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Abstract

Building on previous work which has conceptualised the embodied experience of imprisonment as prison time 'inscribed' on the body, this paper argues that the experience of reintegration after release from prison is similarly embodied and corporeal. It contends that while scholarship of prisoner reintegration post-release has identified the stigmatisation of ex-inmates as a challenge to their successful re-entry, the embodied experience of this process has remained under-researched. Drawing on extensive research with women prisoners, former prisoners and prison staff in the contemporary Russian Federation, the paper presents empirical evidence that explores the embodied experiences of release and reintegration, identifying specific examples of prison time being 'inscribed' on the body which prove problematic for former prisoners, and demonstrating the ways in which their attempts to 'erase' or overwrite these inscriptions constitute a stage in the continual corporeal process of becoming. The paper suggests that these insights could inform better understandings of experiences of reintegration, and could in turn inform the improvement of provision of services to prisoners during incarceration.

Keywords: prison; stigma; reintegration; embodied; corporeal; Russia; women

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"They drink and smoke, they have tattoos, and they use slang. And their teeth are rotten. That's how people think women who've been in prison look."

Building on the work of Wahidin (2002) which conceptualised the embodied experience of imprisonment as prison time 'inscribed' on the body, this paper argues that the experience of reintegration after release from prison is similarly embodied and corporeal. It argues that while scholarship of prisoner reintegration post-release has identified the stigmatisation of ex-inmates as a challenge to their successful re-entry, the embodied experience of this process has remained under-researched. Drawing on extensive research with women prisoners, former prisoners and prison staff in the contemporary Russian Federation, the paper presents empirical evidence that explores the embodied experiences of release and reintegration, identifying specific examples of prison time being 'inscribed' on the body which prove problematic for former prisoners, and demonstrating the ways in which their attempts to 'erase' or overwrite these inscriptions constitute a stage in the continual corporeal process of becoming. The paper suggests that these insights could inform better understandings of experiences of reintegration, and could in turn inform the improvement of provision of services to prisoners during incarceration.

The paper is structured as follows. It opens with a discussion of the embodied experience of imprisonment, drawn from the work of Azrini Wahidin (2002), and follows this with an overview of the literature on stigma and prisoner reintegration, noting the relative absence of work which extends this understanding of embodied experience into the period after incarceration. Having described the research context and methodology, the empirical evidence on which the paper is based are presented, structured around the corporeal experience of release and reintegration as described by women in, and recently released from, prison in Russia, most notably a discussion of poor dental health as a stigmatizing 'marker' of incarceration. The paper concludes by reprising the utility of conceptualising release and reintegration as embodied experiences, and suggests some directions and potential practical uses for future research.

The embodied experience of imprisonment

In her work on the ageing female body in prison, Wahidin (2002, 178) used a Foucauldian analysis to demonstrate how discourses act upon and inscribe the female body, with the body held in a carceral prism in which power relations have an immediate hold over those under the prison gaze. Considering the prison as a total institution, she demonstrated how time as a technique of discipline is used by the prison to mark the body, and how the corporeality of time and its use in prison 'transcends the dualisms between subject/object and mind/body' (ibid). Wahidin's work is informed by a conceptualisation of the self in a post-modern society as an unfinished project, one that is central to a person's sense of self-identity, with the body 'inscribed by variables such as gender, age, sexual orientation and ethnicity, and by a series of inscriptions which are dependent on types of spaces and places' (Wahidin 2002, 180). She draws upon Turner (1995) in emphasising key processes that work on and in the body across time and space, and argues in line with Giddens (1981) that the corporeal existence of the body is complex and reducible neither to biology nor the dictates of capitalism, occupying instead a position between the biological and the social, the collective and the individual, structure and agency. Wahidin translates these discourses into the prison setting,

showing how prison time is inscribed upon the confined body. In so doing she compellingly conceptualises the body not as a passive materiality that simply awaits inscription, but rather emphasises its negotiation of the 'capillaries of power, enabling the body to be always in the process of becoming through the experiences of embodiment' (Wahidin 2002, 181).

Wahidin (2002, 192) argues convincingly that the material body almost becomes a medium through which power operates and functions; but that rather than being a passive medium it is rather interwoven with and constitutive of systems of meaning, signification and representation. Time and experience are, of course, corporeally inscribed, (Ahmed and Stacey 2001) whether a body is incarcerated or not, such as through stretch-marks, wrinkles, and surgical scars. However, there is a mutually constitutive relationship between bodies and spaces (Longhurst 2005) in which bodies are understood as sites of 'textual inscription' (Johnson 2008, 563) which shapes identities and social relations as well as the conceptual and actual spaces in which bodies move. Bodies become inscribed in a way which suits or is an adaptation to, a specific space and/or circumstance (such as scarification which 'fits' the ritual practices of specific groups), but which may not suit another. McDowell (1999, 61) notes that bodies therefore may not necessarily 'fit' the idealised representations for certain 'spaces'; considered ill, ugly, wrong or deviant in a variety of ways. Although bodily inscription *per se* is not prison-specific, in that it takes place whether or not a body is incarcerated, the argument here is that in the eyes of formerly incarcerated women in Russia, incarceration has a particular set of prison-dependent, tell-tale inscriptions - and that the stigma they experience after release is to some extent enabled by the 'lack of fit' between these inscriptions and the circumstances of release. Although the *actual* inscriptions are prison-dependent rather than prison-specific, the fact that the women *perceive* them in this way enables some insight into the corporeality of incarceration and reintegration, and for some the reinscription of the body.

Previous research has focussed on the embodied experience of incarceration (e.g. Wahidin & Tate 2005) but the process of reintegration has been beyond its remit, although hinted at in prisoners' impressions of their own futures after release. This paper therefore extends this notion, applying this conceptualisation of the body, inscribed by time as part of a continual process of becoming, to a different stage of the imprisonment process, namely the transition from imprisonment to 'free' life, and reintegration and adjustment to life after incarceration.

