

Out of the Shadows

**Women and the Dublin Drug Economy
Poverty, Context, Trauma and Survival**

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with

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Summary Report

prepared for CityWide Drug Crisis Campaign

‘Out of the Shadows’:

Women and the Dublin Drug Economy Poverty, Context, Trauma & Survival

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CityWide Drug Crisis Campaign*



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Any omissions, errors, and flaws are all ours, the researchers.

Marguerite Woods
Paula Kearney

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***Show me something more
Than the wolf at the door
All the begging in the cold
To keep the wolf from the fold
Show me something more
Than an honest girl turned thief or whore
Under African sun or Dublin rain
Necessities remain the same***

("Angel", Tracey Thorn/Ben Watt – Everything But the Girl,

Love Not Money, WEA Records Ltd, 1985)



SECTION ONE

Introduction

This report presents a summary overview of the findings of a large in-depth qualitative study of women's involvement in the Dublin drug economy carried out between 2020 and 2022. It is the first study exclusively focusing on such an experience in Ireland.

In the Irish context we know little to date about women's involvement and experience in the drug economy, beyond anecdotal reports. Though not a new phenomenon, its rising visibility in communities often leads to sensationalized and stigmatising coverage of women's experiences. Women's participation in various aspects of the drug economy, beyond just buying or minor selling, has existed for some time, even though it was seldom discussed and little studied.

More than forty years ago, however, while reporting about the male family members of a crime dynasty in Dublin, the journalist Mary Raftery (Magill, 31 October 1983) noted women's involvement in the transportation of drugs into Ireland:

“Each had his own couriers, usually women who were unknown to the police. They considered that women were less likely to be searched by a predominantly male customs and police force. Couriers were despatched at regular intervals to Europe, usually to Amsterdam, although London and Paris were also used, to collect the pure heroin after the deal had been finalised. ...Couriers rarely carried amounts in excess of around one ounce (worth about €400,000 on the streets) in case they were caught, which incidentally was a rare occurrence.”

This successful and undetected carrying of drugs demonstrated how the choice of women for this crucial courier role benefited drug traffickers and deflected the vigilance and suspicion of the authorities. Unfortunately, the women's remuneration for this work is not mentioned.

The CityWide Drug Crisis Campaign has commis-

sioned several reports focusing on drug-related intimidation related to the drug economy. The first report, *Demanding Money With Menace Drug-related intimidation and community violence*, identified the need to carry out further work on early interventions with young people who become involved in drug distribution (Connolly & Buckley, 2016). The resulting study *The Drug Economy and Youth Interventions: An Exploratory Research Project on Working with Young People* (Bowden, 2019), noted its participants' views about the limited visibility of women in the informal drug economy and recommended further research to explore the nature of women's involvement.

Taking its cue from this recommendation, CityWide then commissioned this research, a qualitative study, that aims to explore the experiences of women within the drug economy and those impacted by the drug economy, as women directly involved in or indirectly affected by drug use in their families and community in Dublin.

The study's overall objective is to explore the lived experience of women affected by the drug economy and bring this experience into the dialogue and discussion about community responses to drug use, inform the further development of services and to forward policy recommendations to feed into national strategies in the future.

Women's roles in the drug economy, occasionally central but more often peripheral, are reportedly generating concern among service providers. Experiences of the impact of economic realities, relationships, domestic violence, child-to-parent violence, coercive control, involvement in drug and crime-related activity have been identified as just some of the key issues by researchers, stakeholders, service providers and women alike in an early scoping focus group exercise for this project. These broader contextual experiences have not attracted the attention of policy makers. The Irish national strategy (Department of Health, 2017) has been assessed as pointing a paternalistic lens on women, focusing largely on their needs in the context of pregnancy, parenting and drug treatment rather than in the larger context of their lived experience (Wincup, 2019). The present research focuses on the broader context of women's experiences.

The Terms of Reference and the aims and objectives of the study were drawn up collaboratively with CityWide and following an initial scoping focus group with professional workers in December 2019 and discussions with women with lived experience in January and February 2020, these were further refined. The study's overall objective is to explore the lived experience of women affected by the drug economy. While the aim is to access locally based knowledge about women's experiences, it is also hoped that this will impact more broadly on policy and ensure that the voices of women directly involved impact on and inform future practice, policy and national strategies in the future.

To do this, this study sought the first-hand accounts of women with lived experiences of the drug economy alongside the views and opinions of those involved in drug services and community-based organisations. The study is further informed by extensive literature searches and review of existing research findings regarding women and drug use, crime and involvement in the drug economy.

The following aims and objectives of this exploratory study are to:

1. Bring the voices of women who have lived experience of involvement to the fore in discussions of the drug economy;
2. Explore the gender-based lived experience, power relationships and economic realities for women living in communities affected by drug use;
3. Examine the impact of these experiences on women;
4. Offer recommendations based on women's and professional workers' accounts for alternative responses for women, informed by their lived experience and shaped by their assessments and evaluation of their needs, in these circumstances.

Study Design and Methodology

This is a qualitative study, small and in-depth, that explores both professional workers' views

and observations and directly affected women's accounts of their lived experiences of the impact of the drug economy. The findings and recommendations are drawn from the accounts of 48 participants, purposively sampled in order to bring their range of knowledge and lived experience to the fore. Accessing the accounts of women who have been involved in the activities of the drug economy has been central to this study. This approach differentiates this study from others that have relied solely or mostly on the accounts of professional worker experience rather than lived experience. While the observations, views, and opinions of professional worker informants are invaluable, these are not first-hand accounts but observations that further contextualise the accounts of the women's lived experience of involvement.

Key questions included: What are participants' views and experiences of the drug economy? Where do women fit in as actors in the drug economy? Where do women fit into this reportedly male-dominated world? What is their lived experience? What impact does drug economy involvement have on women's lives?

Twenty-eight semi-structured interviews, a focus group, informal conversations during fieldwork and a member checking or participant validation process following data analysis allowed for the gathering of data. In total, twelve women with lived experience of involvement with drug use, crime and the activities associated with the drug economy and sixteen professional workers within the drug and community work field were interviewed. In addition, ten professional workers participated in a focus group at the outset of the study and a further three professional workers and seven women engaged in informal conversations. These interviews and consultations, informed by a gender-responsive and trauma-informed approach, provided a wealth of data pertaining to the study's key research questions.

The research was conducted during the COVID-19 pandemic and therefore data were gathered in interviews carried out online rather than face-to-face as originally intended due to restrictions placed on social contact and travel. All but five in-

interviews, one focus group and seven informal discussions took place virtually on Zoom and by phone. Despite these limitations, the advent of Covid and its considerable impacts on the daily lives of participants brought into sharp relief and made more visible many of the challenges generally faced by women and communities impacted by the drug economy before and since.

The 28 interviews were audio-recorded, ranging from 15–100 minutes in duration, totaling 32 hours of interviewing. Professional worker interviews lasted between 50 – 95 minutes, totaling more than 20 hours. Women with lived experience of the drug economy engaged in interviews ranging in length from 15 – 100 minutes, totaling almost twelve hours. Additional notes were taken with permission during interviews or conversations.

The interview schedule guiding these semi-structured interviews proposed a series of open-ended questions relating to eight broad topic areas. These included a focus on participants' understanding of the drug economy; its perceived impacts generally; its perceived impacts on women in communities; women's involvement in the drug economy; the nature of their involvement; their lived experience of involvement and the impacts of involvement; and reflections on service and policy responses.

Data analysis involved making sense of, organising and indexing, coding, and categorising manually. Thematic analysis (Braun & Clarke, 2006, 2012, 2018) guided this process and was used to identify key themes in the transcribed accounts of the participants and any written notes or field notes that had been taken during or made directly following each interview and focus group, thereby initially summarising interview content and themes.

Consultation and approval regarding the study, ethical standards and practice took place with the Ethics Advisory and Consultation Team and the Management Committee of the CityWide Drug Crisis Campaign. Independent Review and support were sought at the outset and ongoing consultation and debriefing regarding ethical procedures took place throughout. A reflexive and ethical stance was central to the practice and

conduct of this research endeavour. Voluntary participation, informed consent, confidentiality, and anonymity were essential standards and underlying all of these is the principle of doing no harm. No harm should come to participants because of their participation or as a result of the ultimate use of the findings. However, the extent to which the researchers may no longer have control over the use of findings once published and in the public domain was acknowledged and understood.

The Participants

Two groups of participants have informed the study, women who have direct experience of the drug economy and professional workers who work in the fields of drug and community-based work. The twelve women with lived experience interviewed, and the seven women who conversed with researchers about their experiences and key study questions, were all currently or in the past affected by drug use and involvement in the drug economy. They ranged in age from 25 years to 60 years. The absence of younger women in their late teens or early twenties in the sample was notable, as was the absence of diversity in terms of ethnicity and sexual identity. The women all described themselves as cisgender women; two identified as lesbian women and one as bisexual. Eleven described themselves as mothers while involved with drug economy activities, while eight women did not have children at that time. Two women have become mothers since exiting. They were resident in five differing local drug task force areas in the Dublin region. Six women were currently living in special housing projects, having been rehoused, and one woman was currently homeless and living in hostel accommodation. Of the nineteen participants, four had left or exited the drug economy, three of whom now work in the drug service, community work or social care fields. A further three described themselves as currently attempting to exit both drug use and drug economy involvement while twelve were currently involved to a greater or lesser extent in street level activities, purchasing, sometimes selling drugs, and other associated income-generating activities.

The sixteen professional workers interviewed, two men and fourteen women; the focus group members, three men and seven women; and the three who engaged in informal contact, all women, ranged in age from 31 years to 68 years. They hailed from six local drug and alcohol task force areas in Dublin and were able to offer valuable information about the drug economy and its impacts in different parts of the city, ranging from inner city areas to outlying areas. They either currently work or have worked directly with women affected by drug use who are or have been involved in the drug economy. Their current professional roles included those of case manager, key worker, outreach/health promotion worker, community development worker, project director and drug task force coordinator. They were employed either within the statutory sector or the community and voluntary sector. Many had a lengthy history in the community and drug work fields, had occupied different work roles and had contact with many women directly affected by these issues across their careers. Their average length of time working in the drug or community work field was 22 years, with a range from two to 30 years. Four of the sixteen acknowledged during their interviews that they had lived experience of drug use and involvement in the drug economy in the past.

No differentiation in work role is revealed in the text to ensure anonymity. Almost all quotes and excerpts are attributed to individual participants. While pseudonyms have been used throughout this study, the assigned pseudonym is the only identification in the text along with PW (Professional Worker) or LE (Lived Experience) tag to differentiate between the participant groups.

Extensive direct quotes are used in the findings. These are presented, indented in italicised font, and are the words of participants. Where participants' words are used in the text, they are presented in inverted commas. At points, participants may use or refer to the use of pejorative terms. These remain in the quotes to accurately reflect what has been said.

Report Structure

The next section, Section Two, offers background and context focusing on recent findings of some Irish research, offering evidence about the drug trade and intimidation. In addition, some findings about women's drug use, uptake of drug treatment and representation in statistics about crime and imprisonment in Ireland at the time this study took place are reviewed.

The two following sections report the findings of the study. Section Three discusses participants' accounts of the nature of the Dublin drug economy, its impacts generally and on women within communities. Section Four turns to the lived experience of women involved with drug use and the drug economy, drawing on accounts of women with first-hand experiences and the views of professional workers working with women in a range of community settings.

Section Five offers an overview of the many specific recommendations for change and development made by participants during interviews. A concluding discussion highlights the implications of the study's key findings. The study's recommendations are offered in conclusion.



SECTION TWO

Background and Context

Women's Drug Careers and Involvement in the Drug Economy?

While there are now volumes about women's involvement with illicit drug use and/or crime authored by addiction sociologists and criminologists of many theoretical orientations and perspectives, there is little written about women's direct involvement and engagement in the drug economy. In international literature, apart from in some notable ethnographic studies, women's presence is peripheral.

As pointed out by researchers, studies concerning the drug economy largely focus on issues of international markets, global trafficking and the activities of cartels rather than lower-level local markets. Research at the lower end, then, has been driven by work on deviance and research about young men, gangs, violence, and hegemonic masculinities (Bowden, 2019; Connell, 1995).

Women, with few exceptions, occupy less powerful positions than these young men in the drug economy and have been reportedly on the 'lower rungs of the social world of drug use' (Murphy & Arroya, 2000). Research focusing on women's experience is viewed as 'low end' research (Giacomello & Youngers, 2021) and women are almost always regarded as remaining on the periphery of the drug trade and in studies about it (Campbell, 2000). In both addiction and criminological literature, much has been written by men about men and there have been long-time challenges by women researchers and academics to the continuing 'male as norm' bias that infuses much work in the field. In addition, drug policy remains law enforcement oriented, prohibition focused and 'configured around strategies that are 'gender blind' in design and implementation, with negligible attention paid to how women are differently impacted than men' (Buxton, 2021, p. 155).

The focus of the present study on women's involvement within the drug economy aims to fill a gap in the Irish literature and add to the dis-

crete body of extant work carried out internationally. This review then briefly discusses some of the findings of Irish research regarding the drug economy, drug use and crime, highlighting the limited findings about women participants involvement in drug use, treatment, criminal activity, imprisonment and the impacts on women.

The Dublin Drug Economy

To date, in Ireland, there has been some recent limited interest in and much comment about the drug economy, due to the increasing levels of violence in its context. Several studies have focused on women and drug use, their access to treatment, their involvement with criminal activity and the criminal justice system. There is little research derived knowledge, however, about women's lived experience of street-level dealing and other informal and drug economy activity. A range of Irish studies during the past two decades focused on drug debt, intimidation and the impact on families, and women in families, where members were affected by drug use. These studies have offered convincing evidence about women's experience of drug-related intimidation (McCreery, Bowden, & Keane 2021; Marsh, 2020; Bowden, 2019; Connolly & Buckley, 2016; O'Leary, 2009). Yet only a few studies have noted women's involvement as actors in the Dublin street scene and drug markets (O'Reilly & MacCionnaith, 2019; Saris & O'Reilly, 2010).

The impact of drug use and drug debt related intimidation on families and communities and the involvement of young men have attracted some continuing attention (McCreery, Bowden & Keane 2021; Marsh, 2020; Bowden 2019; Murphy 2017; Connolly & Buckley, 2016, O'Leary, 2009; Duggan 2007; Murphy Lawless, 2002). These studies reviewed or gathered data about the criminal and violent nature of involvement in drug use and the drug trade. Nonetheless some international research has maintained that not all drug dealing is adversarial, violent or commercially motivated, but may be collaborative and network based, a form of 'social supply' (Bowden, 2019).

Since the 1990s in Ireland, as the drug trade moved from being largely an opiate driven market to a greatly diversified one, attention turned to the increasing intimidation and fear generated by local drug economies. Murphy-Lawless (2002) documented the experiences of Dublin women in a community affected by heroin, drawing on the experiences of non-drug-using women and Duggan (2007) reported on the experiences of 30 families of heroin users seeking support services in Dublin. Neither study, however, included women who use drugs as participants or respondents.

It has been reported that the intimidation experienced by families linked to their family members' incurred debts, owing because of their own drug use or their involvement in sale and distribution, has intensified. The lived experience of women in families affected raised significant issues (O'Leary, 2009) and further studies have continued to highlight this aspect of women's experience of the impact of the drug economy.

