

# CHAPTER - ONE

## INTRODUCTON

### 1.1 Background of the Study

The term Female sex workers have been defined as “A women selling sex in exchange for money or goods”. Prostitution is defined as provision of sexual services by one person, the 'sex worker' for which a second person provides money or other markers of economic value. In most, but not all situations, it involves a third party-broker, brothel owner or keeper who takes a commission from the sex worker's earnings and facilitates client contacts (Alexander 1998 quoted by Amin, 2004).

Sex work has always been a subject of controversy. The combination of philosophy, cultural precedence, religious influence and politics determined how each country chose to handle it. In Singapore, sex for money is open. Canada, France and Mexico allow it. Sex workers must be contained within brothels in the Netherlands, unlike in England and Wales where it is limited to individual providers. Israel allows it too. The United States has made sex work illegal in all states, except certain places in Nevada (Kandel, 2009).

The institution of prostitution has existed in most societies in different forms as early as mankind has been able to document interactions in society. Prostitution is often referred to as the oldest profession (Luiz and Roets, 2000: 21; Edhund and Korn 2002:183). The Bible talks about Samson going to Gaza and went into a 'Harlot' (book of Judges, 16: 1-7), while other references to whoredoms and harlots were made in the book of Ezekiel (23:2-18), where Aholah and Aholibah whole's lifestyles. Who lived in Egypt were, described. In Luke (7:36-50; 8:1-2), the famous history of Mary Magdalene, her life style and the forgiveness of Jesus are told.

McLeod (1982:1-2) sees prostitution as caused by the social problems experienced by men and women and secured by women's relative poverty which gives them the only opinion of sex as the most saleable commodity. Male clients emerge according to McLeod largely as a result of the failure of marriage, cohabitation and conventional

sex roles in order to cater for men's emotional and sexual needs. She sees the needs of men and their encounters with prostitutes as palliative or a source of refreshment.

In the Victorian era, prostitution was seen as arising from the need for women to meet the male justified sexual desires. The prostitute was referred to as the fallen woman; this image of the fallen woman reflects the Victorian upper class's ideas about sexuality, gender and class. According to Bell (<http://www.gober.net/Victorian/reports/prosit.html> 8/23/2004) the prostitute is a reflection of cultural anxiety about urbanization, and it is this that created the ideological assumptions behind the creation of the contagious disease acts that punished women in the even of sexually transmitted diseases associated with men having sex with prostitutes.

Prostitutes themselves see the imperfect world as causing prostitution. McLeod (1982:1). Citing Julie, one of her respondents in a study of prostitution in England who said, "If the world were a perfect place there would be no need for prostitutes ... But it seems it doesn't work out like that".

There appear to be different beginnings to the history of sexual service in Nepal. Like other societies, in Nepal, it was considered the privilege of members of royalty to command sexual services from anyone whom they desired. Most of this service was exclusive to them and the kings had several women to meet their needs. Some of these women enjoyed a social status lesser than that of wife but often were rewarded for their service and had a place in court. Others provided short term service and were cast aside. Gradually, others in the Kings' court began to seek these services as well paying by favor or in kind; and this gradually extended to the landlords, and then to anyone who could afford to pay for it (Iyengar and Rout, 2008).

The community of Badis, a Dalit community who were once court entertainers, lives in the Northwestern region. Over the years they moved down in the social hierarchy and were marginalized and considered untouchables along with many other castes in Nepal. Slowly, the women in this community drifted into prostitution (Iyengar & Rout, 2008).

Nepal is classified as a Country with Concentrated HIV Epidemic. Out of the total HIV cases reported in Nepal, approximately 6 Percent constitutes of FSWs (NCASC,

2008). This group constitutes one of the core risk groups for HIV infection and transmission as they engage frequently in sexual acts with multiple partners (WHO/SEARO, 2007).

In Nepal, sex work as such is neither legal nor is it decriminalized. The Supreme Court's verdict in 2002 recognizes sex work as a profession. Police raids of public places are acceptable under the Public Offense Act. If someone is arrested for sex work, it is usually under this act with a punishment of up to NRs 10,000 for vulgar gestures or activities in public places. Police can use the Act to raid hotels as hotels are supposed to be used for activities other than sex work (Kandel, 2009). Societies have viewed sexual service seeking at different points of time in history with different lenses. It has been looked at as a privilege, as immoral, as an art, as a religious or cultural tradition. Today, in Nepal, the debate is on whether it is legitimate profession or social exploitation (Iyengar and Rout, 2008).

## **1.2 Statement of the Problem**

Prostitution has continuously been seen as a problem for society, especially in largely patriarchal settings. In our societies the women that practice prostitution are seen as immoral and are blamed for the spread of HIV/AIDS .It is completely illegal, immoral work but year by year number of women involved in this profession eventhough they know the risk and challenges. The research is concernted to find out the causes, pull and push factors on it.

The vulnerability of women sex workers is best understood by looking at social inequities and specific gender disparities. Women are still the vulnerable unit of the society because of the gender disparities in education, and other means of attaining economic security persist. Cultural and social practices compound to contribute these gaps. The circumstances like child marriage and dowry system, discrimination based on caste and class, drainage of poverty, maintenance of livelihood and gender-based violence force many of the females to resort to prostitution as a subsistence strategy. As well, urbanization, modernization, migration, and the demand for sexual services of young girls have also contributed to compulsion of girls into prostitution through trafficking.

The studied was carried out among the FSW within Pokhara valley. The research was carried out in order to find out the answer of the following questions.

- ) What are the demographic and socio-economic characteristics of Female Sex Workers in Pokhara?
- ) What factors are reinforces for the entry in sexual activities?
- ) What is the level of knowledge and practice of female sex workers on risk Behavior related to HIV and AIDS?
- ) What are consequences from sex work related to physical, social, and economics of Female Sex Workers?

### **1.3 Rationale and Significant of the Study**

Commercial sex is now being the burning issue all over the world and even in Nepal. It is also being the issue of major cities like Kathmandu, Pokhara, Biratnagar, Birgunj, Butwal and so others. No one has studied about of the enforcing factors in commercial sex.

This research is important, as it will help in understanding the interplaying factors for the entry in the sexual profession, it will help government and stakeholders in formulating plans and policies in the days ahead. This research, in a contrast difference from other researches looks female sex work as a separate profession that helps in the sustenance of women along with other dependent members of her family. Government has tilled now targeted FSWs as a vector and victim of HIV, which is in itself very stigmatizing. In one hand, government is allowing various INGO and NGO to run projects and programs on FSWS and in the other hand, it is considering sex work as illegitimate so this problem needs an immediate attention from all sectors especially in the terms of legislation.

### **1.4 Objective of the Study**

The general objective of the study is to find out the interplaying factors to sex work among female sex works in Pokhara.

- ) To find out the reinforcing factors for the entry in sexual activities.

- ) To identify the knowledge and practices of female sex workers on risk behavior related to HIV and AIDS.
- ) To identify the consequences from sex work related to physical, social, economic, and Violence status of FSWs.

## 1.5 Operational Meaning of the Key Terms

**Female Sex Worker (FSW):** A Woman who is paid in terms of cash or kind, in exchange for sex.

**Brothel:** An establishment with a number of rooms that acts as a base for sex Workers. The brothel owner takes a good share of the money paid to each sex worker in the house. Generally, brothels give the impression of being either hotel or restaurant from outside.

**Street-based Sex Workers:** Those Women who are found to be selling sex (Accosting with clients) directly on the streets. They actively solicit clients and are picked up from the street. Generally, they tend to work in the evenings from selected streets.

**Establishment-based Sex Workers:** Those associated with, or located at working establishments (e.g. hotels, bars, restaurants, brothels, red-light houses etc.)

**Divorced:** Those who had divorced and not married again at the time of research.

**Parity:** It indicates the total number of children ever born to a FSW

**Pimps:** Are those who search clients for the FSW and receive commission in return

**Way of HIV Transmission:** Only four methods namely Sharing needles, cutting and piercing items, having unsafe sex (Penetrative Sex without Condoms), transfusion of infected blood and mother to child transmission(while breast feeding, gestation, delivery) are regarded as ways of HIV transmission.

**Drug Users (DUs):** Who have used drugs such as heroin or brown sugar or Other medically used drugs for pleasure (for other than medical reasons) FIDUs have also been referred as ‘women drug users’ in this report.

**Injecting Drug Users (IDUs):** Drug Users (DUs) who had injected drugs at least once in the past one month for other than medical purpose.

**Boy Friends:** Partners with whom, Female sex worker had sex in exchange for money or drugs.

**Drop in Centre (DIC):** Drop in center is a key service delivery mechanism which is a one step of service centre for FSW, that provides comprehensive and holistic Health service services to the Female sex workers.

## **1.6 Limitation of the Study**

Effort was made to minimize such barriers. This research does not represent all components of female Sex worker. The findings may or may not applicable to all the Female sex workers. The study was carried out for the partial fulfillment of the requirement for the master degree of arts in sociology. Therefore detailed research will not be possible due to insufficient time, financial and human resource. Further, the study was carried out only in Pokhara valley and especially Female Sex Worker attaining in Child and Women Empower Society Pokhara. Therefore associated factor of sex worker in this study may not be generalized in any other cases and spaces.

## **1.7 Organization of the Study**

The research is divided mainly in to six chapters. First chapter is related to introductory part, which starts with the background information and includes statements of the problem, objectives of the study, rationale of the study, limitation of the study and organization of the study are "having sub topic are organized".

Second chapter is review of the literature. In chapter three, research methodology adopted for the study is discussed. The methodology chapter is further divided into research design, sampling and sample size, rationale for the selection of study, source of the data, data collection method data processing, reliability and validity and ethical consideration are include.

Chapter four particularly deals with the brief introduction of the study area. This includes geographical location, population, ethnicity, natural resources and brief introduction of Child and women Empowerment society and Naulo Ghumti Nepal.

The fifth chapter is a core chapter of the study. The chapter deals with the socio demographic and economic status of the female Sex worker. The core chapter of the study it deals with knowledge of HIV Transmission, violence face by Female Sex Worker of the study area which is supplemented by the data collection from the field. Chapter six provides brief summary of the whole study, conclusion of the study, finding and recommendation of the Female Sex Worker.

## **CHAPTER - TWO**

### **LITERATURE REVIEW**

#### **2.1 Theoretical Overview**

##### **2.1.1 Queer Theory**

Queer is by definition whatever is at odds with the normal, the legitimate, the dominant. There is nothing in particular to which it necessarily refers. It is an identity without an essence. 'Queer' then, demarcates not a positivity but a positionality vis-à-vis the normative.

Queer theorist Michael Warner attempts to provide a solid definition of a concept that typically circumvents categorical definitions: "Social reflection carried out in such a manner tends to be creative, fragmentary, and defensive, and leaves us perpetually at a disadvantage. And it is easy to be misled by the utopian claims advanced in support of particular tactics. But the range and seriousness of the problems that are continually raised by queer practice indicate how much work remains to be done. Because the logic of the sexual order is so deeply embedded by now in an indescribably wide range of social institutions, and is embedded in the most standard accounts of the world, queer struggles aim not just at toleration or equal status but at challenging those institutions and accounts. The dawning realisation that themes of homophobia and heterosexism may be read in almost any document of our culture means that we are only beginning to have an idea of how widespread those institutions and accounts are". Queer theory's main project is exploring the contesting of the categorisation of gender and sexuality; identities are not fixed – they cannot be categorised and labeled – because identities consist of many varied components and that to categorise by one characteristic is wrong. Queer theory said that there is an interval between what a subject 'does' (role-taking) and what a subject 'is' (the self). So despite its title the theory's goal is to destabilise identity categories, which are designed to identify the 'sexed subject' and place individuals within a single restrictive sexual orientation.

Queer theory is derived largely from post-structuralist theory, and deconstruction in particular. Starting in the 1970s, a range of authors brought deconstructionist critical

approaches to bear on issues of sexual identity, and especially on the construction of a normative 'straight' ideology. Queer theorists challenged the validity and consistency of heteronormative discourse, and focused to a large degree on non-heteronormative sexualities and sexual practices. Queer theory is grounded in gender and sexuality. Due to this association, a debate emerges as to whether sexual orientation is natural or essential to the person, as an essentialist believes, or if sexuality is a social construction and subject to change.

### **2.1.2 Feminism**

Feminism is a term for conceptions of the relations between men and women in society. Feminism is an avenue to question and challenge the origins of oppressive gender relations and it attempts to develop strategies that might change the relations for the better. Manathoko (1992) sees feminism as an analytic or academic perspective, a social movement, a political struggle and an ideology or belief system.

It goes further than looking at issues of justice and equality of the genders to offering criticisms of male dominated institutions (Mannathoko 1992:71). The researcher sees feminism as reviewing the stereotype roles of the female gender and accepting that except for the biological role of caring and pregnancy, women and men can play the same roles if given the opportunity.

### **Global Scenario**

Sex workers have always been at risk of sexually transmitted infections and are frequent targets of control programmes. Some of these interventions have been helpful in providing resources and health care, but many actually reinforce stigma and a culture of blaming sex workers for spreading disease. There has been considerable research on sex workers over the two decades since HIV was recognized as an STI. Sex work remains an integral part of society, increasingly accepted in many parts of the world as men and women who engage in sex work come from all strata of society, which means that the interventions to improve health and control STI must be flexible and responsive

In a study conducted among Female sex workers in Abidjan, Cote d'Ivoire to identify the determinants of entry into sex work and perspectives for leaving by Ghys P, Konan Y, Mah-bi G et al it was concluded that women enter sex work for various reasons and through different mechanisms, Entry into sex work is determined by poverty, and is often precipitated by disruption of the family (e.g. death or divorce of parents, own divorce), lack of family support, or expropriation (e.g. following divorce or death of the husband). Individual motives for entering sex work vary, but have in common of the desire to gain social autonomy through financial independence (Ghys P, Konan Y, Mah-bi G et al 1998)

A study by Hakim, Rahman et al (2002), for mapping sex workers of Bogra for HIV prevention in Bogra City to formulate directions for future STD/HIV preventing interventions found that Female sex workers are in dire straits. They sleep in parks, footpath and in cinema halls; have no toilet and place to bath. Pedestrians use to tease them; hoodlums and police snatch their money, assault physically and have sex without payment. They are suffering by diseases including STDs at large. Female sex workers are forced by clients to have sex without condom. Pimps grab larger portion of contracted amounts; traditional moneylenders lend them money at high interest.

Fang, Li et al. in a survey in china to identify the status of female sex workers showed that the female sex workers were driven into commercial sex by poverty or limited employment opportunities, lived a stressful life, were subject to sexual harassment and related violence, and engaged in a number of health-compromising behaviours including behaviours that put them at risk of HIV/STD infection and depression. Ditmore (2005) on her editorial on sex work and law enforcement research for sex work writes that most locations have laws and/or policies that adversely affect the lives of sex workers. Some limit sex workers' mobility. Even in places where sex work is not against the law, sex workers have reported difficulties with police. Sex workers around the world have been victims of police violence. Abuse of power involved sex workers being taken into police custody and in some cases detained without legal reason. Sanders describe the use of Anti-Social Behavior Orders against sex workers, and how these are used to make sex work more difficult. Consequences are serious: sex workers' health may be jeopardized because sex workers do not negotiate with and check out their clients. This leaves sex workers more vulnerable to

client violence and to difficulties negotiating condom use (Ditmore, 2005). Due to the illegitimacy of sex work in Ghana, Police harassment in sex workers' communities drives sex workers into hiding, thus discouraging them from seeking care (Khone and Kols, 1999).