Stigma and Prisoner Reintegration

A detailed consideration of the vast literature on prisoner reintegration, in which researchers have sought to identify the critical factors contributing to successful reintegration (broadly defined as that which sees former prisoners functioning as members of mainstream society rather than reoffending and returning to prison) is beyond the scope of this paper. However, a survey of this scholarship shows that overcoming the stigma attached to imprisonment is one of the key, interconnected, issues (Travis 2005). Despite the attention paid to prisoner reintegration, very little research has followed the embodied experience of prison time and the way in which this impacts on life after release. Studies of ex-inmate participation in the labour market, for example, while they highlight the problem of stigmatisation of former prisoners, the so-called 'prison effect', tend to focus on the impacts of methods of formal disclosure of a criminal past, such as criminal records checking (e.g. Weiman 2007), rather than on the subjective judgement of individuals based on their appearance. Although recent work in this field (e.g. Harding 2003, LeBel 2012, Pager 2007 and Winnick & Bodkin

2008, Maruna 2001) discusses some former prisoners' strategies, such as concealment of a criminal past, or advocacy work; and focuses on the nature of the personal narratives that individuals develop, thus far, the evolving literature has not considered in any significant depth the embodied experience of reintegration.

In her work on the reintegration of women prisoners, Zaitzow (2011, 209) points out that 'what happens inside jails and prisons does not stay inside jails and prisons'. However, although she provides a grounded and nuanced overview of the particular challenges facing women on release from prison, including the stigma attached to incarceration, which, as she says, translates into an embodied notion, with women saying that 'they believe they have a tattoo on their forehead that proclaims them as "ex-con"' (ibid, 242), there are still questions to be answered about exactly *how* this embodied experience of imprisonment works to stigmatise women released from prison. Clearly although they do not actually have such tattoos, women feel just as clearly 'marked out' as ex-inmates.

The embodied experience of reintegration is bound up with notions of stigma. Although varying widely in exact definition, the concept of stigma generally conveys a sense of disgrace, based on an attribute viewed as discrediting, which reduces the bearer from 'a whole and usual person to a tainted, discounted one' (Goffman 1963, 3). In their conceptualisation of stigma, Link & Phelan (2001, 367) understand it as existing when a series of interrelated components converge. First, people distinguish and label human differences; second, dominant cultural beliefs link such labelled differences to undesirable characteristics, or negative stereotypes; third, on the basis of these stereotypes, labelled persons are categorised as 'them', separate from 'us'; with the result that fourth, 'they' lose status and experience discrimination and unequal outcomes. Stigmatisation therefore happens when 'elements of labelling, stereotyping, separation, status loss and discrimination co-occur in a power situation that allows the components of stigma to unfold' (ibid 2001, 367). Pinel (1999) and Major and O'Brien (2005) have pointed out the variety of responses to stigma on the part of targeted individuals, the ways in which it is internalised, and the lack of understanding of the factors which make people either resilient or vulnerable to stigma, resulting in them striving for a change in circumstances, or withdrawing. The ways in which stigma is 'internalised' affects responses; for example, Campbell and Deacon (2006) argue that even if individuals are not exposed to overt discrimination, they may still 'internalise' negative perceptions, affecting their likelihood of challenging or addressing devalued status. What is clear, though, is that although stigmatized groups have been portrayed as passive victims, in many cases they identify effective coping strategies aimed at reducing the threat of stigma, as in the case of the ex-inmates interviewed for this paper.

Although the paper draws on the theoretical conceptualisations of embodiment, and stigma, and on the wealth of research into prisoner reintegration, it pertains to a different geographical context to the majority of these existing bodies of scholarship, which emerge predominantly from the US and the UK. This different geographical context – the contemporary Russian Federation, merits a brief discussion. The following section of the paper provides a brief overview of women's imprisonment in Russia, and the research undertaken for this paper.

Research context and methodology

Penal systems develop in specific contexts, and there are significant differences in penal interventions between countries with different historical and cultural traditions (Tonry 2001); Melossi (2001, 407) notes that '(p)unishment is deeply embedded in the national/cultural specificity of the environment which produces it'. With this in mind, and before presentation of empirical material, some discussion of the Russian penal context of this research is required. As discussed elsewhere, 'Prisons are not simply institutions which (cor)respond to crime; rather, they are reflective of and mediate social, political, and cultural values, both at the level of the carceral state, and the individual prison' (Moran et al 2009, 701).

In Russia, the legacy of the Stalinist Gulag and later Soviet imprisonment practices has generated a unique 'carceral geography' (Moran 2004; Moran et al 2009 & 2011). Although the contemporary penal system is fundamentally different from its Soviet ancestor, Soviet continuities include high imprisonment rates, and the fact that prisoners, and particularly women, are still sent to geographically peripheral locations to serve their sentences. On 1 March 2011, women made up 8% (66,000) of the 814,200 people incarcerated in the Russian Federation. Many of the characteristics of Russian prison life are common to both men and women (communal dormitories rather than cellular confinement, compulsory prison labour, different levels of privileges assigned on the basis of good behaviour, and punishment and isolation cells), but a critical difference is in the assignment of the place of imprisonment, the institution where a sentence will actually be served. Russia has only forty-six correctional facilities to accommodate women, and these are unevenly distributed across space, away from the major centres of population from which most prisoners are drawn. Almost one quarter of Russia's women's prisons are concentrated in only five of its eighty-two regions. Women are, therefore, more commonly sent `out of region' to serve their sentences than are men, with concomitant impacts on maintaining connections with home and family (Moran et al 2009 & 2011; Piacentini et al 2009, Pallot & Piacentini with Moran, forthcoming).