The strong gender dimension identified in these earlier Irish reports about intimidation related to the mothers of largely young men involved with drug use and the drug economy. It has been found that those using drugs and their mothers are most regularly the targets for intimidation regarding drug-related debt. Mothers have also been reported to be those most likely to repay the debt. Those who had incurred drug debts were also found to engage in harassment and violence against their own family members to force them to pay drug debts (Connolly & Buckley, 2016, p.12). A picture of fear and menace was drawn as dealers intimidated those using drugs and their families, and those using drugs in turn intimidated their own families. A further survey focusing on drug debt intimidation found that of 49 respondents who had directly experienced intimidation, 28 were 'female' and 20 'male' (McCreery, et al, 2021).

These studies highlighted that intimidation is usually a male-dominated activity, perpetrated by young men and is generally experienced by men who use drugs. Those likely to carry out intimidation are men, between the ages of 18 and thirty-five years. Women are reportedly involved with less than 20% and children with about 10% of in-

timidation incidents (Connolly & Buckley, 2016, p.16). Fear of reporting incidents to An Garda Síochána is high and the need to deal with the consequences of drug debt in the absence of assistance from others leads in some cases to family members, often women, becoming involved and engaging in illegal activities to deal with and repay the debts (p.22).

These and other Irish studies focusing variously on the drug trade, drug debt intimidation, drug-related intimidation, young people's involvement in the trade and gangland violence suggest that little is known about women's direct involvement in economic activities around drug use or indeed the impact of the drug economy on women's lives. Women's voices are conspicuous by their absence. Bowden's (2019) qualitative study of young peoples' involvement, based on interviews with professional workers, described the hierarchical and stratified organisation of the drug trade comprising the 'main dealers', 'middlemen', 'foot soldiers', 'enforcers', 'mules', holders and carriers, all of whom may use drugs and shift between different roles (p. 17). The professional worker participants viewed women and girls as mostly marginal in drug economy activities, servicing or taking care of domestic issues, meeting the sexual needs of their partners and others, and experiencing sexual coercion. Contrary to popular belief about women in these contexts, they did not appear to benefit from paternalism or protection within the economy. Participation in the drug economy is viewed as an alternative to labour market participation.

In an extensive ethnographic study of drug trade and gangland violence in Dublin, Marsh (2020) described work at the higher levels of the drug economy as 'men's work' that emerges in working class areas. He further described those at lower levels as engaged in 'poor men's work' in a world with few opportunities (p.35). Drawing on some of earlier criminological literature, he suggests that these big players may be those who 'reject the atrophic existence of welfare dependency' (Hall, 1997: p. 24 cited in Marsh 2020, p. 35). Among its thirty-five participants, thirty-one of whom were at the time or had in the past been involved with drug use and the drug

trade, six women were interviewed. Several women's voices at moments entered the narrative. They were not only portrayed as mostly marginal in the drug scene. They were also peripheral in the study itself and largely represented in traditional roles of victims, in need of protection, and sometimes, but rarely, violent themselves. Again as in the earlier study, their gender provided little protection, and they appeared to be subject to similar levels of violence as men.

O'Reilly's & MacCionnaith's (2019) mixed methods study of crack cocaine use and the drug market in a Dublin locale included five women among a sample of seventeen individuals who used crack cocaine and were interviewed about their experiences. They responded to questions about their drug use, the impacts on their health, families and children. As the purchasers of drugs, participants reported that they depended on their weekly budget, or on shop lifting, and begging for the money to acquire the funds to purchase crack. In addition, four of the five women reported past involvement in either sex-for-drugs exchanges or sex work that they linked to their crack cocaine use and involvement.

Much continues to be made about the shift in Ireland from a heroin-dominated market to the current polydrug use and crack cocaine markets and epidemics. However, it has been argued cogently in much ethnographic research in the United States of America (USA) that it is political and cultural forces rather than pharmacology that 'shape the trajectory of drug epidemics' (Bourgois, 2003, p.31). Drawing directly on the macro-sociological work of Mike Agar, who asked a significant question about drug epidemics - "Why these people in this place at that time?", Bourgois discussed how the 'political economy of social suffering' interfaces with pharmacology to shape trends of substance use. He suggested that the most 'vulnerable, exploited and desperate' populations and groups are affected by crack cocaine use and its devastating and harmful pharmacological affects. This 'political economy of marginality' often impacts women significantly and allows for the flourishing of a busy drug economy.

However, there is understandably a dearth of quantitative and qualitative data about the drug economy involvement of women, as it remains largely hidden from view and women are generally regarded, with some small exceptions, as uninvolved, as bystanders, and victims. This underlines the significance of bringing a gender lens to exploring the experiences of women and the impact of the drug economy on women's lives as users of drugs, as actors in the drug trade and as residents in communities impacted upon by drug use.

Women's Involvement in Drug Use and Crime in Ireland

The exact extent of women's involvement in drug use and crime in Ireland is unknown, but some evidence about women's drug treatment engagement, estimates of prevalence and about women's interaction with the criminal justice system may be gleaned from the many National Drug Treatment Reporting System (NDTRS), Irish Prison Service, Probation Service and Central Statistics Office reports. These together provide some evidence about those who come to the attention of health services and legal authorities.

The Health Research Board NDTRS offers data about those who present for treatment to a range of agencies in any year. Some interesting findings have arisen in the 2020 and 2021 figures that relate to women's involvement with drug use and their residence with children. In 2020, the NDTRS reported that 9,702 cases presented for drug treatment in outpatient, inpatient, low threshold, prison or general practice settings. They noted that fewer cases presented due to COVID-19. Of these, 3,796 were new cases attending. Of the total cases, 73.9% were men and 25.9% were women. In 2020, for the first time the numbers of children living with or not living with their parents were recorded. It was reported that 13.8% (1,343) of those treated were living with children aged 17 years or younger, men accounting for 54.7% (735) and women 45% (607) of these cases. Almost a quarter or 2,363 cases were parents of children who did not reside with them; three quarters were men and one quarter were

women. In 2020, 2,619 cases reported cocaine as a main problem, an increase from 853 cases reported in 2014. In each year from 2014 - 2020, most cases (80%) reporting cocaine as a main problem were men. The proportion of women reporting cocaine use increased from 17.2% in 2014 to 20.8% in 2020. Crack cocaine accounted for 15.8% of all those treated for cocaine in 2020 (an increase from 14.3% in 2019) (Kelleher, Carew, & Lyons, 2020).

In 2021, the NDTRS reported 10,769 cases presenting for treatment. Men accounted for 72.0% of those attending while women accounted for 27.9% of cases. Five cases or fewer identified as non-binary, an option recently added to the NDTRS at the end of 2020. In 2021, 15.8% (1,697) of those treated lived with their children; men accounting for 52.9% (898), and women 47.0% (797) of these cases. A quarter (24.7%, 2,664) had children who were not currently residing with them. Three quarters of these cases (75.3%) were men, and a quarter was women (24.7%). As a proportion of all cases treated, opioids decreased from 47.8% in 2015 to 33.7% in 2021. Cocaine was the second most common main problem drug, accounting for 30.2% (3,248) of all cases (Kelleher, Condon & Lyons, 2021). It is interesting to note that only 70% of all eligible services returned data to the NDTRS for the year, so that underreporting is a characteristic of these aggregate data.

In the Irish context, some recent studies over the past four years have highlighted many issues for women along with concerns about the connections between women's drug and alcohol use and domestic violence. A welcome flurry of interest occurred with regard to intimate partner violence, women's access to treatment and homelessness and recovery and experiences of stigma (Banka, Lavelle Cafferky, McDonagh, Walsh, & Comiskey, 2022; Ivers, Giulini, & Paul, 2021; Merchants Quay Ireland, 2021; Morton, Devaney, O'Connor, McKeown, & Harris, 2020; Morton, MacDonald, & Christophers, 2020; Woods, 2018, 2020; O'Reilly & MacCionnaith, 2019; O'Malley, 2018). There are also concerns about women in sex work, sex-for-drug exchanges, use of crack cocaine, opportunities for recovery and desistance.

None of these concerns in fact are new and women's involvement in homelessness, crime, sex work and sex-for-drug exchanges have been earlier documented (Woods, 1999, 2000; Mayock & Sheridan, 2012, 2013; O'Leary, 2009).

Over the past two decades in Ireland several reports have documented significant changes in terms of women's involvement in offending and imprisonment. Several Irish studies have examined women's involvement in crime. The statistics offer some information about women's involvement in criminal activity and suggest that women may be active within the drug economy. During this period the numbers of women imprisoned have more than doubled (Kelly & Bogue, 2014; The Probation Service, 2013; Irish Penal Reform Trust, 2013). Kelly and Bogue (2014, p.87) noted that the Irish prison service reported in 2010 that the number of women in prison increased by 84% from 2001 to 2010. In 2013, in its review of women's punishment and imprisonment, the Irish Penal Reform Trust highlighted the absence of gender-responsive community-based alternatives to imprisonment in Ireland.

In 2020, there were 649 committals of women to prison as compared to 155 committals of women in 1999, although it should be noted that the numbers in the entire prison system were reduced by 29% during the COVID-19 pandemic and ensuing restrictions (Irish Prison Service, 2021). In Ireland in 2020, women represented approximately 3.8% of the prison population, many committed for non-violent offences and detained for short periods. The average number of women in custody was 148, which represented a 12.9% (-22) decrease on the 2019 average of 170. The daily average number of women in custody in the Dóchas Centre in Mountjoy, Dublin was 120, while there was a daily average of 28 women in custody in Limerick prison. In addition, the Irish Prison Service Annual Report 2020 highlighted the reduction in certain crimes, such as Public Order Offences and Crimes Against the Person, due to public health measures and restrictions during the pandemic. The average number of women in custody in 2021 was 144, which represented a 2.4% (- 4) decrease on the 2020 average of 148 (Irish Prison Service, 2022). These decreases are

likely explained for the most part by the COVID-19 pandemic.

A study of recidivism in Ireland carried out by the Probation Service reported a total recidivism rate of 41% over a two-year period (Probation Service, 2013). Gender differences were observed. Men accounted for 87% of the 2008 cohort studied (population 3,761) and had a higher recidivism rate than women. However, while women had a lower rate of recidivism than their male counterparts, it was reportedly not as low as expected considering the smaller numbers of women engaged in criminal activity in general (p. 14).

Another study carried out by the Irish Prison Service focused on the recidivism during the three years following release of those who had spent time in custody in 2007. Among a study population of 7,701, recidivism rates of 58.3% within two years of leaving prison and 62.3% within three years were reported. In this study, men represented 92.5% of the population and women presented 7.5%. Men also had a higher recidivism rate, which was 63% as compared with a rate of 57% among the women surveyed. The first two years post offending or release are the riskiest in terms of reoffending. However, these findings suggest that one is more likely to reoffend after incarceration as opposed to being on probation in the community.

Recent statistics revealed that women have been steadily catching up with men and have now overtaken men in terms of recidivism. Of those released in 2015, 66% of women reoffended as opposed to 61% of men within three years of leaving prison (CSO, 2021). Of those released from prison in the 2016 and 2019 cohorts, women were again more likely to reoffend than men, with 70% of women reoffending within three years of release compared to 62% of men (CSO, 2022). This steadily narrowing gap between men and women has now disappeared altogether with women surpassing men in this regard. Such changes demand a gendered lens to examine these newer patterns of justice-involved women's increased offending, detection, incarceration and reoffending.

Other studies have reviewed the conditions of women's existence and imprisonment. Bacik

(2002) discussed women's participation in crime, identifying it as considerably less than that of men. She also highlighted that women are less likely to be imprisoned than men, even where they have been convicted of an offence. Carmody and McEvoy's study (1996) of the population of the Women's Prison in Mountjoy in 1994 identified the 100 women participants as affected by poverty, often mothers, with a history of disadvantage, mental health issues, and involvement in drug use since an early age. Almost all studies in the Irish context over the past thirty years suggest that this profile persists. They assert that prison populations tend to be drawn from backgrounds where poverty, unemployment, deprivation, early school leaving, drug use and mental health difficulties predominate (O'Malley, 2018; Kelly & Bogue, 2014; Quinlan, 2011; Comiskey, O'Sullivan, & Cronly, 2006; Connolly, 2006; McCann James, 2001, 2004; Dillon, 2000; O'Mahony, 1997; Carmody & McEvoy, 1996), a profile that remains uncannily similar decades later.

Some qualitative studies have focused on the lived experiences of women while imprisoned (O'Malley, 2018; Quinlan, 2011; McCann James, 2004). Others have focused on the experiences of homelessness among women within the criminal justice involvement. These revealed that many of the women interviewed had lengthy homelessness histories and journeys or trajectories of entering, leaving and returning to prison. Many women's experiences of imprisonment and re-entry suggest that they may experience more safety or a sense of being 'at home' within the prison system (Mayock & Sheridan, 2012, 2013). Other qualitative studies of women leaving prison and experiencing resettlement echo these findings, thereby stressing the importance of a gender-sensitive focus when working with women in this context (Morris, 2012). This experience of repeated imprisonment and release lead to an earlier description of women within the Irish criminal justice system as 'recycled women' (McCann James, 2001). More recently, the experience of women in prison regarding motherhood has again been studied (O'Malley, 2018; O'Malley & Devaney, 2016a, 2016b; Baldwin, O'Malley & Galway, 2015). However, less appears to be written

about women as they live and survive in the community with the challenges of drug use, reoffending, relationships, parenting, stress, domestic violence and mental health issues, among others.

In the Latin American context, Giacamello and Youngers (2021) offered a summary of women's incarceration for drug related offences and demonstrated in their analysis how the 'war on drugs' is waged on already impoverished women through punitive measures that create even further exclusion. These findings suggest that women's increasing incarceration happening here and elsewhere needs to be subjected to scrutiny.

The research in these overlapping fields largely highlights gender differences and the differential drug use, crime and incarceration experiences of women in Ireland. Yet we also know little about those who do not come to the attention of the drug treatment services, the criminal justice system, including the police, prisons, or probation – in other words, we know little about those who avoid or have avoided treatment, detection and arrest. Overall, we have little qualitative evidence about women's lived experience in the activities and social world of the drug economy. Without their voices narrating their experiences, we continue to make often erroneous and uninformed assumptions about their lives.



SECTION THREE

The Drug Economy and Impacts on Women and Communities

The Drug Economy – Participants’ Perceptions

Almost all those participating, with few exceptions, noted that the focus of the study, the involvement of and impact on women in the drug economy, was an unusual one, challenging them to think somewhat differently about women’s lived experiences. Women with lived experience of involvement also thought it unusual, noting that generally they are asked about their access to drug treatment services, barriers to recovery and their experiences generally as women who use drugs, are homeless or in prison. At the outset, each participant was invited to reflect on and discuss their understanding of the drug economy. As will be seen, there was remarkable consensus among the participants about the nature of the drug economy, what it is, how it works, how it impacts generally, and how it impacts women and communities specifically.

I suppose it is really all about the economy, about economics, supply and demand. So, you have the strategies to reduce the demand for drugs and those that are trying to reduce the supply. I suppose I have always seen drug use as a social issue, but less so an economic one. Of course, I think that economic issues in the broader society drive a lot of what is happening like poverty, social structures you know, but like it is all about the economy, or the economies maybe, the formal and the informal, the drug economy. (Carina, PW)

All participants, the professional workers and women affected, described the nature of the drug economy. The reach, impact, mobility, flexibility and adaptability of the Dublin-based drug economy/economies and the absence of regulation and control were discussed in all interviews. The constancy of intimidatory and menacing nature of the drug economy was described.

The informal economy, the drug economy, the culture of buying and selling and the poverty. It’s all interconnected and driven by big criminals and very violent people.

(David, PW)

In addition, the maleness of the economy and markets, in terms of recruitment, participation, control and impact was emphasised as a key characteristic.

