



Desistance Journey of Female Drug Offenders in Singapore

Prepared by: Fann Jiang Yunfan
Assistant Director

Correctional Research Branch
Psychological and Correctional Rehabilitation Division
Singapore Prison Service

Vetted by: Cheng Xiang Long
Senior Assistant Director

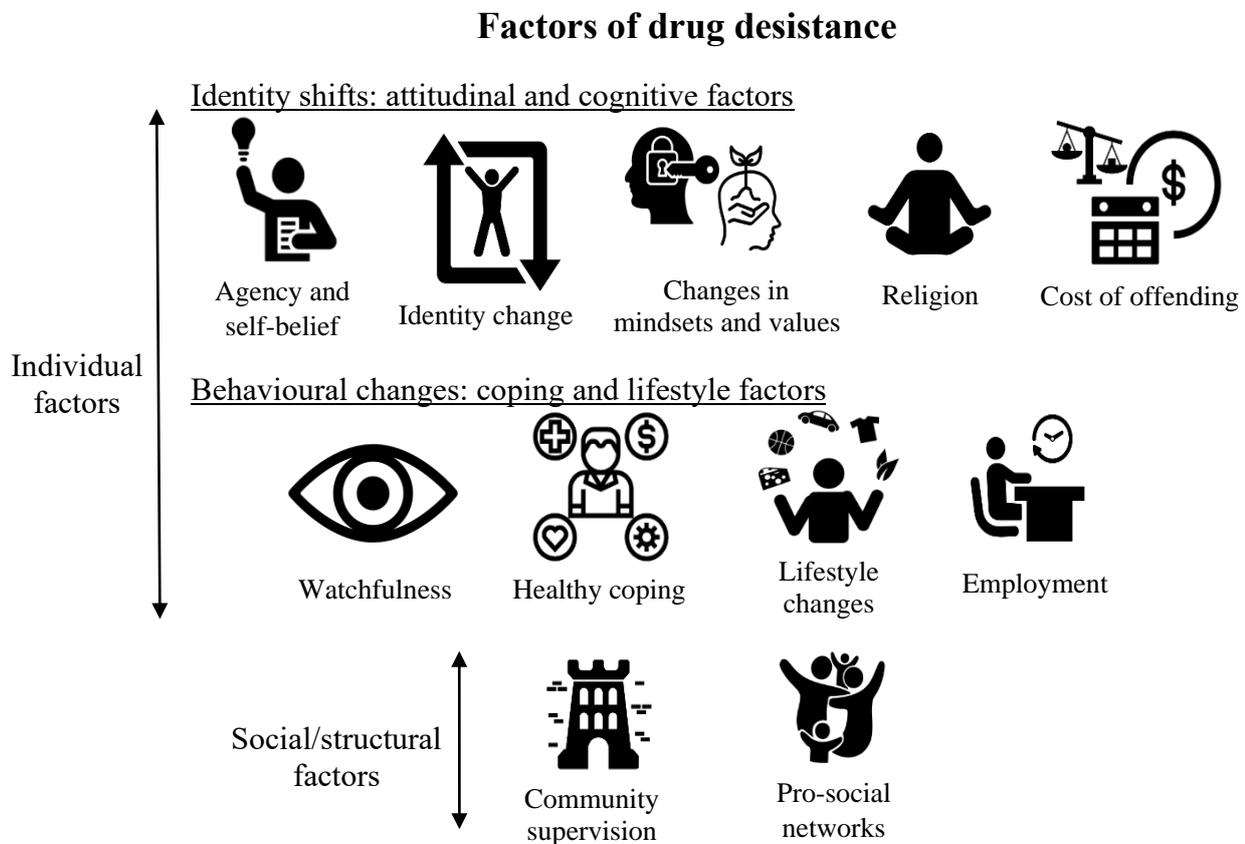
Correctional Research Branch
Psychological and Correctional Rehabilitation Division
Singapore Prison Service

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Background – Literature Review

Both overseas and local desistance research in Singapore have identified a variety of individual and social factors that influence drug desistance (Binswanger et al., 2012; Buckllen, Zajac & Gnall, 2004; Choo, Ong & Sim, 2007; Reichert, Ruzich & Campbell, 2012; SPS, 2017; SPS, 2018). Some of the common factors for desistance are depicted in the figure below:

Figure 1: Overview of Drug Desistance Factors



Background – Literature Gaps

Despite the ever-increasing body of research examining the phenomenon of desistance, much is still unknown about how this process applies to female offenders with drug antecedents. As with many offending and rehabilitation theories, desistance theories have been founded on mainly empirical studies based on males. Therefore, it is unclear whether what we know about desistance currently is also applicable to females. Given that females have unique pathways to

offending and experience certain life events (e.g. parenthood, marriage) differently from males (Rodermond, Kruttschinn, Slotboom, & Bijleveld, 2016), it is reasonable to postulate that the process of desistance would look differently for females.