The data presented here pertain to female prisoners in the contemporary Russian Federation, and were gathered through extensive fieldwork as part of a wider project[1] within penal institutions across four Russian regions, via over 200 interviews with prison personnel and incarcerated women and girls, and also outside of these institutions, through interviews with recently released women living in three different cities in European Russia. Interviews were carried out between 2006 and 2010, by a team of UK and Russian colleagues permitted access to prisons by the Russian Federal Prison Service (*Federal'naya Sluzhba Isspolneniya Nakazaniya*, or FSIN), which like any penal administration, considers practical issues of security and institutional arrangements alongside the perception of the prison system when allowing outsiders in. All prison research involves complicated ethical issues (for a discussion, see Israel 2004, King and Wincup 2007; Roberts and Indermaur 2003), and in designing the qualitative research for the project, the normal protocols about informed consent were explained to the penal authorities and confirmation that these had been followed in obtaining volunteers for interview was sought. However, it is likely that current prisoners considered suitable by the prison authorities for participation in the research (on the basis of physical, psychological, and emotional welfare, and with concern for their health and well-being) were offered the opportunity to volunteer to take part, especially for interview by the visiting western research team. As with any prison research, such a process generates a skewed sample likely to include disproportionately well-adjusted, emotionally stable respondents. To triangulate this

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research inside prisons, a local Russian research team also conducted interviews with incarcerated women, and a group of experienced Russian ethnographers interviewed women recently released from prison. These women were interviewed outside of the penal system, in their own homes or in public places of their own choosing, to enable women with experience of incarceration to speak more freely about that experience than women still in prison might be able to do. Interviews were transcribed and coded using NVivo. Questions about expectations of release were discussed sensitively with women still serving their sentences, with close attention paid to their stage of sentence; where it was inappropriate to raise questions of reintegration with women with several years still to serve, this theme was not pursued at interview. The circumstances of the research, especially within prison, meant that care was taken not to raise topics which may have caused undue distress or embarrassment to respondents, or to pursue with individuals topics they found particularly upsetting (for example, separation from children). Experiences of reintegration were explored both with women interviewed on the 'outside' after their release from prison, and also with the small number of women interviewed during a sentence, who had been imprisoned and subsequently released on a previous occasion. This paper presents the words of women interviewed both whilst in prison and after release, and their status is noted in each case.

The wider research project had a broad focus on women's experience of imprisonment, and the issue of embodiment of experience emerged organically during interviews, rather than being an explicit research objective. Although the corporeality of incarceration and reintegration, especially in relation to teeth, surfaced frequently in conversation, as women discussed their (pre-release) anxieties or (post-release) problems, the fact that the only women directly asked about issues of embodiment were the ones who had brought up the topic themselves, perhaps means that the respondent 'sample' contains a disproportionately high number of women predisposed to dealing with this challenge openly and proactively, rather than allowing stigma to limit their opportunities.

The embodied experience of release and reintegration.

In this section of the paper I return to the work of Wahidin (2002) in tracing the inscription of prison time on the incarcerated body, and extend that theorisation to the body as it leaves carceral space, by exploring the way that prisoners and former prisoners interviewed in Russia experienced the process of release and reintegration. It looks both at their fears and trepidations pre-release, and their experiences after they have left carceral space. Women interviewed in prison described the concerns they had about life on the outside, mainly expressing these in terms of needing to 'catch up' with the changes that would have happened while they had been away. Women interviewed after release focused much more on the effects of their time in prison, in terms of the problems they had in dealing with everyday situations on the 'outside'. Both tended to describe these thoughts and feelings in embodied terms, speaking of the ways in which they felt that their imprisonment was in some way inscribed upon their bodies, either in terms of the way their body interacted with its new environment, the way they thought that they were seen by others, or more commonly, in relation to specific physical changes that they felt marked them out as ex-prisoners and thereby contributed to the stigma that they felt was attached to their status as women who had experienced imprisonment.

In terms of the negative, potentially stigmatizing, inscriptions of imprisonment, it is important to distinguish between 'conspicuous' and 'concealable' stigmas. Goffman (1963, 48) stated that 'visibility... is a crucial factor' in the attachment of stigma, and it is commonly assumed that

conspicuous stigmas are more problematic than concealable ones. However, it may be more accurate to suggest that they lead to different outcomes (e.g. Frable et al 1998, Jones et al 1984), especially since, in the context of ex-inmates, little is known about how formerly incarcerated people perceive the 'visibility' of the 'ex-con' stigma. In the case of formerly incarcerated individuals, it is also important to note that the embodied experience of incarceration exists within a context of general anxiety about release and 'reentry' into society. In the sections which follow, I first use women's testimonies to give a sense of this general anxiety, and then draw from their narratives discussion of 'concealable' and 'conspicuous' stigmas.

Anxieties ahead of release

Thinking first about women's anxieties about release from prison and 'reentry' into society, respondents' comments centred around their personal experience of prison time, in relation to the passage of time on the outside. As Wahidin & Tate (2005) and Cope (2003) have observed, imprisonment provides a context for multiple temporalities, and although prison sentences are measured in 'clock time', in days, weeks, months and years, prisoners do not necessarily experience time flowing at a constant speed. Their own 'experiential' time flows faster and slower depending on individual circumstances; slower, for example, when they are looking forward to visits, and faster when they are able to distract themselves from consciously experiencing every passing moment. Prisoners commonly feel as if time is 'suspended' on the inside, whereas on the outside it moves on, and this sense of multiple temporality is essentially embodied (Moran 2012). Although time feels as if it 'stands still', in terms of the repetition of daily routines and the lack of significant changes in circumstances, the physical body continues to age, and this ageing process is observed and experienced corporeally.

Concerns about how much life on the outside will have changed are common to all prisoners approaching release, but for prisoners interviewed for this project, this anxiety took on a particular significance. Interviewed in Russia towards the end of the 2000's, prisoners were keenly aware that they had been imprisoned at a time of immense social, economic and political upheaval in their country. None of the women interviewed had been in prison since the fall of the Soviet Union in 1991, so all had experienced something of 'post-Soviet' life on the outside, but the changes which have taken place in Russia in the past twenty years, with the transformation from a socialist centrally planned economy to a market economy and democratic system, have been immense in terms of their impact on everyday life. They expressed these concerns in predictable ways, commenting on new technologies, new ways of living, and so on:

> I'm afraid, about travelling, about new people. There's a little fear that everything will have changed.

