph.D., Professor & Coordinator for Criminology, Department of Sociology, Memorial University of Newfoundland,

Purpose of Study:

The purpose of the study is to understand how women in provincial prisons plan for changes once they leave prison. I want to understand what women in prison need to make changes and how they think that mental health and addiction will affect their abilities to make these changes when they return home.

I am going to talk to women living in prison, women who have been in prison but are now living in the community and people who provide services to women in prison. This research will help us to understand how women living in a short-term prison environment might get the help that they need.

What You Will Do in this Study:

I am asking you to participate in an interview with me. I will be asking questions about services you provide to women in prison as well as services provided on release. I am interested in what will support women in meeting their goals post-release. Thus questions will focus on what you think some barriers and gaps in services may be in your own agency as well as in the broader community. I will also ask you what you think women may need post-prison release and how best to engage with this population. You will be able to pass on any questions that you don't want to answer. I will ask you if I can audiotape our interviews. You can choose not to. I will ask you if I can take notes, and you can refuse this also. You will be allowed to see my notes at any time if you like.

If you decline to be taped or allow my note taking during the interview, I will still do reflexive note-taking after the interview. I will journal my thoughts and impressions of the interview after we are done speaking. Should you wish that no notes be taken at all, I advise that you decline participation in the research project.

Length of Time:

The interview will take about an hour.

Withdrawal from the Study:

You can stop participation in this study during the interview, You tell me to stop, and we will stop the interview. Any data collected will be destroyed and not used in my research. That means that the audio recording will be erased and my notes will be shredded. I will check in with you after the interview to see if you are ok with me using the information you have told me during the interview.

You can stop participation in this study after the interview. You can inform me that you no longer want me to use your interview. You may also inform (staff to be identified) with Stella's Circle, and they will inform me that you no longer want me to use your interview. You will not

be able to withdraw from participation after February 1, 2020, because I will be writing up my research paper after that time. If you withdraw your interview prior to February 1, 2020, I will delete any audio recording and shred any notes from the interview.

There will be no consequences if you withdraw from this study.

Possible Benefits:

This study will help us to understand women prisoner's experiences better and can help to provide better services both in prison and outside.

Possible Risks:

Possible risks include frustration/anger when discussing working within a system that stigmatizes/oppresses a population you are working with. It is also possible that you may feel sadness and upset due to circumstances for women in prison, including the recent deaths of women in prison.

Confidentiality:

The ethical duty of confidentiality includes safeguarding participants' identities, personal information, and data from unauthorized access, use, or disclosure.

What is said during the interview will remain between us. I will be audio-recording and keeping notes during interviews. I will be doing the transcriptions from recordings. This information will not be shared with anyone. I will create a code known only to me so that anyone reading my notes cannot identify names. However, because this is a small community of people, who are known to each other, it is possible that you may be identifiable to other people on the basis of what you have said, I will write my final paper with pseudonyms (fake names) and change identifying details to do my best to ensure that you cannot be identified, but it is a possibility due to the small group I am interviewing.

Additionally, there are limits to confidentiality. I will not share anything you tell me during the interviews with anyone unless required to do so by legal authorities.

Anonymity:

Anonymity refers to protecting participants' identifying characteristics, such as the name or description of physical appearance.

When I write up my data, I will not use your real name, and I will change identifying details (such as the agency where you work). Every reasonable effort will be made to ensure your anonymity. You will not be identified in publications without your explicit permission,

Recording of Data:

If you agree, I will be audio recording the interviews, and I will also be taking notes.

Use, Access, Ownership, and Storage of Data:

- Audio recordings will be downloaded to my computer which is protected by a password the same day of the interview. The recording will then be deleted from the recorder.
- I will keep a notebook locked in a cabinet in my supervisor's office,
- I will keep information on my computer on a USB stick that will be password protected and locked in my supervisor's office.
- Your consent to participate will be kept in a separate locked drawer from the data collected, Data will be kept for a minimum of five years, as required by Memorial University's policy on Integrity in Scholarly Research

Reporting of Results:

A report will be written based on the information I collect, I will do a public presentation based on my report, I will be seeking to publish in journals and present at conferences, Direct quotations that you have said may be used, but no personally identifying information will be used, I can provide a copy of the final report when it is done, If you don't want to ask me when I am done, my dissertation (research report) will be available at Memorial University's Queen Elizabeth II library and can be accessed online at <http://collections.mun.ca/cdm/search/collection/theses>.

Sharing of Results with Participants:

After the project is complete and I have written a report, I will provide the report to participants as requested. You can also make contact with (staff to be identified) with Stella's Circle to request a copy of the report. Additionally, I will host two presentations, one in the community and in prison, which will be open to participants (who will not be identified) and others.

Questions:

You are welcome to ask questions before, during, or after your participation in this research. If you would like more information about this study, please contact Amy Sheppard. Faculty of Sociology, Memorial University of Newfoundland, amy.sheppard@mun.ca or my Supervisor: Rose Ricciardelli, Ph.D., Professor & Coordinator for Criminology, Department of Sociology, Memorial University of Newfoundland, 230 Elizabeth Ave, St John's, NL A1C 5S7, rricciardell@mun.ca, 864-7446

If you have questions regarding your rights as a research participant please contact the Health Research Ethics Authority at (709) 777-6974 or info@hrea.ca

Consent:

Your signature on this form means that:

- You have read the information about the research.
- You have been able to ask questions about this study.
- You are satisfied with the answers to all your questions.
- You understand what the study is about and what you will be doing.
- You understand that you are free to withdraw participation in the study without having to give a reason and that doing so will not affect you now or in the future.
- You understand that if you choose to end participation **during** data collection, any data collected from you up to that **point will be destroyed**.
- You understand that if you choose to withdraw **after** data collection has ended, your data can be removed from the study up to February, 2020,

I agree to be audio-recorded

☐ Yes ☐ No

I agree with the use of direct quotations

☐ Yes ☐ No

By signing this form, you do not give up your legal rights and do not release the researchers from their professional responsibilities.

Your Signature Confirms:

- ☐ I have read what this study is about and understood the risks and benefits, I have had adequate time to think about this and had the opportunity to ask questions, and my questions have been answered.
- ☐ I agree to participate in the research project understanding the risks and contributions of my participation, that my participation is voluntary, and that I may end my participation.
- ☐ A copy of this Informed Consent Form has been given to me for my records.

Signature of Participant

Date

Researcher's Signature:

I have explained this study to the best of my ability, I invited questions and gave answers, I believe that the participant fully understands what is involved in being in the study, any potential risks of the study and that he or she has freely chosen to be in the study.

Signature of Principal Investigator

Date