JETIR.ORG ISSN: 2349-5162 | ESTD Year : 2014 | Monthly Issue

JOURNAL OF EMERGING TECHNOLOGIES AND INNOVATIVE RESEARCH (JETIR)

An International Scholarly Open Access, Peer-reviewed, Refereed Journal

"A Study On Perceived Social Support And Quality Life Of Female Sex Workers

(With special reference to 'karnataka state')

Author Name : Prahlada G

Faculty

Department of Social Work

University college of Arts, Tumkur University, Tumkur.

Presentation Title: "A Study on Perceived Social Support and Quality Life of Female Sex Workers (With special reference to 'karnataka state')

Research Focus: Sex Worker

1.1 INTRODUCTION

In this current context, most peoples in the world place greater emphasis on sex as a part of luxurious life and thus the sexual content of the sex is reined. Our young generation, who are fed up with today's modern media, have given more awards for sexual interest. In our Indian society, sex has become so ingrained that he had to have family and marriage social institutions to get sex but today sex seems to be the easiest way to earn a living.

A sex worker, or a devadasi as they have been called at different times in India, are the facilitators of what is regarded as the "oldest profession of the world", which is not driven by need for physical pleasure only, but is rather driven by the economic and psychological distresses which contribute largely to the entry of sex workers into this profession. It is a $100 billion global industry whose legal status varies from country to country from being permissible but unregulated, to a punishable crime or to a regulated profession. It is an industry which is unarguably ubiquitous in all the countries with their own variations, and whose history can be traced to 4000 years back to ancient Babylon.

The problem of female sex work in India is so widespread that every hour, four women or girls enter Female Sex Worker, out of which three enter it against their will. Female sex work in India has both modern and ancient facets to it. A dichotomy of female sex work in India is that it is legal but not regulated. There are an estimated 20 million Female Sex Workers in India. Also, it's not that female sex

work in India involves only the economically deprived sections of society, but there is a whole industry of escorts or call girls who are not only educated but are also from good colleges and from glamorous industries like modeling and filmdom. They usually advertise their services through high-tech methods such as the internet and even advertising in newspapers.

Signs of sex tourism are very much evident in Karnataka. In fact there is a burst in flat-hotel, Bothal – based, home based female sex work, which came to light after the arrests of many sex racketeers from various apartments and residential areas across the state including Guwahati, which is indicative of a large-scale female sex work racket linked to sex tourism in Karnataka.

Karnataka is gradually becoming a potent source of sex tourism. As, having similarity with other Asian countries in their beautiful physical features, the women of Karnataka have high demand in the international market. Sex work is the business or practice of providing sexual services to another person in return for payment. The person who receives payment for sexual services is known as a female sex worker or sex worker, and the person who receives such services is known by a multitude of terms.

According to the Sexual Offences Act (1957) a sex worker is anyone who has „unlawful carnal intercourse" or commits an act of „indecency" with any person for reward. „Unlawful carnal intercourse" is defined as sex with anyone other than your husband or wife. The reward mentioned in the definition is not clearly explained but is generally considered to be money. Sex Worker Education and Advocacy Taskforce (SWEAT) define sex workers as adults who provide sexual services for financial reward.

Sex work occurs in a variety of forms. Brothels are establishments specifically dedicated to Female Sex Worker. In escort Female Sex Worker, the act may take place at the customer's residence or hotel room (referred to as out-call), or at the escort's residence or in a hotel room rented for the occasion by the escort (called in-call). Another form is street Female Sex Worker. Sex tourism refers to travelling, typically from developed to underdeveloped nations, to engage in sexual activity with sex workers.

What causes Female Sex Worker?

In most cases the decision to enter into the sex industry for a woman is economic. However, there can be many different reasons for which women enter into this industry.