In Melbourne, a study was conducted by Munasinghe, Richard, et al. (2007) to determine the proportion of sex workers and non-sex workers with sexual difficulties. Physical pleasure and emotional satisfaction with sex and overall life satisfaction among sex workers was similar to that of non-sex workers, respectively. Sex workers were more likely to experience sexual disinterest and less likely to report being distressed about their sex life. The prevalence of sexual difficulties, other than desire was similar to those of non-sex workers

Gorter et al. (1999) shows in her study conducted among 1200 female sex workers of Nicaragua, a good illustration of how health care in the developing world has failed to serve the poorest and neediest as In all contacts with female sex workers they commented that for them one of the highest benefits of the clinic programme was to be able to visit health services used by 'normal' women without being discriminated against. Furthermore they revealed that they would choose to go to the services where personnel of clinics really cared to treat them well, waiting times were short, the embarrassment of explaining to the doctor that they were sex workers was avoided.

A study conducted by FHI, Addis Ababa City Administration Health Bureau (2002) for mapping and census of female sex workers in Addis Ababa in Ethiopia revealed that most sex worker started commercial sex for economic reasons so it was observed that Poverty and sex work were linked. It was unveiled that Establishment owners exploited the establishment-based sex workers. Most of these sex workers received low salaries or were unpaid for the services they provided as waitresses during working hours while others were required to share their incomes with the establishment owners. Living conditions for the sex workers were at a subsistence level and most sex workers wanted their profession to remain unknown when they were not working whereas some sex workers wanted to continue sex work because the income was very attractive.

## South Asian Scenario

Geetanjali (2001) on her Paper presented at the conference states that the question of whether the sex trade can be defined as work can be addressed through the prism of financial access. She adds, while there is little debate about the fact that women in the sex industry experience sex-work as a survival strategy, the issue gets complicated by the human rights violations within the trade, linked to which is the question of access to the money and resources generated. She further elaborates by picking up a verbatim of an NGO activist:

*“They have a continuing link with their families. Some even send money to their former husbands regularly even if he has remarried...Most send money home regularly to their parents and brothers, they arrange the education of their brothers; marry off their sisters. Women take up prostitution for the same reason as they might take up any other livelihood option available to them...”*

Lydersen (2003) on her article on Sex Workers and Civil Rights States that all of the respondents in the New York study listed finances as their reason for getting into sex work while majority of respondents listed substance abuse as the reason for turning to sex work, and the Chicago study showed that almost all sex workers were substance abusers and almost all increased their use of alcohol and drugs while engaging in sex work, creating a vicious cycle where working to earn money to satisfy their habit only increased their habit. She elaborates about the status of violence that a Female sex workers faces in her daily life by quoting a New York Author Juhu Thakural:

*“Crimes against prostitutes usually go unpunished. There is a tacit acceptance of this form of violence, usually committed against women. The overwhelming majority of sex workers did not go to police after they experienced violent incidents. Others who attempted to report violent crimes were told by police that their complaints would not be accepted, that this is what they should expect, that they deserve all that they get.”*

MAP (monitoring the AIDS pandemic), 2001 in its Provisional Report published in October 4 2001 on The Status and Trends of HIV/AIDS/STI Epidemics in Asia and

the Pacific, states that The national HIV rates in Myanmar is as high as 40 percent in sex workers compared with an estimated national prevalence of only 2 percent. HIV infection among sex workers is in the rise in China. In Bangladesh, sex workers in brothels as well as on the streets reported rather high client turnover, by Asian standards whereas Consistent condom use is among the lowest. This was not entirely surprising, given the extremely violent conditions in which these women do their jobs. In one site, two thirds of street-based sex workers reported being raped by police or thugs in the past year, a situation not conducive to condom use (MAP, 2001).

A baseline survey of a cohort study conducted by Azim, Ezazul, Chowdhury et.al (2006) to identify Vulnerability to HIV infection among sex worker and non-sex worker female injecting drug users in Dhaka, Bangladesh revealed that Sex workers who were injecting drug users were more likely to report experience of violence than non-sex worker IDU. Sex worker IDU were more commonly jailed, the reason for incarceration was more frequently for selling sex.

A rapid assessment carried among from 4612 female regular sex the female regular sex partners of drug users/injecting drug users recruited from Bangladesh, Bhutan, India, Nepal and Sri Lanka to determine variables associated with condom use during their last sexual intercourse. Findings revealed that Condom use was negatively associated with women with a single sex partner. The Conclusion showed that Condom use is low among the female regular sex partners and is primarily associated with women exhibiting risky practices. It is important to note that condom use is four times more likely among those engaged in sex work (Kumara, Virk, et al., 2007)

The study by Amin (2004) elaborates that the vulnerability of sex workers to HIV is shaped by a number of factors including poverty and power in the sex trade, knowledge and risk perception, sexual risk, access to health services, stigma and discrimination, and violence against sex workers both by institutional actors, such as law enforcement agencies, and by clients and partners. The accompanying blame, labeling, and discrimination against women in prostitution contribute to and often exacerbate their risk of contracting HIV. Household debt, abandonment by husband and lovers, and responsibility for children are the main reasons that many of the "family girls" or "housewives" find themselves in such a situation (Mujtaba, 2003). In Maharashtra, brothel-based women work under the control of a network of brothel-

keepers, owners, financiers, brokers, and even the police—all of whom play a powerful role in shaping the sex worker's daily life and environment. For example, most sex workers share a significant proportion (up to 80 percent) of their income with brothel owners, brokers, and police (Nag, 2001). Despite these constraints, evidence indicates that many choose to remain as sex workers for reasons that include acceptance of their situation, being ostracized by mainstream society, and responsibilities towards their families (Nag 2001; Sangram 2002). Sex workers own health needs often go unmet—constrained by the economics of losing wages, inaccessible services, and socialization to prioritize children and partners' needs over their own. Violence is one of the more dire realities confronted by sex workers in India and elsewhere. A number of studies underscore how violence undermines the safety and survival of sex workers, as well as their ability to participate in HIV prevention programs and protect themselves from infection (Alexander 1998; Longo and Telles 2001; Carrington and Betts 2001; Overs, 2002)

### **In Context of Nepal**

Schroeder (2004), on her study on Nepal Basic Sexological Premises elaborates that Gender roles are very well defined in Nepal. Expectations of girls and boys and women and men are clearly outlined, from social interactions to family communication to examples in school textbooks. Generally speaking, boys are valued higher than girls. Men are usually the patriarchs of their families—although women have power within a social context. In many areas, men are expected to work outside of the home, and women are expected to tend to the home and the children. Seclusion rituals for girls and women during menstruation still exist. Menstruation is still seen as dirty. Religious, Ethnic, and Gender Factors Affecting Sexuality is important in Nepal. Women's sexual roles, as being either 'maiden, married woman or widow' are defined within the context of their relationship to men. Some sects do not consider women to be human, responding to the birth of a female child by stating, 'Nothing was born.' Adolescents and teens with less education and from more-marginalized ethnic groups are more likely to engage in early and premarital sex than those who are educated and have a high potential for achieving their life goals. Women who are unable to become pregnant are often ostracized or thought to be 'improper'. (Schroeder, 2004).

Sex work in Nepal is interlinked with the geography, history and culture of each of its regions, making the scenario diverse across the country. Responses while being within a larger strategic framework need to acknowledge these significant differences (Iyengar and Rout 2008).

### **Context of Study Site**

Pokhara, located in Kaski district of Nepal is one of the most popular destinations for tourists and trekkers. There are approximately 1200 female sex workers (Female sex worker) in Pokhara valley. However, very little is known about sexual behavior of female sex workers and their vulnerability to contraction of HIV/AIDS. Although condom use with clients was high, not everyone use condom consistently. The majority reported that they had sex in alcohol trip most of the time. Most of the informants were aware about various sexually transmitted infections and also aware that HIV & AIDS is transmitted sexually (Shrestha and Shrestha, 2006).

Sex workers constitute one of the core risk groups for HIV infection and transmission because they engage frequently in sexual acts with multiple partners. A study in Pokhara and Jhapa district (Nepal) on female sex workers revealed that 59 percent and 31 percent of the sex workers were adolescents aged between 10-19 years respectively. (WHO/ SEARO 2007)

#### **2.1.3 Female Sex Worker**

Drug Poverty, migration, conflict, trafficking of illicit drugs and prostitution are the major contributory factors to Nepal's HIV/AIDS vulnerability. A large number of Nepalese girls are trafficked to Indian cities and many young Nepalese males working in India frequent female sex workers in both countries. Up to 50 Percent of sex workers who have recently worked in Mumbai are living with HIV (Nepal's National HIV/AIDS Strategy, 2002-2006). A major challenge to controlling HIV in the country is the trafficking of Nepali girls and women into sex work in India and their return to the practice in Nepal (UNGASS Country Progress Report: Nepal, 2007). A research conducted in Kathmandu on socioeconomic profile and the prevalence of STD and HIV among 341 female commercial sex workers in showed that Most of the FSWs were from outside the valley (Bhatta, Thapa et al., 1994).

The girl children of age group of 13-20 from the marginalized communities are often driven into the sex industry inside Nepal and across the border, usually because it is the only means of generating income for their families. Women experiencing first sex at an earlier age seem vulnerable because of their limited ability to convince others. According to estimates made by the different non-governmental agencies 20 percent of the total sex workers are younger than 16 years (Poudel, 2003).

The conflict situation in the past decade with its loss of life, violence including gender-based violence, fragmentation of families, internal displacement of people and wide-scale migration has also turned women to sex work as a survival strategy. A study undertaken in two highly conflict affected region of Nepal revealed that 19 Percent of the women reported that they entered sex work as a direct consequence of the conflict (Singh et al., 2005 quoted by Iyengar and Rout, 2008). The large deployment of the army to contain the conflict, and soldiers turning to women near their barracks for sexual service coercive or consensual has been also reported in the post conflict reviews (UNHCR and UNAIDS, 2006).

UNAIDS Country Situation Analysis of Nepal states that Girls and young women continue to be particularly vulnerable to HIV/AIDS in Nepal, Recent ongoing political instability and civil unrest have further exacerbated this. As a result, there has been a significant increase in the numbers of mobile populations. As per the report published by UNFPA There has also been a rise in the numbers of young FSWs. The official estimates are around 30,000 women in sex work (UNGASS, 2008) but NGOs estimate it to be much higher. What really strikes one about the sex work scenario in Nepal is its diversity, and the differences across regions; the profile, pattern of operations and the risk and vulnerability factors vary from location to location. Sex work in Nepal has been categorized broadly into street-based and establishment-based sex work. Although there are regional variations, most sex workers are reported to be in the range of 20-25, stay in sex work for an average of 2-3 years, have been or are married, have two or three dependents and hold another job, which is often low paying. There are others who do not fit into these categories such as cross border sex workers, Badi women, who are involved in family based sex work, and mobile sex workers, but the profile is not very different (Iyengar and Rout, 2008).

## 2.2 Review of the Related Literature

Violence against sex workers is not only widespread, but ranges across the spectrum of labeling, stigma, discrimination, verbal, physical and sexual abuse, and denial of rights to those who demand justice for themselves. The police book sex workers on illegal charges because they have to fulfill their quotas of cases in a month. Then in exchange for releasing the sex workers, the police demand that sex workers give them sex for free, or for not getting them arrested or booked on some charges. It is the negative value, blame, violence, and other conditions in which they work that simultaneously traps sex workers and affects their health and well being. There is also a need for recognition that HIV is often not the primary concern of sex workers who have critical needs for information and services beyond HIV, including legal assistance, welfare of their children, and future security (Amin, 2004).

Previous research has shown that major reason behind joining the prostitution is Acute Poverty (Sonagachi, 1992). Most sex workers live and work under poor environmental conditions. Establishment owners exploit sex workers; the sex workers receive low salaries or are unpaid and in some cases share their income with establishment owners. They may lose their regular partners by proposing to use condoms, thereby jeopardizing a stable income besides emotional support. A study of the magnitude of this exploitation and the economic needs of sex workers is required urgently (Durbar Mahila Samanwaya Committee, 1992).

The major problem in today's context is FSWs are just seen as a high-risk group and target of various HIV-related interventions. Such targeted interventions only end up further alienating communities instead of empowering them to combat HIV. They are mainly portrayed and treated in public discourse and policies as vessels of moral hazard, vectors of disease, and objects of pity, their everyday lives are often beset by oppressive power relations and they tend to be socially excluded as their presence triggers moral panic in communities. Consequently, they find themselves at the receiving end of instrumentalist interventions because they are perceived as a public health threat to be monitored (Seshu, 2008).

Researcher have shown that Sixty-seven percent of the FSWs of Kathmandu have reportedly experienced some kind of violence, such as physical abuse, rape, group

sex, forced sex, and looting money and jewellery. The main reason for this is a lack of appropriate legal provision. The legal confusion and involvement of authorities in violence against sex workers has further deteriorated the situation (Kandel, 2009).

Nearly 22.8 Percent of total Female sex workers in Nepal have not reported the use of a condom and remain very vulnerable and exposed to STI including HIV infection (World Bank in South Asia, 2008). Due to their highly marginalized status, Female sex workers in Nepal have limited access to information about reproductive health and safe sex practices. Cultural, social, and economic constraints bar them from negotiating condom use with their clients or obtaining legal protection and medical services.

IBBS Survey 2006 revealed that illiteracy level among the FSWs was 36 percent and more than 50 percent of the sex workers had experienced sex by the time they were 15 –19 years old. It further added that around 31 percent of the FSWs had been subjected to forceful sex in the past year while some of them reported to be verbally/physically assaulted. Though the knowledge of HIV/AIDS among the sex workers in Pokhara was high, consistent condom use with husbands/male friends was lowest at 7 percent and as 75 percent sex workers had consumed alcohol during the past one month (FHI, 2006). One of the risky factors to be noted is majority reported that they had sex in alcohol trip most of the time (Shrestha and Shrestha, 2006).

Although some FSWs can negotiate and convince clients for condom use, they ignore this with 'regular', 'clean' or 'handsome' clients, so this practice should be taken as a major problem in the control of HIV epidemic whereas some FSWs feel that they have no choice but to have sex without condoms when offered more money by clients (Nepal, Creer, Gurung, 2004).

FSWs in the 16 Terai highway districts reported to have experienced violence or abuse from police and clients and this continual harassment and abuse from several areas of their work make them rarely feel secure so many of them feel the need for a secure and organized place that they can entertain clients and work from that would guarantee their personal safety and protection from police harassment (IBBS, 2007).

As of 2007, only 40 percent of young men and 36 percent of young women had accurate HIV knowledge on transmission and prevention (UNGASS, 2008). Girls and young women continue to be particularly vulnerable to HIV/AIDS in Nepal. Recent political instability and civil unrest have further exacerbated this. As a result, there has been a significant increase in the numbers of mobile populations. There has also been a rise in the numbers of young FSWs (UNGASS, 2006). Indeed, they constitute the biggest vulnerable group to HIV infection (Nepal's National HIV/AIDS Strategy, 2002).

A study conducted among FSWs in Abidjan, Cote d'Ivoire to identify the determinants of entry into sex work and perspectives for leaving concluded those women enter sex work for various reasons and through different mechanisms, entry into sex work is determined by poverty, and is often precipitated by disruption of the family (e.g. death or divorce of parents, own divorce), lack of family support, or expropriation (e.g. following divorce or death of the husband). Individual motives for entering sex work vary, but have in common of the desire to gain social autonomy through financial independence (Ghys, P., Konan Y., Mah-bi G et al. 1998).

Zion, Zudakov et al. (2004) goes beyond the traditional dimensions in their studies. As per them, commercial sex work has many medical and psychiatric implications. It has been shown that sex workers are not always drug addicts or mentally ill; many of them see it as a legitimate form of work that is dictated by their needs, their social, personal and familial background. Commercial sex workers frequently suffer from emotional and somatic health problems that are often neglected.