> I have a fear of something. What's it going to be like? I'll be free just like that. Work. New people. Everything, everything's different, and I'll be starting again.

Prison staff who had seen many women imprisoned and released were familiar with these fears. A social worker and a psychologist gave examples

> We had one woman who was imprisoned in the 1990s, and she didn't experience all these ups and downs that we had back then. She said she just didn't know what to

> expect – she was used to rubles and kopecks [i.e. to the value of money in the 1990s], and she didn't know what she was going to find on the outside.
>
> They ask 'What's behind the [prison] gates? What will things be like? What are cars like [now]?' And so on… There was one girl in the prison, she served eight and a half years, and she said 'I don't know anything about what it's like [out there]. I said 'What don't you know?' And she said 'Well, for example, I don't know what a mobile phone is. I've never used a mobile phone.' Another of my clients came to the end of her sentence; a year ago she was released, after ten years. And it was the same then - 'a mobile phone, a computer – it's all new to me.'

As well as describing their apprehensions about navigating a new world on the outside, women described concerns which appear on the surface to be trivial, but which convey a deeper sense of

> embodied anxiety about adjusting after release. A prison psychologist recalled:Close to the release date they start to worry. The other day a woman was discussing a model's shoes. We started to talk, about what kind of shoes are in fashion. She had a great many years of imprisonment behind her, and lots of fears about what to expect.
> Q. Do you think the woman really cared about shoes, or….?
> A. …or was it a protective reaction? To some extent, yes.
> Q. So shoes are a symbol of a general anxiety, which she doesn't know how to explain?
> A. Yes. I'd say that this was the first thing that came to mind.

Having previously been relatively isolated, Russia is now fully integrated into a globalised consumer society, with global brands and fashions marketed to Russian consumers through an advertising industry which has grown exponentially since the collapse of the USSR. In this context, prisoners such as this about to negotiate release found themselves voicing their general anxieties through an embodied discourse of image and fashion.

Conspicuous and Concealable Stigma

Interviewed about their experiences after release, and speaking about the problems they faced in obtaining official documents, finding employment, and generally navigating the new circumstances in which they found themselves, former prisoners described two sets of challenges which they experienced in an overtly corporeal sense; in which their embodied experience of adjustment to life on the outside was directly affected by the way in which prison time had been inscribed upon their physical body, either in terms of the real but concealable bodily practices to which they had become accustomed, or (their sense of) the conspicuous appearance of their bodies. Although one might argue that only the 'conspicuous' stigma should enable discrimination by others, in the minds of the women interviewed, the concealable stigma operated as a constant reminder of their 'ex-con' status, perhaps acting to assist the internalisation of stigma associated with imprisonment.

Taking first the concealable stigma; one former prisoner described the problems she had in settling into 'free' life away, in terms of the after-effects of sleeping habits she had adopted in prison. For Russian prisoners, everyday life is one of schedules, flow control, and communal living, and readjusting to a domestic setting is very difficult for some. Prison life commonly involves the deprivation of privacy, described as a 'functional prerequisite' of imprisonment (Schwartz 1972, 229), and considered one of the 'pains of imprisonment' (Sykes 1958). It is argued that prisoners are

almost always in one another's presence, or in the sight of penal authorities, in the constantly surveilled 'panopticon' described by Foucault (1979). Penal space in Russian prisons is described by prison authorities as 'communal'; prisoners sleep in dormitories accommodating between 60 and 150 individuals. They share communal washing and toilet facilities, they move around the prison complex in work 'brigades', eat together in the prison canteen and work together in the prison factories. There are very few places within the prison where women can be alone (Milhaud & Moran, forthcoming) and with so many people occupying the same space, very few places which are quiet and peaceful. Although many bemoan these conditions while they are actually incarcerated, former prisoners found that they had grown so accustomed to them that adjusting to a more solitary life and to quieter surroundings after release was very difficult. One described this in terms of her inability to sleep.

> The silence in the house… I want to sleep, but I'm used to noise when I'm falling asleep. I miss the noise. I'd lie down, and my head would start to buzz – there's not enough noise for me. I couldn't understand it at the time. I began to think, that after the noise, I felt the silence as a burden. I'd lie awake, unable to sleep, and feeling tense. And the silence started to really get to me. I'd turn on the TV, put music on in the kitchen, so that there was some noise. I still couldn't sleep. I'd walk around the apartment, into the living room, into the bedroom, like a hunted animal, but the only thing I could do was go outside, so I'd go out into the street. I got dressed and ran out into the street where there were people about. I just couldn't sit at home.

This example demonstrates the way in which prison routine is inscribed upon the body through the embodied practices which become second nature during incarceration, and prison habits which are difficult to break on release. This former prisoner described a corporeal acculturation, in which learning to sleep in the commotion of the prison dormitory, surrounded by perhaps a hundred other women, tuning out their noise and no longer being disturbed by it became an accumulated experience. Outside, in a domestic apartment, she now *needed* the noise and the sense of other people being around, in order to sleep. Unable to overcome this need for noise and company, she tried to mimic it with the TV and with music, but eventually found that she could only relax in a public place surrounded by other people: the closest analogy to the prison dormitory that she could find in 'free' life.

Although this experience had a physical manifestation in insomnia and the need for company, the particular corporeal inscription of prison time was *concealable* - felt inwardly, and not visually apparent to others. By contrast, other former prisoners frequently spoke about their sense that their experience of incarceration was *conspicuous* to others – that people could 'tell', could discern from their appearance that they had been to prison, as in Zaitzow (2011). As one woman interviewed after release explained:

> I was out [of prison] for two months before I would come out of the house. I was afraid that 'zek' [a Soviet era word for prisoner] was written all over my face. I was afraid of people.

