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Resilience and street level prostitution : a collective case study

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Megan C. Glennon
Resilience and Street Level
Prostitution: A Collective
Case Study

ABSTRACT

This study sought to discover how women in street level prostitution survive "the life," how they get out of prostitution, and how they are able to rebuild their lives. What resiliency factors contribute to their ability not only to survive, but to prosper? This qualitative, exploratory study intended to contribute to the knowledge base on women in street-level prostitution, which, although large, has not had a primary focus on how women leave "the life" and what their lives are like following departure.

Three women who had been prostituted at the street level, and in other areas, for at least six months and who had been out of "the life" for at least six months were recruited. Interview topics included: 1) early childhood memories; 2) introduction to and entry into prostitution; 3) experiences and coping mechanisms in "the life"; 4) the exit process; 5) rebuilding after prostitution; 6) what their lives are like today; and 7) their plans and dreams for the future.

These women used substances and dissociation to cope with their lifestyle. These women relied on formal and informal sources of support to leave "the life" and to help rebuild their lives. Resiliency factors identified included insight, use of supportive relationships, as well as turning their experiences into opportunities for growth and learning for others. Suggestions for further research were made to expand the literature on how women who wish to leave "the life" can be supported.

RESILIENCE AND STREET LEVEL PROSTITUTION:
A COLLECTIVE CASE STUDY

A project based upon an independent investigation,
submitted in partial fulfillment of the requirements
for the degree of Master of Social Work.

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CHAPTER I

INTRODUCTION

Prostitution and other forms of ‘sex work’ are prolific in the United States and around the world, and some would argue that they have been since the very beginning of time. ‘Sex work’ takes many forms including pornography, stripping, escort services and street level prostitution, to name just a few and is a multi-billion dollar industry. The U.S. pornography industry alone reported revenue of 12 billion dollars in 2000, which was a *thousand-fold* increase from 1972, when revenue was a mere 7 million dollars (Whisnant, 2004).

How many women and girls are prostituted each year in the US may never be known. Prostitution is difficult to define, thus making numbers difficult to ascertain. Should stripping and pornography be counted as prostitution? Human trafficking is a global phenomenon which brings tens of thousands of women and children into the US illegally each year for the purposes of prostitution (Farley, 2003). Technological advances have added to the invisibility of prostitution, as well. By moving it from the streets to online, prostitution can enter people's homes and becomes ever more anonymous (Hughes, 2003).

This research project will focus on women in street level prostitution, which will be defined in the Literature Review. Much of the recent literature in the area of street level prostitution has attempted to identify the factors that lead women and girls into this life. Early physical and sexual abuse, running away from home, drug use and racial,

ethnic and economic influences have all been identified as factors influencing entry into prostitution (Kramer & Berg, 2003; McClanahan, McClelland, Abram, & Teplin, 1999; Potterat, Rothenberg, Muth, Darrow, & Phillips-Plummer, 1998; Silbert & Pines, 1983). Many studies have also documented the risks inherent in street level prostitution, particularly drug abuse and addiction, STD and HIV exposure, and violence in the form of assault, kidnapping and rape (Dalla, 2002; Raphael & Shapiro, 2002; Weiner, 1996). The mental health consequences of street level prostitution can be severe and include depression and anxiety, Post Traumatic Stress Disorder, dissociative disorders and suicide (Farley et al., 2003; Herman, 2003; Rabinovitch, 2003; Ross, Farley & Schwartz, 2003). In addition, women in street level prostitution experience a great amount of shame and are likely stigmatized as a result of their activities (Masson & Hedin, 1999; Weiner, 1996).

One study found that 89% of 785 individuals in prostitution in nine countries wanted to escape (Farley et al., 2003). Regardless of one's opinions on prostitution, whether one views it as a form of violence against women or as an expression of female sexual liberation, it can be agreed that should women in prostitution desire to leave "the life," this option should be available and accessible to them.

This study will attempt to find out how women survive street level prostitution, how they get out of "the life," and how they rebuild their lives after being prostituted. Using a resiliency lens, this study will attempt to discover what factors contribute to women's survival in a life filled with violence and degradation, as well as those factors which allow them to thrive after getting out of prostitution. Services to women in prostitution require special attention to their unique situation, which more often than not

includes addiction, physical and mental health problems, homelessness, separation from children, and a lack of job skills (Raphael & Shapiro, 2002; Weiner, 1996). This study hopes to contribute to the knowledge base which will assist in tailoring services to meet the special needs of these women.

CHAPTER II

LITERATURE REVIEW

This chapter will begin with an overview of prostitution which will include the definitions and particular terms chosen for this study. The overview will give a synopsis of prostitution in the United States that will include statistics based on gender, age, and race. A brief historical perspective of social work's role and involvement in prostitution will be introduced, as well as the "feminist sex wars" which debate the role and meaning of prostitution in our society. This debate explores whether prostitution is a choice, a job or a form of oppression, and if prostitution should be viewed as violence against women in a male-dominated society or as an example of women's liberation.

This chapter will then focus on street level prostitution by exploring factors which influence a woman or girl's entrance into prostitution, as well as by providing an overview of "the life." The literature review will continue with a look at a few studies which have examined exit strategies among women who choose to leave prostitution. Finally, this chapter will review resiliency theories and how they may apply to women in prostitution who survive a life full of violence, addiction and serious physical and mental health consequences.

Prostitution is a world-wide phenomenon that is intricately tied to human trafficking and the global sex trade (Farley et al., 2003). This issue is far beyond the

scope of this study and will only briefly be discussed. Furthermore, prostitution laws will only begin to be explored, particularly as they relate to the racism and sexism evident in their enforcement.

Prostitution: An Overview

What is prostitution?

For this study, prostitution will be defined as: To offer, agree or engage in sexual conduct with another person for a fee. Sexual conduct means penetration, hand stimulation, simulated or fake sex, and /or sexual contact under or through clothing. A fee can be money, drugs, shelter, new clothes, or even a ride home. These definitions come from My Life My Choice Project's training, Understanding Victims of Prostitution and Commercial Sexual Exploitation: Dispelling Myths and Breaking Down Barriers.

"The language of prostitution is problematic...none of the terms are neutral. The speaker inevitably takes a position on prostitution by using certain terms to describe participants or acts" (Fechner, 1994, p. 28). Farley (2003) discusses how the language around prostitution makes the violence and harm perpetrated upon women who prostitute socially invisible. For the purpose of this study, her suggestion of using the terms "A woman who is in prostitution, who was prostituted, or who is prostituting" (p. 250) will be used instead of referring to these women *as prostitutes*, for they are so much more than what they do with their bodies for money or goods. For the purpose of this study, the term prostitution, and not sex work, which implies that prostitution is/was a chosen career, will be used. However, 'sex work' will be used when referencing research that uses the term.

Prostitution is intricately tied to human trafficking, with trafficking being called by some authors the global form of prostitution (Farley, 2003; Leidholdt, 2003). A U.S. Government estimate indicates that approximately 800,000 to 900,000 people annually are trafficked across international borders worldwide and between 18,000 and 20,000 of those victims are trafficked into the United States (http://www.icasa.org/uploads/prostitution_-_DRAFT-6.doc). The State Department believes that more than half the victims of trafficking worldwide are children (Jones, 2007).

Where does it happen?

Prostitution can take many forms and take place in many different venues including escort services, massage parlors, and at the street level (Raphael & Shapiro, 2002). Continuing with the above definition of prostitution, it can be argued that stripping and the different forms of pornography are also forms of prostitution (Jeffreys, 1997). Women are not usually involved in just one form of prostitution; they may, for example, move from stripping to the street level to pornography (Kramer, 2003). One study (Raphael & Shapiro, 2002) identified 26 different prostitution activities and venues, including street level, exotic dancing, drug houses, and private parties or events.

This study will focus on women who were prostituted at the street level, although this is a difficult distinction to make. For the purposes of this study, women who found their customers through standing on the street, in hotel lobbies, or at bars will be included under street prostitution.

The sex industry has been impacted by technological advances including the advent of the World Wide Web, email, chat, and live videoconferencing. These technologies have increased the visibility and availability of prostitution and prostituted

women. At the same time, the internet has provided a gathering place for information sharing among those who purchase prostitution services, while allowing for greater privacy and anonymity (Hughes, 2003). A service provider to women in prostitution and those trying to leave prostitution states, "Now there are few girls that are "on the street"-- many more are prostituted off Craigslist and are working in hotel rooms" (L. Goldblatt Grace, personal communication). Young girls are recruited off of MySpace and other popular networking sites and trades are being arranged online, moving prostitution from the street to homes and motel rooms (April, personal communication).

Who prostitutes?

The current study will focus on women in prostitution, although children, men and the transgendered are prostituted, as well (Farley et al., 2003). Due to the difficulties in defining prostitution as well as the invisibility of it, it is impossible to know how many women are in prostitution. The following statistics are from the Illinois Coalition Against Sexual Assault:

- 1% of women and girls in the US are being prostituted
- 500,000 to 1.2 million children are involved in child prostitution; there are at least 300,000 male prostitutes under age 16
- 40% of street prostitutes are women of color; 55% of those arrested are women of color; 85% of prostitutes sentenced to jail time are women of color. (http://www.icasa.org/uploads/prostitution_-_DRAFT-6.doc)

In addition, "FBI statistics show that in the U.S., 55 percent of people under the age of 18 arrested on prostitution-related charges are black children" (Jones, 2007).

The average age of entry into prostitution is 14 years old (http://www.icasa.org/uploads/prostitution_-_DRAFT-6.doc). In one study, 1/3 of the women entered prostitution before the age of 15, and 62% of the sample were in prostitution before their 18th birthdays (Raphael & Shapiro, 2002). This study will not specifically investigate adolescents and children being used in prostitution. However, knowing that many enter prostitution at such a young age is overwhelming evidence of the need for prevention and early intervention strategies, as well as considerations for support and treatment of adult women leaving "the life."

What are the laws?

Laws regulating prostitution began in 1910 with the Mann Act, which prohibits the transportation of women and children across state lines and between countries for the purposes of prostitution. By 1920, almost every city in the United States had outlawed solicitation (Wahab, 2002). Currently, laws vary greatly from state to state. Nevada, the only state with legalized prostitution, prohibits prostitution only in counties with a population of more than 200,000. While prostitution is considered a consensual offense, meaning it is an illegal act in which both parties participate, those prostituting are more often arrested and sentenced than their customers. Women who are prostituted also receive more severe sentences than their customers (Monroe, 2005). FBI statistics for prostitution arrests do not even include the customers (http://www.icasa.org/uploads/prostitution_-_DRAFT-6.doc).

A discussion of the laws in this country must take into account how racism affects enforcement of said laws. Women in street level prostitution are more often the focus of enforcement efforts although women at the street level comprise only 20 to 30% of those

being prostituted. African-American women are disproportionately represented in street level prostitution compared to other forms such as strip clubs, which are dominated by Latina women, escort services, dominated by White women, or massage parlors, which are dominated by Asian women (Monroe, 2005). Carter (2003) writes, "Several studies have shown that African-American women arrested for prostitution in the Minneapolis area were charged higher court fines, and given longer jail and probationary sentences than white women" (p. 215).

Penalties for customers and the women prostituted are comparable according to the laws; prosecution may include jail time of 15 days to 2 years, and fines from \$200 to \$10,000, depending on the state (<http://www.prostitutionprocon.org/law.htm>). However, enforcement and prosecution of anti-prostitution laws tends to be more supply-side focused than demand-side. These days, customers in some areas who are first time offenders can bypass the court system and attend "Johns Schools," a one day workshop which serves to educate them around STDs, morality, prostitution laws, and the overall harms of prostitution. Women arrested for prostitution are given no such comparable opportunity and are often fully prosecuted (Monroe, 2005). It is not surprising that in this society the White, male, middle class customer attends a one day 'educational' diversion program, while the African-American, female, poor, and likely immigrant and/or single mother is prosecuted, convicted and jailed (Monroe, 2005).

Before ending the discussion of prostitution laws, one more important area must be mentioned. Adolescents in prostitution face contradictions in the laws. In the state of Massachusetts, the age of consent is 18 years old. However, a 16 year old can be arrested for prostitution. Within the same legal system, this 16 year old girl can consent to sell

her body but cannot consent to sex with a chosen partner. Furthermore, a 14 year old Chinese girl trafficked into the country for use in prostitution would be viewed as a victim and offered a temporary visa, protection, and support services. A 14 year old American girl in Boston arrested for prostitution would be seen as a criminal and may end up in a juvenile facility (Lustig, 2007).

"The feminist sex wars"

A woman in prostitution in Amsterdam described it as "voluntary slavery" which illustrates both the appearance of choice in prostituting, as well as the coercion behind that choice (Farley, 2003). Farley writes, "Instead of the question 'did she consent?' the more relevant question would be 'did she have real alternatives to prostitution for survival?'" (p. 249).

There exists endless debates around whether prostitution should be legalized, decriminalized, abolished, and/or whether there should or can be greater equity in current laws and their enforcement. Current feminist debate questions whether prostitution is a form of work freely chosen by those who do it or whether those who do it were forced or coerced into it, either by individuals or a lack of other economic opportunities. Current theory also questions whether prostitution is a form of violence against women, or represents sexual freedom and liberation. Three main theories will be briefly explored below.

Liberal Feminist Theory: Prostitution as the oldest profession

Liberal feminists believe that prostitution should be decriminalized based on the belief that laws against prostitution are unconstitutional and that women have the right to

sex work should they choose it. It follows that liberal feminists believe that women have a choice to enter prostitution although they do agree that many enter out of a lack of other, comparable financial options. Sex workers' rights groups such as COYOTE (Call Off Your Old Tired Ethics) and HIRE (Hooking Is Real Employment) operate under this belief system. They acknowledge the harm caused to women in prostitution through rape, torture, kidnapping and assaults but believe that decriminalization and enforcement of existing laws can help to address this. Many believe that women are empowered when they charge money for something men expect women to provide for free (Sloan & Wahab, 2000).

Radical Feminist Theory: Prostitution as the oldest form of oppression

Radical feminist theory supports the abolition of prostitution and argues that women do not freely choose prostitution. They believe that women in today's society do not have the equality that would allow for free choices. They argue that prostitution, in all its forms, is oppressive to women, full of violence, and serves to assert male dominance, and that women cannot achieve equality as long as prostitution, in all its forms, exists. WHISPER (Women Hurt in Systems of Prostitution Engaged in Revolt) is one group that represents this approach (Sloan & Wahab, 2000).