Gorter et al. (1999) shows in her study conducted among 1200 FSWs of Nicaragua, a good illustration of how health care in the developing world has failed to serve the poorest and neediest as In all contacts with FSWs they commented that for them one of the highest benefits of the clinic programme was to be able to visit health services used by 'normal' women without being discriminated against. Furthermore they revealed that they would choose to go to the services where personnel of clinics really cared to treat them well, waiting times were short, the embarrassment of explaining to the doctor that they were sex workers was avoided. A study by FHI (2002) for mapping and census of FSWs in Addis Ababa, Ethiopia revealed that most sex worker started commercial sex for economic reasons so it was observed that poverty and sex

work were linked. It was unveiled that establishment owners exploited the establishment-based sex workers. Most of these sex workers received low salaries or were unpaid for the services they provided as waitresses during working hours while others were required to share their incomes with the establishment owners. Living conditions for the sex workers were at a subsistence level and most sex workers wanted their profession to remain unknown when they were not working whereas some sex workers wanted to continue sex work because the income was very attractive.

Geetanjali (2001) states that the question of whether the sex trade can be defined as work can be addressed through the prism of financial access. She adds, while there is little debate about the fact that women in the sex industry experience sex-work as a survival strategy, the issue gets complicated by the human rights violations within the trade, linked to which is the question of access to the money and resources generated. She further elaborates by picking up a verbatim of an NGO activist: “They have a continuing link with their families. Some even send money to their former husbands regularly even if he has remarried...Most send money home regularly to their parents and brothers, they arrange the education of their brothers; marry off their sisters. Women take up prostitution for the same reason as they might take up any other livelihood option available to them...” Lydersen (2003) on her article on Sex Workers and Civil Rights States that all of the respondents in the New York study listed finances as their reason for getting into sex work while majority of respondents listed substance abuse as the reason for turning to sex work, and the Chicago study showed that almost all sex workers were substance abusers and almost all increased their use of alcohol and drugs while engaging in sex work, creating a vicious cycle where working to earn money to satisfy their habit only increased their habit. She elaborates about the status of violence that a Female sex workers faces in her daily life by quoting a New York Author Juhu Thakural: “Crimes against prostitutes usually go unpunished. There is a tacit acceptance of this form of violence, usually committed against women. The overwhelming majority of sex workers did not go to police after they experienced violent incidents. Others who attempted to report violent crimes were told by police that their complaints would not be accepted, that this is what they should expect, that they deserve all that they get.”

MAP (2001) in its Provisional Report on the Status and Trends of HIV/AIDS/STI Epidemics in Asia and the Pacific, states that the national HIV rates in Myanmar is as high as 40 percent in sex workers compared with an estimated national prevalence of only 2 percent. HIV infection among sex workers is in the rise in China. In Bangladesh, sex workers in brothels as well as on the streets reported rather high client turnover, by Asian standards whereas consistent condom use is among the lowest. This was not entirely surprising, given the extremely violent conditions in which these women do their jobs. In one site, two thirds of street-based sex workers reported being raped by police or thugs in the past year, a situation not conducive to condom use. A baseline survey of a cohort study conducted by Azim, Ezazul, Chowdhury et al. (2006) to identify Vulnerability to HIV infection among sex worker and non-sex worker female injecting drug users in Dhaka, Bangladesh revealed that FSWs who were injecting drug users were more likely to report experience of violence than non-sex worker IDU. Sex worker IDU were more commonly jailed, the reason for incarceration was more frequently for selling sex.

A Study conducted in, Calcutta, India with 450 sex-workers identified following major reasons in hierarchical order behind the reason for joining the prostitution namely Acute Poverty at first rank, Family Dispute at second rank, Misguided into this profession at third, willingly at fourth, Tradition at fifth and Kidnapped at sixth (Sonagachi, 1992). Gutierrez, Dandona, et al. (2004) in an abstract paper submitted on

Sex workers own health needs often go unmet-constrained by the economics of losing wages, inaccessible services, and socialization to prioritize children and partners' needs over their own. Violence is one of the more dire realities confronted by sex workers in India and elsewhere. A number of studies underscore how violence undermines the safety and survival of sex workers, as well as their ability to participate in HIV prevention programs and protect themselves from infection (Alexander 1998; Longo and Telles, 2001; Carrington and Betts, 2001, Overs, 2002).

Results of a Cross-sectional Survey of 812 FSWs in Andhra Pradesh showed the level of literacy to be very low at 21 percent. Nearly 30 percent of the women reported that they have accepted client offer of more money for sex without a condom, while virtually all women had heard of HIV/AIDS and STIs, knowledge related to sexual health was still, in many cases, quite poor. Majority were the sole providers for their

families as 94 percent reported doing sex work because of limited alternatives for income (Project Parivartan, 2007).

### **2.3 Commercial Sex in Nepal**

Nepal is made up of diverse ethnic communities whose lives have been shaped by geography, culture and socio economic opportunities. These regional variances have influenced the profile of sex workers. They have led to varying levels of risk, vulnerability and impact, resulting in scenarios, which need a range of responses (Iyengar and Rout, 2008). Schroeder (2004) on her study on Nepal Basic Sexological Premises elaborates that Gender roles are very well defined in Nepal. Expectations of girls and boys and women and men are clearly outlined, from social interactions to family communication to examples in school textbooks. Men are usually the patriarchs of their families. Religious, ethnic and gender factors affecting sexuality is important in Nepal. Women's sexual roles, as being either "maiden, married woman or widow" are defined within the context of their relationship to men. Some sects do not consider women to be human, responding to the birth of a female child by stating, 'Nothing was born.' Adolescents and teens with less education and from more-marginalized ethnic groups are more likely to engage in early and premarital sex than those who are educated and have a high potential for achieving their life goals. Women who are unable to become pregnant are often ostracized or thought to be 'improper'. Sex work in Nepal is interlinked with the geography, history and culture of each of its regions, making the scenario diverse across the country. Responses while being within a larger strategic framework need to acknowledge these significant differences (Iyengar and Rout, 2008).

### **2.4 Commercial Sex in Pokhara**

Pokhara, one of the most popular destinations for tourists and trekkers, is residence for approximately 300 FSWs (Shrestha and Shrestha, 2006). Growing urbanization in Pokhara is accumulating of population. Due to this reasons sex work is gradually growing most of the small restaurants and big hotels of Pokhara are selling sex in concealed form. However, very little is known about sexual behavior of FSWs and their vulnerability to contraction of HIV/AIDS. Although condom use with clients

was high, not everyone use condom consistently. The majority reported that they had sex in alcohol trip most of the time.

Most of the informants were aware about various STIs and also aware that HIV and AIDS is transmitted sexually (Shrestha & Shrestha, 2006). The recent IBBS Mapping in 2006 had estimated the size of FSWs to be around 600 in Pokhara. A local NGO CWES, working in HIV prevention for FSWs in Pokhara with support from FHI reached a total of 1000 FSWs in between June 2007 to July 2009 in Pokhara (CWES, 2009). This shows the rapidly increasing trend of sex work in Pokhara in between the duration of 2006 to 2009. A study in Pokhara revealed that 59 percent of the FSWs were adolescents aged 10-19 and the ages of the sex workers ranged from 14-45 years (WHO/SEARO, 2007).

Third round of IBBS Integrated Bio behavioral survey (NCASC) National Center For AIDS and STD Control, survey in 2008 conducted cross sectional study among 200 FSWs in Pokhara valley shows HIV prevalence of 3 percent. The median age of FSWs was 21 years and nearly forty percent were less than 20 years of age. Illiteracy among FSW was 41 percent and 65 percent were at least once married. All of the participants had heard about HIV. Median age at first sexual intercourse was 16 years and mean duration of FSWs involved in sex work was 22 months. Whether legal or illegal, prostitution is viewed as a deviant occupation and those who work as sex workers are severely stigmatized. Amongst the impacts associated with sex work are health costs, including increased vulnerability to rape and physical violence. There is the risk of exploitation from unscrupulous parlor owners, pimps, or police and other men intent on asserting their right to a 'freebie' (Erbe, 1984; Jordan, 1991). There is also the long-term emotional impact of years of distancing and dissociation in order to limit the intrusion of clients into the woman's personal, private sphere (Erbe, 1984; Jordan, 1991). For many, the nature of sex work promotes substance abuse and the development of dissociative mechanisms designed to assist sex workers' survival within the industry.

## 2.5 Conceptual Framework of the Study

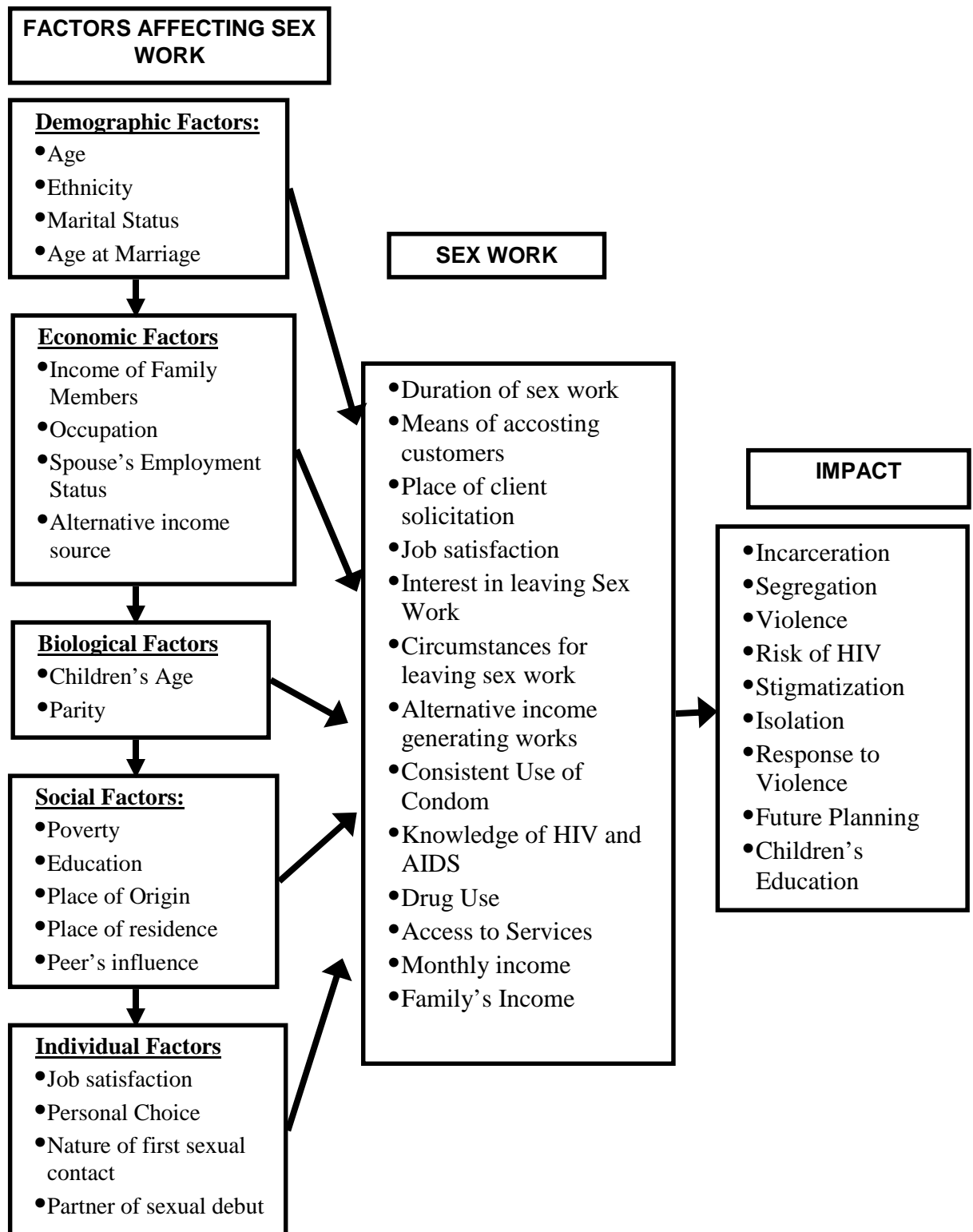


Figure 1.1 Conceptual Frame Work

Many factors influence the ways sex workers are viewed by society at this time. This includes legislation, dominant morality (which is influenced by dominant religious traditions), the HIV&AIDS epidemic and feminist theory. Sex work continues to divide feminist thinking, with the main divisions related to whether sex work is defined as degrading and undertaken by women who have no other options, or whether sex work is considered to be a reasoned and legitimate work 'choice'.

Jeffreys (1997 quoted by Seib 2007) asserted the idea of 'choice' in prostitution is meaningless as prostitution is essentially about men. In this view, the sex industry falls squarely within larger systems of intimidation and oppression of women through sex involving harassment, battering, rape and the commodification of women's bodies (LeMoncheck, 1997 quoted by Seib 2007). Radical feminist theorists view sex workers as sexually subordinate to men, and believe that sex work reduces women to a commodity and is equivalent to violence against women. Within this discourse, the notion of prostitution as an occupational 'choice' is abjectly rejected and although sex workers are not blamed for this personally, the institutions associated with prostitution are condemned. Violence is seen as 'intrinsic' and 'endemic' and distinctions between forced and voluntary sex work are thought to be mythical (Weitzer, 2005, 2005 quoted by Seib 2007).

Conversely, social feminists have argued that sex work allows women who would otherwise work in poorly paid occupations to make large sums of money. The lack of equal employment opportunities and a discriminatory economic climate are factors in the choosing sex work. The liberal view of sex work is pragmatic and is sensitive to the determination of women who choose to work in the sex industry (Scott, 2005 quoted by Seib 2007).

Pro-sex-work feminists have raised concerns about people's difficulty accepting the view that some women stay in the sex industry because they enjoy the work. These feminist thinkers have sought to demystify and reconstruct prostitution as sex work (Jagger, 1997 quoted by Seib 2007). In so doing, pro-sex-work feminists have identified sex work as a form of paid labour, and therefore the occupational health and safety of sex workers can be defended. The conceptualization of sex as work allows individuals and groups to support sex workers on the grounds of occupational or industrial determinism.

(Jagger 1997, quoted by Seib 2007) provides a balanced view of individual choice to 'work' suggesting many sex workers neither freely enter nor are enslaved into sex work. That is to say, women's decisions to enter the sex industry are associated with varying levels of agency. This view of sex work moves away from the dichotomy of victim or agent to a position in which women are neither free agents nor indentured servants. In this vein, choice is seen along a continuum.

Sexual roles in the society are strongly influenced by religion and have defined sex work as a form of 'deviant' sexuality. Indeed, sex workers have been implicated in the breakdown of the family unit, communicable infection transmission and escalating crime rates (Rekart, 2005 quoted by Seib 2007). The discourse of 'sex worker' as 'deviant' has successfully differentiated sex workers from other women in society and has made them the target of discrimination. The categorization of women (predominantly) as 'prostitute' enables 'othering' and creates a label that may permeate both their professional and personal lives (Hawkes and Scott, 2005 quoted by Seib 2007). This is evidenced by reports of sex workers being victimised by clients or members of the general public or denied access to services (Church, Henderson, Barnard, and Hart, 2001; Potterat et al., 2004; Vanwesenbeeck, 2001 quoted by Seib 2007)

Sex work shares a number of characteristics with other occupations which increase the risk of workplace violence. Sex work often involves the emotional or physical care of others, interacting with the public, working alone, working evenings, going into clients' homes, exchanging money, refusing to provide a service and contact with individuals under the influence of drugs or alcohol (LeBlanc and Kelloway, 2002 quoted by Seib 2007).

The illegal context in which street-based sex work occurs may increase women's vulnerability and reduce the likelihood of reporting violence to the police. Church et al. (2001 quoted by Seib 2007) found that only one-third of sex workers who experienced violence from clients had reported the incident to the police, with street-based sex workers even less likely to make a report. Underreporting violence may be due to workers' reluctance to pursue legal action against the clients for fear of the legal repercussions for themselves working illegally or not being taken seriously within the justice system.