But what you have is a pretty male-dominated industry there, a black market industry where men are primarily selling large amounts of drugs or organising the sale and supply and movement of drugs around this area, which is quite an urban disadvantaged area of Dublin. Obviously, these men usually have partners and children. They are part of a family and that family is affected and often involved. (Neasa, PW)

The normality, everyday nature and local nature of the drug economy were also emphasised. Much of what might be defined as drug economy activity passes for ‘*everyday getting by*’ in the community. Others focused on the local aspects of what it is occurring ‘*on the street*’, highlighting the quotidian nature of drug economy activities, the universality of these activities among those who use drugs, the normalisation of such activities in the community, a ‘*push pull acceptance*’ and their connections to a range of social networks, friendship networks, families or intimate partner relationships.

I define it in relation to buying and selling and street drug use ... I would see the crime associated with it as well, do you know what I mean, the drug economy also brings money into households that might not have that money. It is interesting, they’d still be living in poverty. (Maeve, PW)

It’s a daily thing. You only have to walk out the door and it’s there, the more you try to avoid it, it’s there. You have to keep your head down. Everything getting sold under the table and little assholes running around selling drugs ... The number of people who are asking do you want drugs? It’s everywhere, it is across the board. But the drug economy is much broader than just small-

time purchasers and sellers. (Natalie, LE)

The drug economy is regarded as a phenomenon that exists in ‘working-class’ communities and ‘marginalised’ communities. However, other drug economies or markets do exist. Hierarchies of drugs and of drug economies that sometimes overlap and interact were noted but the different consequences, impacts and fall out of involvement in these activities for those with less resources and opportunities were stressed.

When there’s somebody who’s selling tablets or weed or ecstasy or those minor drugs, that is again not regarded as drug dealing. When somebody drifts into more heavy drug use, then that’s seen as more serious. In the community there is a different take on what is a drug of concern and what isn’t. (Brian, PW)

Drug use and the drug trade operate differently in different contexts. It is strongly suggested that those in or operating in affluent areas are viewed as less dangerous and threatening to the social fabric of society generally. In working class neighbourhoods, it is described by some as ‘a way of life’, a ‘tug of war’, whereas in affluent areas of the city it is regarded as ‘party time’, where drugs pass around often in pubs, clubs and social venues and are bought and sold in friendship or social networks or groups.

The drug economy and its business move around too. It can be concentrated in certain areas for a while and then may move its operations elsewhere. (Mandy, LE)

There are different economies all across the city with their own sellers and the guys that control it, you know. And as we well know there are territories, patches, and there is a lot of violence between these groups running the economies. The factions! They’ve been killing one another. We know that. But the buyers, the users, come from everywhere, they follow their drugs of choice, or just try to get what is available. (Linda, PW)

A hierarchy exists too in terms of the impact of stigma associated with different types of drugs, drug use – experimental, recreational or problematic – and the locales and contexts in which drug taking, purchase and exchange takes place.

It’s become very socially acceptable that somebody might deal a little bit of cocaine to certain people. It’s what happens, it’s not seen as criminal or as a drug economy. Often a bit of cocaine is sold on the side. There’s a real snobbery about it – in working class and in affluent areas. But, overall, there’s a class difference, big time. It is a real hypocrisy, the same people aiming to be eco-friendly, and ethical, tracing the origins of their food and the air miles involved and then they use cocaine! They’re not concerned at all about the origins of their drugs and who might get damaged in that. (Maeve, PW)

The drug economy was said to be much more than simply visible street-level sale of illegal drugs but that it included all activities relating to the manufacture, preparation, transportation, and storage of the substances. It also includes all activities associated with drug use, acquisitive crime, begging and sex work. Two aspects were described consistently, the buying and selling of drugs by those who use drugs, and the acquisitive crime that individuals engaged with in an effort to accommodate their drug purchase and use and to support themselves. Women’s involvement in sex work was also mentioned.

Ehm, the first thing that’s after coming into my head is just seeing people out there selling drugs on the streets, and knowing who has them, knowing what’s out there and knowing what you have to do to get them, shoplifting, selling the stuff and selling tablets. (Karen, LE)

Where does sex work fit in? They are dealing the drugs, and we are earning the money to buy them through sex work. It sounds like separate spheres. I think they are heavily intertwined, that depends on the kind of sex work you’re doing as well. If you are working on the street, then yeah, it’s almost one and the same economy. Ehm, it’s just different actors in that economy. (Angela, LE)

The drug scene/economy, it is asserted throughout, does not ‘invade’ and take over the community but is run by people who have been reared in and lived in the community all of their lives. The recruitment of young people, largely boys and young

men, is constant. Family members often ‘recruit’ other family members, brothers involve brothers and sisters and vice versa, friends share drugs and ask for favours. The ‘recruitment’ process is less formal and more family, network and friendship based. There is a great level of fear and concern about this, especially among parents. The normalisation of activities and the lure and involvement of the drug economy for young people, especially boys and young men, is ‘almost accepted’.

The level of control exerted by individuals at the higher end of the economy – ‘big players’ – was noted while the ‘foot work’, the dealing, distribution, moving of drugs, the intimidation is reportedly carried out by others, younger men at the middle and lower ends of the system. One participant evocatively described the experience for many young people of growing up in impoverished communities as a ‘trajectory towards addiction, prison, and early death’ (Eva, PW). Young people’s use, involvement in drug economy was emphasised throughout.

Young boys are being groomed into the drug trade like there’s no tomorrow. I don’t see many girls in this area. No, but the girls are quite drawn to these men and boys. But I haven’t heard of young girls being involved in selling or moving drugs – that’s not to say it’s not happening but it’s not something that’s been brought to my attention...
(Neasa, PW)

The lack of pathways for young people into the formal economy was repeatedly cited as increasing the attractiveness of the drug economy, in which immediate and far greater earnings are possible in the short term. Young men rather than young women are the participants, at the lower levels. However, the young men often have more power and control and status, than their mothers or sisters, who may also be involved in activities as a result of their own drug use.

The drug economy is a place where money can be made. Status can be gained. Connection can be had. Purpose can be had. Whilst it may all be illegal, it can have an incredible attraction. It is a place of work, in the true capitalist sense. But there is no regulation, no unions, no consumer protection. It creates

a nasty workplace at the heart of some communities. (Brian, PW)

The violence, intimidation, menace, threat and the resultant fear and trauma experienced by many is reportedly underplayed and minimised much of the time.

Several participants spoke of how the drug economy is often mythologised, its activities exaggerated and that descriptions of ‘gangland’ and ‘mafia’ were commonly used in dramatic and journalistic accounts of crime. There was considerable concern expressed that trivialising and ‘normalising brutality’ and ‘glorifying violent male characters’ were distracting from crucial structural issues that need to be addressed. Media portrayals of the drug economy were challenged.

Where there is a connotation with the drugs economy that it’s all these big gangs, big dealers, and so you’re talking hundreds and thousands of Euro and everything like that, I think that is a level. But I think in actual fact, then there is a drugs economy at different levels as well....(Margaret, PW)

I don’t think that happens in the way the media sometimes portrays it to happen, that there is one big drug dealer and everybody is running here and there for him. I think it is much more spread out. (Aideen, PW)

Love/Hate – a lot of young people suddenly thought they were cool! And it wasn’t cool! Life may have imitated art – I think it got worse after that! Middle class actors!
(Anne, PW)

Context – Poverty, Structural Inequality and Normalisation

Poverty is the backdrop but so often it goes unacknowledged. We talk about polices about crime, drug treatment, early interventions, you know. Sometimes we talk about disadvantage, but the only thing that will sort all this out, or not sort all this but face up to it, is to start highlighting poverty. It hasn’t gone away. Just the language changed. (Katherine, PW)

The contexts in which the drug economy/economies operate were highlighted and some key issues arose – the impact of poverty and the pull of economic necessity and survival that engaged wider swathes of families and communities into dependence on, if not involvement in, the economy and the material resources it brought into the community; the attraction and initiation of young people into the activities of the drug economy as a ‘career choice’, one that offered the promise of more material goods and income; the trajectory of addiction that sometimes preceded but often followed recruitment as potential access to drugs – merchandise, the product – increased; the frequent fallout in terms of intimidation of drug trade involved individuals and their families as their own personal use of drugs surpassed their economic success and their continued viability as a seller was undermined; the intimidation of those who were purchasers of drugs whose debts increased; the powerlessness of individuals, families and the community to respond; and the ineffectiveness of An Garda Síochána to deal with intimidation, to protect or to secure the trust and confidence of the community.

Sometimes the drug economy activities are indistinguishable from other ways of coping with and managing poverty and lack of social resources. All participants believed that poverty was the motivating force for people’s involvement, not just in the criminal activities themselves, but in the reliance on the proceeds and material goods accrued.

It all starts with poverty, the pressure to provide, the guilt, it’s all about survival. The women, their families had so little over the generations. In this community, the drug economy gives access to things that are under the counter and they are easier to accept because the reality of need is much higher.

(Celine, LE)

Well, there is poverty, and that goes without saying most of the time, except it needs to be named. And the lack of material goods, Christmas, for example, how difficult that is. So, I think particularly the women from here, because they have had so little even generationally themselves, there are very high

expectations. And so, the pressure on them to provide, whether perceived or real, is phenomenal both from their own children, because from the absence, the not being there, the guilt around their drug use and everything else. ...

(Siobhan, PW)

Involvement in drug economy activities is ‘normalised’ for those involved with illicit drug use activities or the use of street drugs. While there appears to be a very ‘sophisticated’ and organised drug economy and industry, resulting economic activities such as exchange, bartering and the sale of stolen goods amassed through shoplifting happens at the street and local levels and is reportedly quite prevalent across many communities as a means of survival.

If people didn’t have access to an informal economy out there, they’d probably starve. They probably wouldn’t have much of what they need, like cigarettes, for example. Everything, even food, comes through the informal economy after being robbed from the operators in the formal economy. But the reality is that many citizens of this state including children would experience significant hardship without those goods or commodities. They certainly can’t survive on the social welfare benefits and allowances off the state. It’s an underbelly, a parallel world.

(Margaret, PW)

Poverty, structural inequality, marginalisation and lack of resources are much associated with the communities in which drug selling and using is taking place and were mentioned in almost every interview as the backdrop to the drug economy under discussion. There was also a clear view that the context in which drug economy thrived was one of disadvantage. The intractability of the presence of drugs issues over generations and a sense of ‘no exit, no escape’ from these was palpable.

Of course there is only a percentage in any community involved, vulnerable to it. They’re not all involved. Not everybody is in bits. We have to ask: What are the particular vulnerabilities that the drugs economy

latches on to? But what are the strengths in communities too? (Carina, PW)

Unfortunately, when you break people down, like when people are living in dire situations, where they are reliant on an informal economy, when it is a day-to-day existence, you can't plan for anything because you don't have that base under you, that women will still put other people before themselves. I don't see that with men (laughs) to the same extent.... The state almost endorses the informal economy in terms of the systems not working. (Margaret, PW)

Within that context, stolen goods are widely available, 'it's anything that you want to order, what you need so there is a kind of bring and buy sale' (Siobhan, PW). The presence of those using drugs and engaging in professional shoplifting ensures that there is a steady supply of goods that meets the many demands and needs in the community.

It is really hard in a community where there isn't much, to avoid being a part of it, do you know. Stolen goods, food, clothing, toys, all of us in some way depend on all of this to just survive or get through the pressure times, like the communions, confirmations, Christmas, birthdays. People want to give their kids the best. Very often it's a choice – it's the moneylender or the stolen goods. I know what I preferred back then. (Janet, LE)

Families wouldn't be struggling if there wasn't structural stuff there, you know intergenerational poverty and the ways areas like this are not invested in, but if you break that down, there's nowhere near enough resources, a lot more is needed. Resources, through crime, may make an area look more affluent than it actually is. It's defiance, survival in the face of poverty. How it looks and how it can be two different things. As a society we are very good at hiding things with statistics. (Patricia, PW)

As a result of a thriving 'under the counter market' in goods, relationships with authority are often problematic and attitudes to An Garda Síochána ambivalent and often hostile. Some asserted that

community policing, policing forums and ongoing dialogues and bridge building with An Garda Síochána were crucial activities to be pursued by community-based agencies and local people. Yet the hatred and distrust of the police were highlighted and others too offered their assessment of the futility of a criminal justice response.

The impact of policing is also viewed as often unhelpful. An Garda Síochána are viewed negatively, sometimes experienced by the community as 'provocative', 'disrespectful' and 'intimidating' to the community, young people and their families. While families and households in the community may need protection because of bullying, harassment, and being intimidated or coerced into inadvertent drug economy activities, the 'guards' are often viewed negatively 'as the enemy' and reporting of such activities is avoided. Relationships with authority are often problematic and widespread mistrust, fear and anger abounds about the official responses to issues, problems and reports of crime, in cases where they are reported.

You just don't engage with them or seek help assistance and advice from them. As a result many families may be at risk of charges, sentences, arrests. (Shauna, PW)

The communities are so disadvantaged and deprived and if not being run by drug dealers, it's certainly stitched into the fabric of these communities and there is so much intimidation and violence, the guards don't even hear about it, they can't touch it, they can't get in there, so that it's not that there isn't a place for justice but it isn't working ... people will turn to others, drug dealers, big players for protection. (Sandra, PW)

This sense of distrust in authority was perceived by professional workers as widespread in local communities and was also raised by many of the participants with lived experience. Their sense of a lack of safety was exacerbated by the belief that the authorities did not have their welfare at heart. Responses to the women's experiences of sexual assault, rape and domestic violence were seen as falling short by both groups of participants.

They don't feel they can go to the guards – will turn to other drug dealers, big players for protection. It's like a form of control, it's transgenerational when you're living in a community like this, that experiences so much poverty. It's cycle after cycle who's involved, it's transgenerational. It does, it gets passed down, definitely. Women getting involved in doing stuff that's illegal to survive. Yeah, yeah, a lot of that. (Celine, LE)

The Covid19 pandemic further revealed many inequalities, shortfalls, hardships and deficiencies, heretofore unrecognised, while the pandemic and restrictions were seen as 'making life even more difficult to endure'. Some things became more evident as certain people stayed or had to stay in public places or spaces, on the street, while others isolated and stayed at home.

During Covid, we saw it so clearly! People looking for bread, milk and cornflakes – the basics – being paid every two weeks – and with all the debts, the coercive control. Women's role is keeping families together – their own substance use and looking after others.... It's about survival, poverty and the need for a state response. (Brian, PW)

Some were unsure whether there was an actual increase in these phenomena – poverty, violence, sexual violence, sex work and sex-for-drug exchanges – or whether the 'Covid context' had merely made women more visible and their experiences more evident to others around them and to services.

No, there's nothing new really, but it was more obvious during Covid – women were trying to hide it before and then couldn't hide it, it became more obvious. (Patricia, PW)

There was also a fear among those involved in service provision that perhaps women had been careful about what they revealed or disclosed to key workers, counsellors, doctors and nurses prior to the advent of COVID-19.

