

Injecting drug use and the performance of rural femininity: An ethnographic study of female injecting drug users in rural North Wales

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Abstract

In this article I explore, through the analysis of ethnographic data, the demands of *gender* and *place* as they play themselves out in the lives of female injecting drug users (IDUs) in the rural communities of North Wales. The findings point to the array of role-relationships which women (attempt to) manage whilst also pursuing an IDU career and highlight how living in a rural community of place shapes how women attribute meaning to, and experience, injecting drug use. By incorporating theoretical ideas around gender performativity and gender spatiality, the analysis provides some understanding of how female IDUs construct their 'risk' behaviour within their own socially embedded and culturally meaningful discourses. The findings suggest the importance of an understanding of gender and place dynamics in the development of effective intervention strategies.

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Everyone knows everyone around here. And for women it's worse. It's like you're no longer capable of being a mother if you're using. There's a mentality that women shouldn't be involved in that sort of thing, not around here at any rate. I mean, God, what would people think? (Female injecting drug user, North Wales)

Introduction

The nature of the 'rural' and of its relationship to the 'urban' has been much debated within the field of rural sociology (see, for example, Newby 1988; Champion and Watkin, 1991; Halfacre, 1993; Murdoch and Marsden 1994). Here, rural studies have done much to challenge dominant representations of rural life and the assumed unity between locality, local social system and community. In addition, this work has allowed the consideration of a diverse rural population that may be thought of as 'rural others' – young people, the elderly, women, the disabled, travellers, gypsies, lesbians and gays (Bell and Valentine 1995; Cloke 1997; Little 1999). Far from enjoying an idyllic rural existence, it seems that many people experience social deprivation, isolation and marginalisation.

Such analyses serve to highlight the relative neglect of the 'rural' in criminology. In much criminological work, the city is taken as the primary location of crime and deviance and a focus on specific local environments has been lacking (Bottoms 1994; Donnermeyer, Jobes and Barclay 2006). Indeed, while we have witnessed a developing programme of cross-cultural research within the discipline of criminology, the comparative focus has tended to be across different countries. Comparisons within a single country, across regions or the rural/urban divide are

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scarce. This is because the urban remains the assumed reference point in many types of criminological inquiry and the countryside continues to conjure up images of a mythical crime-free rurality (Campbell 2000; Donnermeyer et al. 2006; Barclay, Donnermeyer, Scott and Hogg 2007, Deller and Deller 2012).

This myth has been deconstructed somewhat in recent years and, since the 1990s, a number of scholars have turned their attention to issues of crime and justice in the rural context. This work has addressed long-held presumptions about rural homogeneity, collective efficacy and (a lack of) crime (Dingwall and Moody 1999; Jones 2002; Howard League 2005; Donnermeyer et al. 2006). However, research on rural crime and crime control is still in its infancy and, as DeKeseredy et al. (2007) argue, much of the work is not informed by critical criminological theorising. In particular, like many other areas of criminological study, much rural crime research tends to be 'gender-blind' (Gelsthorpe and Morris 1988). Very few rural crime studies focus specifically on gender issues and rural men and women remain, to a large extent, 'invisible' as gendered victims (but see DeKeseredy and Joseph 2006; Donnermeyer, Jobes and Barclay 2006; DeKeseredy et al. 2007; Wendt 2009, Donnermeyer and DeKeseredy 2014) and as gendered offenders.

Little is known, for example, about rural women's involvement in illegal drug culture and about the various roles women play (Grant 2006, 2008). This is due, in part, to an assumption that illegal drug taking is an inner city 'problem'. As a consequence, there has been very little research on substance use (male and female) in rural areas, and little is known about how, if at all, such use differs from that in urban areas (but see Davidson, Sturgeon-Adams and Burrows 1997; Roberts and Wardhaugh 2001; Home Office/COI 2003). The little research that does exist suggests that illegal drugs are widely available in rural areas, and that rural drug use is

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increasing (Home Office/COI 2003). What is also known is that rural communities may be less likely to acknowledge that drug problems exist and that rural drug users often encounter difficulties in their relationships with drug service providers (Henderson 1998; Roberts and Wardhaugh 2001; Home Office/COI 2003).