Conversely, in places where sex work is illegal, workers are more likely to report limited access to health services and few long term financial and occupational options (Rekart, 2005 quoted by Seib 2007). Illegal sex workers may become victims of crime and are at high risk of exploitation (Brents and Hausbeck, 2005 quoted by Seib 2007). For sex workers who work illegally, there is the risk of being charged with prostitution offences, there is an increased vulnerability to violence (Hatty, 1989; Hamilton, 1995; Ditmore and Saunders, 1998; Wolffers and van Beelen, 2003 quoted by Seib 2007).

Sex work, Similar to other occupations, incurs a potential risk of exposure to biological hazards, including HIV, viral hepatitis and other viral and bacterial STIs (Woodward et al., 2004 quoted by Seib 2007). However, the risk of occupational exposure to STIs among sex workers has received considerable more attention and resource than other occupations, particularly following the identification of HIV in the 1980s (Jones, 2000 quoted by Seib 2007).

Pheterson (1990 quoted by Seib 2007) states that when considering the occupational health and potential workplace hazards faced by sex workers, the primary focus of empirical literature continues to be on the associations between sex work and sexually transmitted infections (STIs). Pheterson (1990 quoted by Seib 2007) suggested that there is a need to move away from historical concerns about sex workers as potential reservoirs of infection towards a discussion of public health issues that are of contemporary concern.

There are many occupational health and safety consideration relevant to sex workers, many of which are shared with a number of other occupations. For example, studies have suggested that female sex workers may experience workplace violence with estimates ranging from 65 to 93 percent (Milman, 1980; Miller and Schwartz, 1995 quoted by Seib 2007).

Dévina Azis refers in her research article that Prostitution should be understood in the context of women's rights: prostitution is a discrimination and violence against women, and it has consequences not only on prostitutes but on women in general. She suggests, men and women's relationship in prostitution cannot be considered as a mere sexual encounter between two persons because as long as there will be

prostitutes, men and women's relations will always be labeled by the idea that a man can buy a woman and gender equality will never be fulfilled. She stresses that Women are victims of a capitalistic and patriarchal society that force them into prostitution; the latter violates women's dignity, human rights and bodily integrity (Azis 2006).

Some have argued that public health policy and service should extend to all members of the community irrespective of their circumstances. Thus, rights should be independent of the legality of sex work or moral perceptions surrounding the commodification of sex (Seib 2007).

A study conducted among female street sex workers in Moscow, Russia from October 2002 through March 2003 summarizes that Sex workers have often been viewed as a bridge population for HIV infection, as they have the potential to have spread HIV to the general population through unprotected sex and the programs provided to them often focus on trying to limit or eliminate proximate risk among these women either by attempting to assist them in leaving sex work or by promoting consistent use of condoms during sexual contact (SIECUS Report, 2005)

Qualitative Research among 678 commercial sex workers conducted by Maria J. Wawer et al to examine the social origins and working conditions of selected female commercial sex workers in Thailand through the techniques of focus discussions and in-depth interviews suggested that women were systematically recruited into prostitution from villages and their work enabled them to comply with traditional family support roles. Women revealed a more complex pattern of entry with intra family strife, divorce, efforts to find other employment. The majority of CSW maintained financial ties to the home by sending income to parents, siblings and other relatives. The lives of CSWs were found to be tightly controlled by brothel owners and managers, while few were with husband or partner. Appearance and a trusting relationship were the common reasons given for not using condoms (Wawer M, Podhisita C, et al. 1999).

Sabrina Lee on her research in Uganda identified that Women are exposed to high levels of discrimination, sexual violence, exploitation and harassment. Young women are particularly vulnerable to non-consensual coercive sex, which compounds their vulnerability to infection. There is much evidence from across Africa that many poor, socially and economically disadvantaged women have become involved in 'survival

sex' in which sex becomes a currency to maintain household welfare and security. This was particularly the case where partners are economic migrants. Young women of low-socio economic status in South Africa, who are increasingly likely to be employed informally, are particularly vulnerable to non-consensual and coerced sex, which make them susceptible to STDs and increases the likelihood of HIV infection (lee July 2004).

In an abstract paper submitted on International Conference on AIDS 2004 by Gutierrez JP, Dandona L, and others It is indicated that the Condom use is related to economic fragility among Indian female sex workers. Sex workers who are single are less likely to use a condom with their last client and in addition data revealed that economic fragility is correlated with lower condom use by sex workers (Gutierrez JP, Dandona L, et al., 2004)

The research was conducted in order to know various enforcing factors for commercial sex. Various factors interplay their role with each other. Leading normal life women to convert herself as a Sex Worker, Demographic Factors (Age, Ethnicity, Marital status, Age at Marriage), Economic Factors (Income of Family Members, Occupation, spouse's Employment Status, Alternative income source), Biological Factors (Children's Age, Parity), Social Factors (Poverty, Education, Place of Origin, Place of residence, Peer's influence) and individual factors (Job satisfaction, Personal Choice, Nature of first sexual contact, partner of sexual debut). Interplay of these factors either reinforces a woman to enter in sexual work. Within the dimensions of sex work, women are detoured by multiple forms of issues which determine their level of vulnerability and well being (physical, mental, and social). Following framework shows the inter-relationship between various enforcing factors. Such multiple factors affecting the sex work are : Duration of sex work, Means of accosting customers, Place of client solicitation, job satisfaction, interest in leaving sex work, circumstances for leaving sex work, alternative income generating works, consistent use of condom, knowledge of HIV and AIDS, drug use, access to services, monthly income and family's income. A mix of these factors impacts a life a sex worker in various way, they may face consequences like incarceration, segregation, violence, risk of HIV, stigmatization, isolation. The status as a sex worker, changes her response to violence, and the income and social status earned as a sex worker has significant effect on her future planning and children's education.

## **CHAPTER - THREE**

### **RESEARCH METHODOLOGY**

#### **3.1 Rationale of the Selection of the Study Area**

This research is important, as it will help in understanding the interplaying factors for the entry in the sexual profession, it will help government and stakeholders in formulating plans and policies in the days ahead. This research, in a contrast difference from other researches looks female sex work as a separate profession that helps in the sustenance of women along with other dependent members of her family. Government has till now targeted FSWS as a vector and victim of HIV, which is in itself very stigmatizing. In one hand, government is allowing various INGO and NGO to run projects and programs on FSWS and in the other hand, it is considering sex work as illegitimate so this problem needs an immediate attention from all sectors especially in the terms of legislation.

Much of the available research has focused on the frequency and types of commercial and non-commercial sex, consistency of condom use, and factors related to use or non use of male condoms. For interventions to be successful, however, it is imperative to gain an understanding of the broad range of factors that affect individual decision making. Behaviors targeted for prevention must be understood as combinations of factors within and outside of the sex worker's control and are as diverse as: working conditions; how transactions are made; impact of laws, regulations, and enforcement practices; access to health and social services; and religious or cultural impediments to prevention. In the case of sex work, it is particularly important to examine the continuum of risk, from the time a woman or girl decides to sell sex, to her reaction to situations that put her at risk, and the resulting harms to health (SIECUS Report, 2005).

Pokhara lies on an important old trading route between Tibet and India. In the 17<sup>th</sup> century it was part of the influential Kingdom of Kaski which again was one of the Chaubise Rajaya (24 Kingdoms of Nepal) ruled by a branch of the Shah Dynasty. Many of the mountains around Pokhara still have medieval ruins from this time. In 1752 the King of Kaski invited Newars from Bhaktapur to Pokhara to promote trade.

Their heritage can still be seen in the architecture along the streets in Bhimshen Tol (Old Pokhara). Hindus, again, brought their culture and customs from Kathmandu and settled in the whole Pokhara valley. In 1786 Prithvi Narayan Shah added Kaski into his kingdom. It had by then become an important trading place on the routes from Kathmandu to Jumla and from India to Tibet (Pokhara Sub Municipality).

Pokhara is one of the tourism hubs, in Nepal, therefore it is essential to know the status of sex workers therefore Pokhara has been selected potential site. Reproductive age female involve in sex business was a noted problem in Pokhara city. Solving the drug problem the Ministry of Health, Ministry of women and child NCASC and UNODC/UN women/UNFPA conduct various surveys and launch different problem now. However most of the studies have shown that some sex workers wanted to continue sex work due to attractive income. Most sex workers reported that initially they appreciated the sex work since it provided a good income; however, gradually over time, most began to dislike the work because it exposed them to different health problems and unfavorable social conditions, including the violent actions of clients and house owners, Above all was the curiosity of the researcher, why is most of study targeted to other issue but the issue related to FSWs is rare case it may be helpful to launch out prevention program for female sex worker in Pokhara valley.

### **3.2 Research Area**

Pokhara Sub-metropolitan city is a tourism city of Nepal. In this city there are various facilities, so people come out leave from every part of countries for various purposes. In context of gender empowerment measure, it occupies the sixth position. The study has been carried out in Pokhara. It was difficult to collect information from the respondents because well rapport couldn't develop. CWES and Naulo Ghumti, Sath Sath Project site was used as research area in order to get support as FSW was familiar with the officials of this organization.

### **3.3 Research Design**

The exploratory research design is used to understand various aspects of the problem or issues of the study, while descriptive research design is used to describe the factor associated for drug abuse, causes and effect of drug abuse. No specific hypothesis has

been formulated and no specific variable has been taken as determinant. Descriptive and explanatory research design is used for this research.

### **3.4 Nature and Source of Data**

The data were both qualitative and quantitative. Primary data of both type were collected by employing research technique i.e. interview schedule, observation, focused group discussion, key informants (peer educator) interview. Interview schedule was the source of generating more qualitative data whereas researcher's DIC and outreach spot observation and key informant interview generate more qualitative data. For making more effective, secondary data are collected from various sources (i.e. annual report, monthly plan, client flow chat, logbook, etc).

### **3.5 Universe and Sampling**

#### **3.5.1 Universe of the study**

All female sex worker of Pokhara valleys like Bagulang Buspark, Lakeside, Chipledhunga, Old bus park, Bagar etc. were being the universe. There are around 1200 female sex workers in Pokhara. All of them are taken as universe of the study in Pokhara (CWES, 2012).

#### **3.5.2 Sample Population**

Non probability accidental sampling technique was used. Out of all 1200 female sex workers only 250 female sex worker who were involved in sex business or generating money from exchange of sexual behavior attending in Sath Sath Program of CWES, Pokhara -8 Phirkee, during the period of research were selected as the sample population of the study.

### **3.6 Primary Data Collection Tools and Techniques**

During the research period primary data were collected directly from the study area. Both structure and non structured interview schedule were used to collect the information with respondents. Another source of primary data was direct observation of outreach spot, drop in center by the researcher. Interview with peer educator,

community mobilizer and outreach worker, program coordinator, councilor, staff nurse and some case studies were other sources of generating primary data.

### **3.7 Observation**

Observation has three components, namely impression, attention and perception and it is one of the important methods of data collection. For this study direct participant observation was used to collect relevant data. Participant observation was employed after developing well rapport with the respondents to collect primary data directly from the field. Personal observation is crucial for the immediate study of the events. In this study personal observation were made in the field with certain behaviors and different aspect of squatter's life i.e. physical fitness, dress up health status, behavioral condition, location and social relationship was observed.

### **3.8 Interview Schedule**

Interview is fundamentally a process of social interaction and it is one of the primary methods of data collection. This is the flexible and loosely structured format with the questions. In this study interview method was espoused for collecting first hand data. Interview schedule was prepared based on the objective of the research of the study generating both closed as well open-ended question and developed by using the guideline while preparing. Both structured and unstructured interviews were adopted. Interview schedule was checked and verified by the adviser.

Set of questions for interviews were prepared to obtain qualitative data on personal history of the respondent that deals with their socio economic status education and reasons behind sex worker.

### **3.9 Case Study**

Case studies make the previous history and present status of participants clear. Some of the female sex workers who didn't feel any hesitation to share their own practices were selected for the case study.

### **3.10 Key Informants Interview**

The persons who were working in the field of sex workers during the period of research were selected as key informants. Interview schedule have been made to collect information. It was easy and more effective to collect information with them as FSWs were familiar with them because they have regular contact with the officials for counseling. For making the research more effective female staffs of Naulo Ghumti Nepal, Female Harm Reduction Program, who work directly for sex workers were selected as key informants.

### **3.11 Secondary Data Collection**

To make the research more effective secondary data was collected basically by means of reviewing related literature and previous research reports. Report, article and publications published regarding female sex workers such as female sex worker annual report of CWES, Report of UNFPA, Central Bureau of Statistics (CBS), Nepal, IBBES and MOH/NCASC, MOW were the major potential sources of secondary data.

### **3.12 Pretest of Survey and Questionnaire**

In order to make the questions of interview schedule a pre-test (Pilot Survey) was carried out with some of the FSWs having similar characteristics attending in Nepal Red Cross Society Kaski Chapter Pokhara and necessary correction was made according to the response. The collected data were checked by the investigator for errors and omission on the same day and ensure the reliability of data.

It was also helpful on incorporating new question or removing unwanted or functionless questions. Furthermore it also helps in measuring the level of question and respondents.

### **3.13 Reliability and Validity**

To make the research effective and to make the information valid and reliable world wide research tools and methods have been employed. The information's which have

been collected by different tools have been presented and analyzed in their natural form without modification and change. Collected information's are valid and reliable because.

- ) Interview schedule was developed by using the guideline of preparing Interview schedule.
- ) Interview schedule was checked and verified by the adviser.
- ) Research tool was pre-test and the respondents having similar characteristics attending in Nepal Red cross society Kaski chapter, Pokhara and necessary corrections were made according to the response.
- ) The collected data were checked by the investigator to ensure the reliability of data.
- ) Collected data were checked for errors and omission on the same day.
- ) The data were collected by researcher herself expect some cases (the peer Educator, outreach worker/Community Mobilizer of CWES/Naulo Ghumti Nepal).

### **3.14 Ethical Consideration**

The research topic is sensitive and quite difficult to collect information from the respondents. Special attention has been given to make the research much more ethical. Following steps were followed to make the research more ethical

- ) Formal permission was taken from the authorized organization i.e. CWES and Naulo Ghumti Nepal.
- ) Objectives of the study were explained to the respondents.
- ) Informed verbal consent was taken from each respondent.
- ) All the collected data were kept confidential and anonymous. In some cases
- ) Photographs were taken after permission of hotel and restaurant owner and FSW herself.
- ) Respondents were not influenced by any means to participate in the study.
- ) The special relationship between the respondents and the researcher was not exploited in anyway.

## **CHAPTER – FOUR**

### **INTRODUCTION OF STUDY AREA**

Child Women Empowerment Society and Naulo Ghumti Nepal's Sath Sath Project site Newroad-8, Pokhara, Sub-metropolitan city was the study area for this research purpose. The study was carried out in Pokhara.

#### **4.1 Topography of Pokhara**

Pokhara is a remarkable place of natural beauty. Situated at an altitude of 827m from the sea level and 200km west of Kathmandu valley, the city is known as a center of adventure. The enchanting city with a population of around 95,000 has several beautiful lakes and offers stunning panoramic views of Himalayan peaks. The serenity of lakes and the magnificence of the Himalayas rising behind them create an ambience of peace and magic. So today the city has not only become the starting point for most popular trekking and rafting destinations but also a place to relax and enjoy the beauty of nature. The climate is sub-tropical but due to the elevation the temperatures are moderate: the summer temperatures average between 25–35 °C, in winter around 5–15°C. In the south the city borders on Phewa lake (4.4 km<sup>2</sup> at an elevation of about 800 m above sea level), in the north at an elevation of around 1,000 m the outskirts of the city touch the base of the Annapurna mountain range. From the southern fringes of the city 3 eight-thousanders (Dhaulagiri, Annapurna, Manaslu) and, in the middle of the Annapurna range, the Machapuchare (Nepali language: Machhapuchhare: 'Fishtail') with close to 7,000 m can be seen. This mountain dominates the northern horizon of the city and its name derives from its twin peaks, not visible from the south.