Some of the causes are given below

1. Poverty: Poverty is one explanation for sex work. Miserable poverty has often forced women to enter into the sex industry because of the death of their parents, husband, divorce/separation or spouse‟s ill health.
2. Lack of education and low socioeconomic status : According to some studies it becomes clear that most of the women in this industry lack education and belong to low socio-economic strata. It is true that lack of education is a major constraint to job opportunities. Desire for freedom from family restrictions and in search of economic independence they enter into sex work.
3. Early marriage, domestic violence : It is seen, that in rural areas particularly, parents think of the female child as a burden of the family and so they are married off at an early age(before the age of 18), and harassment and violence is perpetrated by their spouse which is another reason for women coming into this profession
4. Substance abuse: Another major reason for women coming into this profession is the husband‟s addiction to alcohol and other substances. As a result of substance addiction their husbands are unemployed and this sometimes leads to even abandonment. So they choose sex-work as the easiest path for earning money for their family.
5. Family reasons and lack of social support : Sometimes family reasons also force women to enter into this profession like absence of an earning male member, inability to fulfil the needs of children and siblings, daughter‟s marriage, aged and sick parents, facing huge debt and lack of social support.
6. Societal conditions: Some women have reported that they were sexually assaulted by many individuals in their childhood and even by the police in their adulthood. As a consequence, consistent exposure to an exploitative society and working environment made many decide to enter sex work.
7. Family tradition: There are many groups of cast-based traditional sex workers in India. Because of family tradition girls born into these families are pre-ordained to becoming sex workers. Even though there is an explicit cultural reason for involvement in this industry, the root cause is found to be socio-economic in nature.
8. Forcible entry, Deception by known people : Many women also enter into this profession by being trapped through deception by known persons, including relatives and friends, as well as by unknown persons and strangers, and through promise of marriage by a lover or boyfriend.

1.2 PERCEIVED SOCIAL SUPPORT

Social support is usually defined as the continued presence of people on whom we can rely, who care, value, and love us and our priorities. A broad definition of social support is the "resources provided by others" (Cohen and Syme, 1985).It has been seen as “information leading the subject to

believe that he is cared for and loved , is esteemed and valued and belongs to a social network of communication and mutual obligation (Cabb 1976). From the cognitive point of view it includes the type of interactions and rewards inherent in support connections and how these are alleged by the participants (Social Determinants of Health , Michale Marmat and Richard Nilkinson, Second Edition , Oxford University Press).It refers to one's social bonding, social amalgamation and primary relations. These compassionate resources can be –

- Emotional- Expressions of empathy, love, trust and caring (e.g., nurturance),
- Tangible- Instrumental aid and services (e.g., financial backing),
- Appraisal- Information which is useful for self evaluation (e.g., instruction),
- Companionship- sense of belonging and indescribable (e.g. personal advice).

1.3 QUALITY OF LIFE

The World Health Organization defines Quality of life as "an individual‟s perception of their position in life in the context of the culture and value system in which they live and in relation to their goals, expectations, standards and concerns. It is a broad ranging concept affected in a complex way by the person‟ sphysical health, psychological state, personal beliefs, social relationships and their relationship to salient features of their environment" (Oort, 2005)

Taking into consideration the life situations of female sex workers and the relevance of the variables discussed above, the present research is concerned with the status of female sex workers regarding perceived social support and quality of life. Following that an attempt has been made to find the relationship between perceived social support and quality of life of the sex workers.

2.1 REVIEW OF LITERATURE

Review of Literature is an essential part of any research as it is through a study of literature related to the problem that the researcher wants to address that the final selection of variables and the plan for execution of the research study is finalized. In this Chapter the research studies related to the present study have been presented. It must be noted that although FSWs have been studied, very few research studies have been carried out on psychological variables, and as such, very few studies are there which have a direct bearing on the variables under study in the present research.

The studies have been presented under each of the variable under study, while some have been included under "others".