The lack of criminological attention to rural female drug users may also be due to a tendency to see illegal drug use as a male ‘problem’ (Grant 2006, 2008). Here, we can see the way in which criminological discourses construct knowledges or ‘truths’ about illegal drug use and drug users (Grant 2008; Howe 2008). Injecting drug use, in particular, challenges traditional female stereotypes and it tends to be seen as a more ‘masculine’ than ‘feminine’ activity (Ettorre 1982; Grant 2006). As a result, there are very few academic studies of IDU behaviour in which women are the primary subject of study (exceptions being the work of Taylor 1993, Maher 1997, and Smith 2010, with women users in urban environments). In general, where women do feature, they tend to be either cast in the secondary role of sexual partner to a male IDU or the focus is primarily on pregnancy and on the welfare of infants born to addicted ‘crack’ mothers rather than on female IDUs themselves and their needs (Rosenbaum 1981; Oppenheimer 1991; Murphy and Rosenbaum 1999). Consequently, an in-depth examination of the array of roles female IDUs play is missing, even though it is important for understanding this and other female drug using populations.

While rural female IDUs are likely to experience many of the same problems as their urban counterparts, the socio-cultural and geographical characteristics of rural areas are likely to have particular ramifications for women, affecting both the patterns of consumption of, and the social responses to, injecting drug use. In this paper, I explore the meaning of injecting drug use in the context of rural women’s lives and

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how living in a rural community of place shapes women's experiences and perceptions of so-called 'risk' behaviour. The aim is to provide a description of rural drug use that is grounded in the identities and consciousness of rural female IDUs themselves. By focusing on the experiential inter-relationships of place, drug use and gender identity, I hope to provide insights on rural female IDUs' roles and relationships useful for the development of effective intervention strategies.

Research setting: How 'rural' is rural North Wales?

This paper is based upon ethnographic accounts of the lives and experiences of twenty active female injecting heroin users in North Wales, an area that includes the largely rural communities of Anglesey, Conway, Gwynedd, Flintshire, Denbighshire and Wrexham. North Wales covers a geographical span of 2,380 square miles and has a resident population of 670,000. Approximately thirty per cent of the population speak Welsh, although there are considerable variations between locations and, as a rule, the more remote areas have higher proportions of Welsh speakers.

Like many other rural areas, much of North Wales is socially and economically disadvantaged. There is a lack of legitimate opportunities and, with unemployment levels higher than for the United Kingdom (UK) as a whole and a heavy reliance on the seasonal tourist trade, North Wales is one of the poorest regions in the country (qualifying for European Union Objective 1 Status). North Wales has suffered serious economic decline in recent years with the demise of primary industries such as slate mining. Moreover, recent crises in the agricultural sector (including the outbreak of Foot and Mouth disease) point to significant problems for the present and the future of rural communities and for North Wales as a whole (Roberts and Wardhaugh 2001). Many of the small villages are like sink estatesⁱ with declining housing stock and poor local transport services. These problems have been

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compounded by an escalating population of urban incomers, increased competition for local housing and the co-existence of wealth and deprivation (Champion and Watkins 1991).

What constitutes 'rural' has become much contested within the sociological and criminological literature and there is little consensus among scholars regarding how best to define it. Definitions have tended to be classified according to population density, occupation (e.g., mining or farming) and socio-cultural characteristics. However, all attempts at classification may be subject to criticism as they may serve to construct stereotypical representations of rural homogeneity (DeKeseredy et al. 2007). It is now increasingly recognised that rural communities (and the people who live in them) are diverse and heterogeneous. North Wales, for instance, has a number of different rural spaces, including farming communities (with a low population turnover), areas dominated by seasonal tourism (with a transient population), areas dominated by in-migration and areas once dominated by primary industries.

North Wales conforms to Dekeseredy et al's (2007) four common criminological conceptualisations of places identified as rural. First, there is a low population density (Bell 2007). Secondly, there is a high level of acquaintanceship where 'everyone knows everyone' and individuals come into regular contact with one another. Thirdly, North Wales has less autonomy than in the past. For example, the development of major transport systems (road and rail) along the North Wales coast has narrowed the difference between rural and urban spaces. These developments have also made North Wales a major route for transporting illegal drugs between Ireland and England. Fourthly, the rural communities of North Wales are heavily influenced by external cultural, economic and social forces, being reliant on seasonal tourism as well as being subject to wider UK national policies. In addition, and

importantly, people who live in North Wales (and those who visit) think of it as being rural. That is, people give meaning to North Wales as *place* or geographical territory and this shapes how they live their everyday lives (Wendt, 2009).