Black Feminist Theory: Prostitution as racism

Women of color have less access to economic opportunities than their White counterparts in prostitution and they are arrested and prosecuted for prostitution at disproportionate rates (Monroe, 2005). Any view of prostitution therefore must take into account the effects of race and ethnicity on women in prostitution. Black feminist theory seeks to affirm the history and life experiences of all women of color that is informed by

the interconnection of race, gender and class issues. How these areas interact to form an environment of oppression and domination and how they have affected women of color's lives is the basis for Black feminist thought. According to Black feminist theorists, prostitution can be found at the intersection of race, class and gender and an analysis of prostitution must incorporate an understanding of racism (Sloan & Wahab; 2000).

Sloan and Wahab (2000) quote Collins (1990):

Exploring how the image of the African-American woman as prostitute has been used by each system of oppression illustrates how sexuality links the three systems. But Black women's treatment also demonstrates how manipulating sexuality has been essential to the political economy of domination within each system and across all three. (p. 174) (p. 465)

Africana Womanism follows closely the theory of Black feminists. However, Africana Womanism contends that feminists, including Black feminists, have failed to place the necessary emphasis on race in their analysis of prostitution. They believe that street level prostitution by women of color is the result of racism, more than sexism or classism, although the three work together to maintain oppression. Racism, according to Africana Womanists, is always classed and gendered (Monroe, 2005).

Prostitution and Social Work in History

Wahab (2002) provides an overview of how social workers' responses to prostitution have been influenced by changing societal contexts. She argues that from the evangelical reformers and settlement workers of the 1800 and 1900's to present day approaches, "Social work practice in this domain has been threaded through with beliefs about what constitutes reasonable, and indeed moral conduct, particularly for women" (p. 40). Evangelical reformers believed women in prostitution were victims of male

aggression in need of protection. Settlement house workers, and Jane Addams in particular, viewed prostitution as “The social evil” and female social reformers of this time saw prostitution as “A symbol of moral corruption that sanctioned sexual and financial exploitation of women’s bodies, and a threat to women’s homes” (p. 48). In both of these approaches, class values and fears of sexuality influenced attempts to protect women and reform prostitution. Immorality and sexual deviancy were seen as characteristics of the lower classes, and middle and upper class individuals engaged in social work viewed themselves as exempt from such immorality by virtue of their class positions (Wahab, 2002).

In the 1920’s, social workers tried to professionalize their work and “Distance themselves from the image of the benevolent and moralistic female worker” (Wahab, 2002, p.49). They aligned themselves with the fields of medicine and psychiatry. In an attempt to set themselves apart from the church-based work, social workers ended up doing the same kind of work around prostitution: they “Tried to rehabilitate fallen women by changing their personalities through case work and therapy, while evangelicals used religion” (p.49).

In the 1960’s prostitution became an issue within the feminist movement and it has proven to be quite controversial. Contemporary debates on prostitution and other forms of sex work are polarized around whether it is liberating and an empowering choice or exploitative of forced/coerced victims. This debate, which has come to be known as the ‘feminist sex wars,’ was explored in the previous section (Wahab, 2002). In regards to contemporary social workers, Wahab (2002) writes,

Social work services have been most greatly influenced by the anti-prostitution voices, perhaps because the arguments and agendas of these camps have proved more consistent with historical social work perspectives that regarded prostitutes as victims and/or deviants in need of rescue and reform. (p. 52)

Wahab (2002) concludes that despite the different perspectives on prostitution adopted throughout social work's past, historically all organized efforts at reform have focused on the individual women and their character, or lack thereof. "Rarely have sex workers been regarded as the experts on their own lives" (p. 40). This study hopes that by speaking with individual women and hearing their narratives, they will have the opportunity to be heard as the "experts on their own lives."

Entry into Prostitution

Researchers have tried to determine the factors that lead women into prostitution. Early childhood sexual abuse, running away from home, substance use, and racial and ethnic influences are common variables examined in the current research.

Raphael and Shapiro (2002) investigated age of entry into prostitution activities, finding that about 1/3 of their study participants entered prostitution before the age of 15 and 62% of their sample entered prostitution before the age of 18. "Many women in this sample had run away and grew up in households with loss of life, separation from caretakers, domestic violence, substance abuse, and prostitution" (Raphael & Shapiro, 2002, p. 2).

Drug Use and Early Sexual Abuse:

Silbert and Pines (1983) attempt to answer the question of whether sexual exploitation as a child influences women's entry into prostitution by interviewing 200

street level prostitutes in San Francisco, CA. They found that 78% of their participants entered prostitution as juveniles and 60% of their participants reported being sexually exploited as juveniles. Participants reported severe physical and emotional harm as a result of the abuse. Ninety-one percent of these women felt that there was nothing that they could do about the abuse. Most importantly, 70% of these women reported that the sexual exploitation affected their decision to enter prostitution. This, of course, assumes that their entry into prostitution was a choice.

Silbert and Pines (1983) attempt to explain how this early abuse influenced the women interviewed and their entry into prostitution. They state,

The present study...suggested that the willingness of subjects to endure abusive relationships (such as those with pimps and with customers) is related to a developed sense of 'psychological paralysis' in which the subjects have been unable to make sense of a series of early abuses and therefore react with inaction, depression, and self-blame. As the abuse continues and as their ability to make sense of them diminishes, the women retreat into a totally passive role in which they feel powerless, out of control of their life, debilitated, and psychologically paralyzed. (p.288)

It must be noted that the authors provide no evidence to support this claim of "psychological paralysis." This author suggests that one must be careful with such claims; that labeling these women powerless and paralyzed can only serve to diminish what power they do have, and that such an approach ignores that women do survive this lifestyle and do have agency in their lives.

Romero-Daza, Weeks and Singer (2003) interviewed 35 drug addicted street level prostitutes in Hartford, CT to study the relationships between drug use, violence, HIV risk and street level prostitution. Their research identifies the following cycle: witnessing domestic violence at a young age led many participants to drug use as an escape; as the

addiction grew and these women had limited economic opportunities, they turned to prostitution, which exposes them to even more violence, greater drug use and puts them at risk for HIV. While this cycle is not true for all women in prostitution, it nonetheless provides insight into the lives of women in street level prostitution. The authors write,

The majority of our respondents talk about prostitution as a degrading and stressful occupation. However, at the same time, the stories of the women in this project show that they are not passive victims of the circumstances in which they find themselves; rather, they are able to assert their individual agency to maximize their chances of survival in a very hostile environment. (p.254)

Unlike Silbert and Pines (1983) discussed above, Romero-Diaz, Weeks and Singer found the women in their study to be active participants in their own survival in a severely difficult lifestyle.

McClanahan, McClelland, Abram, and Teplin (1999) investigated three pathways into prostitution: childhood sexual victimization, running away, and drug use. They interviewed 1,272 female detainees at Cook County Department of Corrections in Chicago, IL. More than 1/3 of their interviewees reported ever having been prostituted. Examining their three variables against prostitution the researchers found that: Interviewees who had been sexually abused in childhood had higher rates of ever having prostituted, at 44.2 % vs. 28.5% who had no history of abuse; interviewees who had ever run away from home were significantly more likely than non-runaways to have ever prostituted, with 44.7% prostituting vs. 29.7%; and women with moderate or severe cocaine or opiate abuse or dependence were substantially more likely to have ever engaged in prostitution than those women without these disorders, at 53.2% vs. 13.9%. The authors conclude that all three variables predicted entry into prostitution.

Their findings are similar to other studies demonstrating that early sexual abuse and running away behaviors influence entry into prostitution (Silbert and Pines, 1983). Their most significant finding involves the influence of drug use. When the authors controlled for early sexual abuse and running away behaviors, they found that drug abuse alone was not a risk factor for prostitution. They conclude that this finding supports other evidence that drug abuse can lead to prostitution, or it is just as likely to follow entry into prostitution (McClanahan, McClelland, Abram, and Teplin, 1999).

Dalla (2002) interviewed 43 women in street level prostitution to examine the social milieu. She found that 63% of her participants experienced sexual abuse at a young age. In addition, Dalla identified a theme of abandonment in the interviews, whether literal, through parental death or desertion, or symbolic, through substance abuse, mental illness, severe domestic violence, and lack of action or disbelief when sexual abuse was revealed.

“Drug abuse and economic necessity were described as the primary reasons for entering the sex industry” (Dalla, 2002, p. 349). Forty-one of 43 participants reported regular drug abuse. Fifty-three percent of participants reported recreational drug use before entering prostitution while 76% became regular users after entering. Interestingly, 44% of participants reported entering prostitution out of economic necessity, not to support a drug habit. This is the only study found that examined entry into prostitution as an economic necessity.

Potterat, Rothenberg, Muth, Darrow, and Phillips-Plummer (1998) attempted to determine the chronology of sexual activities, drug abuse, and entry into prostitution. They interviewed 237 women in prostitution in Colorado Springs, CO and compared

them to 407 women not in prostitution who were accessed through an STD clinic. The investigators found that drug use was more common among the prostituted women, drug use preceded sexual activity in both groups of women, and drug use preceded entry into prostitution in 66% of the prostituted women (Potterat et al., 1998). Here, it is possible and likely that women were using drugs before being prostituted and then used them as a coping mechanism once in "the life." Their research does not show that drug use leads to prostitution.

The authors' findings on sexual activity and entry into prostitution are given less exploration in their discussion of findings. Among the prostituted women, 32% reported pre-pubertal sexual contact (defined as penile penetration prior to age 11) compared to 13% of the comparison group. The authors do not believe, and their data supports this, that early sexual exploitation plays any greater role in influencing entry into prostitution than drug use does (Potterat et al., 1998).

Potterat, Rothenberg, Muth, Darrow, and Phillips-Plummer (1998) conclude, "Our initial inquiry (Potterat, Phillips, Rothenberg, & Darrow, 1985) into the antecedents of female prostitution in Colorado Springs suggested that while social factors may set the stage for prostitution, the script to become a prostitute may be written by psychological factors. The present study reinforces that impression" (p. 340). With this statement, the authors are stating that their study did not provide clear evidence that either drug use or early sexual contact, whether through victimization or supposed choice, are direct causes of a woman's entry into prostitution. They encourage further research to determine what internal factors, rather than external, might influence a woman's entry.

Race and Ethnicity

Race and ethnicity cannot be overlooked when exploring entry into prostitution. Kramer and Berg (2003) looked at minority status, educational level and the experience of risk factors during childhood or adolescence and how these factors influence age of entry into prostitution. They found that “in spite of experiencing childhood risks less often, minority women in our sample entered prostitution at significantly earlier ages than their white counterparts” (p. 524). The authors point out that separating race and class influence is often difficult. Due to the history of racism and oppression that has left many people of color in positions of lower socio-economic status and thus residing in areas where prostitution is more visible, it is possible that minority women entered prostitution at a younger age due to earlier exposure and greater knowledge of prostitution. The authors suggest that an examination of socio-economic status along with neighborhood influences could lead to a greater understanding of how race influences the age of entry into prostitution (Kramer & Berg, 2003).

The above studies show that a woman's entry into prostitution is influenced by multiple factors, including but not limited to early sexual victimization, drug use, race and ethnicity, and running away behaviors (Kramer & Berg, 2003; McClanahan, McClelland, Abram, & Teplin, 1999; Potterat, Rothenberg, Muth, Darrow, & Phillips-Plummer, 1998; Silbert & Pines, 1983). Further research is needed to explore the role of pimps, or "boyfriends" in a young woman's entry into prostitution. Additionally, only one published study was found (Dalla, 2002) that discussed entry into prostitution as a financial need.

"The Life"

“The life” is a term used by women who engage in prostitution. The term has been adopted by social workers, service providers, researchers and others who work with these women, as well as by popular culture, including, media, movies and even theater. In 1997, the Broadway show “The Life” opened with a story line centered around prostitution. A picture of "the life" will be painted below.

Drug Addiction, Violence and Physical Health Consequences

Weiner (1996) offers a comprehensive look into the reality of street level prostitution. Her research examined almost 2000 questionnaires completed by women in prostitution in New York City who were seeking services through an outreach program which provided primarily HIV testing, condoms and bleach kits for needles. The questionnaires addressed “demographics, family/living situations, sex and drug practices, HIV status and risk reduction strategies, and health history” (p. 99).

Weiner’s (1996) more significant findings include: more than 2/3 of the women had children; more than half lived in their own apartments, another 42.7% lived in unstable situations (relatives, friends, boyfriends) and 17.3% were homeless; 35.2% were HIV positive, 41.8% reported no history of STD’s and were not HIV positive; 68.3% used crack cocaine, 43.7% used marijuana, 39.4% used cocaine, 28.4% used IV heroin, and 23.1% used nasal heroin, more than half of the women used alcohol; use of condoms with johns seemed to be equally split, around half reported always using them (50.2% for fellatio and 50.1% for intercourse) and half reported never using them (49.9% for fellatio and 49.8% for intercourse), 75.3% reported never using condoms with boyfriends.

Weiner (1996) found that 40.3% of the Hispanic women were HIV positive compared to 35.5% of white women and 32.0% of black women. Hispanic women had the highest rates of nasal heroin use while Black women were more likely to use alcohol and smoke crack and White women were more likely to use IV heroin. Hispanic women were found to have more children and have the lowest levels of education. Black women were most likely to be homeless. White women were likely to report hepatitis infection while Black women were more likely to report tuberculosis. Weiner provides a full picture of "the life" including drug use and addiction, physical health consequences and STD exposure, as well as unstable living situations and motherhood.

Raphael and Shapiro (2002) offer a valuable investigation into the lives of prostituted women through the Center for Impact Research (CIR). They estimate that a minimum of 16,000 women and girls are involved in prostitution in Chicago, IL. The CIR trained 12 prostitution survivors to conduct interviews with 222 women who were or had been involved in prostitution, using the fullest definition of prostitution to include pornography, stripping and phone sex, as well as escort services, massage parlors and street level solicitation. Raphael and Shapiro's results are similar to other studies of prostitution in the areas of drug use and treatment, homelessness, and health problems including STD's and HIV status (Weiner, 1996).

Violence experienced in prostitution was investigated (Raphael & Shapiro, 2002). Women in drug houses, on the streets and in hotels experienced certain types of violence more frequently when compared to off street venues such as stripping or escort services. For the current study's purposes, it is significant to note that of women on the street, 21.8% had been raped more than 10 times, 86% had ever been slapped, 70% had ever

been punched, close to 80% had ever been threatened with a weapon, and 75% had been robbed, many multiple times. The numbers for women in off street venues were also rather high. Violence was reported to be perpetrated by customers/tricks, intimate partners, pimps, police officers and neighbors (Raphael & Shapiro, 2002). The investigators also found that “large percentages of women gave the money they made in prostitution to someone else, and stated they faced violence if they ceased to do so” (p. 20).