- **Vanweesenbeeck, Graaf & Visser (1993),** Self-perception costs and benefits of condoms are important, decisive factors in protection motivation and ultimately condom use, but vary from person to person and from situation to situation. In this article, the diversity of costs and benefits of condoms within the specific context of commercial sex was explored for 87 male clients of female prostitutes. It was found that consequent condoms users are better educated and have lower scores on external LOC
- **Basat (2004),** have done a study on 200 married persons to investigate how marital satisfaction, locus of control and self esteem act as major predictor of sexual satisfaction. Results show that gender, education level, and interaction of these variables differentiated the groups on both the sexual satisfaction and marital satisfaction. The variable education differentiated the groups on the locus of control. Moreover, gender and education differentiated the groups on self-esteem. The subjects also report higher sexual satisfaction when they have higher internal locus of control orientation. Lastly, marital satisfaction, locus of control, selfesteem, length of marriage, intercourse frequency and orgasm frequency significantly predicted the sexual satisfaction.
- **Shukla & Mehrotra (2014)**, the study was done on Female Sex Workers in CREAT (Centre for Rural Entrepreneurship and Technical Education) at Lucknow. They tries to understand the Quality of Life of the Female Sex Workers. For the data collection WHOQOL-BREF questionnaire was used. The Sample size of the research is 30 and the selection procedure is purposive sampling from the age group 20-30 years. Results show poor quality of life of the FSWs. Further from the domains of quality of life the FSWs scored high on psychological and environmental in comparison with the other two domains i.e. physical and social domains.
- **Dhavaleshwar, Chidanand and Umesh, (2012),** studied the nature, causes and status of prostitutes at brothels. It has also focuses on some of its effects on the individual, the family, the society and the nation. Among such consequences are physical injuries, poor health, general emotional distress, nightmares, phobia, low self esteem, poor marital relationships, and broken homes and so on. The paper discuses the status and consequences of Female Sex Worker. It also mentioned the expected knowledge of social worker to alleviate the problem. The paper also discussed some social work interventions that

can help in managing or preventing Female Sex Worker or reducing its blight in our societies. The important finding of the study is that 88.9% of prostitutes are married, they have their personal life and doing this activity in order to uphold their family economically, most of time the husbands of practitioners are being present while wife engage with client. It indicates that prostitutes have their family support for this activity, and they considered Female Sex Worker as a business to earn and grow financially

- **Turner M.E.(2013),** this study was done based on a data from commercial female sex workers (CFSW) that was collected in Thailand during January and February 2007. Past research in subjective well- being indicates that women who have more formal education, those who took positive attitude about their income rank and working conditions, and those who feel connected to others in their community report greater well-being compared to others. Most Thai sex workers, in the study, were generally satisfied with their personal domains (relative income, marital status, and working conditions); however, less satisfaction was reported about feeling part of the community.
- **Chen, Tao, Ma, Zhong , Qin & Hu (2014),** the purpose of the study was to investigate the association between social support and AIDS high-risk behaviors in Female Sex Workers (CSWs) in China. For this purpose 581 CSWs from 4 countries in East China participated in the study. Data were collected by using questionnaire interviews including information about social demographic characteristics, the Social Support Rating Scale (SSRS) and AIDS knowledge. The age groups of the participants were 15 to 30 yrs of age. The results shows that the CSWs mainly received individual and family support from their parents (50.3%), relatives and friends (46.3%), spouses (18.4%), respectively. The CSWs with high level of social support used condoms during commercial sex. This indicates that increasing social support can reduce AIDS-related high-risk behaviors and accordingly play an important role in AIDS prevention
- **Wong, Holroyd, Gray & Ling (2006).** In Hong Kong Female Sex Worker and sex industry becomes an integral part of their socio-cultural and economic structure. Accordingly, the physical and psychological health becomes a great concern for the FSWs themselves, the public and government policy. A cross- sectional survey on the quality of life of the FSWs in Hong Kong was done to investigate the physical and psychological well-being of street FSWs and the results were compared with the nonsex-working women of Hong Kong. Results finds out that one common aspect among these FSWs was their negative view of themselves and of life. Results indicated that most of the FSWs were suffering from the feeling of helplessness and entrapment which leads to affect their self-esteem and confidence when affirming their basic rights, such as access to healthcare and safety. The study highlights the vulnerability of this population to apparent weaknesses in Hong Kong's current healthcare system