The study

Beddoe (1986, p. 227) argues that ‘Welsh women are culturally invisible’. She suggests that representations of Wales and of the Welsh have always been based on male views of a masculine Wales (also see Gramich 2003; Moles 2007). Consider, for example, the Welsh national anthem: The Land of my Fathers (Mae Hen Wlad Fy Nhadau). In a similar vein, Aaron and Rees (1994) suggest that women’s voices and women’s versions of, and experiences of, Wales are lacking. Indeed, women’s versions of rural life, Welsh or otherwise, have tended to remain ‘hidden’ (Philo 1992) and it is only relatively recently that writers, working within an explicitly feminist epistemological framework, have begun to explore women’s subjective experiences as a way for understanding women’s lives within a rural context (see, for example, Hughes 1997a, 1997b). This work has pointed to the use of sensitive ethnographies in giving ‘voice’ to neglected rural others (Philo, 1992; Cloke 1997).

Rural female IDUs are something of a doubly hidden or hard-to-reach population. Certainly, they are an understudied population and may be considered difficult to access. In order to give a ‘voice’ to female IDUs living in the rural communities of North Wales (that is, to overcome their invisibility) and to learn about the meaning of drug use in the context of their everyday lives, an ethnographic approach was chosen. Such an approach breaks down the false distinction between researcher and ‘subject’ (Harding 1987) and it allows individuals to reveal their conceptualisations of risk behaviour and their links to others in high-risk environments.

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Life history interviews, shorter follow-up interviews and many more informal discussions were conducted with twenty active female IDUs in North Wales over a twelve-month period (2007-2008)ⁱⁱ. The women were recruited through ‘snowball’ or ‘network’ sampling techniques. In this method, the researcher starts out with an initial set of contacts and is then passed on by them to others, who in turn refer others and so on (Lee 1993). Snowballing is particularly appropriate for the sampling of rare or ‘hidden’ populations and is advantageous in cases where those being studied are members of ‘deviant, vulnerable or highly stigmatised groups. McKegany (1990), for example, highlights the importance of snowballing as a method for gaining access to drug culture and he points to the crucial gate-keeping role of certain key informants.

In this study, the initial contact was with a recovering female IDU, known to the researcher, who had stopped using drugs and dealing some three years previously. This woman may be seen as a ‘knowledgeable insider’, familiar with the beliefs and behaviour of female IDUs in the region. She sought out active IDUs, some of whom were friends from her drug-using and dealing days and some of whom were themselves drug dealers and ‘gatekeepers’ⁱⁱⁱ. As an active IDU, this ‘knowledgeable informant’ had occupied a high status in the local drug culture. As such, she not only provided valuable background knowledge, she also lent the project (and the researcher) a degree of credibility which smoothed the process of gaining both physical and social access^{iv}.

Throughout the main fieldwork phase, the women were met on many different occasions as the researcher became known to them and their networks. All but three of the life history interviews took place in the women’s homes or places of residence and all were audio-recorded with the respondent’s permission and transcribed

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verbatim for analysis using the constant comparative method of generating and linking categories (Glaser and Strauss 1967).

The women

The women interviewed in the main fieldwork stage (2007-2008) were aged between 19 – 46 years at the time of initial interview and were mainly North Wales born and/or had lived the majority of their lives in the region. All were engaged in varying drug using patterns and all used heroin intravenously on a regular basis. In all cases, other forms of substance use preceded injection drug use and many of the women, in addition to intravenous drug use, described patterns of poly drug use, including alcohol, other illicit substances and prescription drugs.

All of the women were poor, with a lack of regular employment, and most had left school with few or no formal qualifications. All but two of the women were mothers, often with a history of young motherhood. While most of the women said they were single, they often had a male partner who was often unemployed and also an injecting heroin-user. In some cases, the male partner was the father of their children. As well as claiming state benefits, most of the women earned money through law-breaking activities, principally shoplifting and other forms of theft or drug dealing.

Findings: Injecting drug use, gender performativity and rural spatiality

Studies of rural gender identities have explored the ways in which masculinities and femininities are ‘performed’ in the countryside (Little 2002). This work has demonstrated the continuing importance of traditional gender roles and has pointed to the nature and causes of gender inequality in the rural environment and community (Little and Austin 1996; Little 2002). Research on agricultural production, for example, has shown that the dominant forms of masculinity in farming have

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tended to rely heavily on stereotypical physical attributes such as strength, toughness, endurance and hard work (Ni Laoire, 2002). Other work has demonstrated the ways in which the dominant form of masculinity found in traditional agrarian ideology is also performed and reproduced in other rural spaces such as the pub, the home and the policy-making arena (Campbell 2000; DeKeseredy, et al. 2007; Hogg and Carrington 2006; Little and Jones 2000).