Do you know? I think Covid was really frightening and scary for everyone, and some of us were traumatised. But we (workers) were safer, we were protected in

lots of ways. I feel guilty about it, really. We did know about it all. None of this is new, is it really? It made it, I think it made us open our eyes wider in horror and in greater recognition of the extent of the horrors of the women's lives. (Katherine, PW)

A lot of my thinking about women's role in the drug economy has been affected about what we have seen during Covid but for the period of time when women are involved in the drug economy it is all part of a whole and they fit their drugs in around everything they do. (Brian, PW)

Another professional worker highlighted that

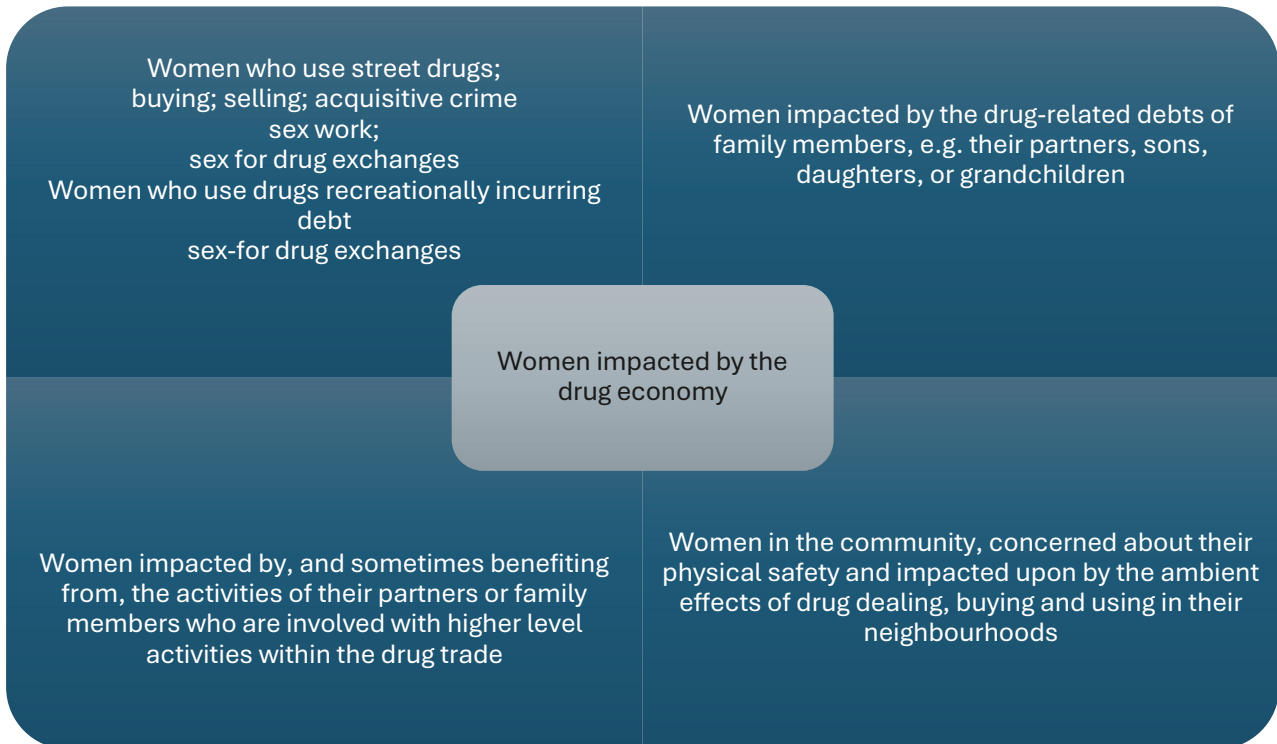
When the money wasn't around and harder to get during Covid, both (women and their partners) were losing out and they'll either have to start selling or perhaps find other avenues to find money and for women the obvious avenue was through sex work. We certainly have seen an increase in women talking about sex work, and sex work from their own homes. (Lorraine, PW)

There was also a clear view that the context in which the drug economy thrived and flourished was one of disadvantage and poverty.

For a lot of people, where wages aren't very high, this is a way out of poverty. It's not around judging that but it's around highlighting the risks of that life. When you're in a position of extreme deprivation and someone gives you 500 Euro to store a bag of cocaine, you're probably going to take it. But that's the world we live in, that educational deficit, that poverty piece are contributory factors to these decisions. Survival and poverty! (Triona, PW)

If you're desperate, you'll take the shitty deal. So, it's not really the flash cars, and holidays in Spain. A lot of the people who are involved in the drug economy are shit poor.

(Anne, PW)



Women Impacted by the Drug Economy

I think it just goes down to the gender inequality in our society generally and women can be manipulated by men in the drugs scene. Every attitude in services, in society, it's the same in the drug scene. I think women have a harder time. (Marnie, LE)

Women are reportedly impacted by the drug economy in Dublin in many ways, through direct involvement with such activities and by association, through the involvement of partners, sons, daughters and other family members. Women are also impacted through living in a community and environment affected by drug economy activities, that are both visible and audible. Women are impacted upon as victims of crime. Women may also be affected by their employment and their involvement in professional work.

Women are not homogenous groupings in any of these categories and there is a wide range of experiences that are understood and experienced in different ways and that may even overlap across the life cycle. Women impacted come from a range of different backgrounds. However, a few generalisations were common to almost all accounts. The drug economy is predominantly seen

as 'a male space' and women generally are believed to 'be forced away', 'pushed away' or 'kept out' from these male spaces, and only brought or welcomed into these spaces when they have a value or a 'service to deliver'. The experiences of women directly involved and engaged with the drug economy and trade, those who are using drugs, selling, and engaging in a range of illicit and other activities to access and maintain their own, their partners' and others' drug supplies, will be focused on in greater detail in the next section.

Many women are engaged in activities to 'service' the economy and complement and assist with many low level activities. Women often 'provide services' to men and boys, keeping it going, they dress, feed, shelter and deal with the debts – playing a maternal, caring, nurturing, supportive and protective role. Women are engaged with tending, caring, looking after others and it is generally agreed that the economic and other burdens arising with caring for families and partners with limited resources are greater for women. As one of the participants said, they are 'molls, mules or mummies' and are all defined through their relationship to men, their 'partners, their bosses or their sons'. Even where women are involved in drug trade activities, women deal but men control.

Women may be impacted by the involvement either in drug use and/or drug economy activities of their partners, while not engaging in drug use themselves. However, the consensus was that for most women there is little gain. It was also reported by several professional workers that young women who became involved romantically with men engaged in the drug trade had come to the attention of the criminal justice system as a result of allowing their homes to be used for storage of drugs, money and weapons.

Women in the community are normally the primary caregivers, they manage households, engage in full-time or part-time work, they care for children, teenagers, adult children and grandchildren. In addition, it was highlighted that they manage poverty, financially resource and manage funds in the household and meet their families' needs for shelter, heat, food, clothing, often well into adulthood.

Women are impacted by the drug economy activities of other family members, specifically their teenage and adult sons. Therefore, when children or young people become involved in illicit drug use and drug economy activities women bear the brunt of responding, assisting, trying to access treatment and support. They also become the targets for the repayment of debts accrued by sons, daughters and partners.

If anything goes wrong for the kids, the intimidation comes to them. All the young boys have mothers and they are ostracized because of what their kids are doing.

(Lorraine, PW)

Increasingly, then, women have been coerced into engagement with activities at the higher level to repay these debts and keep their families from harm. For some women, their initiation into drug economy activity has been instigated as a result of their young son's or other family members' involvement.

The chaos that happens around the drug debt is phenomenal and the violence, and the situation that even if someone is dead the drug debt continues. In the past if someone died or went away, the drug debt would go with them. ... The levels of drug debt, for their

children's debts, debt borrowing, for the women, it's just so difficult. (Siobhan, PW)

Drug debts of family members have exposed many women to significant risks of harm. Women often manage to repay debts of their partner, sons, brothers and other family members.

It is to their doors the dealers come and demand the repayment of their children's debts, for the money they owe for drugs they purchased on tick or for the drugs they used from the stock or supply they were expected to sell. In the past the dealers wouldn't expect families to pay. Now they threaten to burn them out.

(Patricia, LE)

They may borrow to repay debts from official lending sources or money lenders. They sometimes engage in shoplifting. In a number of situations, their homes have been made available to and used by those producing, storing and selling drugs. Professional workers spoke of hearing how drugs, firearms and ammunition have been stored in family homes in order to pay or service debts, that are often unending.

It is also reported that women servicing the debts of family members experience significant mental health challenges, stress, anxiety and extreme fear. This is often mitigated by increasing use of prescribed drugs, increasing alcohol use and in some cases initiation into illegal drug use.

The levels of stress, anxiety and fear and all the underlying issues when you live a life of stress and strain. Many women deal with it in isolation and with not a lot of support.

(Carina, PW)

There's shame and embarrassment, they carry the bulk of the work in the house, the feeding, the cleaning and then they have all this on top of it all in their wheelbarrow. They don't want to go for help. (Triona, PW)

Increased drug use, such as prescription drugs and crack cocaine, relapse, and difficulties accessing treatment have been observed.

Mothers – often isolated, drink more, take benzos, fearful of bricks coming in the window and losing their child in the midst of all this. They are also in the shadows – becoming ill, if not addicted themselves, falling apart.

(Neasa, PW)

Professional workers frequently mentioned violence against women by children or young people who are involved in drug use and drug economy activities. Both women who use drugs and are involved in the drug economy and women with no involvement have had experiences of such aggression and violence.

Women have been traumatised as a result of the levels of threat, menace and violence. This is also reported as a stigmatising and ‘shameful’ experience for many.

Women living in this community, lone parents and sometimes vulnerable, and they have their own homes and they have risks because people show up at their homes and use drugs. So the home might be used as a drug using environment and possibly too they might end up holding money or drugs there. So there is a vulnerability there where women’s homes are being used. Perhaps she doesn’t have the capacity or strength to take control of that or put a boundary there.

(Lorraine, PW)

The presence of those engaged in street-level drug economy in communities can create an atmosphere of fear. Safety in public spaces was mentioned regularly and the level of fear and

trepidation among all women, but especially older women, in the community generally was acknowledged. Described by one professional worker participant as ‘curfewed’, others suggested too that women’s sense of ownership of their own communities is diminished and their isolation increases, denying them services and other opportunities.

Women in professional caring work in the drug work, community, social care and child care fields, were identified as impacted upon by the vicarious exposure to the harrowing and harsh realities of the lives of clients and service users attending the services in which they work. They mentioned sadness, grief, tiredness, feeling depressed and compassion fatigued. The levels of vicarious trauma among workers were highlighted.

I got really burnt out but my worldview is that most women are in some ways abused. Some of us stay in the work and survive, while others just pass through. (Anne, PW)

While we were talking, I was thinking about different women I’ve known over the years, talking about people you know so intimately in a way for such a long period and then they are just gone out of your life, you know.

(Margaret, PW)

Some professional worker participants also communicated their feelings of disillusionment and hopelessness regarding the women’s living conditions, lived experience and trauma, violence and coercion. They also spoke at length about their concerns about the lack of progress and improvements over time in the lives of women.



SECTION FOUR

Women's lived experiences of the drug economy

Introduction

Anything that captures anything or more about women's experiences in the drug world is really valuable. It is so exploratory, isn't it, because in my view, there is little understanding of women's experience in the drug economy.

(Margaret, PW)

What are the impacts of the drug economy on women directly involved? This section turns to women's lived experiences of 'business' and 'work' in the street scene and the drug economy, as described by women participants with lived experience and professional workers who have witnessed this experience.

All accounts highlight how their experiences as women, as women who use drugs, as women who manage households and meet the needs of those around them and as women who are actors in the drug economy are very much entwined. They 'do what women do' broadly in society in terms of domestic labour and emotional labour in the private sphere of family and home as 'household managers' in caring for others, partners, children, extended family members and sometimes, in addition to their own children, their grandchildren, the children of immediate or extended family members, as mothers, 'breadwinners' and 'providers'. They also work 'outside of the home' in drug use and drug economy activities.

Women with lived experience and professional workers agreed that women's experiences of drug use and involvement in the drug economy differ greatly to men's. These different experiences are believed to be and understood against the background and in the context of women's unequal experiences in Ireland, described often by participants as 'gender-based inequality' or 'patriarchal structures', despite the many legal and some normative changes over several decades since the 1970s in Ireland.

Participants spoke at length of the dual roles that women play in the private sphere of their homes, households and families and the public role they carry out in terms of drug economy activities, involvement in a range of both drug dealing activities and other acquisitive crimes, that facilitate their purchase and use of drugs. As long as women still have their homes and their children in their care, women are taking care of business in two worlds, in the private domestic sphere of the home and the public sphere in terms of both supporting their own drug use and their partner's use. Women "do it for themselves" and others.

Women also are making choices, aren't they? We are not just passive recipients of the people around us. What informs those choices can be different. If it is different for women in the world generally, it's going to be different for women in the drug economy as well.

(Carina, PW)

Women's adaptability and multi-tasking were noted by themselves and others.

Life for us is very busy, busy, busy. Doing, Doing, Done.

(Teresa, LE)

Women are good at changing how they interact in different spaces like the street, their homes and in services—sometimes they need access to help, services, to be rescued, but like they also need money and drugs.

(Katherine, PW)

When women are involved in the drug economy it is all part of a whole and they fit their drugs in around everything they do. So they're mothers, daughters, members of the community. They're managing the household budget and everything and then their involvement in substance use and the trading that goes on there, to my mind, is part of that overall mix. So money coming in is to fund the bills, put the food on the table, pay for the electricity and to get drugs. They're involved with partners, also with children and that whole picture that comes into play when you are talking about this topic. And it's not like you can just separate it out.

(Brian, PW)

What Women Do in the Drug Economy

The activities relating to the drug economy, described by all participants, were wide ranging. Women often changed their activities at different moments in their drug use careers and diversified and engaged in several income-generating activities simultaneously. Some had little experience of work and earning money outside of involvement in the informal or drug economy.

According to their accounts, women are directly involved in the economy; in drug use, in drug dealing, that is, drugs purchases and sales, in assisting in the preparation, bagging, and distribution of drugs within their communities and to other locations around the city; in some cases carrying drugs or money to and from other jurisdictions - trafficking; acquisitive crime, shoplifting, robbery, burglaries, fraud; in sex work; sex-for-drug exchanges; providing facilities in their homes for use of drugs, manufacture, holding money, ammunition and weapons. While professional workers mentioned begging or 'tapping' as another activity engaged in to raise funds for drug use, it was not mentioned by the women participants in interview. However, in later member checking with several women participants, when begging was discussed, they agreed that it was reasonable to include it in the list of drug economy activities.

Women often engage in income-generating '*work*' on a solitary basis or with partners, friends or social networks. In some cases, where they owe money or are indebted in various ways to players in the drug trade, those individuals may make demands to '*occupy*' their homes and use them as a base for a range of activities. The women variously reported that they worked with one male at a time, sometimes linking in with consecutive men, their partners, a relative or friend; with another woman, a partner relative or friend; with several women or by themselves. They rarely described themselves as a member of a '*group*', a '*cartel*' or a '*gang*'. Women often tend to be part of a couple, mixed or same sex; although it was often asserted that homelessness leads to increased isolation and women operating alone, especially within sex work.

Women with lived experience described becoming involved in drug use and the drug economy. Long histories of involvement in drug use were common, as were lengthy experiences of the impact of the drug trade and economy so their rich accounts and self-reports offer a chronological and historical account, spanning different eras in terms of drug use, and the nature of drug use, kinds of drug use and the impact over time. It is also important to note that while women become involved, conduct their business in the drug world and drug economy, and often exit these activities, with or without assistance, it is not a linear journey. Often it is a long trajectory of movements in and out of the economy, connected often to their endeavours in treatment and in recovery. Relapse and recidivism into illegal drug-related activities are common. Hence many '*comings and goings*' were described across such a career. Some careers were brief, others lengthy. Of the nineteen women participants, twelve described themselves as regularly or occasionally involved with activities either currently or in the recent past. Three described themselves as in the process of '*leaving it behind*' or exiting.

Participants offered accounts of their own experiences and those of their contemporaries. They described lengthy involvement with a range of activities across their lifetimes from early years. Some women reported a broad repertoire of activities to access funds both for their drug use and other needs, including those of their partners, families and children.