- **Javed , Javed & Khan (2016),**education plays a very important role in every aspect of people's lives. Following Objectives were formed for the study to Assess and Compare Quality of Life of educated and uneducated Muslim Housewives and secondly to assess and compare Well-Being of educated and uneducated Muslim housewife. 100 educated Muslim Housewives and 100 uneducated Muslim housewives were taken from District Aligarh. WHOQOLBREF was used to assess Quality of life and Well- Being Scale was used to assess various well-being dimensions in both the groups. Significant Difference was found between various dimensions of quality of life and well-being of educated and non educated Muslim women of Aligarh district.
- **Khodabakhshi & Damirchi (2016),** the study aims at comparing the different dimensions of quality of life of FSWs who have use drugs and those who haven't use drugs. It's an ex-post facto research. The sample size is 120 FSWs and among them 60 used drugs and 60 don't use drugs. The FSWs were selected all the way through convenience sampling method in Tehran, 2016. For data collection They WHOQOL-BREF questionnaire was used. The results shows significant differences between the two groups. According to the result quality of life of the sex workers is affected by substance use. The FSWs with substance use needs biological, psychological and social need that requires immediate intervention.
- **Margaret ,Walter ,Stephen &Anthony (1983)** done a study in order to replicates on two previous studies that had examined the relationship of locus of control and marital satisfaction (Mlott and Lira, 1977, and Doherty, 1980), whose findings indicated that when the wife was more externally oriented and the husband more internal oriented there exist high levels of marital dissatisfaction. Both studies had given importance on young, recently married couples. The present study was done on older couples, 83 numbers are from rural area and 98 numbers are from urban communities in South-eastern Kansas, who had remain married longer. Findings indicated that locus of control was indeed connected with marital satisfaction. The greater the internal locus of control for the wife, the higher the marital satisfaction and that such an association is not an artifact of social allure.
- **Farley , Baral , Kiremire & Sezgin (1998),**In this research some issues of Female Sex Worker were discuss like is Female Sex Worker is just a job or is it a violation of human rights? According to the author Female Sex Worker is an act of violence against women, is an act which is intrinsically traumatizing to the person being prostituted. Here 475 prostitutes (including women, men and the transgendered) from five countries (South Africa, Thailand, Turkey, USA, Zambia) were interviewed about their current and lifetime history of physical and sexual violence, current symptoms of post-traumatic stress disorder(PTSD) and how they can be able to leave Female Sex Worker. In this study out of 475 prostitutes, 73 percent reported physical assault in Female Sex Worker, 62 percent reported having been raped since entering Female Sex Worker, 67 percent met criteria for a diagnosis of PTSD. On average, 92 percent stated that they wanted to leave Female Sex Worker. The study also

investigated on effects of race and whether the person was prostituted on the street or in a brothel. Finally Female Sex Worker is discussed here as violence and human rights violation.

- **Campbell (2000),** this paper works on 21 FSWs from a poor and violent living condition of South Africa. This paper examines the factors which are responsible to help or hinder a newly implemented community-based peer education and condom distribution project aimed at vulnerable single women. Here attention is given on in which the FSWs routine organisation of everyday working and living conditions, as well as the strategies they use to construct positive social identities despite working in the most stigmatised of professions. However, the FSWs interviews suggest that the tendency to speak of women's 'powerlessness' (as is the case in many studies of African women in the context of the HIV epidemic) is unduly simplistic and fails to take account of the range of coping strategies and social support networks that women have constructed to deal with their day to day life challenges. These strategies and networks could serve as potentially strong resources for community-based sexual health promotion programmes.
- **Kurtz, Surratt, Kiley & Inciardi (2005),** this paper is worked on street based FSWs who are homeless, poor, drug abuse and violent victimized, who needs for a variety of health and social services but faced some problems in assessing these services. The study interviewed 586 and focus group 25 data to examine the services needs and associated barriers to access among FSWs in Miami, Florida. These women often reported services for shelter, freshwater, transportation, crisis intervention and drug detoxification as well as long-term needs for mental and physical health care, treatment on drug addiction and legal and employment services. They have faced both structural and individual barriers. For bridging these gaps service training, outreach and promising research directions were needed.
- **Gobbens & Marcel (2018),** this study aimed at developing a measurement instrument to assessed the factors of older adults' perceptions of their environment in examining the associations of these environment and examining the relation of these environmental factors with the domains of quality of life i.e. physical health, psychological, social relations, and environmental, controlling for background characteristics. The study was done on a sample of 1,031 Dutch people aged 65 years and older. Participants completed a Web-based questionnaire, the "Senioren Barometer" and quality of life was assessed by the WHOQOL-BREF. According to the results all quality of life domains (physical, psychological, social, environmental) were associated with at least one environmental scale. Facilities, neighborhood, stench/noise, and traffic were associated only with quality of life environmental