Raphael and Shapiro write, “This research project was designed within a framework of prostitution as a form of violence against women. While this conceptualization is accepted by many service providers, advocates, and researchers, it is inherently biased” (2002; p. 33). Recognition of this limitation is important and this stance is similar to the one taken in the current research project. It is disappointing to note that two important areas were not addressed in Raphael and Shapiro’s study. To begin, the women were asked if they felt they were able to leave prostitution yet were not asked if they wanted to leave. The investigators recognize that this is another limitation of their study. Secondly, while the researchers investigated domestic violence in families of origin, and included rape under this subject, they did not specifically address sexual abuse, rape and/or incest experienced at a young age by the women in their study. Other investigators have documented the impact of these experiences on women’s entry into prostitution, as discussed above (Silbert & Pines, 1983; McClanahan, McClelland, Abram, & Teplin, 1999). While Raphael and Shapiro’s goal was not to investigate reasons for entry into prostitution but to identify the social needs of these women, an experience of sexual abuse or incest cannot be ignored when attempting to provide

services to this population. Raphael and Shapiro's investigation could have been more informative had these two areas been addressed (2002).

Dalla (2002) also explored "the life" and her study is one of few that examine the role of pimps in prostitution. Less than half of the women in her study reported being involved with a pimp, and three reported, "The rock was my pimp" (p. 349). Similarities between pimps and boyfriends included: both were physically violent with the women, fathered children of the women, and not only knew about the women's prostituting and drug use but had often introduced them to the streets. However, pimps required their women to make a certain amount of money, took the women's money from them and in exchange provided food, shelter and clothing, as well as protection, and often had more than one woman working for them.

Dalla (2002) found that condom use by the women was intermittent, used mostly with strangers only, never with regulars, boyfriends or pimps. Five of the women became pregnant by clients. Thirty-eight of the 43 participants had children yet only 5 still lived with them, with the rest in foster care or the care of their fathers or family members. Dalla did not discuss the incidences of STDs or HIV infection, or other health concerns.

Thirty-one of Dalla's 43 participants reported incidents of severe abuse by clients, pimps or boyfriends. Many reported having been raped, beaten with objects, threatened with weapons and abandoned in remote areas. The women reported steps they took to protect themselves including relying on their intuition, not travelling with clients, and some of the women reported carrying weapons (2002).

In all, Dalla portrays a picture of street level prostitution that is full of violence, addiction, and loss, whether of family and/or parents early in life, of children later in life, or of self, as one of her interviewees reported, “It was so much against my morals years ago. I wanted my kids raised so perfectly and then I just turned, it’s like I gave up” (2002, p. 350).

Young, Boyd and Hubbell (2000) investigated crack cocaine use among African American women. They interviewed 203 African American women with a history of crack cocaine use, some of who prostituted, to investigate the severity of their drug use and whether women in prostitution use drugs to cope with the experience of prostituting. They hypothesized that while women may enter prostitution to support a drug habit, they often increase their drug abuse to cope with the psychological distress caused by prostituting.

The investigators found that women who were prostituted were addicted to a greater number of substances than the women who were not. They also found that women who were prostituted were more likely to use drugs to increase their feelings of confidence and closeness to others, sense of control, and ability to be open with others as well as to decrease their feelings of guilt and sexual distress. This study is significant because it looks more specifically at the underlying psychological factors motivating drug use among women in prostitution. They argue that drug use and prostitution in combination are a self-perpetuating cycle: women may enter prostitution to support their drug use, but once prostituting, the drugs serve to make prostitution bearable, and thus the addiction increases (Young, Boyd & Hubbell, 2000).

Crack cocaine in particular has had an impact on street level prostitution, due to the specific nature of its use. Crack cocaine, purchased in small, affordable quantities, provides an intense but short high, resulting in cravings for more as soon as the drug wears off. The compulsive nature of crack cocaine use, or bingeing, may be more likely to lead to prostitution activities, as individuals tend to spend their money quickly, making them more willing to do anything to get crack. Women who are willing to exchange sex for drugs, particularly crack, have changed the market for prostitution, lowering the amount of money men are willing to pay (Young, Boyd & Hubbell, 2002).

Mental Health Consequences

Women who are prostituted experience a large array of mental health consequences including Post-traumatic Stress Disorder, depression and anxiety, dissociation, and suicide attempts (Herman, 2003; Rabinovitch, 2003; Ross, Farley & Schwartz, 2003).

In one very important and comprehensive study by Farley et al., (2003), 854 current and former prostitutes were interviewed in nine countries. Interviews focused on the violence these individuals had experienced when prostituting and before prostituting. Their findings were similar to studies discussed above in regards to the amounts of physical and sexual assault experienced in prostitution. What was most alarming about this study, however, was that:

68% of 827 people in several different types of prostitution in nine countries met criteria for PTSD. The severity of the PTSD symptoms of participants in this study were in the same range as treatment-seeking combat veterans, battered women seeking shelter, rape survivors, and refugees from state-organized torture. Severity of symptoms of PTSD was strongly associated with the number of different types of lifetime sexual and physical violence. (Farley et al., p. 56)

Dissociation, a common response to traumatic experiences, is also found among women in prostitution and is often found in conjunction with depression and anxiety (Ross, Farley & Schwartz, 2003). Self-harming behaviors and suicidality have also been reported among women in prostitution (Herman, 2003; Rabinovitch, 2003). Stockholm Syndrome, emotional bonding to an abuser, has been found among women in prostitution and some authors have drawn parallels between women in domestic violence situations and women in prostitution (Stark & Hodgson, 2003).

"The life" is dangerous. It exposes women to drug use, many forms of violence, and STD's including HIV. Street level prostitution often causes separation from children, homelessness, addiction and mental and physical health consequences. Farley et al., (2003) found that 89% of 785 individuals interviewed wanted to leave "the life."

Exit Strategies and Considerations

Few studies have been conducted on the exit process among prostituted women. Dalla (2006) provides one of the few studies in the US, while Mansson and Hedin (1999) look at the exit process in Sweden and Manopaiboon et al., (2003) discuss exit attempts in Thailand.

In a follow-up to her earlier work referred to above, Dalla (2006) located 18 of her original 43 study participants almost 5 years later. This second investigation focused on "the women's life experiences between the two points of contact, with emphasis on sex-industry exit attempts" (p. 276). Five of the 18 women had not returned to prostitution, 10 had returned to prostitution, and 3 were incarcerated for parole violations. Dalla found, through in-depth interviews with each woman, that three common themes

were relevant to exit attempts, whether those attempts were successful or not. These include the significance of relationships and attachments, formal support and professional services, and economics and employment. In addition, Dalla reports on the role of religion and spirituality for most of the women interviewed. Mental health problems were alluded to only by the women whose exit attempts were unsuccessful. It is unfortunate that Dalla was only able to locate 18 of the original 43 women and that of those 18, only 5 had successfully exited. Locating the remainder of the women would have provided valuable data regarding exit strategies and attempts from prostitution.

In a Swedish investigation by Mansson and Hedin (1999), 23 women who were or had been involved in the sex industry were interviewed. The authors identified two types of, what they call, "break-aways" from the sex industry. The first type happened quickly by women who were loosely involved in the sex industry; the second type occurred slowly after a long amount of time in the industry. In addition, Mansson and Hedin explored the period after the break-away and found four different life challenges the women have faced. (1) Working through and understanding the experiences of life in prostitution began with a crisis-like emotional reaction immediately after the break-away. (2) The women also experienced great shame after the break-away, which was compounded by the stigma they experienced. (3) The women reported feeling as if they were living in a marginalized situation, not sure in which world they belonged. (4) Lastly, dealing with intimate relationships after life in prostitution was difficult for the women interviewed.

Mansson and Hedin's study also provides an exit model which combines structural, situational, interpersonal, and individual factors to explain how and why

women leave prostitution. Their research is particularly valuable as it addresses the deeper, psychological difficulties of leaving prostitution and rebuilding lives, in addition to societal barriers (1999).

In a follow-up examination of their study results, Mansson and Hedin (2003) focused on the role of supportive relationships in women's break from prostitution. Relationships with family members, intimate partners, children, new friends, and social service workers were all considered in the context of how they influence a woman's break from prostitution. The authors suggest that a woman's break with prostitution is a process involving four phases: (1) preliminary stages when the woman is considering leaving, seeking alternatives, and trying new strategies to distance herself from prostitution; (2) the turning point when the woman decides to break away, which, as the authors postulated earlier, can happen quickly or gradually; (3) post-breakaway marginal situation, the woman is living in between two lifestyles; and (4) building a new life through developing new roles through work, education or parenting.

Mansson and Hedin's (2003) break away process is similar to the Transtheoretical Model of Intentional Behavior Change which includes (1) Precontemplation, where behaviors are not seen as a problem; (2) Contemplation, where one is ambivalent about making changes; (3) Preparation, where one makes plans for change; (4) Action, where one begins new behaviors; and (5) Maintenance, where one is committed to sustaining the new behaviors. This model has been adopted by the addiction recovery field in particular, and is also useful in addressing other problematic behaviors (DiClemente, 2003). Drawing further similarities between leaving prostitution and facing an addiction, the authors write, "Supportive social relationships are crucial for the break from

prostitution. This finding is consistent with previous research, for example, in breaking away from drug addiction" (Mansson & Hedin, 2003, p. 234).

Both Dalla (2006) and Mansson and Hedin (1999) speak of the women's personal commitment to change as central to their ability to leave prostitution. Dalla writes, "The women who successfully exited prostitution took it upon themselves to obtain knowledge, internalize information, and then apply newly acquired tools to their own lives" (p. 288). Similarly, Mansson and Hedin write, "it is our contention that the individual's emotional commitment, as it is expressed through dreams and positive illusions, lies at the very heart of the process of change" (p. 75).

Manopaiboon et al., (2003) interviewed 42 women in Thailand who were current and former female 'sex workers.' The authors found that women's ability and decisions to leave the industry were influenced by four factors: economic situation, relationships with a steady partner, personal attitude toward sex work, and HIV/AIDS status. Manopaiboon et al. write, "Economic factors had the largest influence over women's decisions to remain in, leave or re-enter sex work" (p. 42).

The study in Thailand differs from the previous two in terms of the stigma experienced by the women involved in 'sex work.' "In the northern areas of Thailand, the practice of young women entering sex work was perceived to be a tradition (Peracca et al., 1998)" (Manopaiboon et al., p.49). Additionally, the women in this study did not work at street level prostitution; they worked in karaoke bars, massage parlors and brothels. Violence and drug use may be less prevalent in these venues.

Weiner's (1996) research, discussed earlier, is significant for this current study as she identifies significant considerations for social service providers working with this

population. Access to drug and alcohol treatment is problematic due to living situations and availability of beds, finding care for children and possible loss of parental rights by admitting to drug abuse. Medical treatment is also difficult to access. "Drug use, lack of housing and other unmet social needs make compliance with medical treatment difficult for this population" (p. 102).

Weiner stresses the importance of the development of personal relationships with women in prostitution through offering concrete items such as food, clothing, condoms, and clean needles. In this way, social service providers can exhibit non-judgmental attitudes and begin to gain the trust of these women who "Are unlikely to approach agencies for help because of their lifestyle and fear of arrest" (Weiner, 1996, p. 102).

Most importantly, Weiner (1996) identifies the stigma of being prostituted and the difficulties women have revealing that they have been prostituted. She writes,

Being a prostitute makes a woman vulnerable to the loss of social services, removal of her children and termination of parental rights, expulsion from social support systems such as family or church, rape or other violence, and arrest. The stigma associated with being a prostitute may make it impossible for these women to return to more 'legitimate' lifestyles." Thus, it is extremely difficult for women to identify themselves as prostitutes. (p. 100)

Carter (2003) provides intervention considerations specifically for African-American women in prostitution. She writes, "The services that Black women need may seem to be the same as those required by white women however, because of the repeated and sustained harms of racism, the needs of African-American women are significantly different" (p. 216). Service providers must understand (1) the relationship between slavery and prostitution; (2) the barriers created by institutional racism that bring women into prostitution and keep them trapped there; (3) the issue of child abuse, since women

enter in early adolescence; (4) the influences of poverty and homelessness; (5) the prevalence of multiple health issues; and (6) the cultural and social barriers within Black communities which make discussion of prostitution difficult (Carter, 2003).

Resiliency

“Resilience is the human ability to adapt in the face of tragedy, trauma, adversity, hardship, and ongoing significant life stressors” (Newman, 2005, p. 227). Definitions of resilience are varied amongst clinicians and researchers, and many consider resilience to be a personal trait or quality of the individual, instead of a developmental process indicative of positive adjustment in the face of hardship (Tedeschi & Kilmer, 2005).

The American Psychological Association (APA) believes that resilience can be learned and built, albeit through a complicated process, due to the fact that resilience is a multidimensional concept, associated with many behaviors and actions. “Maintaining good relationships, having an optimistic view of the world, keeping things in perspective, setting goals and taking steps to reach them, and being self-confident...are associated with resilience” (Newman, 2005, p. 227). In addition, each individual’s strategy to build resilience will be different and personalized, based on each person’s strengths and experiences (Newman, 2005).

Bonanno (2004) argues that there are many ways to gain resilience. Hardiness is a personality trait that functions to shield individuals' exposure to extreme stress and consists of three parts, including a desire to find meaning and purpose in one’s life, a belief that one can influence one’s environment and the outcome of events, and the belief that one can learn and grow from positive and negative experiences. Self-enhancement,

or overly positive self-regard, can be adaptive and promote well-being. Repressive coping is a third dimension of gaining resiliency whereby individuals avoid disagreeable thoughts, emotions and memories often through emotional dissociation. Finally, the use of positive emotions and laughter are often used to cope by quieting negative emotions following difficult events (Bonanno, 2004).

The above dimensions of fostering resilience have negative results, as well. Self-enhancement is quite akin to narcissism and these individuals can often leave negative impressions on others. Repressive coping through emotional dissociation is typically viewed as maladaptive and can have long term health costs. Using positive emotions and laughter can be viewed as extreme denial (Bonanno, 2004). However, Bonanno points out that “Researchers and theorists need to move beyond overly simplistic conceptions of health and pathology to embrace the broader costs and benefits of various dispositions and adaptive mechanisms” (p. 26).