For almost all the women participants, however, involvement in the drug economy started with their initiation into the use of drugs. Some were involved in drug trade activities before their drug use commenced because of drug availability in the circles in which they moved. In addition, they described receiving payments in the form of drugs rather than money at an early stage of their involvement. They were then able to finance supply and finance their own and others' use. Others described how they were engaged by older boys, brothers, men and players in the community to '*run*' with drugs, carry drugs from one house to another, one street or area to another or down to a local park. Their initiation into drug

use followed on from this as opportunities to experiment, *'get a taste for it'* and start using regularly came about due to availability and *'ready and steady'* supply. One woman described how her involvement with the drug trade commenced along with some of her friends, all *'recruited'* together.

Carrying drugs, concealing drugs, going to meet people and like that I'd get paid for it. ... The majority of time it'd be in drugs, I'd be paid in drugs but I'd get paid well. Now there was a time before I was even addicted to drugs where I would have been heavily involved in holding drugs, and I mean huge amounts of drugs in my mother's home. I was only thirteen at the time and being taken advantage by someone – a really big player in the drugs economy. That was the start but I went on to do most things, shoplifting, selling, everything.

(Janet, LE)

Another woman described her initiation within her family.

I was handed drugs at fourteen years of age in my own bedroom. My older brothers, sisters and their friends were all involved and they used me for my skills that my Da taught me when I was tiny – shoplifting and carrying stuff.

(Natalie, LE)

For others, their drug use and drug trade involvement started later and often with a partner or following difficult life changing events, bereavement and loss.

I think mainly women might get involved out of fear. I did, I just didn't want issues with my partner. So a lot of women do, they would just do whatever just to fit in, keep things quiet and going good.

(Teresa, LE)

I would have been late going on them, it was from losing my child and I couldn't sleep. And so I started taking methadone, so probably me late 20s. No! I wouldn't, I would have been quite like good and followed the rules and I would have never been involved in anything like that before.

(Brenda, LE)

Reasons for women's entry into the drug economy are many. Participants described *'drifting in'*; seeing the benefits of being able to buy material goods; experiences of being *'invited'*, *'asked for favours'*, *'groomed'*; experiences of intimidation and threats; expectations of family members and partners; the need to earn money for their own drug purchases, their partners' use, and later with children, for economic survival – *'putting the food on the table and a roof over their heads'*.

The dealers/players know who to pick, groom, recruit; they can see you coming. They know the vulnerable ones. And they know exactly who to hit on at home, young single women with babies and kids, a partner in prison maybe, struggling to make ends meet.

(Joyce, LE)

All of the economic and household issues that revolve around drug use, like "Where do I get the money? How do I get the money to put three meals a day on the table for my kids and keep a bed under them and a roof over them?" That's the economic realities of life, a juggling act, it's all about survival, poverty. That's the political economy of drug use. The majority face that and have faced that, the lack of opportunities, the transgenerational poverty. They're used to thinking that way.

(Shauna, PW)

Its seeming *'normality'* and the slow drift into drug economy involvement were features of the women's accounts. Some women's involvement was long term over many years.

I was a serious addict, a serious thief. I made a career out of it, but I never made a penny out of it. Every penny I had, I gave to the dealers.

(Natalie, LE)

All emphasised that once involved with the drug economy, it becomes increasingly difficult to leave or exit because of the pressure from others to remain involved and the access to money and other goods that facilitate drug use and survival.

Women's Involvement – 'Taking Care of Business'

Women participants described their involvements in acquisitive crime; the selling, production, and 'holding stuff' – the 'wheeling, dealing, and more'; and sex work.

Acquisitive Crime

Most often participants described their involvement in acquisitive crime, particularly shoplifting. Women often are perceived as being 'lower on the rung' overall within the scene, and while shoplifting does not count as a drug trade activity, it is defined by many as an essential part of the drug economy more broadly, the money acquired facilitating the purchase of drugs. They buy and sell what is shoplifted and this is a major source of income. Many participants believed that they had an important role to play as they contributed much to the community in terms of accessing and supplying material resources in the form of stolen goods. They expressed pride about their ability in this regard.

Much, much more than just selling drugs. You don't have to be selling the drugs to be involved in it. Shoplifting! I was good at it, and I knew I could get good money at it. Everyone around ordered from me and bought my stuff.

(Janet, LE)

When I really got into drugs, I was with a man, a partner. And I got into it then, using tablets, methadone, heroin, and then smoking crack, anything. Robbing to get it, I'm a good shopper, doing anything to get it and for him too.

(Marnie, LE)

They managed the shoplifting and sale of goods and they confirmed that many women control the work in this area. Some did this work to supplement their income for day-to-day survival as their expenditure on drug use increased.

Because all my money was being spent on drugs rather than on my bills and I didn't want to be in debt to drug dealers, which I never was, I always paid my debts off within a week or so. So that meant rent and utility bills suffered, the food side suffered so I ended up shoplifting to feed myself.

(Amanda, LE)

Professional workers were also very aware of the women's involvement in these income-generating activities at community level.

There's a massive economy around stolen goods, shoplifted goods and around counterfeit goods. It's widespread and most people are impacted – they buy or they sell. Women's experiences in all of it are very shadowy.

(Neasa, PW)

Many women participants regarded and described these activities as 'work'. Almost all agreed that men, their partners, benefited from their involvement in shoplifting and usually took 'more than their fair share'.

It's one activity in which men don't really participate much and are less good at it than us, women. So we keep them in goods to sell, and things they need.

(Karen, LE)

Shoplifting that I did fed both our habits ... but if we were both sick, it was always me that went out and got the money, cause he couldn't shoplift without me.

(Brenda, LE)

In some cases, women described themselves as engaging in a broad range of activities to access funds for their drug use.

Robbing houses, offices and fraud mainly ... I was extremely good at fraud – it was business, company fraud – just a bit of fraud, paperwork, yeah very successful.... I was successful at doing what I needed to do to get drugs.

(Natalie, LE)

Several women involved in acquisitive crime stressed that they did not and had never dealt drugs.

I've done loads of things, an' done them well. I have never sold drugs, never. I have never done it. I hate pushers. I just wanted their product. Stealing is all I have done and then spent it on drugs. I have purchased, I was the one waiting around to buy their product.

(Natalie, LE)

They viewed those who sold drugs, as 'mostly men', as 'assholes' 'scumbags', and 'bastards'. They

differentiated between different types of dealers; those who dealt to support or feed their own 'habits' were regarded less negatively than those who sold drugs for their own gain.

All participants acknowledged their current or retrospective daily, weekly or occasional involvement in buying drugs for their own use or for their partners. Several women maintained that they had never sold drugs, although their partners were often engaged in drug sales.

Selling, Production and 'Holding Stuff' – 'Wheeling, dealing, and more'

Some women described themselves as engaging in buying and selling activities '*just to feed my own habit basically*', while others presented themselves as having a more active and purposeful involvement, making their own choices to become and remain involved with drug trade activities. While the women acknowledged their occasional involvement in street-level activities of selling and moving drugs, these were viewed as predominantly conducted, organised and controlled by men and they described themselves as being '*at the beck and call of the men*'. Supply chains were generally male-dominated, whereby women were contracted to sell certain drugs, in certain locations and to certain people, often other women.

Many women described themselves as dealing with and working alongside their partners rather than '*impersonal dealers like associates*'. The division of labour often reported between drug-using couples, where men were the providers of money and drugs while women were the home-based homemakers and receivers of drugs or being provided for, is '*a thing of the past*', if indeed it ever existed. Women are definitely expected to '*do the work*'.

It wasn't, it isn't like that for me. I don't think it ever was really like that for us ... and I can't imagine, you know, a fella, I could be wrong but I just, like, be more so a girl needing to run the house and look after the kids and making sure there's money for food and bills and all that. And getting the money for the drugs, finding them and topping him up when his stash runs out. And where a fella

might just, just like be hanging around with his friends on the street.

(Karen, LE)

Division of labour in the drug economy is also highly gendered in terms of what women and men sell and exchange. Gendered differences were observed about the types and levels of drug dealing and the types of drugs sold. It was constantly stated that men more often sell illicit street drugs, such as crack cocaine and heroin, the '*harder stuff*', the more '*serious drugs*'. Although women often sell crack and '*wash*' and prepare the product, an activity in which they have reportedly become more proficient, they were for the most part regarded as or regard themselves as the '*tablet sellers*'.

Dealers – men, most of the time. There are women who do be dealing. I'd get tablets more off women, but if I was on crack or gear, more often than not, they are men.

(Angela, LE)

However when they deal, women have to '*manage more*', '*manage more risk*', '*they have to multi-task*' on the street and in these scenes.

Men don't really have to. I think women have more to manage in these spaces. Actually, they're better at it really. A woman can walk into a room and be able to suss them out, calculate the situation, figure out what's worse, what is going to make us money, what's not going to make us money, what's going to be the quick sale and manage all those spaces. And men admire it actually. They fucking love it, if they're honest with themselves, they love it do you know. Cause they don't have to worry!

(Celine, LE)

Despite their skills, current increased risks and the isolation of moving through the scene were constantly introduced into the discussion. It was noted by both women with first-hand experience and by professional workers that the drug world and economy are now much riskier environments for women, especially with the current prominence of crack cocaine use in comparison with the heroin markets of the past.

Women sometimes ‘fit in’ in a masculine environment but are often not ‘let in’, kept away from male spaces and are left on the periphery where the less powerful ‘players’ usually control them.

I worked for a man. He controlled it, yeah. And again just always telling me, like threatening me that, I was to sell stuff and have whatever amount of money it was at a time, by a certain time. If not, my brother’d be harmed. No, I would have been on my own when I was selling tablets.

(Karen, LE)

A key message to women of ‘knowing your place’ is constant and yet there were also many suggestions of women’s important role in the economy. Women can be the ‘front’, or ‘like decoys sometimes’, a ‘safe pair of hands’, for a range of activities. There is a perception that women act as ‘foils’ to men’s detection, arrest and imprisonment. There is a widely expressed long-held traditional belief that women are less likely to be regarded with suspicion, stopped, searched, arrested, sentenced and imprisoned. However, this belief was strongly challenged by almost all participants as an outdated idea and one that is now particularly risky for women. For example, only one of twelve women interviewed, all of whom used or had used drugs and engaged in drug economy activity, had to date remained outside the criminal justice and drug treatment systems. Men’s eagerness to work with women, to recruit them and to use their homes for storage and other activities was evident in accounts.

I think it is more common now because of the amount of intimidation these days. Some are doing it because they want to earn money, some are doing it to please their partners, or because their partners make them do it, some to survive. It’s quick money ... but if I had been caught with the amount of gear I carried, I could have done a long time. The way the guards look at women now, is changing. There is more risk.

(Janet, LE)

They’re holding stuff on them, or at home or even in a hostel – drugs, guns, money – but also if a woman has a home, they are actually using women’s homes to torture people

that might owe them money because they owe money as well. And there’s the sex-for-drugs thing. In my time it was different. It is so bad now.

(Trish, LE)

Several professional workers also offer varying opinions about the perceptions of women engaged in crime. Several emphasised the changing perceptions, risks and the resulting harm to women.

Women can use our femininity and vulnerability to get off with stuff – we just get overlooked and we can get away with stuff.

(Carina, PW)

There’s greater involvement and visibility in terms of distribution, wheeling, and dealing, than they would have had before and perhaps an overfocus on women by guards as overcompensation.

(Lorraine, PW)

Quite likely, they are shifting large amounts of drugs because women can slip under the radar and certainly this is where the vulnerabilities kick in. Using their bodies, yeah sure drug trafficking! Highly vulnerable.

(Carina, PW)

Several women talked about their ‘moving through’ different places, on ‘full alert’, ‘always ready to run’. Looking out for others was often part of the deal but being ‘left on your own to carry the can’ or ‘take the rap’, or ‘the charges’ for men, even for their partners, were experiences often described.

And you were always chasing, you were always looking over your shoulder, you were always moving in that space of, not fear so much as constantly on the edge, anxiety, exciting, terrifying.

(Celine, LE)

Women’s physical safety while dealing was also highlighted.

I think that like going into it I didn’t realise how dangerous it can be for a woman because we don’t get noticed as much, see, because we always see men in that role. I think it’s just expected for a man to do it...

(Karen, LE)

I would've dealt before, cocaine, but it'd just be 20 bags, fifteen bags and I've got robbed when I got left on my own. ... You are more likely to be targeted if you are a woman dealing. ...

(Angela, LE)

Several women described the fallout from involvement, with regard to imprisonment and becoming homeless.

So the opportunity to make money by holding drugs, by letting people come and go from my apartment, with a large amount of drugs and to deal from there ... it was attractive to me because it gave me cash in hand ... the social welfare payment isn't really very much. I didn't end up making any money from that crime. I was too nervous to ask for the money and then I was arrested. So I paid for it, a painful price to pay, no benefit, no gain – imprisonment. I paid a lot of prices.

(Amanda, LE)

I sold, shoplifted and took drugs. Emm, I sold crystal meth, my partner would have sold heroin as well ... Yeah well, I would have had to bag up all the time for the partner. Yeah, he was mainly in control of everything but it was happening in my home and eventually I lost it and was homeless then.

(Brenda, LE)

The judgements and stigma arising from involvement with income-generating activities in the drug economy were stressed in many accounts.

Yeah, you're seen differently, people look at you different. As we said, it's more expected for the fella to go out and do it. But you see a girl there, then it's like this is different. I don't know what words to put on it and yeah, it's just, it's just completely different.

(Karen, LE)

Men are the sellers mainly; women are the purchasers of crack. Younger men, just out of their teens, are selling to older women, sometimes their mothers' friends. It's really messy. The stigma for women. The attitudes of these young men!

(Eva, PW)

Almost all stated that they had never engaged in violent activities in the course of their drug economy involvement, although many had themselves experienced intimate partner violence and other forms of domestic and family violence (sometimes but not always associated with drug economy) and intimidation, threats, bullying and sexual violence on the street associated with selling or purchasing drugs. However, it was suggested by many women participants and almost every professional worker that the drug world was increasingly violent. Some noted that women were becoming more violent to each other. Several women interviewed and others informally contacted acknowledged using violence towards others, men and/or women on one or more occasions.

I have physically fought men and I have left some for dead. No dealer got the better of me! They got what they deserved.

(Natalie, LE)

However violence and intimidation were seen as predominantly carried out by men against other men in the drug world, against women in the drug world and in intimate partnerships.

Women doing intimidation, I'm not sure that's happening, they are kind of at the back end of it, aren't they, rather than at the front end where the intimidation is happening or the hard selling is more, I would say, delivered by their male counterparts, and women are kind of in the background.

(Carina, PW)

While women are generally viewed and reported as being highly marginalised and at the bottom of these hierarchies, they may indeed be empowered by selling drugs or engaged in drug storage, manufacture, transportation and supply. There are some women who apparently defy the stereotype. They acquire a certain status, respect and power in the community and their economic survival is guaranteed, at least for a time. In several communities, it was reported that a small number of key players with regard to crack cocaine selling and control of the market were women.

Women sometimes run the show in certain communities. There's one woman, dealing, controlling, supporting her own drug use. She's selling but it's not gangland. She's big though.

(Linda, PW)

These were women who used drugs themselves, were key in supplying other women and men with the drug and were the '*exception rather than the norm*'. These women sellers and players have issues with crack and heroin, and were described as:

very violent, dealing in a very male way, in a very traditional male way, quite aggressive, quite violent, very controlling, That's not good to see.