3.1 RESEARCH METHODOLOGY

Methodology is the logical planning of the scientific methods involved in conducting the research. Methodology followed in the present study is described below

In this present research a study Perceived Social Support and Quality Life of Female Sex Workers has undertaken.

3.2 GEOGRAPHICAL COVERAGE The present study included Female Sex Workers of Karnataka. The geographical area covered consisted of various districts of Karnataka scattered across the state. The sample of FSWs was, thus, from all over the state.

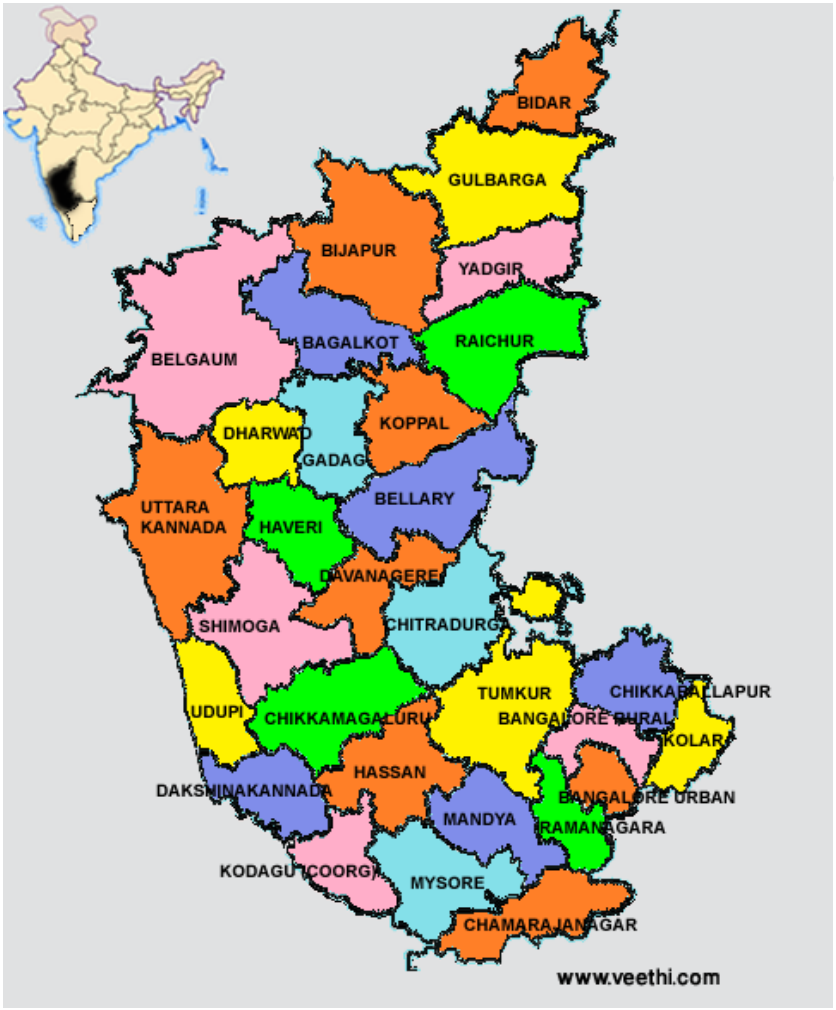

FIG.3.3 MAP OF KARNATAKA

3.4 AIM OF THE STUDY

The present study is conducted on the quality of life of Female Sex Workers.

3.5 OBJECTIVES OF THE STUDY

- To know the socioeconomic profile of the respondents
- To investigate the status of Female Sex Workers on perceived social
- To know about the atrocities committed on women who have in sex work
- To study the stigma and discrimination of Female Sex Workers.
- To shed light on the health status of Female Sex Workers.
- To know about the quality of life of Female Sex Workers.