#### **4.2 Economic Condition of Pokhara**

Pokhara is part of a once vibrant trade route extending between India and Tibet. In these days, mule trains could be seen camped on the outskirts of the town, bringing goods to trade from remote regions of the Himalaya. As Pokhara is the famous tourist destination many institutions have been established to serve tourists. Large numbers

of people are involving in tourism sector. People are involving in business and some are joined in Indian and British army and foreign employment.

### **4.3 Ethnic Composition**

There is ethnic diversity in Pokhara. Originally Pokhara was largely inhabited by Brahmins, Chhetris and Thakuris (the major villages were located in Parsyang, Malepatan, Pardi and Harichowk areas of modern Pokhara) and the Majhi community near the Fewa Lake. When the Newars of Bhaktapur migrated to Pokhara, they settled near main business locations such as Bindhyabasini temple, Nalakomukh and Bhairab Tole. Newars also brought many cultural dances like, "BHAIRAB DANCE, TAYA MACHA and LAKHE DANCE" which add cultural diversity of the Pokhara. After the British recruitment camp was shifted here Magar and Gurung communities settled here in large numbers coming down from the hills. At present Gurung (Tamu), Khas (Brahmins, Chhetri, Thakuri and Dalits) form the dominant community of Pokhara and the nearby hill areas in terms of population. Sizeable population of Newari community is also present within the Pokhara metropolitan area; however, in adjoining areas of Pokhara there are no Newar settlements. A small Muslim community is located on eastern fringes of Pokhara generally called as Miya Patan.

### **4.4 Tourist Destinations**

In no other place do mountains rise so quickly. In this area, within 30 km, the elevation rises from 1,000 m to over 7,500 m. The Dhaulagiri, Annapurna and Manaslu ranges, each with peaks over 8,000 m, can be seen from Pokhara and there is a lake named Phewa Tal (Tal means lake in the Nepali language), three caves (Mahendra, Bat and Gupteswor) and an impressive fall (Patale Chhango or Devi's Fall) where the water from the Phewa Lake thunders into a hole and disappears. Due to this sharp rise in altitude the area of Pokhara has one of the highest precipitation rates of the country (over 4,000 mm/year). Even within the city there is a noticeable difference in the amount of rain between the south of the city by the lake and the north at the foot of the mountains.

## **4.5 Naulo Ghumti Nepal**

Naulo Ghumti was started as a program by the International Nepal Fellowship (INF) in 1995. In the beginning, a day care center and outreach work for Harm Reduction was established. The programs have been gradually extended into Counseling and Treatment Centre with day-care and residential facilities, a community based Drug Prevention Initiative and Vocational Training to ex-drug users. Training and Awareness activities to prevent drug and HIV/AIDS in the community have been intensively implemented at community level.

Naulo Ghumti started getting involved in local, regional and national initiatives as the country becomes increasingly aware of the issues surrounding drug use and HIV/AIDS. These include forging relationships with the other NGOs working in this sector, District Administration Office, the District Police Office, and Drug Control Law Enforcement Unit and the District Public Health Office, District Development Committee amongst others.

Naulo Ghumti was the first program working in the field of drug and HIV related counseling, treatment and rehabilitation in Pokhara. It serves the clients from all parts of Nepal as well as from India, Bhutan and Pakistan. It continues to be the only fully comprehensive prevention of drug use, rehabilitation and relapse prevention program in Pokhara. By 2003, Naulo Ghumti was sufficiently established to be handed over to the management of an executive committee. It became an independent NGO in January 2003, but continues to have close links with INF. It is registered in Kaski District and affiliated with SWC and also approved from Drug Control Program of Home Ministry.

Naulo Ghumti is renowned as a reputable organization, throughout the western region, and all over Nepal. Its name is mentioned in AHRN, Directory of UNDCP/UNODC and in drug related forum. Naulo Ghumti is also the member of NANGAN, NGO Federation, NHRN and Western Region Alliance for HIV/AIDS.

Coupled to the above, Naulo Ghumti has excellent credibility among the national and international community. Currently NGN is working with the partnership of ICCO, KIA Netherlands, UNODC, FHI 360/USAID, VSO-N, European Union, WHO,

MDM and UNODC. However, we are still interested to work with other more committed development partners from all parts of the world who share with us, the same vision and mission and are committed to Drug rehabilitation, treatment and HIV/AIDS Prevention programs.

#### **4.6 Child and Women Empowerment Society Nepal**

Child and women empowerment society Nepal is a nongovernmental organization established in Bs 2055. This organization was originated by some women motivated with fair mind for social development with an intention of promoting the education, health, economic growth and to ensure the social rights of marginalized women and children in the society. The origination is resisted in district administration office, Kaski (Reg. No. 584/055) and affiliated to social welfare council (Affiliation no 8370/055). The organization till this date is working actively in affiliation with NGO federation kaski district, gender network Kaski civil society for peace, education network and food security Kaski etc.

## CHAPTER- FIVE

### INTERPLAYING FACTORS TO SEXWORK

#### 5.1 Distribution of the Respondents by Age

Age structure is crucial demographic data in examining population characteristics. These demographic variables have direct implications for several issues related to socio economic aspects of population. Such as trend of population, increase labor force, female population in the reproductive age etc. Therefore, age is an important factor for female sex worker to know by how long they fall to Sex business by time frame.

**Table 5.1: Distribution of the Respondents by Age**

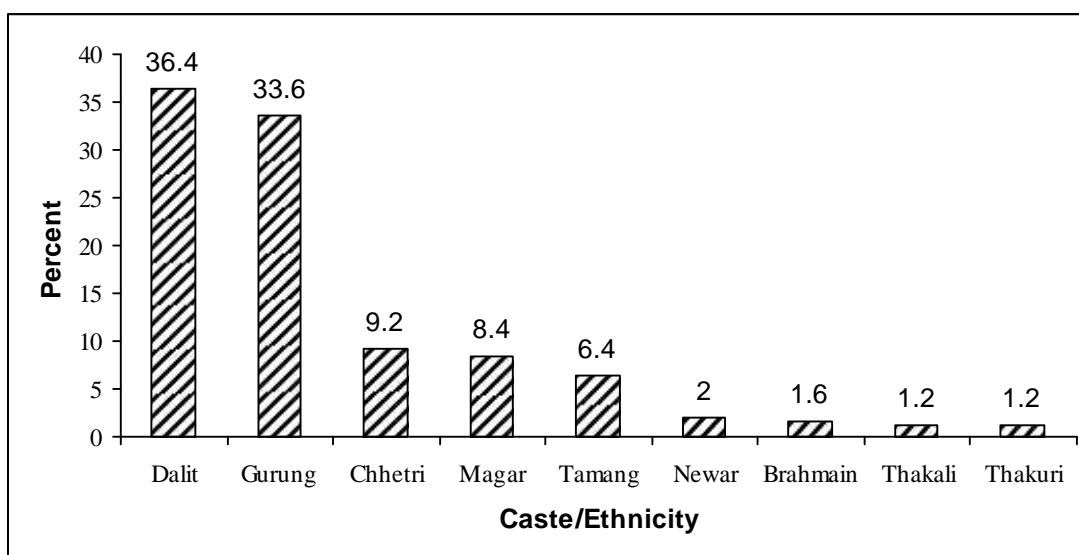
<b>Age Group</b>	<b>Number of respondent (n=250)</b>	<b>Percent</b>
15-20 yrs	131	52.4
20-25 yrs	83	33.2
25-30 yrs	25	10
30-35 yrs	8	3.2
35-40 yrs	3	1.2
<b>Total</b>	<b>250</b>	<b>100</b>

Source: Field Survey, 2012.

Table 5.1 shows that majority of the respondents (52.4 percent) were in age group of 15-19 years which is adolescent and 33.2 percent were 20-25 years are in second position this is the an economically active age group. It was found that 10 percent of the respondent from the 25-30 age groups. Only (3.2%) of the respondents were in the age group of 30-35 years and 1.2 percent from 35-40 years, it demonstrated that early adolescent age group female were came in to sex workers. It was common among young adult. 52.4 percent of females began sexual intercourse at early age i.e. 15 to 19 years.

## Caste and Ethnicity of the Respondents

Caste and ethnicity is the identification of a person. This makes one group distinct from other. Most of the social codes are established according to culture of caste/ethnicity group. Caste represents any of the heredity such as Hindu social cast Brahmin, Chhetri, Gurung and Newar ethnic group.



**Figure 5.1: Distribution of the Respondents by Caste/Ethnicity**

Table 5.2 shows that majority of sex workers in Pokhara are from Dalit Community which was 36.4 percent followed by Gurung is 33.6 percent. Chhetri, Magar and Tamang were found 9.2 percent, 8.4 percent 6.4 respectively. Brahman, Thakali Newar and Thakuri are found very low involvement in sex work. It indicates that Janajati or Indigenous groups, which may be attributed to the relative cultural openness of female or economic deprivation in these caste groups. It signifies as scenario that caste in itself is not an enforcing factor in entry to sex work but since relative proportion of Dalit in Sex work is seen very high in context of National Population, this issue needs further study.

## Place of Birth

Origin refers the birth place of respondent on the basis of nationality they have geographical/physical setting of human beings. It shows the people's setting

arrangement, density of population and making the service plan. Address supports to find out those female Sex workers may come from other neighboring districts.

TAMPEP (2009) on its study on Women and Migration states that, the lack of social and economic opportunities in economically deprived countries has remained the primary cause of migration and the global trend of poverty amongst women has directly affected the "Feminization of Migration". Rural to Urban Migration is an increasing trend in Nepal where people migrate for better opportunities.

**Table 5.2: Distribution of the Respondents by Districts**

Districts	Number of Respondent	Percent
Kaski	87	34.8
Syangja	37	14.8
Gorkha	25	10
Chitwan	23	9.2
Mygdi	21	8.4
Baglung	16	6.4
Parbat	14	5.6
Morang	11	4.4
Lamjung	9	3.6
Mustang	7	2.8
<b>Total</b>	<b>250</b>	<b>100</b>

Source: Field Survey, 2012.

Table 5.2 illustrates that of 34.8 percent of the respondents were from Kaski district and significant portions were from the surrounding districts like Syangja, Gorkha, Tanahu, Lamjung, Parvat and Banglung. However some of respondent were from Chitwan 9.2 percent and 4.4 percent from Morang. It shows the influx of female of surrounding district in Pokhara for economic opportunities. These findings could be related with the 'laws of migration' formulated by E. G. Ravenstein (1885) which states that "Most migration is over a short distance", as it can be seen that the influx from Western Development Region is Comparatively high which is genuine of Nepalese scenario.

**Table 5.3: Distribution of the Respondents by Current Locality of Involvement in Sexual Work**

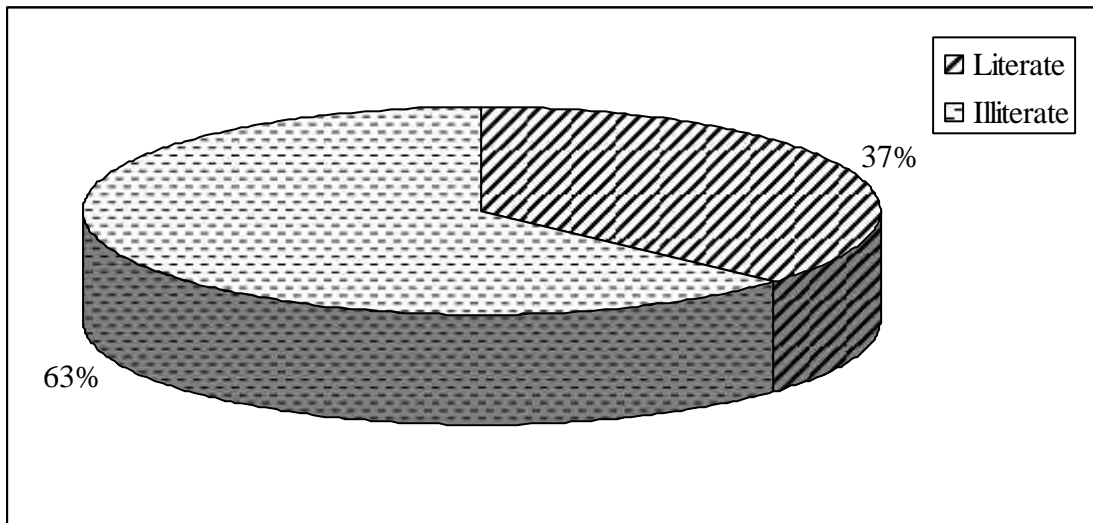
<b>Locality</b>	<b>Frequency</b>	<b>Percentage</b>
Baglung Buspark	155	62
lakeside	52	20.8
Bagar	20	8
Srijana Chowk	10	4
Old Buspark	9	3.6
Chipledhunga	4	1.6
<b>Total</b>	<b>250</b>	<b>100</b>

Source: Field Survey, 2012.

Table 5.3 indicate that current location of sex workers is found at 62 percent from Banglung Bus park which is known as new bus park also followed by lakeside area is 20.8 percent. Other location is nominally noted Bagar, Old Bus Park, Shrijana Chowk, and Chipledhunga. This shows that the choice location of Female Sex Worker is Banglung Bus Park and lakeside may highly located hotel and restaurant arena.

### **Educational Status**

Education in common use is merely the delivery of knowledge, skills and information from teachers to students it is inadequate to capture what is really important about being and becoming educated. Education makes the person able to perceive accurately, think clearly and act effectively to achieve self-selected goals and aspirations. Education is a process of cognitive cartography, mapping your experiences and finding a person's regular work or profession; job or principal activity. ICPD Program of Action (1994) illustrates that "Education is one of the most important means of empowering women with the knowledge, skills and self-confidence necessary to participate fully in the development process." Education has been often associated with holistic empowerment of female.



**Figure 5.2: Educational Status of the Respondents**

Figure 5.2 shows that majorities. 63 percent of Female Sex Workers were literate and 37 percent are illiterate. It indicate that both of female literate or illiterate are involve in sex business as a sex worker, however it is treated as illegal work by Nepalese laws.

**Table 5.4 : Distribution of Respondent by Level of Education**

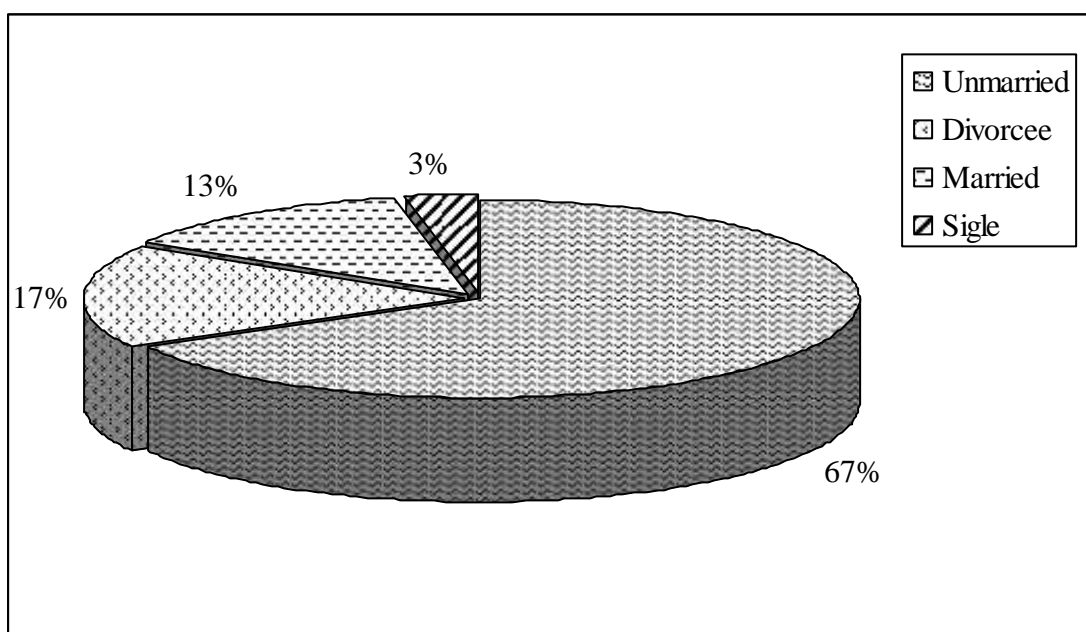
Level	Respondent	Percentage
School	122	77.71
S.L.C.	12	7.64
+2/Intermediate	18	11.46
Bachelor	5	3.18
<b>Total</b>	<b>157</b>	<b>100</b>

Source: Field Survey, 2012.