(Lorraine, PW)

Women are ready, no choice really but to take up these roles, they are forced into that, they are coerced into it. The level of self-hate that they have, that's all they expect, that becomes normal. Domestic violence, when someone is using a substance is off the Richter scale because of the dependency and the need to get the substance as well so it is multiplied – the level of control or lack of control she has in her life.

(Siobhain, PW)

As suggested in many professional interviews, women dealers are a minority of those involved in such activities.

You rarely see women on the street selling. So either they are, you know, to the side or involved at a higher level or something like that. There's a small number I think at that higher level.

(Brian, PW)

There are women creating their own little drug cartels but not many. But there is nearly a sense of pride among women in that they provide their supply for themselves using whatever means other than just being provided for.

(Maeve, PW)

Sex work

Two women explicitly described themselves as '*sex workers*', and three women met during field-work engaged with sex work as a part of their range of income-generating activities. While many referred to the fact that their bodies were sometimes their source of acquiring funds, this was most often associated with holding, carrying and transporting drugs from one place to another. One woman said:

The one thing that I could be sure of was that my body was my wealth, my survival. I carried drugs and money in my body, I did runs back and forth from here to Amsterdam, London and back. I got involved in all sorts of relationships, including candy daddy, sugar daddy relationships, I looked after him in every way, including sleeping with him and got myself drugs. Then there was always the street, if other options ran out.

(Edel, LE)

Several women described various current involvements in crack cocaine use, from regular and habitual use to occasional weekly '*pay day*' use. One woman offered the following maxim: '*you lie down for brown, suck cock for rock*', acknowledging that, for some women, sex work or '*exchange*' is regarded as an accepted part of life. Despite that, there was little overt discussion of this aspect. Significantly, the participants discussed at length income-generating repertoires that included shoplifting, larceny, robbery, theft, fraud, drug possession and dealing, public order offences, violence and others. However, the silence regarding sex work was notable and many women spoke about '*other women*' who were involved in sex work. In contrast, professional workers talked at length about women's involvement with sex work, sex-for-drug exchanges and '*survival sex*'. The notion of being debt bound into sex-for-drug exchanges arose in many interviews with professional workers. This occurred less so in discussions with women participants. Only one woman described her experience as one of being debt bound or having to supply services to others as organised by the person to whom she owed money for drugs. The other women spoke of this as something that occurred from time to

time but infrequently. One woman offered an illuminating account of her experience that showed the dynamics of this situation:

So like it would have been times before where it is very opportunistic where you're coming along to a dealer and you don't have the money and it's not planned or anything, but it just somehow ends up that you negotiate. "I'll give you a blowjob for two bags, three bags", something like that. There's no dealer that is going to support your habit on just blowjobs and rides. So it will happen now and again but ...

(Angela, LE)

A small number assertively defined themselves as being or having been 'sex workers' or more often 'working girls' and spoke at length about the impact and import of these activities on their lives as women, as women who use or have used drugs. But they also acknowledged how they separate out their identities as women who use drugs and women who do sex work. Several professional workers were acutely aware of the women's reluctance to reveal their involvement in sex work to drug services, for example.

A lot of women don't describe themselves or define themselves as sex workers because the stigma, the label is a powerful thing. For many it is just a case of wandering into it in a more drug driven state. Because of the way things have changed with the law and street work there may be more people doing it in a more casual way. People wouldn't have traditionally identified as sex workers anyway; it would have been a 'working girl' or a 'prostitute' or something like that.

(Aideen, PW)

Women described the series of events that 'brought' them into sex work as similar to their entries or initiation into drug use or the drug economy. These ranged along a continuum from women 'drifting in' through need for money or drugs; making a more considered rational choice of sex work as a 'viable career' in order to earn money, survive financially on a day-to-day basis and purchase drugs for their own and partners'/others' use; women experiencing manipulation, coercion and or violence, being 'put

out there' to do the work, often by partners and also by people to whom they owed money; and 'exploitation', women being forced to engage in sex work without any freedom to choose or leave.

Involvement with sex work created even more strain for women in terms of stigma and reputational damage with their partners, families and children and the responses of services were sometimes regarded as harsher and more punitive for women.

The judgements and fall out, control, coercive control and intimate partner violence, incredible even from their partners, who may need and in fact benefit significantly from her usefulness and income in sex work as she is making his life comfortable as well.

(Eva, PW)

...the man wants the woman to be a good mother and look after the home and all that stuff, look after them, their needs and his. But when she slips and ends up using and things fall apart at the same time, if she is involved with using and sex work maybe, looking after stuff, but if she starts to struggle, it is thrown back in her face. We see a lot of domestic violence, mental abuse from partners saying, "Look at you, you can't look after the kids, and look at the house it's shit, you can't get yourself drug free, you've never made it, you're useless".

(Linda, PW)

Generally, women chose to make their money through acquisitive crime or sex work and then purchase their drugs rather than participate in sex-for-drug exchanges. There was a greater sense of power and control if it was a clearly defined purchase of drugs or a contract, a financial monetary exchange rather than 'barter' or 'services in kind'.

We'd make our money through working and then go and score. But it was really important that we would go to the dealers with the money instead of, how important it was for holding our own power with the dealers to go with the money that we had made through sex, but not with them. We'd be more secure and less indebted to them.

(Angela, LE)

This participant further emphasised that while sex-for-drugs exchanges do take place, it can often be an occasional activity engaged in by women who are already involved in sex work. However, there are often further risks here. She continued:

They may push it if they know you're working. When they take sex for drugs, they look down on the women that are doing that. So when it's just all business, there's a more equal footing.

Again involvement in sex work, sex-for-drug exchanges were stated to increase risks, having become a normal 'fact of life' within the scene, bringing women 'to the dark side, into a different world'. It was mentioned that they often now gather in 'packs of women', for protection and safety, a phenomenon less evident in the past.

The Impacts - Violence, Vulnerability, Intimidation and Trauma

The violence isn't always about the exchange. It is about the world that you're in, the domestic violence, the sexual violence. I'm not getting into it. I don't want to be graphic.

(Marnie, LE)

Survival, yeah, it takes its toll.

(Joyce, LE)

Women participants and professional workers reported the considerable risks and harms that women experience as a result of involvement in street-level drug use and the drug economy. These include physical harms, mental health harms, risks of street-level violence, threat and intimidation, physical and sexual assault. The impact on women of involvement in dangerous worlds is far reaching. Dangers, injuries and the lack of safety were described and highlighted throughout.

Women's experiences of violence and abuse, domestic, street and ambient; their experiences of stigma, discrimination and loss of status and 'respectability'; their 'loss of self', families, partners, and children; their loss of homes and in some cases, their loss of life were all raised as issues that 'need to be heard'.

Yeah, there was bad times and big impacts, there was violence, there was intimidation, a lot of control, it was everywhere and at home too, I got it too.

(Teresa, LE)

It nearly tore my family apart especially when I had my baby – that was the thing that changed my life. I nearly tore my family apart. I often got thrown out. I moved into crack houses, homelessness. It's that self-respect thing, not giving a bollix about yourself. A lot of what I lost would have been myself, you know.

(Janet, LE)

The experience of trauma arose in account after account of the professional workers and the women. The twelve women interviewed made explicit reference to 'trauma' and some also talked about childhood, adolescent, and lifetime experiences, some of which they experienced as traumatic.

Women offered accounts of diminished mental health and heightened levels of distress at moments, but they also discussed how they took control of their lives and accessed and become involved in life-affirming and restorative activities. Some had been diagnosed as having underlying mental health conditions, borderline personality disorder, PTSD, anxiety, and depression. Other women had experienced grief, bereavement and loss. Some workers also reported high numbers of suicides among women, particularly young women who have had huge cocaine debts.

Despite the suggestion that women remain invisible, some seemed to do little to hide their involvement in drug economy activities and several talked about constant vigilance by An Garda Síochána. Coming to the attention of the authorities and the criminal justice system was viewed as one of the most significant impacts of involvement in the drug economy, not least because of periods of imprisonment and the long-term impacts on opportunities for employment. Ten of twelve women interviewed spent time in prison and one on probation, therefore having contact with the criminal justice system. Of the 19 women with lived experience, only one participant had never been involved with the drug treat-

ment or criminal justice systems throughout her career in drug use and the drug economy. The stigma associated with criminal justice involvement was also highlighted, as was the impact of stigma on families and children. The impact of guilt, shame and resulting trauma arising was also noted.

Then getting involved in crime to get money to increase your purchasing power, to do sex work, to commit burglaries, all these things lead to a lot of psychological trauma. As a perpetrator, I think, if you do harm to others, that does come back to bite you, you know, in a way with shame, with guilt, with stigma in a probably much more serious way than the threat of imprisonment. Sometimes this is more of a battle for people. They might go into prison and spend a few years there and do the time and come out. But it might take longer for them to square things up for themselves, with their values and their place in society.

(Anne, PW)

Professional workers outlined at length their concerns about the impacts on women that further illuminated the lived experience of these impacts. The key issues that were raised included: the stress of women's coping and survival, their minding others, caring and 'keeping things going'; the level of risks for women on an ongoing basis and the levels of drug-related and sex work – related risk-taking; how women trade safety for survival and align with dangerous and violent partners for protection; and concerns about the overwhelming impact of gender-based violence and the drug economy.

Professional worker participants raised questions about the occurrence of intimate partner violence posing the pertinent question – 'is it taken seriously as an offence by all social services, An Garda Síochána and by the criminal justice system?' As mentioned earlier in Section Three, professional workers reported distrust of authorities as an everyday reality in local communities and many participants with lived experience concurred with this view. Official responses to women's experiences and reporting of sexual assault, rape and domestic violence shocked both

groups of participants. Women were often dismissed as drug users and their accounts were not believed or were regarded as not credible.

"Were they really raped? They use crack. They're a drug user. Stoned out of their brains. They have people in and out of their houses". It is just awful, the attitudes. And then nothing is done.

(Neasa, PW)

Overwhelmingly, professional workers asserted the need to listen to the voices of women affected directly by these issues.

You don't hear women's voices on the ground. I hear mostly men on the street. Everything is gendered. We need to hear women's voices raised in these discussions. They are not even 'invited' into them, well maybe there is a token one. That has to be different in the future.

(Linda, PW)

Women often seek protection from men who are violent in the belief that these partners will protect them from violence on the streets, in hostels, or where women are roofless and sleeping in tents. Despite the victimisation of women by men and sometimes families, many professional worker participants talked about how women have changed in response to a changing environment and drug trade. Being trapped in homelessness and relationships was a major concern.

We can't escape that women are at risk of being harmed by men and that it is at every single layer. But if you are drilling down to the drugs economy, it's going to be emphasised without a doubt.

(Carina, PW)

Unsafe – then protected by abusing men – safest option for her, it's better to have a protector, even if he is an abusive one. She knew what to expect, she knew that violence was going to happen.

(Katherine, PW)

They end up in prison, and then the stigma, usually it's the women who are really out there, end up in prison and they can be the front for a whole lot of things ... She got co-

erced into holding a lot of drugs, ends up in prison and it affects their children then, as they are nearly always the one looking after them, even if the partner is around.

(Siobhan, PW)

Coercive control, the decisions made by partners to hold drugs, hold weapons, to sell or transport, using the family home or the woman's home to store things when she has no choice but to agree were all listed. In addition, concerns were expressed that women were increasingly at risk of a range of physical and mental health harms as a result of their increased use of drugs; the fact that their homes were being 'colonised' or 'invaded' by others; the safety and welfare of children and families; increased levels of violence, domestic violence and drug-related intimidation, with threats and occurrences of physical and sexual assault.

Another issue arose in almost all professional workers' interviews, that of the coercion and in particular the sexual coercion of women with regard to drug-related activities or drug-related debt. During interviews as many as fourteen professional respondents hailing from different parts of Dublin City discussed the anecdotally reported high numbers of women across communities who are coerced into 'offering' their houses as venues for drug economy activities. In fact, most workers believed that women had little choice and that in some cases, men just moved in and 'settled' or 'colonised' their homes as their base and then pursued their drug-related activities. In other situations, it was described as an 'invasion' or 'hostile takeover'. In addition, many women are also believed to be coerced into sex-for-drug exchanges with dealers or are expected to pay drug-related debts through having sexual activity with sellers, dealers and other men. Again while women's involvement as controllers in a small number of cases was acknowledged, these 'operations' were viewed as predominantly conducted, organised and controlled by men.

But I know from talking with community reps there are a number of women that are being intimidated because of crack cocaine use. There are a number of communities around here where there is a concern for a

particular group of women that they fear are involved in crack use in some way.

(Neasa, PW)

However, while there is no doubt that home invasions and sex-for-drugs and debt servicing are occurring, participants spoke about it hesitantly. Many highlighted the 'moral panic' about women's use of crack cocaine and expressed concerns about the focus on hypersexuality among women using crack cocaine and the oversexualised explanations for women's use. One professional worker expressed concern about the moral tone associated with the emphasis on women's involvement with sex-for-drug exchanges.

Now there is a lot of, I suppose, over the last six months to a year, some people have been really going on about this, in a way that I'd worry about because it's really making the issue, in my view, very sensationalised about the number of crack houses, in inverted commas, the number of women, that are involved. But the tone can be quite hysterical and the tone in terms of describing the women that are involved, I found both disrespectful and patronising, you know speaking about 'single mothers' and you know 'women selling their bodies'.... It's a thin line between addressing the issue in a respectful and empathic way rather than a punitive or judgemental way. That is the fear. We want to deliver services that are loving, caring, empathic, kind and respectful. We need to keep that balance.

(Triona, PW)

Although these issues were mentioned without prompt in many professional worker interviews, home invasions and takeovers did not emerge in most of the interviews with women with direct involvement with the drug economy. This difference was notable. In addition, the notion of being debt bound into sex-for-drug exchanges arose in many interviews with professional workers, less so with women participants. Sex-for-drug exchanges were discussed as increasing in the context of the selling, dealing and trading of crack cocaine, particularly.

Women's drug use and sex work activities, selling and buying are often more home-based activities. A woman's home is an asset in terms of her economic survival. Women who are homeless and resident in hostels do not have a home as a resource. Women without homes, sleeping rough or living in hostels, also experience greater levels of exposure to a greater range of risks.

The drug economy also reaches into the homeless services and the hostel system. Intimidation and control of women by partners within homeless accommodation and among women in hostels was also raised as a significant issue. It was mentioned on several occasions that some women were dealing to other women in that context, and then organising sex-for-drug exchanges for women to service and pay off the drug debts accumulated.

The prison is viewed as having its own drug economy that has strong links to the drug economy beyond its walls. Participants described their involvement with such activities while in prison. Increasing violence between women was reported with a particular emphasis on how violent the prison environment has become. Increased drug economy, trading, and exchange activities may account for this increase.

By virtue of their involvement in illicit activities—drug use, crime and 'deviant' behaviour—women who use drugs and are mothers experience much concern and scrutiny. The collision of two roles, that of using drugs and mothering/parenting, may cause major difficulties and challenges for women, their children, their families and those practitioners who engage with them. The impact of drug use involvement on women's motherhood status and their ability to keep children in their care was also discussed. There is a significant difference between perceptions and expectations of women and men with regard to parenting roles.

A key moment in women's lives, where they move from being a mother to being a non-custodial mother and losing a child to the care of others, was described by women and professional workers. Both groups of participants also described this experience that had impacted many of their friends and kin and clients respectively.

I lost my children. I was badly affected, because when my kids, like my kids went into care over it, I lost my kids from it, like.

(Brenda, LE)

Women are poorer now, they may be more active than they were in the past, more impacts, more children in care now. They're redundant women, being busy is important. It's worse and more complex, more severe effects psychologically – the violence.