In Russia, as elsewhere, a personal history which includes incarceration is a source of stigma, with ex-prisoners facing significant obstacles to assuming mainstream social roles. Incarceration is generally perceived to carry a stigma that marks ex-offenders as dishonest or unreliable. The stigma of

incarceration is often seen in labour market studies where employers express a strong preference against hiring ex-offenders (Lopoo & Western 2005). For women leaving the prison system in Russia, such stigma is particularly significant for their prospects of finding work, and entering a job market arguably prejudiced against hiring women since the economic collapse of the early 1990s privileged men's labour, and where women's physical attractiveness is a significant factor in their likelihood of being hired (Moran et al 2009). Women felt this stigma as the visible effect of prison time, marking them out as former prisoners and reducing their prospects for successful adjustment after release. The women varied in the ways in which they responded to this stigma, and the extent to which they contested and/or internalised it (Pinel 1999, Major & O'Brien 2005), with many describing their coping strategies and the way they had managed the issue (Campbell & Deacon 2006). For example, one former prisoner initially kept her history a secret from work colleagues, fearing their reaction.

> When I came to work here we [the former prisoner and her work colleagues] drank tea together and got to know each other. I said – I have kids, but no husband – I need the money, so I came to work here. When I got my first paycheque, I didn't say anything to anyone, just made tea and said – 'Girls, let's have a cup of tea'. When everyone was sitting down and drinking tea, I said 'You can congratulate me', because it was October 5th. I said 'Girls, I want to share my joy; it's a year since I was released [from prison]'. It was such a shock for them, all sitting there! I just put the tea out, and said 'Come and drink tea with me, I have something to celebrate'. It was a year that I was free. It was a shock for all of them. They were all like 'oh-oh-oh', laughing. And they were like, 'Tatiana, you're lying!' - 'You don't smoke, you have no tattoos and you don't swear!'

Although, as this extract shows, her work colleagues were supportive when she disclosed her history to them, their reactions revealed both their negative preconceptions about ex-prisoners, and the fact that they too perceived prison time to 'mark' women in a certain way – through physical appearance and personal habits. Another former prisoner expressed this much more starkly.

> They drink and smoke, they have tattoos, and they use slang. And their teeth are rotten. That's how people think women who've been in prison look.

Former prisoners perceived their dental health to be the single most noticeable physical manifestation of imprisonment – the most conspicuous corporeal inscription of prison time. In the interview setting they were self-conscious about their teeth, and they continually returned to this as a theme of conversation, discussing the poor dental care they had received in prison, and the embarrassment caused by their missing teeth.

Dental health in prison
At this point, and before discussing in depth the views of former prisoners, some brief observations about dental health in prison, and the relationship between dental health and self esteem, are useful to set this discussion in context. Recent research conducted in a variety of geographical contexts, (for example in China (McGrath 2002), Australia (Osborn et al 2003), the US (Cunningham et al 1985, Salive et al 1989, Mixson et al 1990, Boyer & Nielson-Thompson 2002), Nigeria (Dhlakama et al 2006), and South Africa (Naidoo 2004)) draws a similar conclusion; that prisoners' oral health is worse than that of the relevant background population. This finding is commonly attributed both to some prisoners' already poor oral hygiene before imprisonment, and also to the often poor provision or uptake of prison dental services. Studies also commonly find a tendency for prison dental services

to extract teeth rather than fill cavities, resulting in the unnecessary loss of teeth, and accordingly, to poor dental health amongst prisoners, which tends to worsen as sentences progress, and contributes to poor general health and poor nutrition. If prison dental services are usually worse than those provided to the general population, then in Russia we might expect them to be particularly poor; in Russia, as Jargin (2009, 519) has noted, some dental practitioners have continued a Soviet-era tendency towards invasive treatments, some manipulate patients 'towards extractions and prosthetics [dentures]', and minimally invasive techniques which seek to conserve dental tissue have only recently been introduced. Very little is known in general, however, about the oral health of prisoners exiting prison in the Russian Federation; the only indication comes from a 1991 study carried out in Magadan, in the Russian Far East, in which Hardwick et al (1993) noted that the presence of a significant number of recently released prisoners in their sample of the local population impacted on their data.

Research into self-rated oral health and measures of general health, self esteem and life satisfaction, broadly finds that self-rated oral health is a good predictor of self esteem and general wellbeing, and vice versa, i.e. that the better a person feels about their life in general, the more likely they are to take care of their teeth (Macgregor & Balding 1991, Benyamin et al 2004, Locker 2009). Setting out in broad terms the relationship between prisoners' oral health and self esteem, Williams (2007, 84) points out that in the US, missing teeth 'is becoming a telltale sign of having been incarcerated', and that poor oral health constrains social, professional and personal relationships. She also notes that for an individual suffering from oral pain caused by cavities or impacted teeth, searching for a job 'is almost impossible' (ibid).

Missing teeth as a conspicuous stigma of imprisonment
Women interviewed in Russia after release from prison spoke evocatively about the significance of their dental health both for their self esteem, and for their prospects of finding work and therefore successfully adjusting to life on the 'outside'. Their comments, discussed below, describe compellingly the simultaneously very personal and overtly public nature of missing teeth as a marker of prison time; as an example of prison time inscribed on the body in a way that was very embarrassing and stigmatising, and very difficult to hide.

According to their recollections, Russia is no exception to the general observation of poor and invasive dental treatment in prison. Although one former prisoner reported that where she had served her sentence, the prison dentist had treated both prisoners and staff alike, and had filled teeth as well as extracted them, most women's experience was that although a dentist visited the prison once or twice a month, prisoners' dental health was poor and dental treatment was limited to extraction.

> There were dentists, but dentists only extracted teeth.
> Q. What do you mean?
> A. Just that. We did not get fillings...
> Q. So, if for example. ..
> A. If there was toothache, then you'd go to the doctor. She would take a look and say - if
> you want to put up with an extraction, I'll pull it out. So she pulled it out.
> Q. So the women were practically without dental care?
> A. Yes

Q. Why do you lose your teeth [in prison]?
A. Why do you lose them? If you get caries [tooth decay] they pull them out, just pull them out, but they will not drill them.
Q. So there isn't any treatment?
A. No.