3.6 HYPOTHESES OF STUDY

Proposed solutions or explanation are known as hypotheses. It is just a feeling or a conjecture.

The present study has its own hypotheses there are..

- The Socio economic status of Female Sex Workers is extremely low
- Women who are sexually engaged are very backward academically.
- The family situation of women in the sex industry is very deplorable.
- The health status of Female Sex Workers is miserable.
- There may be social and environmental influences that are important to come to sexual profession.
- Women engaged in sex work are forcibly engaged in this act.
- The lives of Female sex workers are poor.
- To investigate whether there is any relationship between perceived social support and quality of life in female sex workers.

3.7 RESEARCH DESIGN

Research design is the **framework of research methods and techniques chosen by a researcher**. The design allows researchers to hone in on research methods that are suitable for the subject matter and set up their studies up for success.

In this present research, a study on the quality of life of Female sex workers is undertaken.

The Researcher has chosen the descriptive research design for the subject of his study.

3.8 SAMPLE OF RESEARCH

SAMPLE The research has covered a sample of Female Sex Workers. From different parts of Karnataka These FSWs were further differentiated in terms of their age, education level and marital status.

3.8.1 SAMPLING METHOD

In this research the greatest challenge for the researcher was data collection as finding female sex workers was very difficult.

For the present research the researcher has adopted the **Snowball Sampling**

3.9 TOOLS OF DATA COLLECTION

For the present research, the researcher will be adapt the structured questionnaire for conducting the study

3.10 SOURCES OF DATA COLLECTION

This present researcher has adopted the primary and secondary sources of data collection for his research study

3.11 LIMITATION OF THE STUDY

- The subject chosen by the researcher is very narrow so information is limited.
- This study is only limited to Karnataka State
- The information may be far from reality, as most of the women involved in the research are illiterate.
- The literature review on the subject of study is very limited.

CHAPTERISATION

This thesis has been prepared into five chapters A Brief description of the contents of theses chapters is given below

Chapter No I: Introduction

Chapter No. II: Review of Literature

Chapter No III: Research Methodology

Chapter No IV: Analysis and interpretation

Chapter No V: Findings, suggestions and conclusion

REFERENCES

- Abeysekera, S. L. (2016). Socio-Cultural Study of Heroin Using Female Sex Workers in the City of Colombo (Doctoral dissertation, The Open University)
- Abhilasha, P., Reddy, M., Ramanathan, R., Manickam, T., & Elangovan, S. (2018). Prevalence of Sexual Dysfunction in Females with and Without Schizophrenia. American Journal of Psychiatry and Neuroscience, 6(3), 56.
- Amani. S., Ebrahimi. H., Mirghafourvand. M., Shafaie. S.F, (2019),Mental Health and its Relationship With Social Support in Iranian Women With HighRisk Sexual Behaviors, International Journal of Women's Health and Reproduction Sciences Vol. 7, No. 1, 112–118 http://www.ijwhr.net doi 10.15296/ijwhr.2019.18 ISSN 2330-4456
- Basson R, Berman J, Burnett A, Derogatis L, Ferguson D, Fourcroy J,…..Whipple,B.(2000). Report of the international consensus development conference on female sexual dysfunction: definitions and classifications. The Journal of Urology 2000; 163(3);888-893.
- Darshani. R.K.N.D. (2014), A Review of Personality Types and Locus of Control as Moderators of Stress and Conflict Management, International Journal of Scientific and Research Publications, Vol. 4, Issue 2, ISSN 2250-3153
- Farley, M., Baral, I., Kiremire, M., & Sezgin, U. (1998). Female Sex Worker in five countries: Violence and post-traumatic stress disorder. Feminism & Psychology, 8(4), 405-426
- Martin, R., Thomas, G., Charles, K., Epitropaki, O., & McNamara, R. (2005). The role of leader-member exchanges in mediating the relationship between locus of control and work reactions. Journal of Occupational and Organizational Psychology, 78(1), 141-147
- Zimmerman, C., Watts, C., & World Health Organization. (2003). WHO ethical and safety recommendations for interviewing trafficked women.