(Siobhan, PW)

Victimisation – 'Conflicting and nuanced views'

There was also an acceptance of the difference of women's involvement in crime and this was expressed strongly by many professional workers who highlighted the significant and 'harrowing and brutal' crimes women have been subjected to while involved in the drug world. Furthermore, there was a clear view that women's engagement with crime was more often victim-less and that victimisation had brought them there.

Men are in prison become of the harm they have done, women are in prison mostly because of the harm done to them.

(Shauna, PW)

I have met women who are dealing or involved in sex work, but I don't see it as involvement in the drugs trade, it's just a means to an end – survival. When you ask about the drug trade I am just thinking of these coercive and controlling relationships that bring them there.

(Triona, PW)

There is a strong sense of victimhood, particularly discussed by professional workers, while the women's resilience, strength, and perseverance was also acknowledged.

I sometimes marvel at their sense of resilience, survival, purpose, resourcefulness and very few women will talk about these sorts of things to workers because they are using them at times, they're playing the game to get what they need, because we need to know that they are the victims.

(Katherine, PW)

The women interviewed discussed their frequent victimisation in the world of the street and the drug trade but the majority of those interviewed resisted the ‘victim’ label. They saw themselves as ‘victims of circumstances’ rather than ‘out and out victims’. They strongly emphasised that they were not ‘hapless victims’ of men.

I was surrounded by men all the time because it’s a man’s world, that selling, that trade. I was surrounded by men all the time and I wasn’t sleeping with them. But I knew the energy and what I could get out of them really. It was that idea of playing the game but they were good people, some of them are good friends of mine to this day.

(Celine, LE)

However, many acknowledged male violence and control in the drug economy and the ‘world’ they inhabited.

I want to step back from feeling sorry for myself, step out of a victim role.

(Amanda, LE)

I didn’t feel like a victim. I know now that I was. I was in such a violent relationship. I was just so vulnerable. And the lack of respect.

(Janet, LE)

But I do feel that, I felt powerful, I didn’t feel like a victim, do you know what I mean, although we are. But people wear multiple hats and I know now that I was a victim of my own circumstance. But at the time, it’s a busy life, I think I craved busyness because it allowed me to the space to run away from things, you know.

(Celine, LE)

Another woman highlighted how there is often a ‘subtle dynamic’ at play and acknowledged that making money and survival demands an ability to ‘hustle’ and to do things that are ‘hidden’ and not ‘realised by others’. It is ‘part of the strategy’.

The drug dealers at the higher level, they control and own the product that runs it all and then as you go down the ladder obviously you don’t have the same level of control, but there is more of a status that goes with being

a dealer than with other things. Women are more likely to be at the bottom of that system, but they can fit in as partners to people higher and can be very active in that role and be involved in actually running things more.

(Angela, LE)

We are very good at it – probably better than the men. We often got away with most of it and didn’t get caught.

(Ella, LE)

Indeed, it is back and forth in many of the women’s accounts between notions of power and powerlessness, between being very skilled in managing situations, living on your wits, cunning, wiles, and on the other hand, vulnerability to and at the hands of the same individuals for whom they do so much.

I don’t think the positions of victim and villain, oppressed and oppressor, are static. I’ve been both during my time. At the same time I can switch from one interaction where I am being very obviously victimised to within minutes later, preying on someone else. I think most people do that because, here’s a cliché - it’s a dog-eat-dog world – and at times you’re going to be the one, you rob somebody else or something like that.

(Angela, LE)

Several women, looking back, described how they gained confidence, status, even prestige, in entering, succeeding and surviving in a dangerous world and a ‘cutthroat’ business. Despite trying to do so they rarely, if ever, succeed in challenging this male-dominated field.

When you step back from it, I don’t think anybody has control except for the people who actually own the drugs. They have the final say on everything. “We own this”. “We control you”. And they were men. The addiction had more control over me, when I sit back and think of it now.

(Janet, LE)

Women as sellers or in sex work are more vulnerable, to intimidation, theft, violence from men, so it’s safer when there’s men somewhere around in the vicinity.

(Trish, LE)

All spoke, some at length, about power, purpose and agency. Some asserted that they were very independent and purposeful at the time they were involved while on reflection they realised how crucial a role they played in a gendered way facilitating others and experiencing 'victimisation' and 'probably coercive control'. Others offered more nuanced accounts, regarding themselves as 'back and forth between power and powerlessness'.

I am proud! I can survive on my own most of the time. I raise the money, I don't have anyone to provide for my family, I do that! I can provide for my fella, I get money for him. If anything happens to him, I will be OK 'cause I have always done it. Useless! They have it easy! And they fuckin' get away with it. And we let them.

(Marnie, LE)

As discussed earlier, the drug world and the drug economy is seen as a male space where much of the power lies with men. There was a consensus that it is 'a man's world' in the drug economy. Women expressed strong opinions about their experience and believe that despite everything they are always 'on the backfoot', 'we are the drones, men have it easier'.

Women fill the gaps; they fit in in most aspects of the economy and do things that the men don't want to do or that they don't want to take the risk. You're more likely to just get used to store stuff and stuff like that and that's precarious. You're always left likely to keep, to be kept lower down on the rung and that men will inevitably try and take advantage of you. You take the risk and you don't always get the benefits. I was asked as a favour to hold some guns for him, but it's not really seen, women aren't really seen as part of the business. Obviously, that was a NO! (laughter) Fuck off!

(Angela, LE)

Men have more control. The biggies are men. Women, it's for survival, while you might get the feeling of power from it. Some of their economic needs and all is being met like. What it boils down to is growing up in a fucked-up community where there's no options for you and I think when I was grow-

ing up women were always expected to help out in the family. It is that sort of dependence on women and girls in the family... I think now the girls tell their Ma's to fuck off but there are still those who do take on the roles, the responsibilities, the parentification.

(Janet, LE)

With men, it always comes back to them as individuals – they do their own thing, they're selfish, it's all about me and my recovery and my health.

(Margaret, PW)

At the same time many women described how they are often protected by men in the drug economy, in their families and by their partners. There is significant discomfort about this issue, as they also receive many injuries and harms from the men with whom they live or work.

The women offered retrospective and contemporaneous accounts. Several women talked at length about outright angry, mixed and ambivalent feelings about their life experiences.

I am a very angry person. I think you know. No one ever protected me. My mother did try and I loved her to bits, but she was always in tatters. My father beat her to a pulp, and she couldn't stick up for me. She knew ... he had me doing stuff for him, running around with drugs and money from one place to another, from one dealer or buyer to another. I was tiny and everything was right there in front of my eyes. I don't say much to people about it. I won't give you the ins and outs, but I know you have to know. Then most of my life homeless, drugs and prison ...

(Natalie, LE)

Why do we do this? Why did I do it? Because you're fucked, you're traumatised, you think it's normal, you think that's OK, it feels good. And it does feel good, I know! You're protected by all these big men, you know. But it can turn at any moment. So it does feel good, well safe, but it's not all the story ... But you know what everything falls! They say that there's a war on drugs and on women, but you know like you very rarely succeed in the

informal economy because the drug trade is criminal, like it's a criminal act you know.

(Celine, LE)

Trauma, well it's something that's always at the surface, being reactivated, or you're trying to suppress it. Obviously living under that sort of constant stress and tension is not helpful for healing from trauma. It's very difficult to address the impact of trauma on yourself when you are living on the edge and trying to survive. So, it just becomes about managing constantly if you can even do that.

(Angela, LE)

Women's voices are often described as aggressive or passive, beyond the pale or "knowing your place". However, although the women often assume a tough exterior, the professional workers were very aware of the violence and aggression they experience.

Control, verbal abuse, insults, degradation, derision, put downs the stuff that doesn't leave physical marks, scars and bruises and then right through to bruises, broken bones, scars, the physical abuse and violence, awful violence, and sexual abuse, rape

(Katherine, PW)

Changes in the social context and the impact of drug use and the drug economy were highlighted. Women are then often more likely to be isolated and on their own or engaging in dangerous and isolating relationships. There are few benefits.

"Better the devil you know than the one you don't." "Better to be abused by one man, than abused by loads of men", I've heard women say these things constantly. "I've never had a safe home, a safe place". "I know what he's like, and I hate him at times but I'd prefer to be with him outside and I have some control over my life". Women came into my head as I was talking there.

(Margaret, PW)

The reportedly 'huge' and 'rocketing' harmful fallout from crack cocaine use and associated activities in terms of women's drug use, health, homelessness, experiences of violence, incarceration, traumatisation and re-traumatisation, sep-

aration from and loss of children and decreasing support and regard of families, and disconnection from services pervades these accounts and for women, there are 'no safe places' anywhere from intimidation, violence, control and monitoring, even from services.

Between a rock and many hard places, that's where the women find themselves a lot of times. They're stuck between the intimidation of the drug economy on the one hand or the criminal justice system on the other. But there's also, ehm how would you say? There's service-related kind of intimidation and being watched and monitored and being expected to conform, an unbearable situation I'd say – it is a kind of institutionalised intimidation or even violence that some have been through.

(Katherine, PW).

Exiting the Drug Economy

In interview, women with lived experience spoke about becoming involved in drug use and the drug economy, about their involvement in a variety of activities over the years and some talked about their exiting or exit from drug use to what they described as more 'prosocial' activities or a life beyond drug use. They described too their struggles to maintain that exit and to survive after having been involved with activities that brought not much but some financial reward and benefit.

Women participants agreed that ultimately crime 'doesn't pay'.

In the end it didn't pay, the crime did not pay in the least, free drugs, good quality at the beginning, but at the end, it was a nightmare...

(Amanda, LE)

Several professional workers expressed their opinions about the 'payback' and 'benefits' for women in no uncertain terms.

The drug trade? The women don't benefit from it. Who is profiting? I haven't met women who are at the top of it. I have met women who are dealing or in sex work, but they're not successful, they never have

money, they are homeless, they don't have fancy clothes, there are no benefits.

(Linda, PW)

These aren't the women in the big BMWs and sitting in the hair salon getting the hair done. They're just surviving. They don't get the nice clothes. Even if they rob them, they sell them!

(Lorraine, PW)

The main beneficiaries are not those who use and purchase drugs. There is massive loss! Death, debt, doing things to pay off debts. It is a nasty market!

(Siobhan, PW)

Women's drug economy involvement lead to their being further disempowered, victimised, detected, arrested, sentenced, imprisoned. They also emphasised the loss of contact with children while imprisoned, their failed attempts at family reunification after prison, the stigma, isolation after imprisonment and the attendant stigma following incarceration.

It ended with a very serious offence and I paid dearly. It is a thing I live with that every day. It isn't shame really, more like stigma and I feel it always. I'm here now. I've got all the answers now. I'm feeling good now.

(Amanda, LE)

I put it all in perspective what I haven't got now, and then I'll realise how much I value myself now compared to back then, do you know? I didn't value myself; I didn't value myself as a mother which is why I overcompensated with my child ...at least I know it's money I earned properly and I'm not putting my children at risk by doing it.

(Janet, LE)

Twelve women participants described themselves as frequently or intermittently involved in drug economy activities or recently involved but now inactive. Three described themselves as 'leaving it behind' or exiting. Significant challenges still exist.

I think a lot of women are sometimes forced back into the drug economy to survive. Like what's the point?

(Natalie, LE)

Four women spoke of their experiences retrospectively. Significantly they have moved from having past involvement with drug use and the drug economy to respected paid and voluntary work roles within the drug and community work field, as qualified workers. Their particular lens on this issue in view of their 'both sides now' perspective was invaluable.

However, if they leave the drug economy behind and are no longer involved in acquisitive crime, in drug dealing and other related activities, women often discover their economic status does not improve. They either experience continued unemployment in the formal economy or they may find themselves working still in the 'informal' economy, in low paid jobs, with little rights and considerable risk of detection and simply 'making ends meet'. Poverty, low income, and disadvantage persist into the life after drug use and drug economy involvement.

There was a consensus that women's involvement in the drug economy is 'not a new thing'. However, there was a recognition that it has 'been played down' and for various reasons, women's involvement, their activities, experiences and impacts have been left 'in the shadows'.

There is nothing new about the drug economy and the involvement of girls and women in it. There have been changes in how rough it is, how violent and degrading it is and the risks, violence, mental health, injury, and death. And there are changes and developments in how organised and sophisticated it all is now.

(Trish, LE)

Girls are there, probably were always there, doing things that are not as obvious, there not as noticeable. But it probably wasn't talked about, mentioned. Girls might get away with more than young fellas, who attract more negative attention.

(Teresa, LE)

These accounts highlight how women have always been involved to an extent with drug economy activities, how it is different for women and how their lived experience underlines their unequal position in the economy, their role as peripheral and the unequal benefits and fallout of such involvement. The drug economy is perceived as having far reaching effects on and harms for women. The experience is qualitatively different for women. It was observed by all participants, however, that women's involvement in the drug economy was a topic that had not merited a great deal of attention to date and required attention, participation by women in discussions and the need for the dissemination of such findings about women's lives.

Men often get asked about this topic, but women don't. And if we don't ask women about their own experiences, men will project the victimhood and the vulnerability on women, because that's where they see them. And it's not really where they see us, what they see is what they want to see, you know.

(Celine, LE)

The layers and layers that stop these women from coming out of the shadows needs to be heard, talked about and tackled at a national level. The dialogue or narrative needs to change around the drug economy involvement. It's hidden, it's over there and "it's not us, it's them" – the very same as the drug issue was.

(Neasa, PW)

I think it is important to put it out there and have an impact because if we don't get this piece out, then we nearly again, are we still reinforcing this silence? We've done this but let's not talk about it, let's not put it out there because we don't do that where women are concerned. Yes, it will require careful writing. There's been enough of sensationalising all these topics. But the perception, the understanding of those involved needs to be out there. It's been a good conversation. We don't get to have these conversations, anywhere.

(Lorraine, PW)



SECTION FIVE

Participants' Recommendations

Individualised Responses, Social Remedies – “*Fixing people or fixing the system?*”

An asocial analysis, focused on single issues such as health in isolation from social context or criminal justice responses in isolation from the social determinants, is unlikely in the views of most respondents to bring about any meaningful change. Poverty is central to the experience, both predating and following engagement in careers in drug use, crime and the drug economy.

Meaningful change will require a commitment to resourcing communities and addressing issues of structural inequality rather than simply ‘*throwing more services at people*’.

At moments in interviews with workers, a sense of hopelessness emerged. The intractability of these challenges in communities and the persistence of the impact of drugs and associated activities were acknowledged.

Almost all professional workers and many women participants highlighted the structural issues and asserted that drug policy ‘*missed the boat*’ as the focus became more narrow over time. The context and environment must be focused upon.

At a micro level, services, however, need to be adequately informed and aware of the broader social and economic challenges faced by women. They need also to be trauma-informed, be aware of the extent of experiences of violence in the drug world, the experiences of domestic/intimate partner and family violence.

Participants' Proposals for Service Responses – A Summary

In summary, participants called for a range of responses and issues that must be noted in supporting women engaged in drug use and the drug economy. They recommended:

Drug Economy

Recognition of women’s involvement in the drug economy, acknowledgement of the realities of women’s gendered experiences within the drug economy and further research into the lived experiences of women from other communities in this context.

Acknowledgement of the varied experiences of and the impact of the drug economy and its effects on the lives of women across the communities; those directly involved in selling and purchasing drugs; those impacted upon by sons’, daughters’, partners’, and other family members’ involvement in drug related activities; and by women in the communities affected by the impact of drug economy activities, anti-social behaviour and intimidation on the environment where they live.

Violence

Recognition of the occurrence of gender-based violence within the drug economy.