The dentist just pulls teeth out. Actually they never filled them, just pulled them out. That's all [the dental treatment] that we had.
Q: Well, at least they are extracted with anaesthesia?
P: Yes, yes, of course.

In some prisons, dentists *would* fill cavities, rather than extract teeth, but only if prisoners could pay, out of the meagre wages they received for prison work.

For your teeth, if you have money you can go to the 'hospital' [the prison clinic] for treatment. Otherwise they just pull out the aching tooth. They drill, they drill there. You can get the drill in the 'hospital', for money.

The outcome of all of this is that women found themselves re-entering society with missing teeth and poor oral health, something that they collectively recognised as a problem. As one woman put it,

Teeth, teeth, teeth, teeth… There was virtually no one who didn't complain about the state of their teeth. Yes, they'd fall out, yes, they crumbled away. I lost two teeth while I was inside. It was the bad environment, the lack of vitamins, well everything, generally.

In line with the observations made by Williams (2007) for the US, these Russian women found that deterioration in their dentition caused problems on release from prison, particularly when trying to find work.

I had to get my teeth done. I got my front teeth done before anything else. I couldn't even open my mouth or, well, who would give me a job? It's easier for them to take a young girl who looks good in the same shop, than me with no teeth.

Q. And did they not do your teeth in prison?
A. No, that's the worst thing. There, all the girls, all of them, they come out toothless –
Not one will give you a job [on the outside]. Not when you open your mouth.

For these women, prison time is clearly inscribed on their bodies through their loss of teeth. Separated from the penal context of inscription, where they were surrounded by 'similar others' (Frable et al 1998) and where missing teeth are common, they feel conspicuous and different, and perceive themselves to be easily recognisable and stigmatized as ex-inmates. Whether it is actually the stigma of incarceration, inferred from the missing teeth, which deters employers is debatable – the women may suspect that employers make this connection, but even if they do not, they recognise that in any case their missing teeth put them at a disadvantage in the labour market and inhibit their successful reintegration. For them the reminder of imprisonment was inevitable.

As earlier testimony showed, missing teeth are just one of a range of physical characteristics and habits which 'mark out' ex-inmates, including tattoos, smoking and swearing. However, they seem to

be the most problematic, in terms of the problems women face in concealing these bodily inscriptions of incarceration. Smoking, drinking and swearing are habits which can be difficult to break, but women can at least conceal them in public if they feel that this will help hide a personal history about which they feel self-conscious. Tattoos indelibly mark the skin, but are not necessarily publicly visible[2]. However, any social interaction which involves conversing with others, and any public-facing employment, reveals missing teeth. For this reason, these women were willing to go to considerable trouble and expense to repair or replace their teeth, and devoted scarce resources to getting their teeth fixed as a high priority on release.

> Here [outside of prison], you *have* to get your teeth done, above all. Now you can have
> them put in [implanted], my mother gave me 56 thousand rubles [approximately 2000
> US dollars] to have teeth put in.
> Q. That's expensive.
> A: Yes. [But] I had no teeth, I was ashamed to open my mouth.

Russian prisoners face a number of obstacles on release, including renewing essential personal documents like the internal passport, residence permits, and so on, with implications for their legal status and entitlement to various aspects of citizenship. Given the reportedly poor standard of medical treatment in prison it is also understandable that they might wish to visit a doctor on release. However, for them the most urgent priority was their teeth.

> I'm not in a hurry to get my documents, and I haven't visited the doctor's. The only thing
> is - dentistry – that's the first thing I'll do when I'm more or less back on my feet.
> I've looked at it. I already think that I'd have a plastic prosthesis [dentures], for the
> whole mouth at once. It'll cost seven thousand. Ten thousand, I think, because that's not
> counting how much it costs to have [the remaining teeth] pulled out [approximately
> 250-350 US dollars].
> Q. Would that be an implant?
> A: No, that would be full dentures. The ones that stick [to the gums]. Because right now
> they make something out of silicone. I have to adapt, because they can't be fixed, they
> have to be pulled out.

Erasing, or overwriting, this inscription of incarceration from their visible bodies was of paramount importance, and although they felt the stigma of missing teeth very personally, the women interviewed also demonstrated a determination to repair the 'damage' done to their appearance. In this way, they show that as Wahidin (2002, 192) argued, the material body is not passive, but rather is interwoven with and constitutive of systems of meaning, signification and representation. They saw their bodies as unfinished projects, with the body always in the process of becoming through the embodiment experience, and in so doing sought to address the 'ex-con' stigma. Their plans to replace missing teeth thus reflected the centrality of the body to their sense of self-identity, marked by a series of inscriptions dependent on types of spaces and places and experiences in them. If the loss of teeth was a marker of imprisonment, noticeable and 'telltale' on the outside, then dental treatment erased or overlaid that inscription, as the women took control over the projects of their bodies and made their own inscriptions in line with their conceptualisations of self-identity. Whilst the reasons why certain ex-prisoners responded to stigma in certain ways are explored elsewhere (Moran

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[2] Women do receive tattoos in prison in Russia, but the practice is not as widespread as in men's prisons (Lambert & Christ 2003).

forthcoming), the testimony of these women suggests that those who contested discrimination by addressing the conspicuous stigma of their teeth did so not only with the financial assistance of friends and family, but perhaps also with the kind of social and emotional support which enabled them to be resilient, rather than vulnerable, to stigma, by being able to reinscribe their bodies in line with their preferred conceptualisation of self-identity.