Harvey (2007) agrees with Newman (2005) and the APA regarding the multidimensional aspects of resilience when she writes, “Bonanno (2004) seems to regard resilience as an all-or-none phenomenon” (p. 15). Harvey questions how clinicians are to classify an incest survivor who “Functions well during the work week, but is isolated, anxious and lonely on the weekends” (p.15). If we define resilience as multidimensional, then it is possible for one to be both suffering and surviving (Harvey, 2007).

Saleeby (2002) borrows from Wolin and Wolin (1993) to identify some of the possible personal qualities or traits that make someone resilient: humor, insight, creativity, morality, independence, patience, initiative, and relationships. He believes that these traits can be part of a person’s temperament or they can result from experience.

They can be inherent for an individual and they can also be developed, through life experiences and/or through relationships with others. Saleebey (2002) writes:

Resilience is not the cheerful disregard of one's difficult and traumatic life experiences; neither is it the naïve discounting of life's pains. It is, rather, the ability to bear up in spite of these ordeals. Damage has been done. Emotional and physical scars bear witness to that. In spite of the wounds, however, for many the trials have been instructive and propitious. Resilience is a process – the continuing growth and articulation of capacities, knowledge, insight, and virtues derived through meeting the demands and challenges of one's world, however chastening. (p. 11)

Missing Research

Benoit and Shaver (2006), writing from Canada, attempt to reveal areas of sex work that have been underresearched. Relevant to this current study, the authors determine that more work is needed on the long range impact of time spent in the sex industry on individual's health and well-being and what strategies help them to develop sustainable lives. They note that "Work on the social construction of stigma relating to the sex industry has begun, but we know little about how discrimination or enacted stigma become 'felt' and internalized, and what the outcome means for PWSI (People Working in the Sex Industry)" (p. 246). This is particularly important to those who work(ed) at the street level, as the amount of violence and drug use are often higher. This study will attempt to address some of these areas.

Summary

Social work's history with women in prostitution has been based on the belief that they are in need of being saved, either from the clutches of a patriarchal society, or from

themselves (Wahab 2002). The "feminist sex wars" offer varying viewpoints on this (Sloan & Wahab, 2000). Is prostitution yet another form of violence against women in a male-dominated society or is it women's opportunity to take back something that has forever been defined by that male-dominated society, their sexuality? Given the amount of violence and trauma that women in street level prostitution are exposed to, it is difficult to see it as empowering to the women who do it (Dalla, 2002; Raphael & Shapiro, 2002). However, surviving a life filled with such trauma, and rebuilding afterwards, can be viewed as empowering (Saleeby, 2002). The use of resiliency theories to view these women allows us to examine the traits or attributes that allow a woman to endure "the life" as well as to define the new life that comes after (Bonanno, 2004; Newman, 2005).

CHAPTER III

METHODOLOGY

The research question guiding this study is: How do women survive a life in street level prostitution, how do they get out, and how do they rebuild their lives afterwards? This study used a qualitative, exploratory design. Flexible methods were used to allow for an investigation of how women cope in "the life" and how they get out. This design is appropriate because the researcher intended to "capture the phenomenon of interest in the words and actions of those who embody or live them and to capture them in context in terms that are as 'experience-near' as possible" (Anastas, 1999; p. 57).

Benoit and Shaver (2006), when discussing previous research on women in prostitution, write, "they often still appear as one-dimensional, rather than as people whose 'work' represents only one part of their multi-faceted lives" (p. 246). In an attempt to bring about this needed three-dimensional view, a case study approach has been utilized for this study. Anastas (1999) writes, "Case studies can also be especially useful for examining the process of change, whether developmental or induced by intervention efforts" (p. 94). In this spirit, semi-structured interviews were used in order to collect data from three women from diverse backgrounds who were prostituted at the street level and have left "the life."

Sample

The sample for this case study included three women, making this a collective case study. Anastas (1999) writes, "This kind of study, while too rarely done or done

correctly, in fact has great potential to contribute to knowledge development in the helping professions" (p. 103). Inclusion criteria for participants in this study were: 1) English-speaking women who were 18 years of age or older; 2) women who spent a minimum of 6 months in street-level prostitution; 3) women who have left "the life," i.e. are no longer being prostituted and; 4) women who have been out of prostitution for a minimum of 6 months.

For this research, possible participants were located through a local program, Program X, which works with women who were formerly prostituted. This program offers prevention programming through group therapy to adolescent girls who are at high risk of being prostituted and also provides trainings for the service providers who work with these young women. Adult women who were formerly prostituted speak at these trainings; they share their stories in the hopes of educating people to the realities of the world of prostitution. It is these women that the researcher hoped to access for participation in this study.

In order to minimize the possible harms to participants in this study, these women were specifically selected because they have already chosen to speak openly and publically about their past in prostitution. In addition, because they have chosen to do this in the hopes of preventing other young women from entering "the life," these women were demonstrating aspects of what this researcher would argue is their resiliency, making positive use of negative experiences, reaching out to and helping others. This represents what some would argue is one limitation of this study. However, because this research utilizes a case study design, the women in this study were chosen as they are

exemplars of the phenomenon that this research is attempting to understand (Anastas, 1999).

The director of Program X was contacted and the research project was explained to her. She expressed an interest and ability in helping the researcher access possible participants. Recruitment flyers were provided which included a preliminary explanation of the research, the inclusion criteria and the researcher's contact information. Women interested in participating then contacted the researcher, via email, and interview times were scheduled.

Data Collection

The design for this study was approved by the Smith College School for Social Work Human Subjects Review Committee (see Appendix A). An informed consent form was given to and signed by each participant at the time of the interview (see Appendix B). The informed consent form included the purpose of the study, inclusion criteria, and the risks and benefits of participation.

In-person interviews were conducted, lasting approximately 1 ½ hours. These interviews took place in a mutually agreed upon location that allowed for comfort and privacy. Two hours total were set aside for introductions, explanation of the research, a review of the informed consent, to answer questions, conduct the interview and debrief at the end. Participants were compensated with fifty dollars for their participation in the interview.

Brief demographic information was collected at the beginning of the interview. Interviews then loosely followed an interview guide (Appendix C) and were audio-taped.

Two of the three interviewees received the interview guide via email before meeting and only one took the opportunity to review the questions ahead of time. The third woman did not have access to email and the short time between when the interview was arranged and when it took place did not allow for mailing of the guide.

During the interviews, this researcher tried to remain neutral, which was quite difficult considering the emotional content of the topic. However, in case study research, it is accepted that the researcher will impact the data collection (Anastas 1999).

Participants were asked additional questions only to clarify responses. The interviews ended up being a mixture between question asking and answering and the participant's personal narrative. These three women have told their story so many times, in multiple contexts, so that it seems to flow naturally.

At the end of the interviews, time was available to debrief and discuss how the interview went. Field notes were taken that included the women's mental status, the environment the interview took place in, and also the researcher's thoughts and feelings.

Audio-recordings of the interviews were transcribed by the researcher. The audio-recordings were kept separate from any identifying information collected.

Data Analysis

Data analysis when utilizing a case study design “basically involves ‘the organization and communication of findings’ (Gilgun 1994: 376)” (Anastas, 1999, p.105). Anastas (1999) also reminds researchers that when using a collective case study method, comparisons are not to be made between participants.

Transcriptions of the interviews were reviewed and data was organized in a coherent and understandable manner, as presented in the next chapter.

CHAPTER IV

FINDINGS

This study sought to answer the following questions: How do women survive a life in street level prostitution? How do they get out of "the life"? How do these women rebuild their lives afterwards? What resiliency factors do they develop or possess that contribute to their ability to not only survive, but to thrive? This chapter will present data collected through interviews with three women who were formerly prostituted.

Interviews asked about their earliest memories from childhood, their entry into and time spent in prostitution, how and when they left "the life," and what their lives are like today. Basic demographic information was also collected including race/ethnicity, age, spirituality, sexual orientation, and marital status.

The data presented below will introduce the reader to three women whose personal experiences will provide the reader with a meaningful look into their lives, both past and present. Additionally, their thoughts, feelings and how they make sense of their experiences, as well as their dreams for the future will be presented. In order to protect their identity, participants' names have been changed, as well as any other identifying information.

August

August is a 48 year old, African American woman. She is heterosexual and currently single. She physically appears younger than her 48 years. She has one son and

one granddaughter. She identifies as a Muslim and "just a spiritual person." She is comfortable to sit with, relaxed, and she tells her story with ease and openness. August spent 12 years in "the life," stripping and prostituting, between the ages of 17 and 30.

Childhood Memories: "My childhood was very confusing."

August and her older brother grew up in the South, in the home of her maternal grandparents. August's grandfather sexually abused her when she was a young girl, having intercourse with her regularly when he was intoxicated. She remembers him giving her the change from his pocket which she would use to buy her friends candy. This made her feel guilty and confused, "like I kinda did something to deserve it...or that I liked it or something." He was also physically abusive to her grandmother and she remembers her grandmother being very sad and frequently crying.

August describes school as "A refuge, I loved being at school, anywhere but home really. I really loved school, I did really well in school, and I was always like the teacher's pet." As a girl, she frequently fought other school children in order to protect her brother, "He could not fight." Fighting was a part of life in the South. "Fighting was something that you had to do...the rule was you don't beat me, I'll beat you."

August met her biological mother when she was 8 years old and remembers that first meeting:

I remember it so clearly. I'm playing outside and she comes up in this taxi, and she has on this leather, this really nice tan coat with a fur collar and her hair's all swooped up and it's up with the curls, very elegant looking, you know, very proper. She says "Hi, I'm your mother," and I said "No you're not," and she said "I'm your mother" and I said, "I can't talk to strangers."

August did not know that her grandparents were not her parents. She recalls not liking her mother from the first time they met, and overhearing different conversations indicated

to her that her mother had never wanted her and her brother. Now her mother was getting remarried and wanted to reunite the family and bring her children to live in New York City. "My grandmother goes, 'Well, they're not going anywhere without me, I'm not leaving them, I'm not leaving them with you, you never wanted them in the first place.'" At this time, August's grandmother left her grandfather and moved to New York City with the family.

August's whole life was turned around at this time. In addition to meeting a mother she did not know she had, she recalls finding out that her name was actually something different than what her grandparents had been using. "I didn't even know my name, and my last name was spelled wrong, so all that I had learned wasn't who I was... it was really weird."

Upon arriving in New York City, August met the man who would be her new father and become one of the most important people in her life:

I adored my dad. I was afraid, he would always buy me things and I would wonder, is he gonna want me to...and he never did. So he was my example of like, the love of a father. I am so grateful he came into my life when he did. I really got to see that there were good men, good parents. He never raised his voice; he only ever called me "dear heart," he never called me by name, only "dear heart."

Her relationship with her mother was difficult: "I didn't really care for me mom, she didn't care for me." August soon learned the reason she had been brought to New York City was because her new father insisted on it, not because her mother wanted her children.

August felt different from her new friends, as well. She was moved ahead a year in school when she moved to New York City and this proved difficult, as she was much

younger than her classmates. "They were more advanced than me, emotionally, and their bodies had matured more than mine...I couldn't hang out the way they could, I had different rules."

August began to become aware of class differences when she moved to New York City, as well. "We seemed to be living better than we did" in the South, where "we were poor, but I don't think I knew it." In New York City, her family purchased a house. "I kinda thought we were well-to-do because other kids who didn't have much always came to our house to eat." Most of the other neighborhood children came from single parent homes, whereas August had three parents at home - a mother, father and grandmother.

Entry: "I started dancing, another traumatic experience..."

August recounts multiple traumatic experiences in her teenage years and paints the picture of a young naïve girl taking part in activities she did not yet understand.

She began sneaking out of her house and going to bars and nightclubs at the age of 15, "Everybody down there looked really happy and really cool." At this time, she began smoking marijuana and drinking alcohol. She soon met a boy and recalls her first consensual sexual experience:

What happened was, it was like traumatic, because of the incest, so all I could see was my...like it was very painful 'cause I had like flashes and I didn't know what was wrong with me and uh, I started crying and I could not stop crying, my whole body is shaking and I didn't know that that's what was happening, you know, it was like triggering the trauma.

After this, August decided she needed to utilize some form of birth control, but when she went for her appointment, she discovered she was already pregnant. Her naivety is apparent when the doctor told her she was pregnant and she responded with, "No I'm not...I didn't even like it, don't I have to like it?" August is terrified of the

consequences if she tells her mother and learns about abortions from her boyfriend. She chooses this option which turned out to be another traumatic experience for her. "I didn't know that was yet another trauma I was creating...I just felt awful and I felt like a murderer and now I'm learning, I got education after the fact, and so I felt even worse."

She had graduated high school by the time of her abortion and had received a full scholarship to Salem State. Her father had promised her a car if she got a scholarship, but her mother prevented him from buying it for her. She recalls being very angry with her mother about this. Today, she wonders if an addiction to marijuana and alcohol was starting to play a role at that time.

These new traumas, combined with the experiences from her past, her increased use of alcohol and drugs, and her anger with her mother, which ran deeper than just a new car, likely contributed to her decision to begin dancing at the clubs. She quickly began prostituting, as well. She states:

Another traumatic experience, like I didn't know why I felt, now I understand all of it, but I just didn't know why I felt so ugly, cheap, and I would meet these men and I would sleep with these men and um, I felt very dirty.

Surviving: "I thought I was just kinda like this call girl, like expensive, exclusive girl."

August worked in strip clubs, dancing and prostituting. "I was making a lot of money but I didn't know that it was affecting me spiritually...I had to use drugs even more in order to perform." She soon acquired a pimp as she was told she needed one for protection. She worked in the clubs dancing and prostituted out of motel rooms. During this time she became pregnant with her son and although she did not plan to have children, "I did that time out of guilt...I just felt like I could not do that [get an abortion] again." Of this time in her life, August reports,

I'm kinda living a double life and I'd try to dance then I'd take a break and I'd go work a regular job and I'd try to work and I'd always end up doing that because the money came faster and I thought I could make more money. I'd have this plan like, ok, I'm gonna make this much money, then I'm gonna go to school, I'm gonna make this much money then I'm gonna buy a car. I'd have all these plans but the plans never panned out. I'd always make the amount of money but I'd never do what I said I was gonna do 'cause I'd always end up giving it to them.

August's life began to change when she left New England with her pimp and another of his girls, whom she thought was one of his friends. "Now in hindsight, I can see the whole thing, she was like what is called a wife-in-law, we were both with the same guy and um, but I was very naïve, I was in this whole world, but I was very naïve." Her pimp had never been violent with her but "He was a really nice guy and when we got out of New England, he changed. It was like when we got so far away from my family, from people that I knew..." She also did not know that he was a heroin addict who shot up between his toes.