From table 5.4 majority of the respondents (77.71%) had received School level of Education and followed by Intermediate level of education (11.46%), (7.64%) had got secondary level education and only 3.18 percent had got higher/Graduate level education. This shows that Sex work was most prevalent among youths or young women.

## Marital Status

The marital status is the civil status of each individual in relation to the marriage laws or customs of the country. It shows that the person is marital status of living situation. Marriage is a social union or legal contract between people called spouses that create kinships. Marriage is interpersonal relationships, usually intimate and sexual those are acknowledged. Such a union is often formalized via a wedding ceremony. Many cultures limit marriage to two persons of the opposite sex, but some allow forms of polygamous marriage, and some recognize same-sex marriage. In some cultures, marriage is recommended or compulsory before pursuing any sexual activity (Field Survey, 2012).

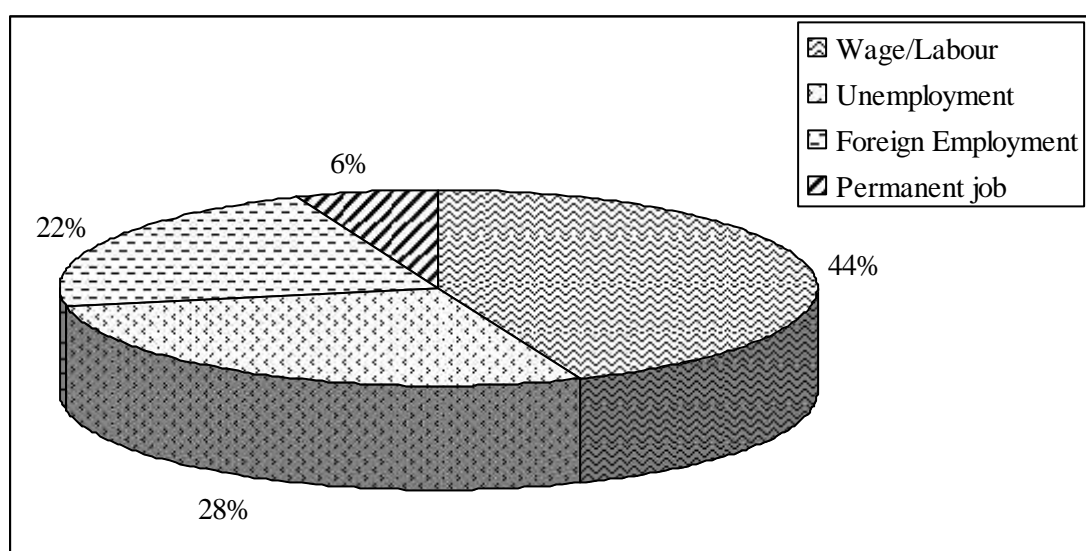


**Figure 5.3: Distribution of Respondent by Marital Status**

In figure 5.3 majority of Female sex worker (67%) were unmarried in Pokhara, around one fifth (17%) were divorced and only (13%) were married and 3(3%) are single separated. This shows that Sexual Intercourse is mostly common before marriage. Which implies that a significant number of unmarried girls get into this profession. However in comparison to this general population, the number of divorcees is very high among FSWs. Marxist Nicky Hart argues that the increasing divorce rate can be seen as a product of conflict between the changing economic system and its social and ideological superstructures (Field Survey, 2012).

## Occupation

Occupation is an activity on which time is spent by a person to get some benefits for their life sustainability. It is based on personal interest, educational and family background and the activities done by the person. Sex workers choose to remain clandestine and prefer mentioning other jobs as their major source of income which is rightly suggested by Frederick (2009) by saying that a Few Nepali prostitutes work openly. In all urban centers, there are unnoticeable brothels on quiet streets and a growing number of dance restaurants, whose 'waitresses' provide supplementary services. Some work on back booths of tea shops or hotel restaurants, and others hide their profession behind a shop counter or vegetable stall.



**Figure 5.4: Distributions of the Respondents by Occupation**

Figure 5.4 illustrates that 43.75 percent respondents stated themselves wage or labor they work on hotel or restaurant, where they work as Waiter and Stewardess, which represents the major site for the operation of sex works as hotel and restaurant. Similarly 28.13 percent respondents informed that they are unemployed, which shows this group is totally dependent on income from sex work where as other respondents are taking the sex work as a secondary source of income. Likewise 21.87 percent are foreign employer they may seasonally involve in sex work and 6.25 percent have permanent job holder they are partially involve in sex work, these groups are very secrete for sex work.

## Children Parity

Possession of Children may increase susceptibility of FSWs towards unsafe sex. However , lower educational attainments and having children increase .

**Table 5.5: Distribution of the Respondents Having Children**

No. of Children	No of Respondents	Percentage
1	16	50.00
2	9	28.13
3	6	18.75
4	1	3.12
<b>Total</b>	<b>32</b>	<b>100</b>

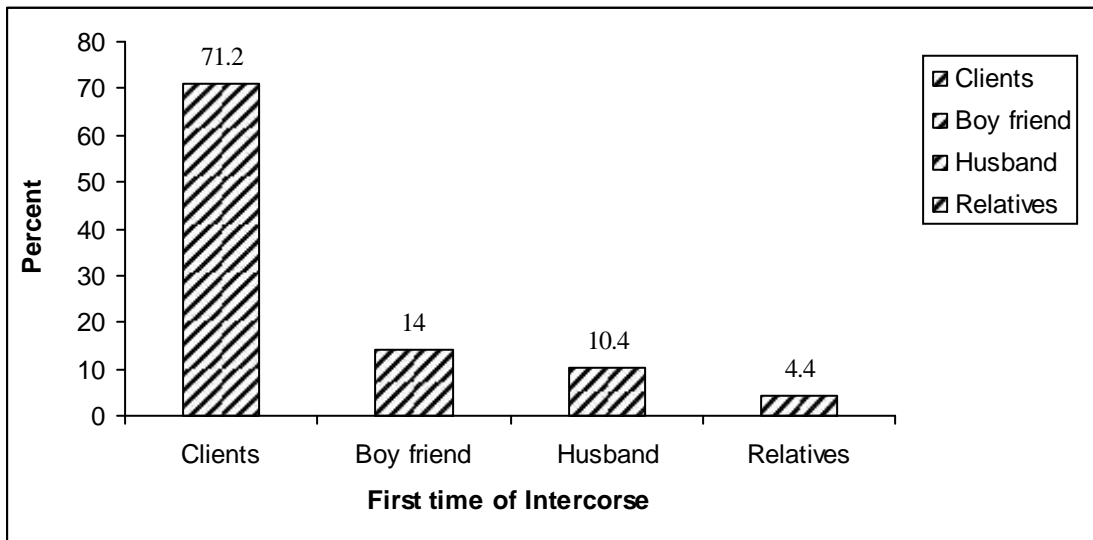
Source: Field Survey, 2012.

Table 5.5 shows that out of the total respondents only 32 were married and have Children, out of 32-50 percent respondents have number of 1 child followed by 28.13 percent having 2 children. 18.75 percent and 3.12 percent of respondents having 3 and 4 children's were respectively.

## 5.2 Sexual Intercourse

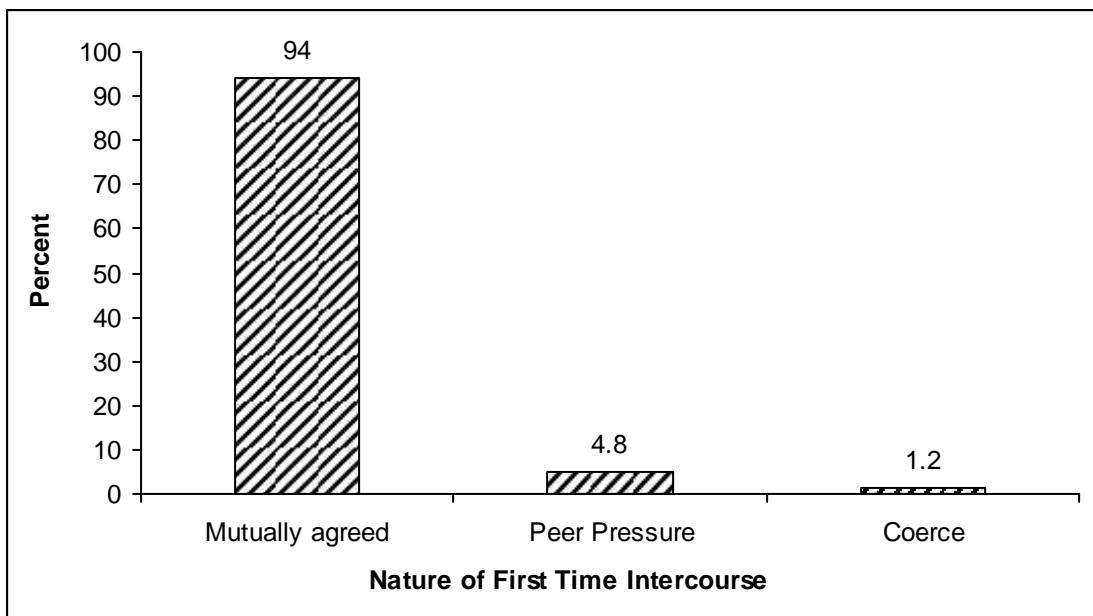
### Sexual Intercourse

The journey to adulthood often includes experimentation with sexual behaviors. Manning et al. (2000) cited in Grello, Deborah, Welsh et al. (2006) illustrates that first intercourse experiences occurred in the context of a romance for the majority of young people. However, large numbers transitioned to sex with a partner who was 'a friend' or with someone they 'had just met'.



**Figure 5.5: Distribution of the Respondents with First Time Intercourse**

Figure 5.5 shows that the 71.2 percent of first sex encountered by a sex worker with the clients and followed by 14 percent have established with boyfriends only 10.4 percent with husband and first sexual intercourse with relatives was 4.4 percent only. General our understanding that sex with husband or boyfriend/lover is acceptable and consensual is proof.

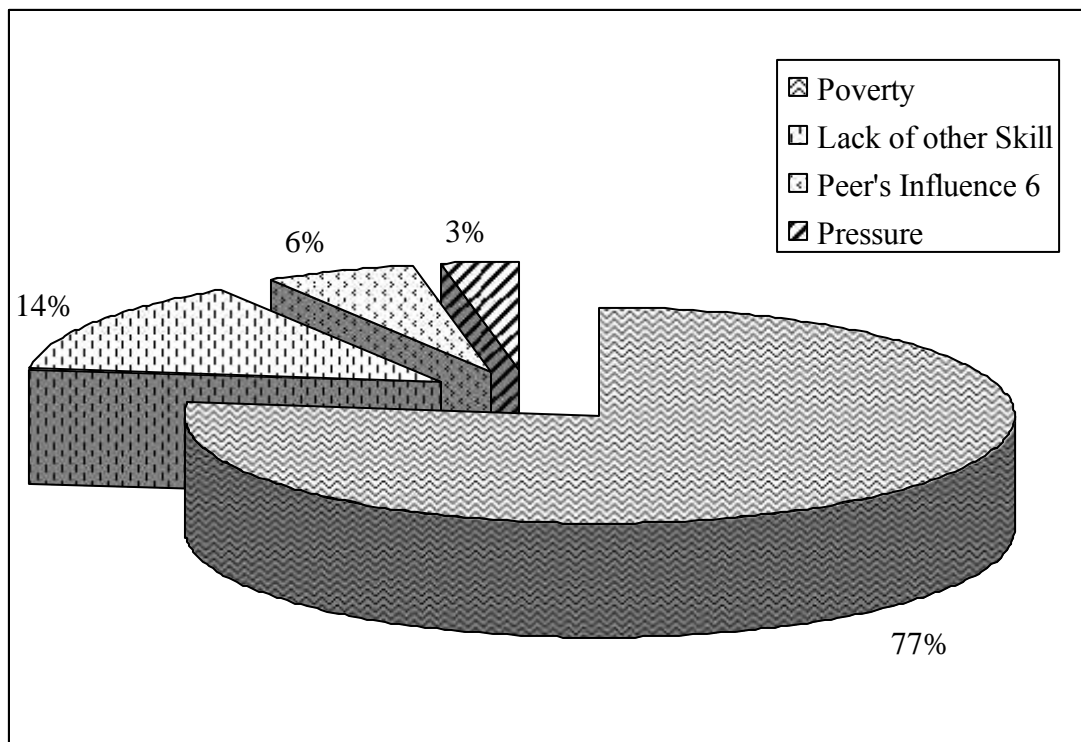


**Figure 5.6: Distribution of the Respondents Nature of first time Intercourse**

Figure 5.6 shows that, Majority of the clients 94 percent establish their first time sexual intercourse by mutually agreed 4.8 percent established through peer pressure and only 1.2 percent establish by coerce of by force.

### 5.3 Causes of Involving Sexual Work

UNAIDS (2002) study suggests that fundamental conditions that contribute to entry to sex work are given as Poverty and limited economic opportunities, Gender inequalities, sexual exploitation, including trafficking, which includes mobility, and finally cultural belief and practices. Similarly, Kumar (2000) suggests that one of the major reasons for women entering into and continuing in sex work is poverty.



**Figure 5.7: Respondents by Reason for Choosing Sex Business/work**

Figure 5.7 suggests reasons behind choosing the sex work; it indicates that 77 percent female sex workers responded of choosing this work due to poverty followed by lack of other skills were 14 percent, 6 percent due to peer's pressure or influence and only 3 percent due to coercion or pressure.

**Table 5.6: Distribution of Respondents by Marital Status and Reasons Behind Choosing Sex Work**

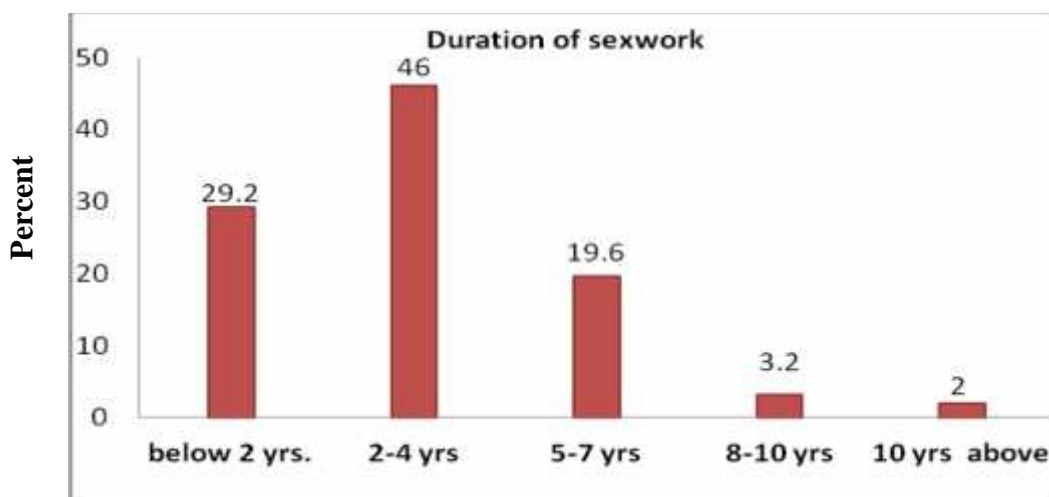
Marital Status	Lack of other Skills		Pressure		Poverty		Peer's Pressure		Total
	Number	%	Number	%	Number	%	Number	%	
Unmarried	22	8.8	4	1.6	131	52.4	10	4	167
Married	3	1.2	2	0.8	24	9.6	3	1.2	32
Divorced	7	2.8	1	0.4	32	12.8	2	0.8	42
Separated/ Single	2	0.8	1	0.4	5	2	1	0.4	9
<b>Total</b>	<b>34</b>	<b>13.6</b>	<b>8</b>	<b>3.2</b>	<b>192</b>	<b>76.8</b>	<b>16</b>	<b>6.4</b>	<b>250</b>

Source: Field Survey, 2012.