Harm reduction strategies that move beyond information about safer sexual and drug using practices and actively inform women about the reduction of the risks and harms and their vulnerability within the context of the drug economy, drug-related intimidation and within intimate partner relationships that are economically, socially and sexually controlling and coercive.

Move beyond solely educating women to be aware of and prevent domestic and other forms of violence. From a position of structural and gender-based inequality, it is highly discriminatory to expect women in these situations to solve them without intervention and assistance.

Dissemination of findings

Dissemination of these findings with a view to informing debate about women’s experiences and to impact on policies regarding poverty, disadvantage, resources and community development.

Promotion of practices, through the dissemination of key learning from this and other studies focusing on the economic realities of women’s

lives in care planning, key working, education, peer work and community development, that are gender-responsive, trauma-informed, peer-led and partnership based.

Services

Resourcing already existing social care and community-based services to continue and develop new responses – *“this is not an issue or problem that you can just throw new services, projects, or money at”*. Services, such as those responding to substance use, addiction, homelessness, mental health, domestic violence and coercive control and child protection, are crucial and best delivered by well-resourced and always developing already existing programmes.

Informing all organisations and agencies currently offering services to women about the economic realities of their lives, involvement voluntarily or because of coercion in these activities, taking account of trauma experiences, violence, and coercive control.

Supporting women in their caring roles in gender-specific and gender-sensitive initiatives and spaces. More in-person and virtual options to outreach to and increase the attendance and participation of women in services are proposed generally and specifically in the aftermath of COVID-19 restrictions.

Understanding, awareness and recognition within all services of the social context are necessary as is an appreciation of the economic realities and hardship experienced by women in the community and by women with drug issues.

Training

Ongoing and in-depth training about the impact of the drug economy on women and households is necessary for all services and agencies responding to women, including An Garda Síochána, the criminal justice system, and the staff within prisons.

Gender awareness and trauma-informed training with a view to increasing knowledge, understanding and skills in responding appropriately and assertively where necessary to women, im-

pacted by the drug economy, addiction, gender-based violence and trauma.

Exiting and work

Recognition of the difficulty of exiting from the drug economy. For many women, as they leave the drug economy their economic status does not improve. They may find themselves working in the informal economy, in low paid, unprotected and undeclared work. Therefore, pathways and exit strategies rather than punitive responses are necessary to individuals who are enmeshed or trapped within the drug economy. Addressing structural poverty, low income, lack of opportunity and the reform of the social welfare system are priorities.

The development of properly resourced peer work programmes to outreach to hidden women and groups of women that evade the attention of service-linked workers. Younger women are not coming to services or identifying themselves as engaged in activities that for women bring stigma at sometimes much higher levels than for men. It is notable that those recruited to participate in this study ranged in age from 25 – 60 years.

Anti-discriminatory practice, stigma and human rights

Understanding of poverty and inequality. The term ‘social class’ or ‘working-class’ is rarely used officially and sometimes, when it is used, it is viewed as discriminatory and labeling. However, in refraining from acknowledging social class and inequalities in terms of social class, classist responses and policies are often strengthened and rendered invisible in the terminology used – ‘communities’, ‘disadvantage’, ‘inclusion’, and ‘exclusion’.

Women with children suffer untold levels of stigmatisation and the stigmatising and stigmatised identity as a mother who uses drugs and engages in crime is a reported factor that prevents women from identifying themselves and asking for support from family, community and support services, including social work and family support.

The impact of stigma and its enduring impact in a life beyond involvement with criminality and

drug use were noted throughout this study. The importance of the continuing work challenging stigma and the exploration and development of innovative anti-stigma strategies was underlined.

Life after drug use and involvement in crime. Equality legislation, framed within an individual human rights framework, identifies nine counts focused on the membership of certain groupings, status or demographic characteristics. However, two areas unacknowledged that pertain to this research are those of social class and the status/rights of former prisoners/justice-involved individuals. It was specifically stressed throughout this report that opportunities are often denied individuals within the formal economy. For those who exit or desist from criminal activity, there may be even fewer opportunities in the formal economy. In fact, those with criminal histories are often denied employment within the statutory/semi state sector and the private sector. The return to a discussion of this aspect of ongoing exclusion from the formal economy is imperative.

Drug policies should be informed by human rights perspectives, public health models and gender-specific perspectives, inclusive of women, LGBTQI individuals and communities and other groups

Recognition of the continuing need for debate about the impacts of prohibition, that is seen as problematic and harmful. Some participants believed that legalisation of drug use would limit, control or even eradicate the power of those engaged with the drug economy, while others believed that decriminalisation would be preferable as legalisation seemed to be *'a bridge too far'*. However, the majority of those participating advocated a move away from the criminalisation and punishment of women who use drugs.

Future Research

Future research studies could remedy the acknowledged lack of diversity in this study, with regard to ethnicity and sexual identity, through using privileged access and peer interviewers from diverse communities affected by drug use and drug economy involvement, thereby including what have been described here as

'absent voices' and accessing a wider range of lived experience of impacts of the drug economy. Research carried out within participants' own communities and contexts by researchers recruited from within, for example, Traveller, LGBTQI, Trans organizations, Migrant and other communities would further illuminate the reach and impact of the drug economy.

Concluding Comments

Successive studies internationally have described women as marginalised, often passive and highly vulnerable to risks, violence and harm. Yet others describe them as in control of their lives, always powerful and purposeful. The present study offers findings that are nuanced and suggest that the reality lies somewhat in the middle. Women are often victims and perpetrators, sometimes simultaneously and other times are subject to violence at some moments and in some spheres, contexts and relationships and are powerful and self-reliant in others.

There are two stories related in this study, one dealing with the lived experiences of women and the other tells the story of an alternative, uncontrolled and unregulated drug economy in which and with which women interact in often less than powerful situations. The documentation of the extreme harm experienced by women necessitates that the systemic issues be addressed.

In an earlier study, it was suggested that we exist in a *'disabling policy environment'* where structures are centralised, there is an emphasis on performance outcomes, the problem is framed as an individualised or criminal issue rather than a social problem (O'Gorman, Driscoll, Moore & Roantree, 2016, p. 31). Most reports focusing on drug related intimidation and the drug economy in the Irish context have recommended local initiatives and responses to the drug economy (McCreery, et al, 2021; Bowden, 2019; Connolly & Buckley, 2016). However, it is perhaps crucial to identify higher-level systemic and legal responses that are necessary also. These have been advocated strongly by this study's participants regarding acknowledging the need for structural reform addressing structural inequality and poverty

eradication strategies. Where there are poverty and inequality, it is women who are very directly and arguably most affected.

The economic and policy contexts have changed significantly over the past 25 years since the establishment of Local Drug Task Forces (now described as Drug and Alcohol Task Forces) in 1997 following the publication of First Ministerial Task Force on Measures to reduce the Demand for Drugs. That report shifted the direction of policy and explicitly linked poverty and drug use, echoing earlier largely disregarded reports and research. Yet in the intervening years that message has been diluted, increasingly side-lined and has faded from view in further strategies. The participants, many of whom have lengthy histories of engagement in professional work in the drug and community work fields, stressed that little had changed in the lives of women, men, children and families living in communities affected by drug use, particularly now with a vibrant and increasingly violent drug economy that has gone from strength to strength. Women's involvement in the drug economy and the impacts of the economy on women generally are reported to have reached worrying levels, increasing risk of significant harms in terms of physical and mental health and wellbeing, living with the ever-present threat of physical and sexual violence, coercion, and menace. The '*unbridled power*' of the players at all levels of the drug trade and women's continuing peripheral, occasional, and '*service*' orientated activities in the economy place them at a great disadvantage in this world.

Much research conducted during the 1990s and 2000s in the USA and Australia was initiated as a response to changing drug markets, the advent of crack cocaine and the need to know more about women's lived experience in this context (Maher & Hudson, 2007). In the Dublin context, the availability and increased use of crack cocaine, particularly by women, was found in a range of studies, quantitative and qualitative, during the past few years. These changes in drug markets often push the research and policy agendas into neglected or abandoned areas.

The focus in National Drug Policy currently is on health-centred recovery or harm reduction per-

son-centred actions. However, the findings of this qualitative Dublin-based study echo numerous research findings internationally that suggest that the social context and realities of structural and gender inequality weigh heavily on the lives of women in diverse communities affected by drug use, occurring before and moving far beyond the addiction and mental health issues emerging. The First Report of the Ministerial Committee to Reduce the Demand for Drugs, echoed the findings of a much earlier 1983 study of drug use in Dublin (Bradshaw Report, unpublished but leaked) and highlighted the issue of poverty and its role in causation of demand and drug problems. The First report also briefly but aptly noted the differences between women and men's involvement in illicit drug use. However, over the years, the drug strategies focus turned back to Health and Criminal Justice interventions in isolation from the cross-cutting responses of the earlier policy debate. A return to the importance of poverty elimination strategies is timely, as suggested by almost all the study's participants.

Women's accounts of their roles and involvement in the drug economy and their lived experience have been recounted in detail in this study as have the testimonies of professional workers' understanding of their lives. The reports of increasing use of crack cocaine, involvement in sex work and the exchange of sex, extreme violence and the taking over of homes and various other resources confirm the impacts of the drug economy on women. The economic realities, their intimate partner and family relationships, experiences of domestic violence, child to parent violence, and coercive control by all around them are related in addition to involvement in drug and crime related activity.

Yet there is a sense from study participants that the agencies and organisations that provide services to women are in practice addressing issues regarding addiction recovery and desistance from crime without truly engaging with the poverty, gender-based structural inequalities and the true economic barriers and lack of opportunity facing women. While practice responses are necessary to focus on issues such as drug use, involvement in crime and engagement with the

drug economy, an understanding of the ‘aetiology’ of these phenomena in social rather than medical or criminological terms is necessary. A focus on changing individual identities from ‘deviant’ to ‘pro-social’ in the work of rehabilitation or restorative practices obscures the social structural explanations and causes and once again lays the responsibility for change with individuals, families and community. These understandings and explanations must instead, according to almost all study participants, impact on the future thrust of drug policy and national policies regarding structural change and poverty elimination strategies.

A gap is identified in the Irish context, and it is hoped that this qualitative study will attract continuing interest in this aspect of women’s experience, that their voices will be central to the continuing development of services and strategies. This study has offered the accounts of professional workers and of women who have a history of engagement in drug use and the drug economy. One of its strengths is that it offers rich accounts of professionals, all of whom have lengthy experience in the field and it offers invaluable first-hand accounts of women directly affected.

Their accounts have allowed us access to an understanding of the many ways the drug economy impact on the lives of many women who experience different types of involvement in drug use. It highlights also how the drug economy may impact on women who do not themselves use drugs but are associated with those who do so through familial or intimate partner relations. In addition, it also brought to the fore some of the participants’ observations of young girls and women’s current experiences in terms of their involvement. Finally, a picture emerged from some participants’ accounts of the widespread impacts on women, younger and older, as residents in communities where the impact of open drug dealing, the congregation of large numbers of young men and the ever-present ambience, threat and menace related to the visibility of drug-related activities presents challenges, imagined or real, to women’s safety and comfort moving around in their own communities and neighbourhood, even before dark.

In conclusion, as several participants summarised aptly, recommendations and the forward march of drug policy must be informed by women’s voices and women’s lived experiences, as hard as much of it is to witness.

What’s necessary is to keep communities and women in view – keep the spotlight there. A social response – not just health led. Yes, the national drug strategy has moved on in terms of being health led rather than criminal justice focussed – tying women into the Criminal Justice System is ludicrous – but this way of thinking about things is limited. It is a response to communities, poverty, disadvantage, structural inequality, these are the things that have to change – otherwise it’s a band aid response, that really changes nothing in the long term. ... We probably haven’t even scratched the surface in terms of what is going on. We need these conversations to continue about women’s experiences in their homes and hostels, the world of the street, the drug trade, the economy.

(Lorraine, PW)

There is a lot to be done, to change things, you know, at least that is what I think. Where do we start? The things we are saying here need to be heard by the powers that be. So, we have to shout. Lots of thing happen – the drugs, the crime, the violence – and maybe it is too late. Can it ever change now? But it should, and there has to be a start somewhere. It’s poverty, the generations of it, and that’s not changing and it’s us, women, who get the raw deal and have to deal with it. Really, we’re bottom of the heap, so society just has to change, it’s us, we change things, we get recovery, we do all the effort, but something else has to give. It’s about survival.

(Teresa, LE)

Study Recommendations

“Another service isn’t the answer ... not another service. We need broader strokes ...”

RECOMMENDATION 1

Participation, Representation, Leadership

‘Our voices must be heard and inform everything – nothing without us’

Women’s voices in their diversity and lived experience must inform services, practice and policy at every level regarding responses to drug issues, including that of the drug trade and economy. Women with lived experience must be represented and a part of all initiatives at every level of response to the drugs issues in terms of community, health responses and criminal justice responses. It is not enough to simply add aspirational actions pertaining to women in varying strategies and revisit at various points; rather it is necessary that women directly affected become key players in forwarding the dialogue and discussion, as the designers, authors and leaders of these policies and strategies.

RECOMMENDATION 2

Violence

The extent of women’s experiences of violence must be the subject of ongoing investigation, study and review. Recognising the experience of gender-based violence in the life experience of women who use substances and involved with the drug economy is crucial. The enormity of its impact in the accounts of women, as evidenced in this study, suggests that this dialogue continues at every level. Services must be gender-proofed and the services responding to domestic violence should be provided in a non-judgemental and non-discriminatory manner to women engaged with drug use, crime and the drug economy. Expectations of women to be drug free, exiting crime and abandoning activities involved with the drug economy in advance of referral to services, such as refuges, sheltered housing and step-down facilities, simply defeats the purpose. Considering the level of economic and psychological dependence on those with power in the drug economy, delays and reluctance

to admit women to services and refuge may leave them at even greater risk of violence.

RECOMMENDATION 3

Independent oversight

Independent gender-specific oversight groups locally and citywide must be established involving significant numbers of women directly affected, to work towards addressing multiple issues across the diverse groups of women affected by and involved in drug economy activities at local, city and national levels. Links with all advocacy and human rights groups will push this agenda.

RECOMMENDATION 4

‘The poverty in our lives must be seen to be believed’.

The impact of poverty and low income on women and the reality of the ‘feminisation of poverty’ must be acknowledged and central to an understanding of structural inequality, disadvantage and social exclusion. Recognition that any adequate policy response to drug use must prioritise poverty elimination or eradication strategies and must recognise the experience of women as bearing the brunt of economic survival and disadvantage is imperative. Increased investment in communities and the resourcing of families at risk are crucial. Structural reform, poverty eradication strategies and the overhaul of the social welfare system and its ethos have also been recommended. The need for far-reaching reforms to combat poverty was emphasised by many participants.

RECOMMENDATION 5

Gender Mainstreaming of the National Drug Strategy

A range of responses to women beyond those responding to women during pregnancy and motherhood must be explored. Women’s needs are extensive and reach far beyond this period of their lives. Young women, older women, trans women, trans men, traveller women, migrant women and others have specific needs and issues to be addressed. It is important to recognise the diversity of the groups of women affected.

RECOMMENDATION 6

Recognition and elimination of the criminalisation of women, punishment and incarceration of women

It is crucial that concerted dialogue, debate and review of policy and legislation be regularly conducted regarding prohibition and alternative legal and policy strategies as they impact women in communities. This will facilitate the lessening of the power base and control of the local drug trade and economy. Above all, a strategy of diversion and the abandoning of policies and practice that criminalise, penalise and imprison women is at the core of reducing social and drug-related harm to women, children, families and communities.

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