They drove to Colorado and upon arrival, August was ordered out of the car and onto the street. She laughed and refused because "I thought I was just kinda like this call girl, like expensive, exclusive girl. Working the streets was like, you know, lower class, I didn't work the streets." When she laughed, her pimp struck her. She walked the street and the first man she agreed to have sex with turned out to be a police officer. She spent 30 days in jail because her pimp would not spend \$100 to post bail.

Her first experience with street walking, and her first time in jail, were the beginning of a series of events that forced her to look at her life and what she was doing with it. She reports, "Things were starting to happen to me that had never happened before, I had never been hit before, never arrested before, things were starting to happen to me that I didn't think were normal." One night, after her pimp beat and raped her for

talking to a Black man at the club, she was able to recognize that she needed help and sought it out from another dancer. With her help and support, August was able to leave her pimp in Colorado and return to New York City. Here she draws a parallel with her own grandmother's escape from her grandfather: "I never got my clothes, just like my grandmother, I never got my clothes, I never got anything. I just left. And so that was a turning point for me, in the life."

However, she continued dancing and prostituting and abusing alcohol, marijuana and cocaine. Her naivety is apparent again when she states,

I was just kinda feeling like my life was going to this place that I just didn't want it to go anymore. I was extremely tired, I didn't know I had become addicted to cocaine and alcohol, I didn't know about addiction, I just thought something was really wrong with me. Why do I have to use all these drugs all the time, what's wrong with me?

Exit: "I really thought I was taking a break, I ended up staying."

August's exit from "the life" was more directly related to her addiction to drugs and alcohol, than about leaving prostitution, although as she sought treatment for her substance abuse, she ceased prostituting. At the age of 30, she was in a car with a man for whom she had worked. He was driving in the midst of an alcohol-induced black out which resulted in an automobile accident. "My jaw was broken, it was snapped on both sides, I was up underneath the dashboard and they got us out of the car, but I was so intoxicated I didn't feel a thing." Following the accident, this man entered recovery, came to August and apologized, and took her to her first NA meeting. "I stopped dancing and I stopped that kind of stuff, you know, with the drugs. I stopped the whole lifestyle and I stopped everything, you know, to get clean."

About her recovery August states,

I was just at the end of the road and I hit the big bottom and so I was willing to do whatever and so I just went to meetings and I saw, so I know it is possible... something happened when I started going to meetings and I started to want it more for myself. I really thought I was taking a break, I ended up staying. So it just kinda stuck in me.

She considered continuing "the life" without the drugs but realized, "If I did it, I'd have to have drugs. I couldn't think of a time that I was involved that I wasn't high...I don't think I'd really do it clean."

August possess a great deal of insight into her time in "the life,"

A lot of things happened that weren't part of what I wanted for myself and although my parents had their issues, their idea of where they wanted me to go was kinda cool. It was kinda what I wanted to do, but I got caught up in this other lifestyle and I lost myself. Well, I never really had a self, I kinda formed myself around that... 'cause in the developmental years where you actually start to think about you career and all that, I'm swinging on a pole, taking off my clothes. I'm not processing that then, I'm using drugs...you're doing the sex thing and when I think about it now, I know I was trying to control what happened to me, I wanted to have some control over sex, so now I get it.

Rebuilding: "Once again, it's like here we go."

August attended, and then worked for, an outpatient substance abuse treatment program specifically for women. She began working the front desk but soon became a drug counselor: she found she was very good at her job. Her recovery was tested again and again. One significant test came after two years of sobriety and her step-father, the man who had been such an important figure in her life, passed away from colon cancer. Anticipating that his passing would be a relapse trigger for her, August had told those close to her that if he died, she was not going to stay in recovery,

'cause it had been really hard for me, I ended up homeless in recovery, a lot of things happened in recovery that hadn't happened to me and I was like "I don't get

this whole get clean, 'cause I'm not happy there; all this shit's happened," and so I said "I'm not gonna stay."

However, with the support of friends and her substance abuse program, she was able to maintain her sobriety. "That was like a turning point in my recovery because I didn't use, I did get through it. It was confirmation that I needed to grow up." August was able to hold onto the gifts her father had given her: His love, his support, his knowledge, and "I kind of held on to the way he thought about me."

The second significant test occurred a couple of years later when August was working a new job at a program for pregnant women. She received extensive training, learning about HIV and about how to be a counselor, and was working towards becoming a Certified Drug and Alcohol Addiction Counselor (CADAC). She had just gotten engaged. When August and her fiancé went to get blood tests for their marriage license, she found out that she was HIV positive. "I tested positive and like it felt like the bottom fell out, like things were just starting to feel like they were getting good, and then I tested positive and once again it's like here we go."

August took some time off from work and when she tried to return, she was told that she could not come back. August immediately called AIDS Action and spoke with an attorney.

It was really for a point to the director 'cause I thought she was being really shitty about the whole thing and so I did that, it kinda helped me, in a strange way it helped me with the acceptance that I had it 'cause it was like, "I don't like this but I am not allowing anybody to discriminate against me because of that, I just can't deal with that."

August fought her employers, who settled out of court and offered her job back. She did not take it because "I wouldn't want to work for people who felt that way."

August then began AIDS activism work, speaking in different places, telling her story; she even made a video for a museum in Chicago about living with HIV. Although she was speaking out and helping others, August states

I was starting to feel prostituted by that, I was starting to feel more pain...I was beginning to feel like I couldn't feel my story, you know, like I was saying things but there was no emotion attached...I wanted HIV to be something I had and not something I had become.

How the HIV connects with her time in prostitution, August does not know.

I think the minute that I tested positive I thought about my lifestyle, the things that I had done and I realized that was probably the consequence. They couldn't tell me whether it happened in recovery or before; it really didn't matter because either way I wasn't going to be able to give it back.

Today: "I used to think, something was wrong with me, now I know there's something very right with me."

Today, August is approaching 19 years of sobriety. She still attends NA meetings and sponsors other women. She works with teenage girls who may have already entered "the life" or who are at risk for it and she really loves what she does. During the interview, August's phone rang and on the other end was one of the adolescent girls with whom August works. August tries to always be available to clients and at August's request, the interview was paused so that she could quickly check-in with her client.

August recalls how when she worked in the clubs, men would often want to just talk to her. They would still pay her for her time, and still have sex with her, but they often wanted to talk. She remembers thinking this was strange at the time, but today it makes sense to her. August says, "I think my whole life I was supposed to be who I am now and I think that's why people always talked to me. I used to think something was wrong with me, now I know something is very right with me."

Summary

August abused substances to cope with a life in prostitution. Despite the lifestyle she was a part of, August was able to recognize when things were getting out of her control and did not match with what she wanted or felt she deserved. She was able to enlist others for help when she needed it to escape a violent pimp or to escape an addiction. She did not try to leave "the life," but found that once she stopped abusing substances, "the life" was no longer appealing. August used the love of her father to keep her motivated and to help her believe in herself. Her ability to recognize when she was being treated unfairly continued to serve her throughout her life, as she fought when facing discrimination at work. She found that giving back and helping others was what she was meant to do and she continues to do it today, working with adolescent girls in danger of getting involved in "the life."

April

April is a 45 year old, Black, heterosexual female who identifies as Christian. She has three daughters and recently married her second husband. April spent 15 years in "the life," from the age of 16 to 31 years old. She began prostituting at the street level as an adolescent, and moved to working in strip clubs.

Childhood Memories: "Too dark to be White, too light to be Black."

April and her mother lived with her maternal grandparents and her teenaged uncles after her parents divorced when April was three years old. Her mother was a "hard core woman" who was verbally abusive to her only daughter. She believed children should be seen and not heard. April has foggy memories of having one of her

uncles on top of her with his hand over her mouth. She also remembers how she would often crawl into bed to sleep with her grandmother. She recalls waking up one night with her grandfather on top of her and her grandmother saying "get off that girl, that's not me." At the age of 4, she believed it had been a mistake on her grandfather's part but today she questions what happened. April has only recently begun to remember, think about and talk about these early experiences.

At the age of 6, April and her mother moved to New York City where her mother remarried. April did not want to leave her friends and family behind. When she arrived in New York City, she was placed in Kindergarten for the second time. She reports, "That was my first blow at like, first low self-esteem, disappointment, not feeling good about myself" and she believes this affected her throughout her time in school.

April had a very difficult time fitting in with the other kids in her new neighborhood and school. She reports:

The kids there felt that I was too dark to be White, too light to be Black, so therefore I was pus-colored white girl, is your father Puerto-Rican, where'd you get that White-girl hair from...so I had very low self-esteem, I wanted to be real Black and I wanted to have real nappy hair, and I thought that if I had those things, that if I looked a certain way, kids would accept me, I wanted to be on welfare, I wanted to be like those other kids.

She felt different still because both of her parents worked, her family owned a big house, and they were not on welfare like many of the other families in their neighborhood. April was harassed and "beat up" most days after school.

April remembers feeling like she did not fit in her own family either. Her mother had another child, and April recalls everyone in the family having the same last name except for her. She has memories of her extended family saying to her, "'Sit your puss-

colored ass down;' even they would talk about the color of my skin." Her mother was "Very humiliating, very embarrassing." She yelled often and insulted April in front of her friends and family members.

Entry: "Of course I went for it, ended up standing on the corner."

April developed a crush on a new boy at school but did not believe he would be interested in her, "Because they already told me I was too light...everyone pretty much told me I was nothing and I believed it, basically the point is I believed it." He did like her though and he became her first boyfriend. April's low self esteem likely left her vulnerable to the pressures from this boy to have sex, "I remember him saying that 'you're wasting my time, there's other girls who will be with me and have sex with me'. And so the next time I went [to his house] I did, even though I didn't want to." She became pregnant and had her first daughter at the age of 16. She relates, "I got a welfare check and I thought that was exciting, and that that made me cool." He also talked April into giving him half of her welfare check, shoplifting, "So then he said the same thing to me, like if you stole for me, if you loved me," and eventually prostituting: "He was saying, if I did that we could make all kinds of money, have our daughter and an apartment and all this other stuff, so of course I went for it, ended up standing on the corner." She was 16 years old.

April's very first customer was a police officer who demanded oral sex in exchange for not arresting her. She recalls crying, sobbing, and thinking "I don't wanna give him a blow job, and not to mention, I had never given a White guy a blow job, I had had no sexual encounters with White men." The cop let her go but left her with this

warning: "Do you know you could be blowing some guy and he could slice your throat?" April was frightened by this experience, but she returned to walking the streets and prostituting.

April had already been spending time downtown and had seen the "girls" on the street: "They looked really sharp, they had leather coats, and I mean really, they looked like money, elegant...I'm attracted to things." She also knew many of the girls out there: "All the girls in my neighborhood, those girls I wanted to be just like, all of them had already been turned out by pimps."

Perhaps one of the things that made this life compelling for April was the role of race on the streets:

I found a place it was ok to be light-skinned because all the tricks, of course New York City was real racist, white girls made all the money, so it was to my advantage to be light...'cause if they wanted a White girl and couldn't find one, they'd take me, if they wanted a Black girl but they thought the dark-skinned ones might rob them...not to mention the darker-skinned girls all wanted to hang with me 'cause I attracted money, so I just developed this false sense of self-esteem.

Surviving: "Remained out there for damn near 15 years."

April only worked the streets for one year, until her boyfriend-turned-pimp went to jail. She moved to the peep shows and ended up in the strip clubs, still prostituting. April recruited other girls to work and performed sexual acts "that I probably never would of done." She experienced violence while prostituting. She was raped multiple times, had sawed-off shotguns held to her head, a switchblade to her throat while she was ordered to strip down and a man stated he was going to rape her "orally, vaginally, anally, but he didn't say it like that." Her survival skills, developed and perfected from the time

she was a child, saved her from that experience. She convinced the man that she had to go to the bathroom, he let her out of his truck, and she screamed until someone came and helped her.

April relates with disgust some of the johns that she met:

I was like 17, 18 and they would say to me, "you're too old, can you get me a girl that's younger, can you get me girl that's 11?" So like, the disrespect, the things that they must hide from the earthly people, how they would come up and say those things to me, very degrading.

April used "a lot of drugs, a lot of drugs" to cope with the lifestyle. She began using marijuana, alcohol and cocaine and her addiction grew to crack and heroin. "You know, you're drinking so you can kinda be all over them, you know, you're talking them out of their money, 'cause I like to think I was a little slicker when I was drunk." She states, "I just did drugs the whole time. I was addicted. I ended up with a cocaine, heroin addiction...so that's how I coped."

April also dissociated when with a customer:

I also learned to um, the ability to turn myself off. I learned how to, you know, turn a trick and just lay there, or talk dirty to him but whatever, so he would hurry up, whatever I needed to do, but I'm really not there.

Exit: "I was not trying to leave the lifestyle; I was trying not to get high."

April went to five detoxifications for her substance abuse before she began to consider leaving "the life." She went to her first at age 21 and when the staff told her that she would never stay clean if she went back to work, she told them:

They were jealous and they were mad 'cause they don't get paid what I do, and you all just don't want me to make money and that's my job. You know, because from the man telling you that's what I was born to do, that's me.

After each detoxification she returned to stripping and prostituting. At the time of her fifth detoxification, she was 30 years old and pregnant for the third time. Her second

daughter had been born addicted to drugs and she did not want that to happen with this child. During her fifth and final detoxification, April reports that her attitude was different: "Because now I am so sick and tired, drugs have kicked my ass so bad, and I am so sick and tired, that now I am willing to listen." April was not seeking to leave "the life," but she found she could not continue working and maintain her sobriety.

As my disease progressed it wasn't so much getting out of the prostitution 'cause I've always liked to hustle, I've always liked to make money, I still like to make money, just more legit...so my intention was never to stop the lifestyle but drugs had become painful...people told me that if I didn't stop, that if I kept doing what I was doing, I was gonna keep getting what I'm getting and so I had to look at my track record and everything they said was right. It took me nine years to find that out.

April was ready to listen and take the advice of those around her. After her detoxification, she began using 12 step meetings. She sought outpatient treatment for her addiction and found a brand new program specifically for pregnant and post-partum women. The program was a 2 year day treatment, where women went Monday through Friday for the first year and attended groups on parenting, nutrition, relapse prevention and other topics. The program provided daycare so participants could bring their children. The second year included weekly individual therapy and a Relapse Prevention group. During her second year,

I really put both feet into 12 step programs and getting the support, letting people know who I was, I kinda let my ego have some humility, "I don't know what I'm doing, my life is f-ed up, please somebody help me, all I know how to do is turn tricks, to get high and turn tricks, who's gonna help me with that?" And being honest about that and I got the support that I needed and found a home. I found a place where other girls, "Yeah, I turned tricks, too." "Oh, I did that, too." "Oh, I did that, too!"