In contrast, the dominant construction of rural femininity remains firmly associated with the stereotypical attributes of nurturing and caring (Bryant 1999; Hogg and Carrington 2006; Moles 2007). Here, images of 'home' within the context of a domestic idyll, with women at the centre, remain an important part of a rural ideology. Aaron *et al.*(1994), for example, explore the highly gendered idealisation inherent in Welsh rural discourse, which, they argue, has acted to shape women's roles and everyday experiences of countryside living. They point to the notion of the Welsh 'Mam' (mother), and to the aspects of 'good' Welsh women's work that are most highly valued: the keeping of hearth and home and a 'feminine pride' with child rearing and domestic social roles.

Thus, it is suggested that rural space is gendered and that many rural women experience disadvantages not only in terms of the limited opportunities open to them in the countryside, but also in terms of the ideological construction of their gender role (see Hogg and Carrington 2006; Hughes 1997a, 1997b). Here, it is argued that material difficulties, together with a prevailing (masculine) rural culture, act to keep women in a subordinate position to men (Carrington and Scott 2008; Frances and Henderson 1992; Little and Austin 1996; Hughes 1997b).

The women interviewed in this study all provided rich ethno-depictions of their lives, their experiences of injecting drug use and how living in a rural

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community of place impacted upon them and their IDU careers. In their accounts, a number of overlapping themes emerged around injecting drug use, rural gender roles and relations, female embodiment, gendered spatiality and the management (or not) of the rural self. In what follows, these themes are explored in two complementary subsections.

Injecting drug use and rural gender identity

Merton (1968, p. 434), in his description of role-set theory, argues that actors in certain statuses or positions have an array of associated roles and he stresses the importance of analysing the ‘complement of role-relationships which can be thought of as comprising a role-set’. Merton’s role-set concept has resonance when applied to the study of rural female IDUs. For example, the status of active IDU brings with it a number of social roles relating to, *inter alia*, drug dealers, other IDUs and network members, criminal justice and drug treatment agencies. In addition, female IDUs occupy an assortment of other roles such as those of mother, wife, partner, girlfriend, daughter, sister, friend, employee and so forth, when they occupy the status of an active IDU. The women are not *just* IDUs as the following excerpts illustrate:

Ok so maybe I am a junkie, a smack-head, whatever, but I’m also a person, a mother, a daughter, a friend, a lover.

I spend some of the day here [mother’s house], watching TV, drinking coffee and helping Mam. Then, I might go into town, you know, hang out with my friends, work the shops a little, score some gear. Then, it’s back on the bus. That’s a typical day. My Mam looks after my little boy or else he comes with me into town.

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I'm always in a mad rush because the kids are in school and all that. I have to be home when they get here. So, I'm in a hurry to get them to school, then it's the hassle of getting the money, you know? The kids, my family, everything. It's hard to manage everything.

In the women's accounts we can see evidence of the multiple roles which they manage, or attempt to manage, simultaneously. Hence, the drug using and criminal activities of the women are structured around, and organised in relation to, other roles and life activities. For example, one of the women interviewed, who I shall call Ceri, is a twenty-five year old mother of two children. Most of the time she shoplifts for money to buy heroin. During the summer months she sells heroin to support her habit but also to support her children. She lives in a small village some five miles from one of the larger towns along the North Wales coastline. The following excerpt illustrates a number of roles Ceri plays. Each of these roles is played simultaneously and within the context of others.

Ceri: I want to stop using, get clean. But I'm hooked. So, I have to try to get the money for the smack, the kids. I'm really struggling.

CS: Tell me about the problem.

Ceri: It's really hard to break the cycle living here. I mean, I go out on the bus and I see someone ... I walk down the high street and I know someone who's a dealer. And they're like friends because everyone knows everyone. So, it's really hard to break out of that, you know? If they offer you the chance to dip or do up, what can I say?

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CS: How do you manage?

Ceri: I don't know. I've got good friends but most of them are using. In the summer, I sell for a few months, you know, to all the people coming in. I just want to pay the bills and get some gear. It's no big deal. The rest of the time it's mostly working the shops to get money or clothes and that for the kids.