Table 5.6 illustrates the cross tabulated relation between the reasons behind selecting the sex work and marital status of the respondents. If we analyze the reasons behind choosing sex group based on marital status we can observe that majority of unmarried sex workers are influenced by poverty is major point to enter sex work (52.4%), which is followed by lack of other skills at 8.8 percent, whereas the majority of divorced 2.8 percent. Figures show a clear demarcation that all women are influenced by poverty, Lack of other skill and peer's pressure other pressure or by force were very low profile for each marital status women in to sex work.

### **Duration of Sex Work**

The entry in sex work is supported by various direct and confounding factors, so is the retention in the sex work. The duration in sex works shows the retention of Female sex workers within the given condition.



**Figure 5.8: Respondents by Duration of Involvement as Sexual Worker**

Figure 5.8 shows that 46 percent of the respondents are practicing sex work from 2-4 years, followed by 29.2 percent were less than 2 year, similarly, 19.6 percent women are in this profession from 5-7 year, 3.2 percent are in this profession from 8-10 year, and only 2 percent are working since more than 10 years.

#### **5.4 Place of Solicitation of Client/Customer**

Place of solicitation could be an important factor in defining the place of operation of FSW. A Study by Blanchard, Khan, and Bokhari (2008) in Pakistan Divides Location of solicitation in three groups' namely Public places (refers to places where FSWs encounter and/or solicit clients and includes open areas such as along streets, at intersections and in public venues such as bus and train stations ), Home or Kothikhana and Brothel which illustrates that Overall, 57.5 percent of FSWs worked out of home or Kothikhana settings, with just over 40 percent working from public places and the remaining 2 Percent working out of brothels.

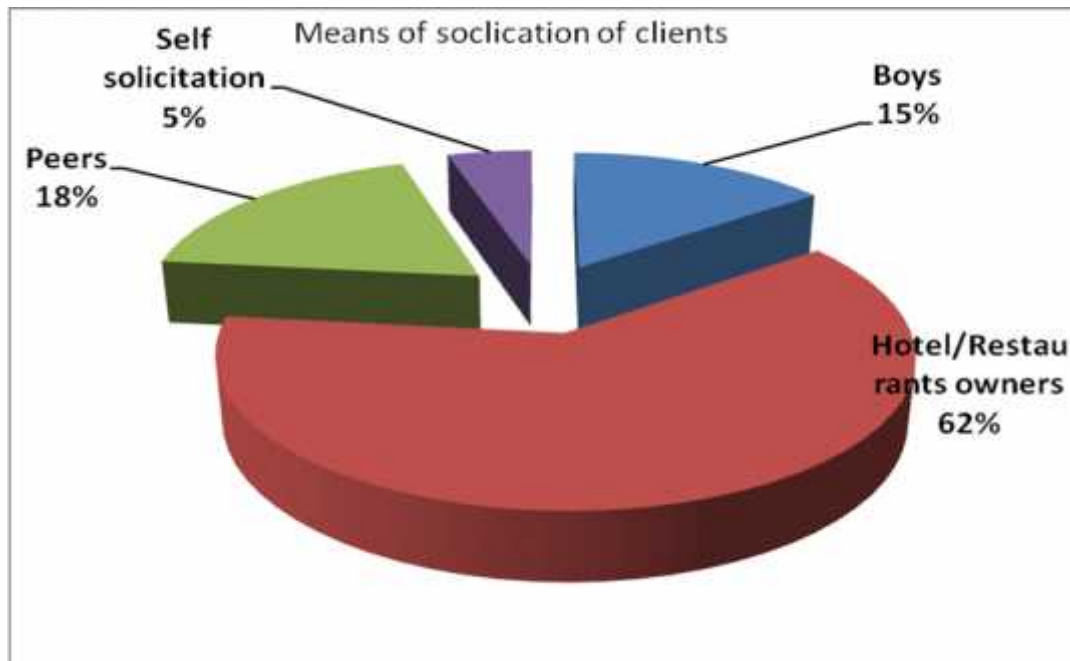
**Table 5.7: Respondents by Place of Solicitation of Client/Customer**

Place of Solicit	Number of Respondent	Percent
Restaurants	107	42.8
Hotels	91	36.4
Home/Dwellings	42	16.8
Streets/Park	10	4.0
<b>Total</b>	<b>250</b>	<b>100%</b>

Table 5.7 shows that 42.8 percent solicited from Restaurant followed by 36.4 from Hotel, 16.8 percent women solicited from home/dwelling and only 4 percent from street/park with their clients for sex work.

### 5.5 Means of Solicitation of Client/Customer

Female Sex Workers use various means to solicit client. The choice of means may have direct impact on their earnings and safety too. Pimps and Hotel Owner claim certain portion of the income made by the sex workers.



**Figure 5.9: Respondents by Means of Solicitation of Client/Customer**

Figure 5.9 illustrates the Means of client solicitation which means the medium through which the FSWs accost the client. 62 percent women search through hotel and restaurant owners, 18 percent from peers through boys 15 percent and only 5 percent self.

### Level of Satisfaction among Female Sex Workers

For many occupations, much has been learned about the effects of work and the workplace on job satisfaction and employment-related stress. However, there is an absence of research exploring the determinants of job satisfaction among sex workers (Seib, 2007).

**Table 5.8: Distribution of Respondents by Level of Satisfaction**

Level of Satisfaction	Number of Respondent	Percent
Agree/satisfied	162	64.8
Fully agree/satisfied	65	26.0
Disagree	18	7.2
Fully disagree/disappointed	5	2.0
<b>Total</b>	<b>250</b>	<b>100%</b>

Source: Field Survey, 2012.

Table 5.8 shows that the level of satisfaction from this profession has divided into four variables which can be described in such a way that, Majority of the clients 64.8 percent responded that they are satisfied with their work. Interestingly 26 percent responded were fully satisfied with their work. 7.2 percent responded were disagree with their work where as 2 percent responded were fully disappointed with their profession.

**Table 5.9: Causes of Satisfaction**

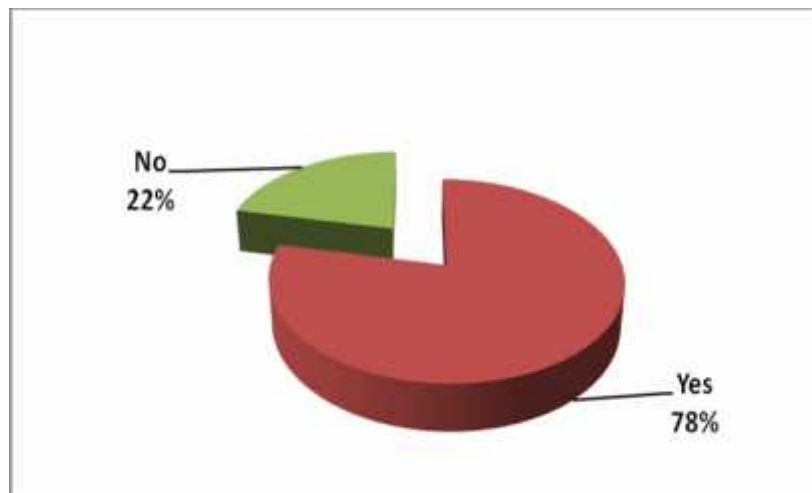
Reason for Satisfaction	No of Respondent	Percentage
Means of earning	167	73.57
Enjoyment	45	19.82
Time pass	15	6.61
<b>Total</b>	<b>227</b>	<b>227</b>

Source: Field Survey, 2012.

Table 5.9 shows that among those satisfied with their job 73.57 percent responded that this job were means of earning to fulfilling their needs, 19.82 percent responded that they get enjoyment from this work and 6.61 were involve in this sex work for time pass only or just getting relax.

### **Willing to leave this Job/sex Work**

Leaving sex work can be difficult and compelling task for a sex work. Manopaiboon et al. (2003) suggests that factors facilitating or inhibiting women's ability to leave sex work are still poorly characterized, and little is known about women's lives after they leave the profession.



**Figure 5.10: Reasons of Leaving the Job**

Figure 5.10 indicate that 78 percent of the respondents wanted to leave their profession where as only 22 percent didn't want to leave the profession. It shoes that most of women involve in this profession not by interest but their coercion.

**Table 5.10: Reasons of Leaving the Job**

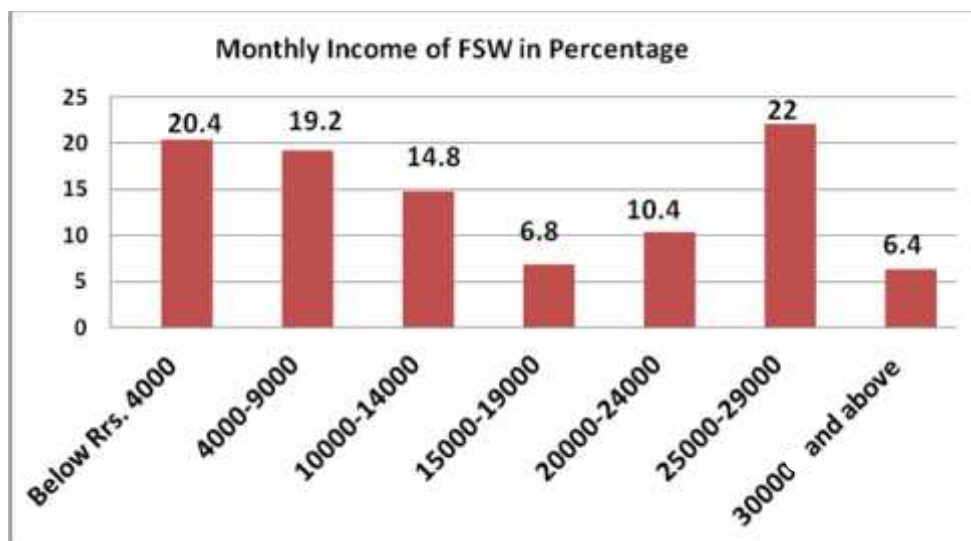
Reasons	Number of Respondent	Percent
To marry	95	48.47
To be respectful	41	20.91
To be social	35	17.86
To be healthy	25	12.76
<b>Total</b>	<b>196</b>	<b>100</b>

Source: Field Survey, 2012.

Among the instated FSW who were willing to leave this job/sex work Table 5.10 shows that majority of the respondent 48.47 percent want to discontinue this job after marriage followed by 20.91 percent to be a respect full life or doing another job, 17.86 percent want to be a social or doing social work and 12.76 percent of respondent facing health related problem from this job

## 5.6 Respondents by Income

Poverty has persisted in Nepal because of low economic growth, inadequate social and economic infrastructure, relatively high population growth, low access to non-agricultural income, and deep-rooted cultural and historical practices which include discrimination on the basis of sex, caste etc (HDR, 2001).



**Figure 5.11: Distribution of Respondents by Monthly Income**

Figure 5.11 shows that the earnings made by FSWs are quite fascinating. There is a wide gap between the highest and lowest level of income. A total of 20.4 percent earn below Rs 4000 per month where as 22 percent earns Rs 25000-29000 per month and 6.4 percent of FSW's income were more then 30000. 19.2 percent of FSW's were earn 4000-9000 Rs per month 14.8 percent earn Rs 10000-14000 and 6.8 percent were 15000-19000 a month.

**Table 5.11: Distribution of Respondents by Monthly Income Source  
Other then Sex Work**

Source of Income	Number of respondent	Percent
Broker	46	50.5
Wage Labor	20	22.0
Job	15	16.5
Business	10	11.0
<b>Total</b>	<b>91</b>	<b>100%</b>

Source: Field Survey, 2012.

Table 5.11 shows that out of 250 respondents only 91of respondent have another source of income rather than sex work. Among them 50.5 percent were broker followed by labor 22 percent. 16.5 percent have job for alternative source and only 11 percent were business.

**Table 5.12: Sources of Income of Other Members of the Family**

Sources	No of Respondent	Percentage
Yes	172	68.8
No	78	31.2
<b>Total</b>	<b>250</b>	<b>100</b>

Source: Field Survey, 2012

Table 5.12 shows that majority respondents 68.8 percent family member also have income source only 31.2 percent of respondent fully depend their sex work for earning.

## 5.7 Safer Sex Practices

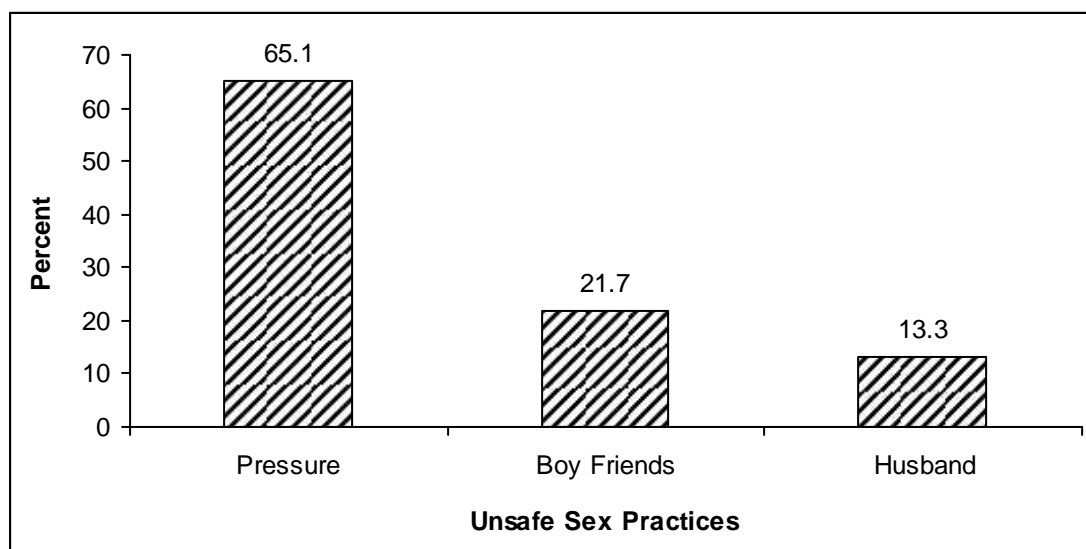
In general, sex workers have relatively high numbers of sexual partners. This in itself does not necessarily increase their likelihood of becoming infected with HIV-if they use condoms consistently and correctly then they will probably be protected no matter how many people they have sex with. The reality, however, is that sex workers and their clients do not always use condoms (UNAIDS, 2009).

**Table 5.13 Respondent by Condition of Practicing Safe Sex**

Condition	No of Respondents	Percentage
Yes	167	66.8
No	83	33.2
<b>Total</b>	<b>250</b>	<b>100</b>

Source: Field Survey, 2012.

Table 5.13 shows that majority of respondent 66.8 percent having safe sex practices used male condom and only 33.2 percent of FSW have unsafe sex practice. By analyzing this scenario 33.2 percent of FSW are high risk on Sexual transmission infection and HIV infection.