Rebuilding: "You know I'm a criminal, right?"

Four years ago, April was contacted by a woman she knew from the streets who was formerly prostituted herself. This woman had just begun a new program training Department of Social Services (DSS) employees around prostitution and "the life." She asked April to come to the training and share her story. April agreed and from that point her work progressed from telling her story at the DSS trainings, to speaking with groups of teenage girls about "the life," to speaking at trainings for clinicians and other professionals.

It was not until DSS asked her to speak directly with an adolescent girl who had been prostituted that April felt fear and her insecurities about her past resurfaced.

I called my other girlfriend and I said "What the hell is wrong with these people; do they know who I am?" These people call me; ask me if I would go see one of their kids. I'm like, "They're crazy! Do they know who I am?" She said, "Yes sweetie, they do. That's why they want you."

April soon had a caseload through DSS of about 6 young girls who had been involved in prostitution. In addition, her friend stepped away from the work and April was offered her job, which included co-running the trainings for clinicians and DSS workers and running groups in adolescent residential centers. All of this April took on with some anxiety but she found she enjoyed it. She recalls having to be fingerprinted for her new job and thinking, "Oh the jig is up now." She told her boss at the time, "You know I'm a criminal right?" and her boss responded, "Yes we do April, we just want to verify it."

Today: "I'm not walking around ashamed, embarrassed... 'cause I see my purpose now."

Of her life today April reports,

My life is really, really full...I work out of a calendar, I can't go anywhere without it and [I'm] just living beyond my wildest dreams. Had I, what I had planned for myself when I left "the life," had I stopped at what I had planned, I would have short-changed myself. Yeah, I would have cheated myself a whole bunch.

I'm not waking around all ashamed, embarrassed, 'cause now I see my purpose. I just feel like God's in charge and if he can...God forgave me and I think, look what he's doing with me. I'm not doing it, I didn't choose this, a girl asked me to speak.

And for her future,

To get a degree girl! I gotta go to school but I'm so fearful 'cause I have so many damn disorders...I'd be happy just to get a Bachelor's, matter of fact, let me back it up, Associate's. But the ultimate goal for me would be...I'd like to have my own name, my own program, working with girls, exploited teens...have a really nice recovery program, a house for these girls, a place to call their own, where they don't feel different, they're actually looking at themselves through each other.

Summary

April used drugs and alcohol to cope with her lifestyle and she developed an addiction. She also learned how to dissociate in order to tolerate turning tricks and this still affects her today, even when with someone she loves. April did not necessarily want to leave "the life" but she wanted to fight her addiction. She eventually realized that she could not continue in "the life" without using substances, so she gave up both. It was not the men or the sex that she wanted to stay for, it was the excitement, the hustle, and the money. With the support of other women through outpatient addiction treatment and 12 step programs, April is approaching 15 years of clean time. She uses her experiences to teach others about "the life" and prevent teenage girl from entering prostitution. She has dreams and goals for her future and is working to reach them.

Crystal

Crystal is a 49 year old, Caucasian woman. She identifies as Pentecostal and her spirituality plays an important role in her life. She is heterosexual and currently single. Crystal had 3 daughters but recently lost one to suicide. She spent 5 years in prostitution, from 16 to 21, working the streets, hotels, and massage parlors.

Childhood Memories: "A lot of my early childhood memories...I don't know what happened to them."

Crystal does not remember much from her childhood and has had memory problems for as long as she can remember. In her earliest memories, around age 8, she lived with her mother and father, and her 2 sisters. Her mother and father were both alcoholics, and her father was verbally and physically abusive to her mother. One of her strongest memories is the night her mother hit her father over the head with a cast iron frying pan during an argument over grocery money. Her mother thought she had killed her husband. She called the police to turn herself in, but he was alive and no charges were pressed. He left the home soon after that and Crystal saw him occasionally until he died four years later from a ruptured liver.

Crystal recalls taking on the caretaker role in her family from a young age. Her mother was an alcoholic who was frequently absent from the home. Crystal took care of her siblings and the home. "I would make her coffee for when she came home drunk and then beg her not to drink, and then trying to, you know, be a caretaker in that way, like wanting her to, you know, be at home, be a mom."

Her mother moved the family often until she remarried when Crystal was around 13 years old. Crystal had begun to run away from home at this time and to experiment with marijuana, alcohol and mescaline. "I always hung out with older kids and we used to hang in the common and there was nothing to do in town, it was a small town, and smoke weed and drink and do other drugs." In the 9th grade, around age 14, Crystal was placed in the custody of the Department of Youth Services (DYS) because she continued to run away from home and use substances. When the opportunity presented itself, she ran from DHS too.

Entry: "Nobody questioned my age or asked me for ID."

When Crystal ran from DHS, she "Ended up in downtown Chicago, age 14. I dyed my hair black, I started dancing in the clubs...and um, nobody questioned my age or asked me for ID." She was not prostituting at this time and remembers "Feeling disgusted about that whole scene...I remember the manager really being upset with me 'cause I wouldn't even like to sit with guys." Of this time, Crystal reports:

I had progressed to doing black beauties, a lot of black beauties and staying awake for 3 or 4 days at a time, dancing at the clubs. I thought I was the shit 'cause I made like \$600 a night, for my age, and I had gotten my own room...I guess I was doing alright for a kid my age as far as taking care of myself.

She met a man at the club and travelled with him to Miami. She did not stay with him though and, alone in NYC, she soon met her first pimp. She recalls walking down the street,

I was like addicted to excitement and stuff at that point and I saw...my first pimp. He was 28 years old and I was 16. He looked very exciting 'cause he had on mink and all these diamonds and called himself Jesus...and he wore a ring on both index fingers and I remember there was a picture of Satan on it, but he called himself Jesus.

They met and he soon moved her into his apartment with another of his women. He had a room all ready for Crystal: "It looked like a princess room, like the white furniture, like everything that a young girl would like." There was a closet full of clothes in her size, as well. She began prostituting by "Dressing up in business clothes and going out to fancy hotels." Crystal worked in massage parlors, as well.

Surviving: "I remember I died in the ambulance on the way to the hospital."

At 17, Crystal found the lifestyle she was in exciting:

It seemed exciting to me because...I was still a kid and I was going to the after hours and hanging out with all these elite type of people, wore fancy clothes and drove big cars and you know, it was like, there was an excitement or some sort of something to it that made me feel like part of, and even though I was giving all my money away, I always had everything I needed...

There were frightening experiences, such as being robbed and beat up by tricks. Her pimp, Jesus, was very violent, as well. "There probably wasn't a week that went by that I wasn't getting knocked around." She used cocaine and alcohol to cope. She also reports:

Displacement, like a lot of times I didn't even feel like I was in this world, like my life was a movie and I was watching it but I wasn't in it. I always had that feeling, even when I was a kid. Probably the drugs were helping me do that too.

Jesus fathered her first daughter when she was 17 years old. "Something happened to me at that point, I said, 'well, I have to take better care of myself so I can take care of her.' I was starting to mature a little bit." She ran from Jesus to another pimp "who was nicer...I think he hit me once." However, Jesus and her new pimp planned together to take her daughter from her. When Jesus came to her new place and she refused to let him take her daughter, he shot her.

He had been out all night and he was real wired and I remember him pacing, back and forth to the bathroom and the last time he came out he just pulled out a .45 and shot me in the head. I was sitting in an easy chair, you know I thought he was going to hit me or something, I never expected to get shot...it was only from like 2 feet away.

Crystal was shot in the head, in the memory portion of her brain. She was taken to the hospital and remembers dying in the ambulance on the way. Her spirituality grew out of this experience.

They said I died in the ambulance on the way to the hospital but what I remember is going through some sort of, going through something, some long tunnel...I remember getting the Holy Ghost and I didn't even know what the Holy Ghost was...but I knew I had been saved.

Crystal was in a coma for five days. "I came out of the coma, I remembered everything and I remember saying I was gonna change my life." She was paralyzed on her right side and was in rehabilitation for almost a year, re-learning how to write, eat, etc. During that time, her second pimp was sneaking cocaine into the hospital for her. Speaking to the power of addiction, Crystal states,

For some reason that made me feel like, even though I had made this promise to God, for some reason I felt like, the cocaine, it makes you feel like superwoman...it gave me euphoria, like I could do anything, I actually believed in my head that it was making me heal, or get better faster.

Crystal went back to prostituting when she got out of the hospital and remained in "the life" for another two or three years.

Exit: "I have to change my life for my child."

Crystal began to slow down on her drug use, likely due to her physical health and recovery after being shot and because she was now mother to a toddler. She reached a point in her lifestyle where she could no longer tolerate the men touching her and without the heavy drug use, it was even more unbearable.

I started robbing people 'cause I couldn't stand people touching me anymore. You know b.c I had slowed down a lot on the drug use compared to what I was doing, that helped me be displaced out of myself when I was using a real lot, and so when I slowed down, I was still using but I slowed down, I just couldn't stand the whole thing anymore so I just started like going to the hotels, giving people, putting mickies in their drinks and robbing them.

Crystal began to think about leaving the lifestyle, "I started really maturing and trying to think about somebody besides myself, like my daughter, so I was trying to change my life." Her current pimp was very controlling and she had to convince him to let her go home to New York to visit her mother. When he finally agreed, she left and never returned.

Crystal was still using cocaine and alcohol when she returned to New York, but she never returned to prostituting. She soon married a man who was extremely abusive, "He used to beat me up two or three times a week." He fathered her two additional daughters. Crystal used battered women's shelters and other programs a few times but continued to return to her husband. She eventually left him after a particularly bad fight and went to live with a friend. She left her children with her mother-in-law while she tried "to get my life together."

However, she was still in the grip of her addiction. It was not until her friend called an interventionist that "something clicked."

He said to me, "You know young lady, you think about everything you've done your whole life since the time you first picked up drugs has enabled you to use..." That was like my first spiritual awakening after the incident of being shot 'cause I was like, something clicked...I started crying 'cause it was true, everything I had ever done from day one did enable me to use drugs, but I never thought about it that way.

At the age of 26, she entered detoxification and began attending 12 step meetings. She stayed clean from that time on, but continued to get involved with abusive men: "It was the same pattern, just not using now."

Rebuilding: "I ended up doing very well in my years in human services."

After getting clean, Crystal moved into a studio apartment and got a job. She had trouble making ends meet and returned to school for her GED and Associate's Degree. She quickly regained custody of her oldest daughter, but had to fight for almost three years to get her youngest two daughters back from her mother-in-law.

One woman was instrumental in Crystal's recovery, a Reverend she met at her church who helped Crystal get into a transitional housing program. This allowed her to finally regain custody of her children. She relates how her past lifestyle affected her ability to mother:

I remember me having a lot of anger, and definitely not knowing how to deal with my children, or be nurturing, and I wanted to very much. I was so used to being in a violent lifestyle and that started coming out. Rather than me talking to my children or whatever, that started coming out and I was yelling at them all the time.

This time, the Reverend set her up with home-based counseling: "I remember I didn't want to hear it...you know but they worked with me through all that stuff." She also gave Crystal one of her first jobs in the Human Services field, working with battered women. Crystal began in the human services field by doing volunteer and advocacy work through the church and then found a job working with homeless, addicted women, doing "the things people had done for me." She was successful in this field and eventually came to own and manage two properties.

This Reverend was "the most supportive woman I really ever had in my life." She gave Crystal an award because of her accomplishments and her human services work. This award was a plaque with a lotus flower on it, because "A lotus can grow up out of concrete, no dirt, nothing." "It boosted my self esteem and made me feel worthwhile, 'cause I guess I didn't feel it before."

It was perhaps this growing self esteem that allowed Crystal to leave her second marriage to a man she met in recovery. He was not abusive to her but:

He was a cheater: I spent 8 years wondering when another woman was gonna show up. I felt really good. I lived in a \$300,000 home, we owned 3 properties. I remember feeling so good when I finally got up enough courage and moved out of the \$300,000 home and into a room and I felt so good 'cause I'm like, "I'm not your doormat anymore." So my self esteem in that area has grown tremendously.

Today: "It just seemed like everything came tumbling down. "

Two years ago, Crystal's middle daughter hanged herself at the age of 25. She had been diagnosed with schizophrenia around grade nine and it had been a long struggle for the family. On the day before Thanksgiving, Crystal went to pick her daughter up for the holiday and found her. Crystal relapsed after 21 years of sobriety. With the support of friends from her recovery program and her daughters, she returned to detoxification after two years of using crack cocaine and heroin, two substances she had not used in the past. During those two years, Crystal lost everything she had worked to build: over \$200,000, her luxury automobile, and her two properties.

I had experienced death before, my oldest sister died the year before of cancer, but it's different when you lose a child...After I got clean, I was like, I couldn't get out of bed. After detox, I was very depressed, and they said I had Posttraumatic Stress Disorder and depression, from that and probably from things way back, whatever I hadn't dealt with before, it just seemed like everything came tumbling down.

Today Crystal is attending a career development program and living in a sober house. She is seeing a psychologist and a counselor now to deal with the PTSD. She fears going back to human services work until she is stronger in her new sobriety.

I feel, from where I came from to now, I'm feeling real risky, like 'what did you do to yourself?' 'cause I was doing so well but then, it is what it is. I'm trying to just get my life back on track again. I know the skills; I just haven't used them for a long time.

Today Crystal has learned to cope with the difficult times through prayer, attending NA meetings and listening to positive messages, or even focusing on other people's problems, which helps to make her own seem smaller. "I really want people in my life who are really supportive and caring... loving, caring, supportive people." Her daughters are also sources of support and motivation for her. Interestingly, both of her daughters have spent some time in prostitution. Her youngest is now working to become a nurse, but her oldest is still struggling with an addiction of her own.

Crystal looks at her past experiences and is able to see how they made her stronger, as well as how they affected her negatively.

In a good way, my experiences have made me so spiritually strong, that no matter what I go through...I pretty much felt like I could do or handle anything...with the help of God and other people. So in that sense it's been really empowering. On the other hand...it has created a form of self-doubt and a pattern of...you have to learn how to slow down...It took me many years and going through a lot of stuff to be able to slow down and step back and even be able to ask for help. That was one of the big ways it affected me 'cause I could not ask for help. I think that's why I got in trouble when my daughter killed herself, 'cause I couldn't ask for help. I was used to being self sufficient, so being out on the street at such an early age and being self sufficient, and always taking care of yourself, made it very, very difficult for me to ask for help when I needed it.