This example reveals the way in which female IDUs try to manage their drug using careers in the context of other roles such as parent and social network member (also see Ramos et al. 1999). It also illustrates the way in which living in a local community of place can impede efforts to get clean. Indeed, many of the women described relationships (with partners, relatives, network members) which may hinder safe IDU behaviour. The following excerpt sums this up:

It's not like being in the city, where they've got programmes and needle exchange and all that. Here, the temptation is everywhere and it's difficult to say no when it's your friends or family. They may well know that you want to get clean but they don't care.

As we have seen, female IDUs do not manage relationships singularly. They attempt to manage several relationships and roles simultaneously (for example, the roles of parent and drug dealer). Here, of course, the potential exists for role conflict. Indeed, the women's stories were abundant with examples where different roles were not, or could not be, managed effectively. For example, many women described how their attempts to hide their addiction from significant others were often thwarted:

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Oh God, the worst time was when my Nain [Grandmother] found out I'd been using. Of course, she was shocked, the shame of it.

I never wear anything with short sleeves, even in the summer. I don't want people to see [track marks]. I hide it from the kids but they're growing up and they're not fools.

What brought it to a head was getting arrested for shoplifting. It was when I was arrested that people found out. There was a story in the [local paper] and news travel fast around here. So, suddenly the family dirty secret was out.

In this case, the arrest may be seen as something of a 'phenomenological jolt'; an unexpected event, raising questions about taken-for-granted perceptions and definitions of social reality (Wagner 1973). The women interviewed provided rich accounts of the difficulties of maintaining various roles whilst managing a drug user career and all could pinpoint occasions where they, or those around them, were forced to reassess and/or alter their understanding of social relations. In the women's accounts we can see the way in which the responsibilities of role maintenance are further complicated by the demands to fulfil gender and culture stereotyped roles.

There are eyes everywhere and people crying out for a good story.

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Growing up around here, where everyone knows everyone, there are certain expectations, particularly for girls. My Mum works in the village shop and so everybody knows who you are.

So it's OK for the lads to get shit-faced at Young Farmers or wherever on the weekend, but for a girl to be off her head around here, that's the end of the world.

The social construction of gender roles is significant to understanding female drug use in rural communities because research has revealed that in rural contexts, dominant ideologies and social constructions maintain powerful constraints on women (Grant 2008; Moles 2007; Wendt 2009). Here, it has been argued that gender divisions tend to be more rigid in rural communities, where traditional family values are particularly strong. Rural female IDUs attempt to uphold a particular gender identity but run the risk of being viewed as 'failed' women. Cultural assumptions prescribe a certain role to women and if they do not conform to such expectations others inevitably define them as 'bad' women.

Ettore (1992, p.75) points to a specific image of the female heroin user: the 'polluted woman'. She argues that heroin is a particularly 'masculine' drug. Hence, female heroin users are 'thought to have polluted their bodies and their identities as women' (Ettore 1992, p.76). In this respect, injecting drug use may be seen as an assault on female bodily integrity and embodied respectability (also see Ettore 2004; Grant 2006).

In rural spaces, women's behaviour is closely monitored and judged by others. The women interviewed in this study were all well aware of the potential for gossip

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and rumour and the consequent community disapproval of them as individuals and as women. While some of the women described the benefits of community watchfulness, most described the intimate nature of rural social relationships as particularly restrictive:

I think that there are good and bad things about living somewhere where everyone watches out for each other. Like if we were in a city, nobody knows anybody or cares about anybody. But in the countryside, people keep an eye on you, which can be good if you are sick or the kids are sick or something. Looking at it the other way, people are in your face all the time and are quick to point the finger.

When it became public knowledge the attitude of people around here was shocking really. I mean people I've known all my life wouldn't talk to me, cross the road if they saw me coming towards them. If I walked into the shop, people would stop talking or they'd start whispering. It was as if overnight I'd changed into this different person.

People are very judgemental ... it's like people are watching you all the time and are very quick to pass judgement. So, you can imagine the reaction to having a smack-head living next door!

The women interviewed described how they worked hard to avoid the risk of public gossip and condemnation. In their accounts we can see women's internalised discourses around female 'respectability'. In their attempts to pass as respectable or

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'good' women, we can see how rural female IDUs are upholding a particular gender identity:

I know I'm a good Mam to my children. They want for nothing. I don't give people any cause to judge me. I do my job for my family, put up a mask when I go out. It's business as normal.

I always make sure that the house is clean and tidy. It's never a mess. I make sure that there's never any gear around when the kids are here.

