

## **The Female Drug User as a 'Victim' or 'Villain' and the Implications for Social Work**

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### **1 Introduction**

The gender perspective in theory and research about drug use can be recognised approximately since the 1970's. It is predominantly focused on women and points them out as a specific group with specific problems and needs which have been neglected in previous research.

The aim of this paper is to review the basic theoretical knowledge that we have about female drug users and discuss it in the context of social work with these women. It has been written as a part of my PhD project at the Department of Social Policy and Social Work at the Masaryk University Brno, Czech Republic and also presented at the TiSSA Preconference in August 2011. The target group of my thesis as well as this article is female 'problem drug users', who are, according to the definition by EMCDDA<sup>1</sup>, 'injecting drug users or regular users of opioids, cocaine and/or amphetamines'.

While critically reading and analysing the theory about female drug users we can recognise the tendency to emphasise either the role of social structure or the role of agency. This dichotomy has been reflected already by some authors, mainly criminologists and sociologists (e.g. Anderson 2008, Maher 1997). In this paper, firstly, I introduce these two theoretical approaches and, secondly, I discuss their possible implications for the practice of social work. The theoretical approaches are identified on the basis of a literature review, particularly of literature focused on female users of illegal drugs. The practical implications I discuss on the basis of my own experiences which I gained as a social worker with drug users in the Czech Republic.

### **2 The female drug user as either 'victim' or 'villain'?**

#### **2.1 Emphasis on Social Structure**

The role of social structure and structural inequalities in the context of drug use has been emphasised especially as a part of criticism of the positivist medical approach which had been strongly dominating addiction research. Contrary to the medical approach, represented especially by psychiatrists and the 'disease model of addiction', the structural approach describes drug use as a social problem rather than an individual failing. The social, but also political, cultural and economic context of drug use is seen as very important. Furthermore, the gender perspective emphasises the crucial role of gender as an important basis of social organisation. Ettorre (1992) stresses that it is important to see that women are more often than men, socialised into dependency and consequently she gives a new, broadened definition of

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<sup>1</sup> European Monitoring Centre for Drugs and Drug Addictions

dependency, which express the structural context of women's drug use. For Ettorre (1992) 'dependency' stands not only for 'addiction', but also for 'subordination', where 'dependency as addiction' is not socially acceptable, especially when it interferes with women's social roles, such as housewife, worker, mother, daughter, or girlfriend, but 'dependency as subordination' is a socially acceptable or even desirable or prescribed norm for women. Furthermore, due to the common role of the woman as a 'carer', there are also other people dependent on her (e.g.: children, elderly) which creates a complex system of dependency, not only in the public but also in the private sphere (Stocco 2000, 2002).

Another example of gendered relations in the drug world are the double standards for men and women. Drug use in many ways contradicts what is seen as the social ideal of feminine behaviour and therefore negative moral judgements and stereotypes are more likely in the case of drug-using women than men. Consequently women are more stigmatised for that activity (Ettorre 1992, Stocco 2000, 2002, Vobořil 2002).

The main negative stereotypes are connected especially to what can be seen as 'typical female domains' such as morals, sexuality and the ability to care about themselves and others. Therefore these women are often seen as failing as partners, mothers and guardians of moral standards. And these stereotypes become even more punitive when women use drugs during pregnancy. The main negative stereotypes describe them as being aggressive and manipulative, acting without feelings and emotions or suppressing them in favour of getting drugs, or as being sexually promiscuous. In their personal life they are seen as lonely, unhappy, lacking self-confidence, or destructive. Their femininity is depicted as 'misplaced', 'rejected', or 'insufficient'.

## **2.2 Emphasis on agency**

The emphasis on the role of agency is often expressed as part of a criticism of overestimating the role of social structure. It questions the uncritical acceptance of direct linkages between childhood abuse or experiences with other forms of violence and involvement in law-breaking and drug use as well as the direct linkages between female dependency on men and on drugs as a very stereotypical view of women's involvement in the drug world. For understanding the role of agency it is more important to focus on the process of negotiations about being a drug user, rather than simple description of the social role.

Some authors come with rather challenging ideas and interpretations of drug use as a form of resistance or rebellion against the social pressure and stereotypical gender expectations (e.g. Friedman and Alicea 1995, Baskin and Sommers 2008). Contrary to the claims that women are becoming drug users especially through relationships with men they define women's use of illicit drugs as a possible indicator of rising gender equality in the society. They interpret drug use as a denial of the passive role and an adoption of a more independent and rebellious lifestyle.