Conclusion

This paper extends the work of Wahidin (2002) on the embodied experience of incarceration, suggesting that the inscription of prison time on the body has significance not only during incarceration, as she has demonstrated, but also after release, in that released prisoners feel most keenly the inscription of prison time on their bodies, through their anxieties before release, their adjustment to everyday life on the outside, and critically, the stigma attached to their loss of teeth as a marker of imprisonment. In so doing it articulates and goes some way towards addressing a question about prisoner reintegration which has remained underexplored – the ways in which the 'stigma' perceived by ex-inmates is felt by them to be visible to others in a way which causes disadvantage. These women perceive the loss of teeth in prison as a conspicuous stigma - a 'telltale' sign that they have been imprisoned, which to their minds enables others to mark them out as different, and in Link and Phelan's (2001) conceptualisation of stigma, to facilitate status loss, discrimination and unequal outcomes. However, as Pinel (1999) and Major & O'Brien (2005) have noted, such stigma is not simply endured by these women. Their testimony shows that many strive for a change in circumstances, and having identified the 'telltale' sign, seek to address it, by seeking dental treatment which will alleviate this conspicuous, embodied stigma of imprisonment.

By drawing attention to the significance of this embodied experience, the paper makes a case for a wider range of approaches to be taken to the study of prisoner reintegration, to take properly into account the implications of problematic and stigmatising physical manifestations of imprisonment, and to consider the methodological challenges of conducting this work with respondents commonly understood to be vulnerable in relation to ethical research considerations. This research shows that former prisoners conceive of their reintegration as an embodied experience, and perceive themselves to be at a considerable disadvantage due to issues such as poor dental health. Whether or not these perceptions of disadvantage are accurate, or would be borne out by study of potential employers, as Corrigan et al (2006) have noted in a different context, in this case stigma evidently affects self esteem in a way which makes ex-inmates reluctant to engage in mainstream social practices, with implications for the likely success of their reintegration. Wahidin (2002) argued that a consideration of the embodied experience of incarceration is imperative in understanding how imprisoned individuals cope with imprisonment, and I would contend that it is also vital for an appreciation of their experience of release and reintegration. Further research of this kind may additionally provide further evidence to support calls for the improvement of prison dental services (e.g. Harvey et al 2005), both as a means of supporting prisoners' general health, and also to enhance their prospects of successful reintegration on release.

References

Ahmed, S. & J. Stacey (2001) *Thinking Through the Skin* Routledge, London

Benyamin, Y., H. Leventhal & E.A. Leventhal (2004) Self-rated oral health as an independent indicator of self-rated general health, self-esteem and life satisfaction *Social Science & Medicine* 59, 1109-1116

Boyer, E.E. & N.J. Nielsen-Thompson (2002) A comparison of dental caries and tooth loss for Iowa prisoners with other prison populations and dentate U.S. adults *Journal of Dental Hygiene* 76, 2, 141-150

Campbell, C. & H. Deacon (2006) Unravelling the Contexts of Stigma: From Internalisation to Resistance to Change *Journal of Community and Applied Social Psychology* 16, 411-417

Cope, N. (2003) 'It's No Time or High Time': Young Offenders' Experiences of Time and Drug Use in Prison *The Howard Journal* 42, 2, 158-175

Corrigan, P.W., A.C. Watson & L. Barr (2006) The Self-stigma of mental illness: Implications for Self-esteem and Self-efficacy *Journal of Social and Clinical Psychology* 25,9,875-884

Cunningham, M., R.E. Glenn, H.M Field & J.R. Jakobsen (1985) Dental Disease Prevalence in a Prison Population *Journal of Public Health Dentistry* 45, 1, 48-52

Dhlakama, G.H., Adeleke, O.A., G.A. Chukwu., A. Bukar, M.F. Gyang & I.S. Danfillo (2006) Oral Health Practices of Inmates of the Jos Main Prison. Abstract from the 5th Annual Scientific Congress of IADR Nigerian Division, August 29-September 1, 2006

Foucault, M. (1979), *Discipline and Punish*, Vintage, New York

Frable, D.E.S., L. Platt & S. Hoey (1998) Concealable Stigmas and Positive Self-Perceptions: Feeling Better Around Similar Others *Journal of Personality and Social Psychology* 74, 4, 909-922

Giddens, A. (1981) Agency, Institution and Time-Space Analysis. In Knorr-Cetina, K. & A.V. Cicourel (Eds) *Advances in Social Theory and Methodology: Towards an Integration of Micro and Macro Sociologies,* pp161-174, Boston, Routledge

Goffman, E. (1963) *Stigma: On the Measurement of Spoiled Identity* Prentice Hall, Englewood Cliffs, NJ.

Harding, D.J. (2003) Jean Valjean's Dilemma: The Management of Ex-convict Identity in the Search for Employment. *Deviant Behaviour* 24, 571-595

Hardwick, K.S., D.B. Jones & K.R. Phipps (1993) The Oral Health Status Among Residents of the Magadan Oblast, Russian Far East *Journal of Public Health Dentistry* 53, 2, 101-108

Harvey, S., B. Anderson, S. Cantore, E. King & F. Malik (2005) *Reforming prison dental services in England – a guide to good practice*. Department of Health, London

Israel, M. (2004). Strictly confidential? Integrity and the disclosure of criminological and socio-legal research. *British Journal of Criminology* 44, 715-740

Jargin, S.V. (2009) Some aspects of dental care in Russia. *Indian Journal of Dental Research* 20, 518-519

Johnson, L.C. (2008) Re-placing gender? Reflections on 15 years of Gender, Place and Culture *Gender, Place and Culture* 15, 6: 561-574

King, R. & Wincup, E. Eds 2007. *Doing Research on Crime and Prisons* 2nd edition Oxford University Press, Oxford

Lambert, A. & M. Christ (2003) *Russian prison tattoos: codes of authority, domination, and struggle* Atglen, PA, Schiffer Publishing

LeBel, T.P. (2012) Invisible Stripes? Formerly Incarcerated Persons' Perceptions of Stigma *Deviant Behaviour* 33, 89-107

Link, B.G. & J.C. Phelan (2001) Conceptualizing Stigma *Annual Review of Sociology* 27: 363-385

Locker, D. (2009) Self-Esteem and Socioeconomic Disparities in Self-Perceived Oral Health *Journal of Public Health Dentistry* 69, 1, 1-8

Longhurst, R. (2005) Fat bodies: developing geographical research agendas *Progress in Human Geography* 29, 3: 247-259

Lopoo, L.M. & B. Western (2005) Incarceration and the Formation and Stability of Marital Unions *Journal of Marriage and Family* 67, 721-734

Macgregor, D.M. & J.W.Balding (2005) Self-esteem as a predictor of toothbrushing behaviour in young adolescents *Journal of Clinical Periodontology* 18, 5, 312-316

Major, B. & L.T. O'Brien (2005) The Social Psychology of Stigma *Annual Review of Psychology* 56, 393-421

Maruna, S. (2001) *Making Good: How Ex-convicts Reform and Reclaim their Lives* American Psychological Association Books. Washington D.C.