It's a struggle some times to keep on top of things, the house, the kids, coping with him [partner] and his family. But, I just put on a brave face and get on with it.

The women were all quick to defend their gender behaviour. Here we can see the aspects of public and private gender performance that are central to the construction of a particular version of rural femininity. The performance of femininity for these women in the community represents a socio-historical construction of femininity that is internalised in the women's sense of self and in their sense of belonging to place. Thus, we can see the relationship between place and identity.

Gender relations and rural spatiality

Ettorre (1992, p.78) highlights the gendered nature of the drug-using world. She argues that heroin use does not alter the 'structural position' of women. Rather, the drug-using world reflects similar 'dynamics of oppression institutionalised in

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wider society' (p. 74). Here, the performance of gender may operate to keep women in a subordinate position to men. Rural space may also be viewed as gendered in that it is embedded in relations of power (Campbell 2000; Carrington and Scott 2008; Wendt 2009; Donnermeyer and DeKeseredy 2014). Wendt (2009, p. 3), for example, points to the way in which gender stratification is maintained in rural contexts through 'dominant ideologies and social constructions'. She argues that social reality for people in rural communities is 'very much based on male dominance and superiority, and traditional gender roles' (2009, p. 63). Other writers have, similarly, argued that gender divisions are more rigidly policed in rural spaces, where cultural assumptions prescribe expectations of 'appropriate' behaviour for both men and women (see, for example, Hogg and Carrington 1998; 2003).

While telling their stories, many of the women interviewed reflected on their relationships with men. Most of the women were, at the time of the interview, living with or in a relationship with men who were unemployed and who were also heroin users. Some of the women had been initiated into injecting drug use by previous or current male sex partners. In their accounts, we can see how a gendered division of labour structures the women's domestic and family responsibilities as well as their drug-using behaviours:

When we first got together [partner] had quite a good job. I had the kids and kept the house clean. You know what it's like? Then the drugs came along and he lost his job. I still look after the kids and the house and that and he ... well let's say he's looking for work.

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We first got involved in drugs through some friends of his. He kept on at me to try it but I didn't want to at first and then one day I did. I didn't realise how quickly the habit would set in.

The first time we injected together was actually quite romantic. It was exciting him injecting me. Can you believe that? The kids were staying with my Mam and I'd got the house all nice and we had a nice meal. Then, he helped me to shoot up.

When he got locked up I tried to sort myself out. I was on methadone until I fell pregnant. So, I wasn't shooting up and neither was he when he got out. But then he started using again ... you know he was back with the old crowd. Because he was using and he wanted me to, I started again.

Previous research on women and heroin suggests that women's use is highly influenced by men (Rosenbaum 1981). Certainly, in women's stories of initiation into drug culture and their continued use, we can see some evidence of their men 'being in charge'. While the women described how the onus of responsibility for household chores and child rearing fell to them, they also were often the ones responsible for 'scoring' drugs. Many of the women resorted to shoplifting to get money to buy drugs for themselves and their partners. However, when it came to the proprietorial control of the relationship, women recounted stories of male dominance:

He gets quite angry at times, to be honest. He often won't let me see my family or my friends and follows me if I go out.

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We've come to blows on more than one occasion. I think he just sees me as his skivvy, looking after the children, looking after the house, looking after his drug habit. And if we've both been on the pop [alcohol] as well, it can get a bit nasty. I've been up at the hospital a few times.

Studies of gendered violence in rural communities demonstrate how living in a rural place can shape both the experience and perception of domestic violence (Hogg and Carrington 2006; Wendt 2009; Donnermeyer and DeKeseredy 2014). This work provides an understanding of the complexities of violence affecting women in rural areas and points to the meanings women give to their everyday experiences of social reality. Wendt (2009), for example, demonstrates how cultural assumptions and constructions of appropriate gender roles are significant to understanding domestic violence in rural communities. Similarly, Hogg and Carrington (2006, p. 171) provide a means of understanding gendered violence within the 'architecture of rural life'. These studies demonstrate the powerful and enduring influence of patriarchy within rural communities, including notions of male dominance, female domesticity and a gendered division of labour. Such sets of meanings, together with a symbolic ideal of rurality (Campbell 2000), held by both rural men and women, have consequences for women's experiences of violence and their ability to break free (also see DeKeseredy et al. 2007, DeKeseredy and Schwartz 2009; Donnermeyer and DeKeseredy 2014).