Summary

Crystal coped with a life in prostitution by abusing cocaine and alcohol. She also used what she calls "displacement," which may be similar to dissociation. She felt removed from her life, felt as if she was watching it like a movie, thereby not experiencing many of the emotions attached to it. To get out of prostitution, she simply left. She had to lie to escape her pimp, but she did leave, without outreach services or other supports. She cut down on her drug use on her own as well, although she continued to battle addiction after leaving "the life." Using the support of others, particularly her friend the Reverend and NA meetings and philosophy, Crystal was able to beat her addiction for 21 years. Her relapse in the face of her daughter's suicide should not be seen as failure, for we know addiction is a chronic, relapsing disease. During Crystal's 21 years, she reached out to others and used her experiences as opportunities for growth for herself as well as others.

The findings in this chapter have been presented in such a way as to introduce the reader to three women who survived a life in prostitution, got out, and rebuilt their lives. The next chapter of this study will discuss the relevance of these findings in relation to the literature previously reviewed, particularly in the area of resilience. Furthermore, the next chapter will discuss the relevance of this study's findings to social work practice and policy.

CHAPTER V

DISCUSSION

This study sought to answer the following questions: How do women survive a life in street level prostitution? How do they get out of "the life"? How do these women rebuild their lives afterwards? What resiliency factors do they develop or possess that contribute to their ability to not only survive, but to thrive? Some of the important findings included the following: The use of substances and dissociation to cope in "the life," the use of formal and informal supports to leave prostitution and rebuild after leaving. Furthermore, resiliency factors were identified such as insight, spirituality, the use of supportive relationships, and the ability to make meaning of painful or traumatic experiences as well as use these experiences for individual growth. Lastly, reaching out and helping others served a similar purpose.

This chapter will relate these findings to prior research presented in the literature review. Many of the current study's findings support the previous literature. Some important findings were not supported by the current body of literature and provide valuable new information which can contribute to future program planning and research opportunities.

This study does have limitations, particularly in regards to the small sample size. The findings from this study are not statistically significant so they are not transferable. However, the choice of in-depth interviews allowed for a deeper investigation into the more intimate details of these women's lives and their experiences.

Early Childhood and Entry into Prostitution

Age of Entry

Silbert and Pines (1983) found that 78% of their participants entered prostitution as juveniles; Raphael and Shapiro (2002) found that 1/3 of the women in their study entered prostitution before the age of 15, and 62% entered before the age of 18. The women in the current study all entered prostitution as adolescents, August at age 17, April at age 16 and Crystal at age 16. Teenage sexual exploitation was not the focus of this study; however, one cannot ignore the fact that young women are being prostituted. This presents evidence that prevention and early intervention strategies are greatly needed. In addition, deeper investigation of psychological factors that make young girls vulnerable to entering this lifestyle would be beneficial. Interestingly, April had the following to share regarding the young women she works with:

I think most of all what I want...to kinda leave you with, in most cases, my experience with the girls that I work with, that the girls that are involved, everything last one of my girls, for whatever reason, have no mothers in their lives, whether it's because of drugs, whether it's the mom took a CHINS out, "I don't wanna be bothered with you," they all...are yearning for a relationship with their mothers. That's the most painful area...it is so deep, and that's their most painful area.

Drug Use and Early Sexual Abuse

Although this study did not specifically focus on what leads women into prostitution, it is still relevant to explore the various factors and/or situations which influence a woman's entry into prostitution. Silbert and Pines (1983) found that early childhood sexual abuse influenced a woman's entry into prostitution. August and April, she suspects, both experienced sexual abuse at a young age, but only August voiced that

this abuse influenced her activities, "When I think about it now, I know I was trying to control what happened to me, I wanted to have some control over sex."

Running away behaviors have also been reported as an influence into a women's entry into prostitution (McClanahan, McClelland, Abram, and Teplin, 1999). Crystal began running away from home at the age of 11 and it was this very behavior that resulted in her dancing in clubs in downtown New York City at the age of 14. This is an area that is rich for further research as it can be hypothesized that leaving home and ending up alone on the streets leaves young girls at high risk for victimization.

Drug use has been examined as an influencing factor in a woman's entry into prostitution. McClanahan, McClelland, Abram, and Teplin (1999) found that drug abuse alone was not a risk factor for prostitution. In addition, Potterat, Rothenberg, Muth, Darrow, and Phillips-Plummer (1998) found that drug use preceded entry into prostitution, but could not determine if it was a predictor for entry. The women in this study were using substances before they began prostituting. However, it is difficult to determine what role drug use or addiction played in their entry. This study was not specifically examining entry into prostitution; therefore, this area was not deeply explored in the interviews. Substances certainly played a role once the women were prostituting regularly, as will be discussed further below.

Race and Ethnicity

Kramer and Berg (2003) looked at the role that race and ethnicity play in a woman's entry into prostitution. They found that the women of color in their study experienced childhood risks less often, yet entered prostitution at higher rates. The authors believe that this can be attributed to the history of racism and oppression that has

left many people of color in positions of lower socio-economic status, and thus living in areas where prostitution is more visible, providing earlier exposure and greater knowledge of prostitution.

April and August, both women of color, were exposed to prostitution and stripping at a young age. April recalls driving around downtown New York City and seeing the girls on the street at the age of 16; August recalls going to the clubs and talking to the dancers at the age of 16. However, Crystal began dancing at age 14 and it is not known if she was exposed to this lifestyle before that age.

April's experiences in prostitution speak the loudest to the influence of race and ethnicity. She experienced a great deal of teasing from family and friends about her skin color when she was young, contributing to low self esteem and questions about where she belonged and fit in. Once she began prostituting, she found that her skin color was an advantage and no longer a source of pain: "I found a place it was ok to be light skinned."

Coping in "the life"

The stories and experiences of the women in the current study portray a lifestyle which includes violence, addiction, and physical and mental health consequences.

Drug use

Young, Boyd, and Hubbell (2000) looked at the relationship between drug use and prostitution and examined the role that substances play while prostituting. The authors argue that drug use and prostitution in combination are a self-perpetuating cycle: women may enter prostitution to support a drug habit, but once prostituting, the substances are used to make the experience tolerable. As a result, the addiction increases.

The authors found that women in prostitution use drugs to increase feelings of confidence and closeness to others, their sense of control, and their ability to be open to others. Also, drugs were used to decrease feelings of guilt and sexual distress.

The current study's findings reflect Young, Boyd, and Hubbell's findings. The women in the current study report drug use before prostituting, but their drug use and choice or variety of substances increased once they started, leading to unmanageability and addiction. The women reported using substances to cope with the lifestyle.

August reported that not long after starting to dance and prostitute, "I had to use drugs even more in order to, to perform" and "If I did it, I'd have to have drugs; I couldn't think of a time that I was involved that I wasn't high." April reported using substances to perform better: "You know you're drinking so you can kinda be all over them, you know you're talking them out of their money, 'cause I like to think that I was a little slicker when I was drunk." Crystal believes the drugs helped her to distance from her life: "I didn't even feel like I was in this world, like my life was a movie and I was watching it but I wasn't in it. I always had that feeling, even when I was a kid. Probably the drugs were helping me do that too." Crystal also reported that once she began to slow down on her drug use, she could no longer tolerate being touched by her customers.

I started robbing people 'cause I couldn't stand people touching me anymore, you know b.c I had slowed down a lot on the drug use compared to what I was doing and that helped me be displaced out of myself when I was using a real lot and so when I slowed down, I was still using but I slowed down I just couldn't stand the whole thing anymore.

Mental Health

Studies have reported multiple mental health consequences in women who have been prostituted including Post-traumatic Stress Disorder, depression and anxiety,

dissociative disorders, and suicide attempts (Herman, 2003; Rabinovitch, 2003; Ross, Farley and Schwartz 2003). The current study found similar findings. April reported dissociating when with customers and this is still a part of her life.

I mastered that, that actually affects me to this day. That has not gone away, I can still, with someone I love, I can still have sex right now and not feel a thing. Because I'm like, ok we're here, but I'm somewhere else. Still, still plays a part in my life to this very, very day.

Crystal, who of the three women likely experienced the most violence, was only recently diagnosed with PTSD and Depression. She also reported what may be a form of dissociation that began in childhood, perhaps in response to witnessing domestic violence between her parents. This coping mechanism was further facilitated by increased drug use later in life.

Silbert and Pines (1983) concluded that women in prostitution experience a form of "psychological paralysis" as a result of lifetime abuses which prevents them from taking an active role in their lives. This researcher did not find data to support this claim. The women in the current study experienced traumatic events as children, including sexual abuse, emotional abuse, and witnessing domestic violence. In addition, they experienced many forms of violence while in "the life" including assault, rape and even being shot. However, they were active participants in their lives and took action to protect and care for themselves.

August was able to recognize when things were happening in her life that did not fit with what she wanted for herself and to then take steps to change her situation. April took action to get help with her addiction multiple times and made the choice to return to "the life." Crystal, who no doubt endured the most abuse of the three women, was able to

leave a very abusive pimp, and then leave prostitution when it was no longer what she wanted for herself. These women were able to find and utilize support systems and get help when it was needed. They demonstrated personal agency in the midst of a very difficult lifestyle.

While Silbert and Pines' subjects may have endured more abuse than the women in this current study, it is dangerous to label these women "passive" and "paralyzed." Even under difficult circumstances, the women in the current study showed an ability to take care of themselves and to enlist others to help them. The difference in the literature and the current study's findings may be accounted for by study design. The case study approach allowed for a deeper investigation into the women's narratives of their experiences. In addition, these women were chosen for the current research because of their resiliency and ability to survive and thrive through difficult and distressing experiences, as will be further discussed below.

Exit Strategies

In exploring exit attempts from prostitution, the available studies focused on women seeking to leave "the life" yet did not specifically address *why* these women were leaving prostitution. Whereas, the most significant finding from the current study is that two of the women were not attempting to leave "the life." Instead, they were seeking help with their addiction and found that they could not continue to prostitute without using substances. They essentially had to give up "the life." Of course, looking back now, the women are thankful to be out of "the life," but at the time of their exit, their goal

was not to leave "the life." None of the studies that will be discussed below specifically addressed this phenomenon.

This finding presents an area that is rich for program planning and social work practice. All clinicians, but specifically those working in substance abuse settings, would be of greatest help to their clients if they had an understanding of how prostitution and addiction relate. Crystal states, "The two go hand in hand and after you come out of prostitution there's almost some sort of fine line." Clinicians must strive to create an atmosphere that is welcoming and non-judgmental of these women. To fully understand the women's experiences they must feel safe and comfortable in sharing them. To use August's words:

I just find that a lot of counselors and a lot of people look at people who are addicts differently. Like, I can't believe you did that. But, substances reduce your inhibitions and we know that alcohol reduces your inhibitions so you're likely to do things that you wouldn't normally do. And just have some empathy.

I think if you can just keep in mind that these are people who have had some really serious things happen to them that you probably can never imagine and they may never be able to even say it.

Mansson and Hedin (1999) examined exit strategies from the sex industry in Sweden. They found that "break aways" were either done quickly by women who were loosely involved, or slowly by women who were more deeply involved. The findings from the current study tentatively reflect the authors' findings. Crystal, who spent the least amount of time in prostitution, 5 years, had a faster break away then August or April, who both spent over 10 years in prostitution.

Mansson and Hedin (1999) also identified challenges that prostituted women face after leaving "the life" including an emotional reaction immediately after leaving,

dealing with shame and stigma, living in a marginalized situation between the lifestyle and the "straight" world, and navigating intimate relationships. Crystal reported what could be described as an emotional reaction after leaving "the life." Speaking of her sexuality she states,

The very thing that I used to hate when I was involved in prostitution...b.c I didn't allow that intimate part of myself to come out when I was a prostitute, it came out in recovery and I became very overly sexually involved to a point where it was in an unhealthy manner. I went through this real crazy time because I never enjoyed my own sexuality until I got into recovery. I had never developed in that area in a real healthy way so I had to relearn all my morals and values again.

August and April did not report an emotional reaction after leaving prostitution.

It is interesting to note that both of these women were in formal treatment for their addictions at this time, while Crystal was not. It is likely that the support from 12 step groups and treatment services helped them to cope with any strong emotions they may have experienced during this transition phase. In addition, Crystal was still using substances after leaving prostitution and had not yet learned healthier coping mechanisms.

Dalla (2006) and Mansson and Hedin (1999) both address the women's commitment to change as central to their success in leaving "the life." The women in the current study exhibited a strong commitment to changing their lives once they made the decision to leave prostitution. Crystal risked personal violence when escaping her pimp yet she was able to successfully leave. August and April were both able to recognize that their addictions were unmanageable within the context of "the life." They committed themselves to staying clean and thus leaving "the life" All three women made a commitment to building a new life for themselves and their children.

Weiner (1996) identified considerations for social service providers working with women who have been prostituted, specifically regarding barriers to accessing substance abuse treatment and medical services, as well as the difficulty and fears women may have in admitting that they have prostituted. She cautions that the stigma attached to prostitution makes it very difficult for these women to return to a "legitimate" lifestyle.

Two of the women in the current study, August and April, found long term substance abuse treatment programs specifically for women. Interestingly and sadly, both of these programs are no longer in existence. Crystal left prostitution without the support of any formal treatment and simply used the free and easily accessible 12 step meetings for help with her addiction. August and April also used 12 step programs.

Resilience

Newman (2005), representing the American Psychological Association, believes that resilience, "The human ability to adapt in the face the face of tragedy, trauma, adversity, hardship, and ongoing life stressors" (p. 227), can be learned and developed. Optimism, positive relationships, perspective, self-confidence, and working towards goals are all associated with resilience. Bonanno (2004) also believes that resilience can be gained or fostered.

The women in this study are clearly resilient. Their past experiences, combined with their current life paths, make them exemplars of resiliency. Each woman has unique characteristics and strengths contributing to their resiliency.

August

The greatest example of August's resiliency is her ability to recognize when she is being treated unjustly and to take action to change it. August had multiple experiences that were egodystonic, which resulted in her enlisting the help of others to make changes in the situation. For example, when August found herself in jail and was assaulted by her pimp, she found people to help her leave her current circumstances. Again, when she was discriminated against because of her HIV status, she fought back with the help of AIDS Action. This insight, along with her ability to be proactive likely result from her self esteem and confidence.