McDowell, L. (1999) *Gender, Identity and Place. Understanding feminist geographies*. Cambridge University Press, Cambridge.

McGrath, C. (2002) Oral health behind bars: A study of oral disease and its impact on the life quality of an older prison population *Gerodontology* 19, 2, 109-114

Melossi, D. (2001). The cultural embeddedness of social control: Reflections on the comparison of Italian and North American cultures concerning punishment. *Theoretical Criminology* 5 (4), 403–25

Milhaud, O. & D. Moran (forthcoming) Penal Space and Privacy in French and Russian Prisons, in Moran, D., N. Gill & D. Conlon (Eds). *Carceral Spaces: Mobility and Agency in Imprisonment ad Migrant Detention* Ashgate, London

Mixson, J.M., H.C. Eplee, P.H. Fell, J.J. Jones & M. Rico (1990) Oral Health Status of a Federal Prison Population *Journal of Public Health Dentistry* 50, 4, 257-261

Moran, D. (2004). Exile in the Soviet forest: 'special settlers' in northern Perm' Oblast. *Journal of Historical Geography.* 30 (2), 395–413

Moran, D. (2012). 'Doing Time' in Carceral Space: 'TimeSpace' and Carceral Geography *Geografiska Annaler B* 94 (4)

Moran, D. (forthcoming). Leaving behind the 'Total Institution'? Teeth, TransCarceral Spaces and (Re)Inscription of the Formerly Incarcerated Body. *Gender, Place and Culture*

Moran, D., Pallot, J. & Piacentini, L. (2009). Lipstick, Lace & Longing: Constructions of Femininity inside a Russian Prison. *Environment and Planning D: Society and Space* 27 (4), 700–720

Moran, D., Pallot, J. & Piacentini L. (2011) The Geography of Crime and Punishment in the Russian Federation. *Eurasian Geography and Economics*. 52, (1), 79-104 79-104

Naidoo, S. (2004) Oral health status of prison inmates in the Western Cape. Abstract from the XXXVIII Scientific Meeting of the South African Division of IADR, September 2-3, 2004

Osborn, M., T. Butler & P.D Barnard (2003) Oral health status of prison inmates – New South Wales, Australia *Australian Dental Journal* 48, 1, 34-38

Pager, D. (2007) *Marked: Race, Crime and Finding Work in an Era of Mass Incarceration* University of Chicago Press, Chicago.

Pallot, J., & L. Piacentini with D. Moran, (forthcoming) *Gender, Geography and Punishment: The Experience of Women in Carceral Russia* Oxford University Press, Oxford

Piacentini, L., Pallot, J. & Moran, D. (2009) Welcome to 'Malaya Rodina' (Little Homeland): Gender, Control and Penal Order in a Russian prison. *The Journal of Socio-Legal Studies* 18 (4), 523-542

Pinel, E.C. (1999) Stigma Consciousness: The Psychological Legacy of Social Stereotypes *Journal of Personality and Social Psychology* 76, 1, 114-128

Roberts, L. & Indermaur, D. (2003). Signed consent forms in criminological research: protection for researchers and ethics committees but a threat to research participants? *Psychiatry, Psychology and Law* 10, 289-299

Salive, M.E., J.M. Carolla & T. Fordham Brewer (1989) Dental Health of Male Inmates in a State Prison System *Journal of Public Health Dentistry* 49, 2, 83-86

Schwartz, B. (1972) Deprivation of privacy as a 'functional prerequisite': The case of the Prison. The *Journal of Criminal Law, Criminology and Police Science* 63 (2), 229-239

Sykes, G. M. (1958). *The Society of Captives: A Study of a Maximum Security Prison*. Princeton, NJ: Princeton University Press

Tonry, M. (2001). Symbol, substance and severity in western penal policies. *Punishment and Society* 3 (4), 517–36

Travis, J. (2005) *But they all come back: facing the challenges of prisoner re-entry* The Urban Institute Press, Washington DC

Turner, B. (1995) Aging and Identity: Some Reflections on the Somantization of the Self. In Featherstone, M. & A. Wernick (Eds) *Images of Aging: Cultural Representations of Later Life* pp245-262. London, Routledge.

Wahidin, A. & S. Tate (2005) Prison (E)scapes and Body Tropes: Older Women in the Prison Time Machine *Body & Society* 11, 2, 59-79

Wahidin, A. (2002) Reconfiguring Older Bodies in the Prison Time Machine *Journal of Ageing and Society* 7, 3, 177-193

Weiman, D.F. (2007) Barriers to Prisoners' Reentry into the Labor Market and the Social Costs of Recidivism *Social Research* 74, 2, 575-611

Williams, N.H. (2007) Prison Health and the Health of the Public: Ties That Bind *Journal of Correctional Health Care* 13, 2, 80-92

Winnick, T.A. & M. Bodkin (2008) Anticipated Status and Stigma Management among those Labelled 'Ex-con' *Deviant Behaviour* 29, 295-333

Zaitzow, B. H. (2011) We've Come A Long Way, Baby…Or Have We? Challenges and Opportunities for Incarcerated Women to Overcome Reentry Barriers. In Ekunwe, I.O & R.S. Jones *Global Perspectives on Re-Entry* Tampere University Press, Tampere, Finland pp225-256