Whilst gender relations in rural communities have been constructed around sets of meanings that are more 'traditional and conservative than in urban culture' and which posit male dominance and a female domestic ideal (Wendt 2009, p. 64), Donnermeyer and DeKeseredy (2014, p. 47) point to the socio-economic changes that

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have occurred in rural spaces in recent years and to how these transformations have challenged traditional masculine identity and ‘rural men’s power’. Such changes in the rural communities of North Wales include the demise of the traditionally staple and male-dominated farming and mining industries, leading to high levels of unemployment and economic hardship. Donnermeyer and DeKeseredy (2014, p.48) point to a relationship between rural violence and economic hardship and suggest that rural men may make up for the ‘lack of economic power’ by wielding greater control over their wives or partners (also see DeKeseredy et al., 2007; Carrington and Scott 2008). In addition, they highlight the ways in which unemployed rural men reconstitute masculine power and prowess through, what Campbell (2000) defines as ‘disciplines of drinking’.

The women interviewed in this study all described themselves as poor and in their stories we can see a complex interplay of injecting drug use, male drinking practices, economic hardship and rural violence. One woman summed this up:

Our life is like Groundhog Day! It’s the same day after day. We’ve got an expensive habit and it’s getting the money for that. It’s hard when you’re doing so much of smack a day and living on benefits. So it’s trying to get the money to score. If we can score then we find somewhere to shoot up. Then, he spends the rest of the day in the pub with the lads, boozing and arguing, while I see to my Mam and get things sorted for her or go up to my friends. And at chucking out time at the [pub], if there’s not a good fight to be had on the streets, he’ll take whatever it is out on me. That’s my life, to be honest. I’m a punch-bag for all his frustrations with his life.

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This is not to suggest that the women interviewed are necessarily passive in their social relationships with men. Some actively resist and, in their own words, 'give as good as they get'. When asked about whether they had considered leaving the relationship, few women had contemplated it, not only due to emotional attachment to their partner but also due to an attachment to place, a sense of community and of localness. Many were reluctant to leave and some also feared the double stigma of being labelled an IDU and a domestic violence victim.

Where would I go? This is my home and I don't mean this house. I mean, well, here. I've lived here all my life and it's all I know. All my friends are here. It's, well, it's home.

What would people think if I was to leave? They'd think that I was walking out on him. Most people around here would probably take his side because his family's been here like forever. I could go back to [major city] but I was only little when we moved here and I don't know anyone. This has been my home for over 20 years.

It would be even more of a scandal around here if people thought that he was beating up on me. It's such a small place and with everyone knowing everyone. And, there's no escaping that. You would have to move out of the area and leave everything that's important behind. I love living here and I'm not prepared to leave the place.

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As the excerpts above demonstrate, the women saw the local space as their home and that they belong in the area. In a consideration of the spatiality of drug use, Maher (1997, p.134) questions the assumption, found in much of the drug literature, that 'men and women enact drug use within separate spheres'. She suggests that simplistic analyses of drug use in relation to the public/private dichotomy 'evades questions concerning the possible overlap between the spheres'. In conversations with the women in this study about where they live, their social relationships and their concepts of risk and safety in relation to injecting drug use, the women reflexively described a third 'local' space between the public and the private. While many women articulated the fact that rural public spaces remain masculine (e.g. the local pub) and most women defended their gender performativity in relation to the private sphere of home, when asked about injecting drug use as a social practice and experience most women reported that they tended to enact IDU in neither the public nor private. Rather, they identified a local space, a space of familiarity and neutrality for themselves and their male partners:

We never use at home, that's our policy. I make sure that there's never any gear at home. We also stay away from public places, you know? You see some people shooting up in the park or public toilets but I refuse to do that. Anyone could be passing and can see you and you know what people are like around here. You'd get the looks and the gossip and it would go back to my Mam before you know it. We have a local place that we go where there are people we know, you know? We look out for each other, in case something goes wrong.

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Me and [partner] always slam together or take turns. He looks out for me.

There's a guy that lives in a student house in [large town] and he lets us crash there for a while. There's always a few people there so we crash and sit and have a smoke, you know what it's like. It's a cool place and it means that we don't have to be out on the street or in some bus stop or somewhere in full view.