An important topic in the context of women's agency is the definition of power and its distribution. Anderson (2008) in her analysis of social and economic power in the drug world recognises two different forms. The 'structural form of power', which is characterised by possessing resources, domination and control and the 'relational or transformative form of power' which expresses the ability to influence and achieve desired outcomes and is aimed to benefit not only self but also others (e.g. children, partners, or community). Distinguishing these two forms of power gives Anderson (2008) a useful tool for analysing power relations. She points out that although it is men who more often hold the structural power and women

who hold the relational power, men's structural power is to a large extent made possible by women's agency and relational power. Therefore we can see the power relations between men and women as interdependent and it shows, as Dominelli (2002) states, that power is not a zero-sum entity, which one has and other has not, but as constantly (re)created in social interactions. This way women are not placed in a powerless position but rather the focus is on understanding what kind of power they hold.

Maher (1997) in her research about female drug users in Brooklyn describes the exercise of agency in the case of women involved in sex business. She explains, that in order to maintain a sense of dignity, self-respect and protection from exploitation most of these women were able, to some extent, to define limits in relation to sexual conduct, discriminate among clients and between sex acts or negotiate the price and the duration of the transaction.

### **3 Implications for Social Work with Female Drug Users**

The shortcomings of an approach which puts emphasis on social structure can be overestimating these structural inequalities and consequently denying agency, choice, responsibility, or accountability. Women can be portrayed as victims of oppressive social structures, relations and substances and as submissive objects. It is also rather deterministic. It tends to emphasise themes of dysfunction, dependence, powerlessness, exploitation, and victimisation. This view is by Anderson (2008) called the 'perspective of powerlessness'.

When we look at this approach in the context of social work, we can expect that clients who are seen as victims can be possibly seen as more legitimate recipients of social help. Consequently we can expect that also these clients themselves will deliberately identify with the victim role in order to gain access to institutional help, social benefits or other resources.

For a social worker seeing the client as a victim can be also a possible solution of ethical dilemmas. It is easier to perceive clients as victims rather than active agents, especially when it is concerning controversial issues such as selling, making or smuggling drugs, involvement in the sex business, or the use of violence.

Nonetheless it is still stigmatising to be a drug user and this approach does not help the clients to gain equal position in the society and be respected as responsible and capable of taking control over their lives.

On the other hand, if there is too strong an emphasis on the role of agency, female drug users can be seen as kinds of villains, rational agents who are seeking how to maximise deviant or criminal opportunities and self-interests. They can be also described as 'addicts by choice' who use drugs for their own pleasure, without thinking about consequences and others. Social structure is often not reflected or underestimated. Anderson (2008) calls this view the 'perspective of pathology'.

Clients who are seen by the social workers in the role of villains can be deplored or blamed for being aggressive and not caring about others, but only themselves, which is especially in the case of women seen as problematic or inappropriate behaviour. These clients are also often not seen as legitimate recipients of help, and therefore institutional support is often rejected. This attitude is deeply connected with the fact that in many cases it is not socially acceptable to acknowledge women's strengths, power and control over their lives, and this becomes even more problematic when it concerns illegal or violent activities. Social workers

also face the problem of how to support the agency of the clients, when it is often exercised through illegal activities and consequently they often fail to empower them.

It is important to point out that this description of these two approaches takes into account somehow extreme emphasis on one or another and in practice they do not necessarily appear in these extreme forms. Both approaches can be also criticised for being rather essentialist, as women are perceived as a homogenous group and intersectionality is not reflected (Crenshaw 1991). Last but not least, it is always a matter of interpretation what we can see as a result of structural inequalities or as an exercise of agency (e.g. the issue of involvement in the sex business). However I believe that this description of these two 'ideal types' helped me to identify the possible pitfalls we can encounter while working with female drug users and on the basis of deeper understanding of their situation we can prevent them.

As we can see, the pathology/villain approach, by underestimating the broader social, political, economic or cultural context, as well as the powerlessness/victim approach, by denying women's agency, both often fail in empowering the client. Therefore I argue that the important basis for empowerment is to see every client as an individual with specific needs and abilities and at the same time critically examine the broader context of their position in the society. In this way client's capacities to negotiate and shape the world around them are recognised and supported. Above all we should bear in mind that the lives of people who use drugs contain a much wider variety of relations, experiences or desires than only pathological or powerless involvement in the drug world.

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