August's high self esteem may be a product of her very positive relationship with her step-father. August's ability to use interpersonal relationships like this one for help and support is another example of her resilience. At the same time, August expresses gratitude and wonderment for the people in her life who supported her across her years. Of her step-father she states, "He had a real soft spot for me...I think that was just kinda grace that I got from what I had gone through. And I'm really grateful for it." Of the woman who gave her one of her first jobs, "People get placed in your life so perfectly." This gratitude is coupled with a sense of trust in the way things are supposed to be. August believes that her first job as a substance abuse counselor was meant to be, as is her current career working with sexually exploited youth.

August also showed an ability to set and attain goals for herself and her future including furthering her education and reaching out to help others. August has worked as a substance abuse counselor, she sponsors other women through the 12 step program, she worked as an AIDS activist, and today she works with sexually exploited youth.

August best matches Bonanno's (2004) definition of hardiness which includes a desire to find meaning and purpose in one's life, a belief that one can influence one's environment and the outcome of events, and the belief that one can learn and grow from positive and negative experiences.

April

Bonanno (2004) believes that resiliency can be gained through repressive coping, whereby an individual avoids disagreeable thoughts, emotions and memories through dissociation. April used dissociation to cope with "the life" and this still affects her in current relationships. While some may argue that this is maladaptive, it allowed April to survive a difficult lifestyle. Today she has developed healthier coping strategies for difficult or stressful times; she uses her 12 step meetings and calls on female friends for support. She uses both group and individual support and is able to recognize when she needs which one.

April also exhibits resilience in her self confidence and through a strong sense of who she is. She takes care of herself and her body through exercise and eating well. She reports, "I invest in myself and I feel that, as a woman, I'm worth it, as a mother I'm worth it." April shows an ability to recognize her strengths but also to admit her faults. "I also keep women in my life who will be honest with me, not people who will co-sign my stuff and say 'oh girl, that's fine,' so I try to keep honest women, people who will really care about me and my life." Similarly, April was able to find and relate to other women who had experiences similar to her own. Identification with these women likely helped April to work through any shame she may have experienced.

Like August, April has faith in her God and in what is meant to be. She states, "Now I see my purpose. I just feel like God's in charge and if he can...God forgave me and I think that, look what he's doing with me." This faith has also helped April move beyond feeling ashamed of her past lifestyle.

April is a determined and hard-working woman. She is proud to be a provider for her children and she does not "need a dime from a man." April has taken her past experiences and used them for something positive; to help sexually exploited teenagers as well as other women with experiences similar to her own. She has goals for her future that involve bettering herself through education so that she may further help others with a program of her own for the adolescents she works with.

Newman (2005) wrote, "Maintaining good relationships, having an optimistic view of the world, keeping things in perspective, setting goals and taking steps to reach them, and being self-confident...are associated with resilience" (p. 227). April best matches this description of resiliency.

Crystal

Crystal provides the strongest example of the role that spirituality can play in an individual's resilience. She found support and guidance in her life after leaving prostitution through her church and the people she met there. These connections helped her with her own problems, yet also led her to helping others. Today, her spirituality is one of her strongest coping mechanisms. She prays to her God for strength and motivation.

In addition to prayer, Crystal has found other coping mechanisms. She uses her 12 step meetings when needed. Similar to Bonanno's (2004) belief that the use of

positive emotions contributes to resiliency, Crystal knows that listening to positive messages and stories gives her strength. At the same time, by focusing on other's problems, her own seem smaller and more manageable. Crystal related this with some trepidation, as if this were something of which to be embarrassed or ashamed of. However, Crystal has a history of helping others and using her own experiences for something positive. Using other's problems for motivation can be seen as a positive, healthy technique. Yet another example of Crystal's resilience is her ability to make meaning of her negative life experiences, find growth and learning from them, and pass this to others.

Crystal is able to recognize her strengths and her weaknesses. She is very aware that her difficulties with asking others for help is one her biggest limitations. Her self esteem has grown tremendously over the years as her confidence in her abilities and worth has grown. She shows an ability to recognize her own limits in her work and her emotional life, which is evidence of an ability to take care of herself.

Saleeby (2002) writes, "Resilience is a process – the continuing growth and articulation of capacities, knowledge, insight, and virtues derived through meeting the demands and challenges of one's world, however chastening" (p. 11). Crystal, and the other women in this study, are undoubtedly resilient and have much to teach to others.

Future Research

Areas for further research emerged from this study. While many women in prostitution use substances to cope, not all do. All three of the women in the current study had addictions, and for two of the women it was this that led to their leaving "the

life." Research should be conducted specifically investigating the coping mechanisms of women in prostitution who do not use substances and what their exit strategies involve. In addition, the women in the current study entered prostitution as adolescents. Studies should be conducted with women who enter prostitution as adults to investigate differences in experiences. The current study focused on street level prostitution. Studies should be conducted to explore the differences in exit strategies from the various forms of prostitution in order to tailor services to the specific populations.

The Participant's on Prostitution

This paper will close with the participant's thoughts on prostitution.

August on "sex work" and legalization:

I think it's a very dangerous world prostitution; I think it's very demeaning. I think that what you go through emotionally, there's no price for what you go through, emotionally, by having these strangers enter your private place. You know I just don't see how that can be legal, I don't, I don't see it as a job.

What would my granddaughter, what would I be teaching her about being a woman, a woman that has morals and integrity and that has some sort of intellect, you know? Who has a mind that is even far greater than the average man that the only thing she can do is sell her coochie. I don't think so. Oh, your vagina? It's just a vagina, do whatever you want with it...it's there for men to purchase, here sell it. It's not something I'm gonna want to vote for.

April on legalization and the language of prostitution:

Hell no! It shouldn't be legal because anywhere there's an adult sex industry, there's kids. No, no, no, no, nope. I don't think the children should be criminalized, but no, I don't think that it should be made easy. Let me just say this: I don't think that should be a legitimate job, like my sick mind, actually when I look back that was really sick of me to think that was legitimate so no, no, because the children will get caught up in that.

With the children I like it to be called sexual exploitation. Definitely language means everything, I don't have a problem with that term [sex worker], not to boost them up, but because some of them, those women need help, too. To take

away that 'prostitution,' because to say that, you're automatically a lost cause...but I'm all for doing away with the prostitute word and really coming up with a language so people can have some empathy. Definitely with the kids sexual exploitation because when you say teen prostitute, 'oh she wanna be out there, oh she know better than that.' Language is everything.

Crystal on legalization:

I don't think it should be legalized, for the fact that once it's legalized, then women aren't going to make a bunch of money at it. On the other hand, it takes away some of our mystique...But I mean, I was glad to be able to make \$100 in 20 minutes...But I know how damaging, emotionally and spiritually, it can be. I wish it didn't have to be at all. It will always go on, I can imagine, in some form or fashion. Spiritually, I know what it does to people, but on the other hand, people are gonna do it anyways because of where they're at so they should make some money at it. But also the danger and the violence, that stuff is terrible. I wish they could have the good part of it without going through the rest of it.

This research examined how women survive a life in street level prostitution, how they get out of prostitution, and how they rebuild their lives afterwards. This research has attempted to present the participants as experts on their own experiences and life stories. It is in this spirit that their thoughts on and beliefs about prostitution and its role in society should be presented. These courageous women have survived traumatic and terrifying experiences, they have maintained their personal agency and a belief in their own value and self worth, and have reached out to offer their experience and knowledge as assistance to others.

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Appendix A

Human Subjects Review Committee Approval Letter

February 20, 2008

Megan Glennon

Dear Megan,

Your revised materials have been reviewed and all of the revisions are complete. We are now able to give final approval to your study.

Please note the following requirements:

Consent Forms: All subjects should be given a copy of the consent form.

Maintaining Data: You must retain signed consent documents for at least three (3) years past completion of the research activity.

In addition, these requirements may also be applicable:

Amendments: If you wish to change any aspect of the study (such as design, procedures, consent forms or subject population), please submit these changes to the Committee.

Renewal: You are required to apply for renewal of approval every year for as long as the study is active.

Completion: You are required to notify the Chair of the Human Subjects Review Committee when your study is completed (data collection finished). This requirement is met by completion of the thesis project during the Third Summer.

Good luck with your very interesting project.

Sincerely,

Ann Hartman, D.S.W.
Chair, Human Subjects Review Committee

CC: Alexandra Graham, Research Advisor

Appendix B

Informed Consent Form

Dear Potential Research Participant:

My name is Megan Glennon and I am a graduate student at Smith College School for Social Work. I am conducting an exploratory study of how women survive a life in street level prostitution and how they get out of ‘the game’ and rebuild their lives afterwards. This study is being conducted for my Thesis, in partial fulfillment of the Master’s of Social Work degree at Smith College School for Social Work and for future presentation and publication on the topic. I have received permission from the Human Subjects Review Board of the Smith College School for Social Work to conduct this study.

You are being asked to participate in this study because of your experiences in street level prostitution. To be included in this study, you must have spent 6 months or more in prostitution and have currently been out of “the life” for 6 months or more. You must also be at least 18 years of age.

If you choose to participate in this study, you will be asked to sit for 1 interview lasting approximately 2 hours. This interview will be audiotape recorded and field notes will be taken. Demographic information will be collected, including but not limited to, age, ethnicity, spiritual background and sexual orientation. The interview will cover the following topics: how did you experience day-to-day life in prostitution, what coping mechanisms allowed you to survive it, what factors led to your decision to leave ‘the life’

and what did that process look like, and how have you moved forward towards your new life.

There are potential risks to participating in this study; specifically the possibility that interview questions may bring up difficult and painful memories of your time in prostitution. You can choose not to answer any question and/or to stop the interview at any time. In addition, we will spend as much time as needed at the end of the interview debriefing your experience. A list of referral resources will also be provided to you so that should you wish to speak with someone about the feelings brought up by the interview, you will have options for where to go.

There are benefits to you for participating in this study. You will receive monetary compensation, \$75, for your participation in this study through My Life My Choice. This compensation will be received following the interview, and will be given to you whether or not you *complete* the interview. In addition, participation will allow you to share your experiences of street level prostitution and choosing to leave. Identifying what thoughts, beliefs, people, services, and/or resources helped you to leave prostitution and rebuild your life can be helpful to other women who are facing the same situation. The helping professions may utilize the information gathered by this study to be of greater assistance to women who would like to leave prostitution.

Ms. Goldblatt Grace will be aware of your participation in this study; however, she will not have access to the interview material. She will sign a confidentiality agreement in order to ensure protection of your identity. In addition, confidentiality will be kept by assigning interview tapes a number and removing any identifying names and locations from transcripts (you are also asked not to include identifying information

during the interview). Some illustrative quotes will be used for publication, but will be changed to eliminate identifying information, thereby protecting your privacy. I will be the main handler of all data including tapes and transcripts, however my thesis advisor(s) will also have access to this information should it be necessary to assist in the completion of this study. I will keep the tapes and transcripts for three years, in compliance with federal regulations. During this time, tapes, transcripts, and consent forms will be kept in a locked cabinet. After the three year period has expired, all material will be destroyed or, if kept, will remain in a locked cabinet. Should materials be kept beyond the three years, they will be destroyed when no longer needed. The data will be used for my thesis and may be used for future presentations and publications.

If at any time during the interview you do not want to answer a question or you wish to discontinue the interview, that is your absolute right and I will honor your request without any repercussions to you. You have the right to withdraw from this study at any time (before, during or after the interview) up to April 1st, 2008, when the report will be written. Should you choose to withdraw from the study at any time after completing the interviews, you will be able to keep the \$75.

YOUR SIGNATURE BELOW INDICATES THAT YOU HAVE READ AND UNDERSTAND THE ABOVE INFORMATION; THAT YOU HAVE HAD THE OPPORTUNITY TO ASK QUESTIONS ABOUT THE STUDY, YOUR PARTICIPATION AND YOUR RIGHTS; AND THAT YOU AGREE TO PARTICIPATE IN THE STUDY.

Signature of Participant Date

Signature of Researcher Date

If you have any questions, or wish to withdraw from the study, please contact me at:

Megan Glennon, SWI

26 Central St.

Somerville, MA 02143

617-591-0902

mglennon@email.smith.edu

OR the Chair of the Smith College School

for Social Work Human Subjects Review

Committee at 413-595-7974.

Appendix C

Interview Guide

Demographics

1. What is your age?
2. What is your ethnic background?
3. What is your religious or spiritual affiliation?
4. What is your current relationship status?
5. What is your sexual orientation? (Are you sexually attracted to men, women or both?)

Early Development and Entry into Prostitution

1. I'd like to begin by asking you about your childhood and your earliest memories. Can you tell me about your childhood and work your way up through your teenage years?
2. When and how did you enter prostitution?
3. Do you have any ideas about how experiences growing up affected your entry into prostitution?
4. Does your family know about your life in prostitution? How have they reacted, what have they said to you, etc.?
5. How would you describe your relationship with your family currently?

"The Life"

1. How many years did you spend in prostitution and what was your experience? Please share with me as much as you are comfortable talking about.

2. You've shared with me some (difficult, painful, traumatic, etc.) experiences. How do you believe you coped with this lifestyle?
3. When did you begin to consider leaving "the life?" Are there any moments that particularly stand out? Did anything specific happen?

Exit Process

1. What were your first steps towards getting out?
2. What services did you know of that were available to assist you?
3. Please tell me all you can about the exit process.
4. What services did you use? Can you identify which services were particularly useful to you?
5. In what areas did you need assistance yet had trouble locating or accessing them?
6. What were your greatest motivating factors to leave?
7. What was the greatest contributing factor towards your success at leaving prostitution?

After Prostitution

1. What is your life like today?
2. Tell me how you got from the exit process to where you are today.
3. Are there ways that your experiences in your past affect you today?
4. What sorts of things do you do to cope when you feel stressed or overwhelmed?

How is this different from the way you coped in the past?

5. How would you describe the way you feel about yourself?

Do you think of yourself as different or special in any way, positive or negative?

How do you feel about yourself as a woman?

How do you feel about your body? Do you take care of yourself and your body?

6. How do you feel about the future? What are your plans and dreams?
7. What keeps you motivated?
8. How do you understand, or make meaning of, the painful experiences of your life?
9. There is a great deal of debate about whether prostitution should be decriminalized, legalized, etc. What are your thoughts on this?
10. What would you like people to know about prostitution that we may not have already talked about?

Closing

1. Is there anything we haven't talked about that you would like to share? Areas of difficulty or strength?
2. How has this interview been for you?
3. Were there any questions that were particularly painful or difficult?