In part, the 'local' relates to areas within the community, which is to be expected in small rural environments. However, the 'local' also referred to others in that space. In the women's accounts, we can also see further evidence of their attempts to pass as 'respectable' women. Such stories of 'embodied respectability' are key to understanding female injecting drug users and their occupation of rural space. In rural communities, as we have seen, women's behaviour is watched and judged by others. The women's 'risky' behaviour at every turn threatens to jeopardise their 'respectability'. As a consequence, the risk assessments for rural female IDUs relate not just to their drug use but also to societal reaction.

Discussion

Recent debates within criminology have begun to draw upon the spatial 'turns' in geography to explore and interpret crime in the context of *space* and *place*. To date, much of this work has been quantitative (including, spatial analyses, spatial modelling, the use of GIS for data management and display) and reliant on large police recorded offence and offender datasets. The findings presented in this paper support the need for sensitive ethnographies to explore and interpret the meanings of 'risk' behaviour in the context of space and place.

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The paper has been based on the oral accounts of female injecting drug users living in the rural communities of North Wales, whose lives and options have been constrained, not only by their drug use, but also, in the majority of cases, by poverty and economic hardship, social marginalisation and violence. In their accounts, we can see the demands of gender and place as they play themselves out in the women's day-to-day lives.

The findings point to the multiple roles and relationships which women attempt to manage whilst also pursuing an IDU career and the ways in which living in a rural community of place puts additional constraints upon women to embody 'respectability'. Here, we can see the complex interaction between the self/body, social rural space and societal reaction as the women work hard to present themselves as 'good' women. In rural communities, women's behaviour is closely monitored and judged by others and, in order to 'pass' and avoid condemnation, women struggle to uphold a particular gender identity and a particular version of rural femininity that is, itself, rooted in symbolic notions of rurality.

Rural women experience disadvantages, not only in terms of the limited opportunities open to them in the countryside, but also in terms of the ideological construction of their gender role. Here, we can see an enduring social reality for men and women in the countryside based on ideologies of male dominance and female domesticity. Injecting drug use does not alter this structural position as women's access to, and experiences of, drug culture is similarly gendered.

The findings highlight the ways in which an understanding of the cultural constructions of masculinity and femininity are integral to an exploration of gendered power in rural space. Here, there is also a need to think critically about rural gender relations in the context of the socio-economic changes that have transformed many

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rural communities in recent years. Such changes have led to new ways of performing masculinity (including violence and substance use) and new forms of patriarchy in rural communities. Or, perhaps, it is just a case of old wine in new bottles. Either way, an understanding of the complexities of rural violence is important. Here, women may stay in violent relationships not just due to attachment to men but also, and importantly, due to attachment to *place*.

An understanding of place dynamics is also important when considering the ways in which men and women 'enact' drug use in rural communities. Here, it seems that, contrary to the common assumption that male drug users inhabit public space whilst female users inhabit the private sphere, a third local space is identified based on familiarity with places and people.

Finally, the findings suggest the importance of an understanding of gender and place dynamics in the development of effective intervention strategies. Here, a lack of anonymity and a culture of rural watchfulness, mean that many women, fearing for their reputation and the reputation of the area, will not help-seek. This leads to particular challenges to find out about the needs of rural female IDUs. Moreover, a significant factor is that women with drug problems in rural areas (and those experiencing social deprivation and violent relationships) are often geographically and socially isolated. Hence, there is a real need for integrated, multi-level and accessible services. As we have seen, rural female IDUs occupy multiple roles, including, either through choice or a lack of choice, the role of carer. Gender-sensitive intervention strategies need, therefore, to be mindful of the complexities of these women's lives and of women's involvement with others in a local community of space. In particular, how these social relationships may facilitate women's entry into, or, indeed, exit out of, addiction (also see Grant/ 2008).

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ⁱ The term 'sink estate' refers to British housing estates characterised by high levels of economic and social deprivation.

ⁱⁱ This was the main fieldwork phase of the study. However, much more time was spent at the outset of the project in developing relationships with the women, in observation and in lots of 'hanging out' and hanging around with them. Moreover, contact with some of the women has been maintained since and this has been invaluable in terms of validating themes and gaining clarification on certain issues.

ⁱⁱⁱ Some of the women recruited and interviewed were also known, to a lesser or greater extent, to the researcher who was born and brought up in North Wales. So, while the researcher was something of an 'outsider' to IDU culture, she shared with respondents some common experiences. Access to other study participants were also often achieved on the basis of these sorts of relationships.

^{iv} Also, see Ramos et al. (1999) and Smith (2010) who highlight the advantages of using recovering addicts as ‘cultural consultants’ when gaining access to illegal drug culture.