There are also other gaps in extant literature, namely the lack of process perspective, unclear desistance signals, as well as an absence of findings from Singapore's local context. Past studies have mostly explored factors of desistance present at the point whereby individuals have arrived at the state of non-offending. However, desistance from drug abuse is a process of repeated attempts at abstinence before sustained abstinence is achieved (Dennis, Scott, Funk, and Foss, 2005; Laudet, Savage, & Mahmood, 2002). Examining factors at a single time-point ignores how factors for drug desistance could change over time. In addition, the lack of a consistent definition of "successful desistors" hinders community trust and acceptance when people are uncertain if the individual is a desistor or a potential reoffender. This is because desistance is a lifelong process and there might be some in the community who remain sceptical of an individual's intention to change or ability to sustain the change. Therefore, Maruna (2012) suggested the concept of desistance signalling to identify a desistor by the credible actions they can take after release that reliably indicate that they have changed. Lastly, as the literature reviewed were predominantly from Western countries, local research is necessary to understand drug relapse and desistance in Singapore given the sociocultural and legislative differences. Taken together, these factors provided the impetus for us to better understand female offending and desistance, so that we can further support female offenders with drug antecedents in their desistance journey. This would also enable us to refine our rehabilitation approach to be increasingly gender-specific.

Current Study

Our study aimed to investigate: (1) why some female offenders with drug antecedents (i.e. female repeat drug abusers) relapsed while in the community, (2) how other female offenders with drug antecedents (i.e. female drug desistors) desisted from drug consumption using a process perspective, and (3) what were the desistance signals that contributed to their desistance process. Semi-structured interviews were conducted with 10 female repeat drug abusers and 10 female drug desistors to obtain qualitative information pertaining to factors of relapse and desistance. To be considered a drug desistor, they would have to be both drug-free and crime-free for at least 5 years as a likely indicator of stable abstinence. Our interviews

asked participants about their reasons for relapsing and desisting and explored these reasons at different time points of their journey towards desistance. We also asked participants to recall some of the actions they took to signal their intention to desist.

Key Findings

Our findings showed that the individual, environment, and social factors involved in male drug desistance were also found to apply to female drug desistors. At the start of the desistance process, female desistors underwent identity transformations stemming from a strong desire to change, greater sense of self-efficacy, and motivation. These were then translated into behavioural changes such as setting goals and making post-release plans, which they diligently followed through with after their release from prison or rehabilitation. During the aftercare phase of their rehabilitation journey, supervision from Community-Based Programmes (CBP) bolstered the attitudinal and behavioural changes of the female desistors, equipping them with adaptive coping skills, a safe environment, and structure in their lives to aid their reintegration back into society. Following CBP completion, prosocial networks provided desistors with opportunities to build their social capital, which in turn helped them to persevere in remaining drug-free. Together, the interactions between the individual, environment, and social factors formed a reinforcing feedback loop that bolstered desistance efforts, helping desistors become more stable and stronger over the years.

Compared to male offenders with drug antecedents in past studies, relationships played a key role for their female counterparts. Namely, the female desistors in this study emphasized relational factors as facilitators for change, such as being motivated to change for their family and children, and were aided by significant others in the form of emotional support, financial support, and supervision in desisting from drugs. On the other hand, female repeat drug abusers tended to relapse back to drugs due to relationship problems such as conflict with their family or partners, or as a means to enhance their relationships with drug-taking partners.

Implications

Our findings highlighted the significant role of prosocial bonds and emotional connectedness with significant others in the female desistance process. Thus, a relational approach is

recommended to better meet the needs of female offenders, such as having more family interventions and parenting programmes to address their relationship issues, family conflicts, and caregiving difficulties. To this end, Singapore Prison Service has developed a gender-specific psychological intervention programme with these elements for our female offenders with drug antecedents. In addition, more female halfway houses are recommended to scaffold post-release support, as supervision and counselling can facilitate mindset changes, as well as provide offenders with a structured environment to promote change and reintegration back into the society. Given that the process of desistance starts from prison and progresses into the community, a holistic approach involving collaborative efforts from criminal justice system agencies and community services is recommended to create an inclusive society that promotes desistance.

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