**Figure 5.12: No of Respondents Reason for Unsafe Sex Practices**

Figure 5.12 shows that majority (n=83) of FSWs have had sex without the use of Condoms. Out of total 83 respondents who told that they ever had sex without condom, 65.1 percent reported to have without condom sex with client's pressure, 13.3 percent with their own husband and 13.3 percent sex with their boyfriend. Among the unsafe sex behavior's FSW they sex with client it indicate that either they have no knowledge of HIV or they did not oppose to sex with condom their clients. In other case Sex workers are simply powerless to negotiate safer sex, even if they try to do so. Clients may refuse to pay for sex if they have to use a condom, and use intimidation or violence to enforce unprotected sex. They may also offer more money for unprotected sex– a proposal that can be hard to refuse if the sex worker in question is in desperate need of an income (Field survey 2012).

### **Knowledge on HIV and STI**

Knowledge on HIV, measures to prevent own self and practice of safer sex are the essential factors needed to prevent HIV transmission. IBBS survey in 2008 in Pokhara identified that 39 percent of FSWs have Knowledge on 'ABC' measures [A (Abstinence) B (Being faithful) C (Consistent use of condom)] of HIV prevention where as only 14 percent had Comprehensive knowledge on HIV 'DEF' measures [D (Healthy looking person can be infected with HIV), E (A person cannot get the HIV virus from mosquito bite), F (One cannot get HIV by sharing a meal with an HIV infected person) in addition to ABC.

**Table 5.14: Respondents Knowledge about HIV/AIDS**

<b>Knowledge about HIV /AIDS</b>	<b>No of Respondent</b>	<b>Percentage</b>
Fully Known	183	73.2
Known	27	10.8
Totally Unknown	25	10.0
Little Knowledge	15	6.0
<b>Total</b>	<b>250</b>	<b>100</b>

Source: Field Survey, 2012.

Table 5.14 shows that the majority of respondent 73.2 percent were fully aware about HIV/AIDS followed by 10.8 percent were known about HIV. 10 percent of Female

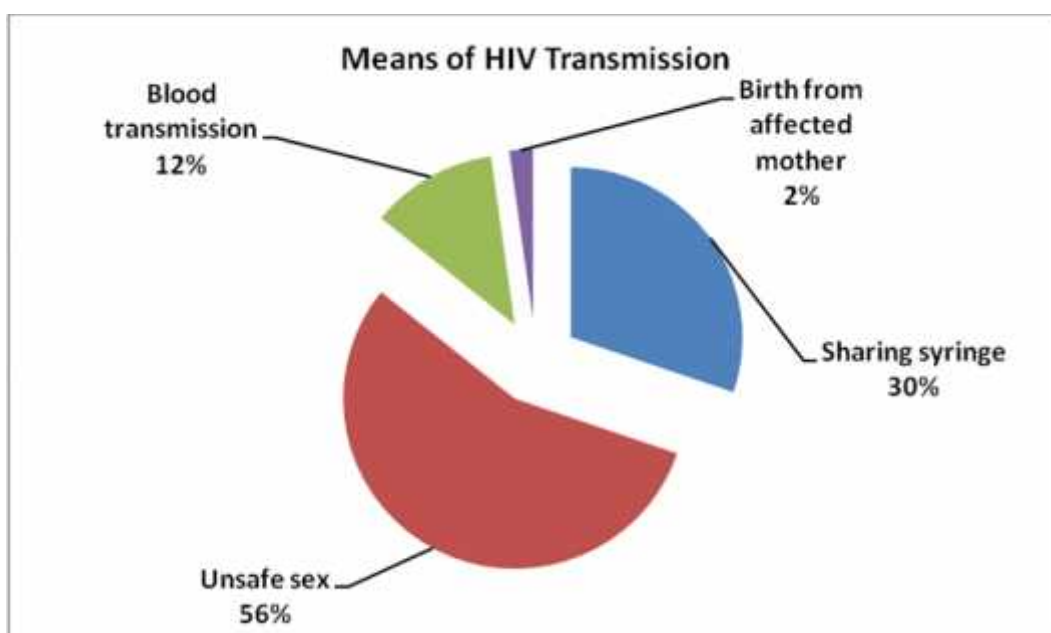
sex worker have no knowledge about VIV and AIDs 6 percent respondent get little knowledge. It indicates most of FSW are out of risk but some are high risk on HIV.

**Table 5.15: Sources of Knowledge about HIV/AIDS**

Sources of Knowledge	Frequency	Percentage
NGO's	107	47.55
Friends	41	18.22
Radio/TV	31	13.78
Friends	26	11.55
Doctor	9	4.00
Newspaper	5	2.22
Poster	6	2.68
<b>Total</b>	<b>225</b>	<b>100</b>

Source: Field Survey, 2012.

Table 5.15 shows that majority of the respondent 47.55 percent get knowledge about HIV and AIDS from NGO worker or NGO visit by office and list 2.22 percent of respondent get knowledge from news paper. It indicates that means of knowing HIV and AIDS were much in Nepal. Friends, Radio and TV also were effective source to share the knowledge with FSW about HIV and AIDS.



**Figure 5.13: Knowledge on Means of HIV Transmission**

Findings from Figure 5.13 shows that means of HIV transmission(N=250), 56percent of respondent told HIV transmits through unsafe sex 30 percent of FSW said through syringe sharing, 12 percent told Infected Blood and only 2 percent told from infected mother to child. By this figure FSW have no knowledge about means of HIV transmission.

**Table 5.16: Knowledge of Respondents Means of Safety ways from HIV Transmission**

Means of Safety Way	No of Respondent	Percentage
Safer sex	203	90.22
Use sterilized piercing	7	3.12
All of above	5	2.22
Avoiding barest feeding	4	1.78
Use Screen Blood	3	1.33
Avoiding gestation	3	1.33
<b>Total</b>	<b>225</b>	<b>100</b>

Source: Field Survey, 2012.

Table 5.16 shows that the awareness on prevention of HIV transmission is high among FSWs (N=225) as 90.22 percent know that safer sex leads to prevention from HIV, likewise 3.12 percent responded of using sterilized Piercing/Cutting equipments, 1.33 percent responded of using Screened blood and avoiding gestation by infected mother, 1.78 percent responded of avoiding Breast feeding and 2.22 percent of respondent have the knowledge about all means mentioned above.

## **Drug Abuse**

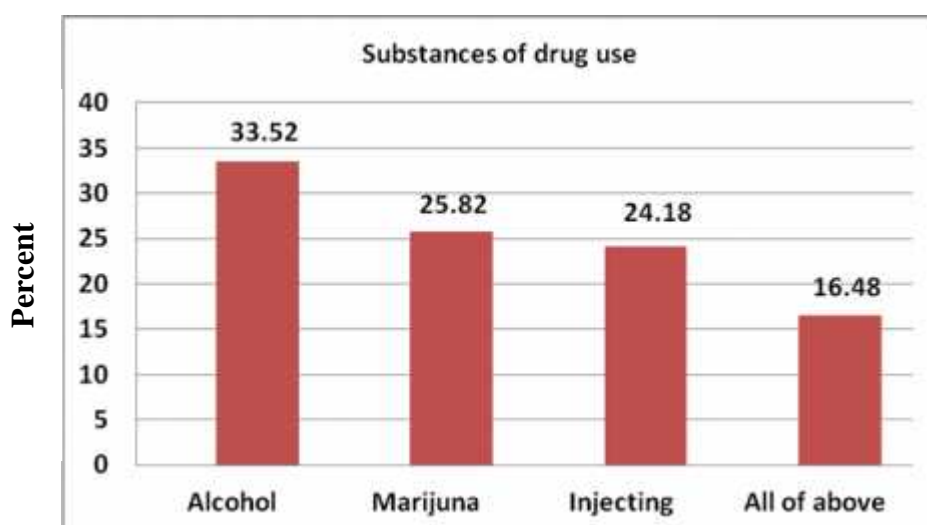
A review of Global literature of Alcohol Use among FSWs conducted by Li et al (2009). Identified that alcohol use was prevalent among FSWs. Multilevel contexts of alcohol use in the sex work environment were identified, including workplace and occupation-related use, the use of alcohol to facilitate the transition into and practice of commercial sex and self medication. Alcohol use was associated with adverse physical health, illicit drug use, mental health problems, and victimization of sexual violence, although its associations with HIV/sexually transmitted infections and unprotected sex among FSWs were inconclusive.

**Table 5.17: Distribution of Respondent by Drugs Using Practices**

Using Practice of Drug	No of Respondent	Percentage
Used	182	72.8
Unused	68	27.2
<b>Total</b>	<b>250</b>	<b>100</b>

Source: Field Survey, 2012.

Table 5.17 shows that, most of the female sex workers 72.8 percent have drug using practice and 27.2 percent of FSW doing their sex business without using drugs.



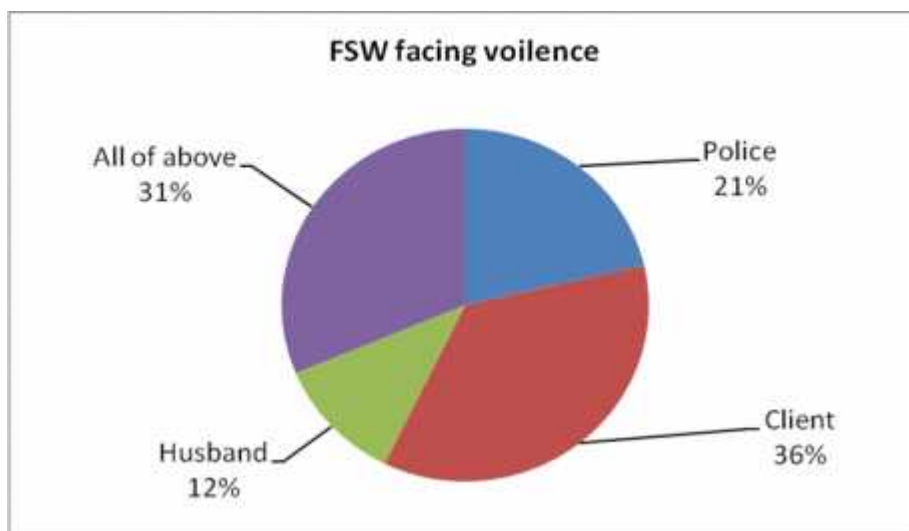
**Figure 5.14: Distribution of Respondent by Types of Use Drugs**

Figure 5.14 illustrates that 33.52 percent of FSWs used (N=182) were alcohol, by 25.82 percent Marijuana, 24.18 percent were had Injecting practice and 16.48 were use alcohol, marijuana and Injecting commonly use. Drugs work as sedative agents and decrease the risk perception which may lead to unsafe sexual practices.

## **5.8 Violence against Female Sex Worker**

Basically female sex worker are involved their own profession. In course of time they are terrorized and harassed by client, authority in the name of sex worker rights. Some of the client gives physical as well as mental torture. Some times they are exploited. They could not get any amount for their completion of work. We can express the real condition of violence. Majority of the female sex workers 52.4 percent were facing violence and 47.6 percent of FSW doing their sex business without facing any

violence. On the basis of exploiter and exploited this is the diagram to justify the situation.

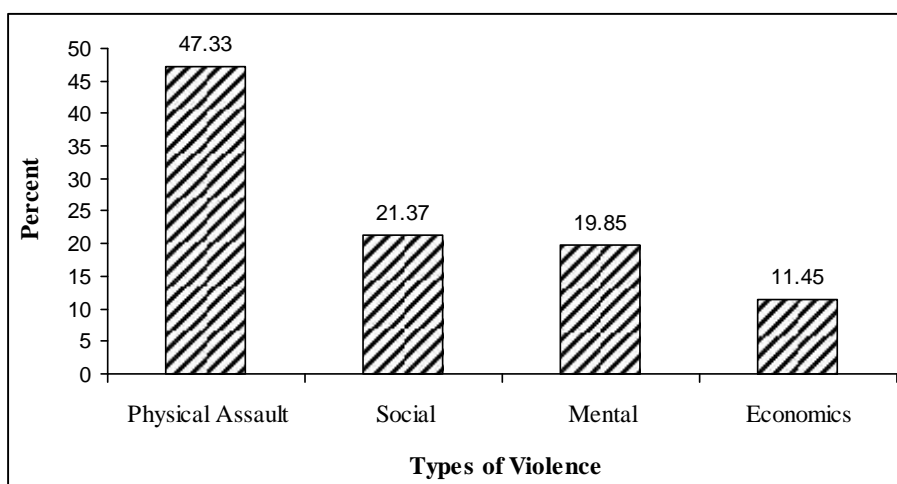


**Figure 5.15: Violator in Terms of Violence**

Figure 5.15 illustrates that 36 percent of FSWs feel the violence from their clients (N=131), were 21 percent from police and 12 percent by their husbands. 31 percent of female sex worker were facing the violence from clients, police and their husbands also.

### 5.8.1 Types of Violence

Female sex workers faced not only the physical violence but they are faced various types of violence i.e. mention in the following figure.



**Figure 5.16: Types of Violence Faced by the Respondents**

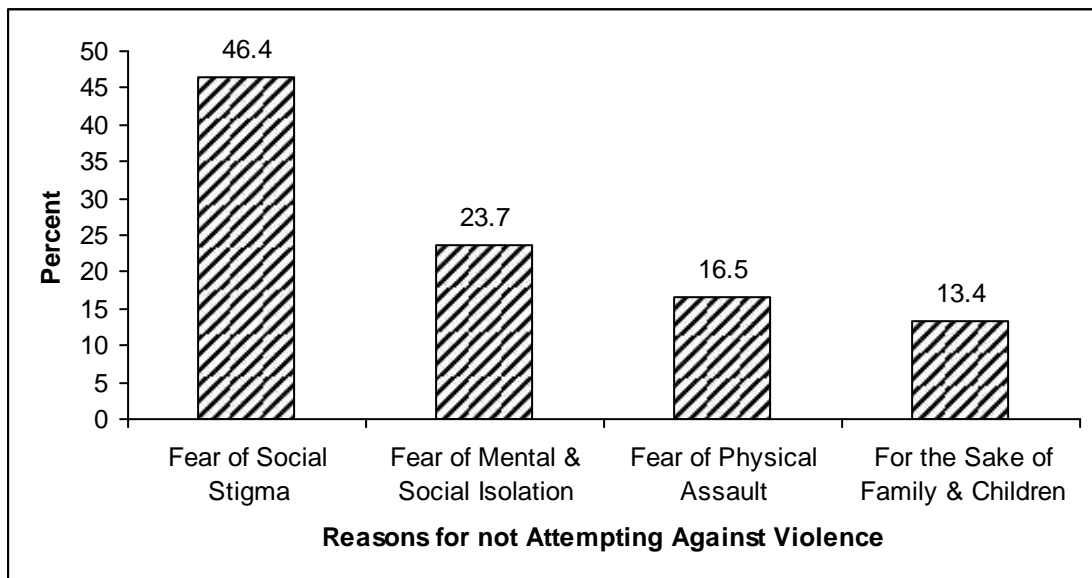
Figure 5.16 shows that responses made by sex workers regarding the type of violence that they were inflicted upon. 47.33 percent of responded being Physical assaulted such as beating and touch all part of body (N=131).19.85 percent informed of being mentally harassed through Name calling, Vulgar Gestures, miscall and SMS through mobile phone etc, 21.37 percent of responded of being isolated from society is call social violence and 11.45 of respondent reported that their income has been confiscate by husband, hotel and restaurant owner.

**Table 5.18: Respondent by Defiance to Attempt against the Violation**

<b>Attempt Against the Violence</b>	<b>No of Respondent</b>	<b>Percentage</b>
Yes	34	26
No	97	74
<b>Total</b>	<b>131</b>	<b>100</b>

Source: Field Survey, 2012.

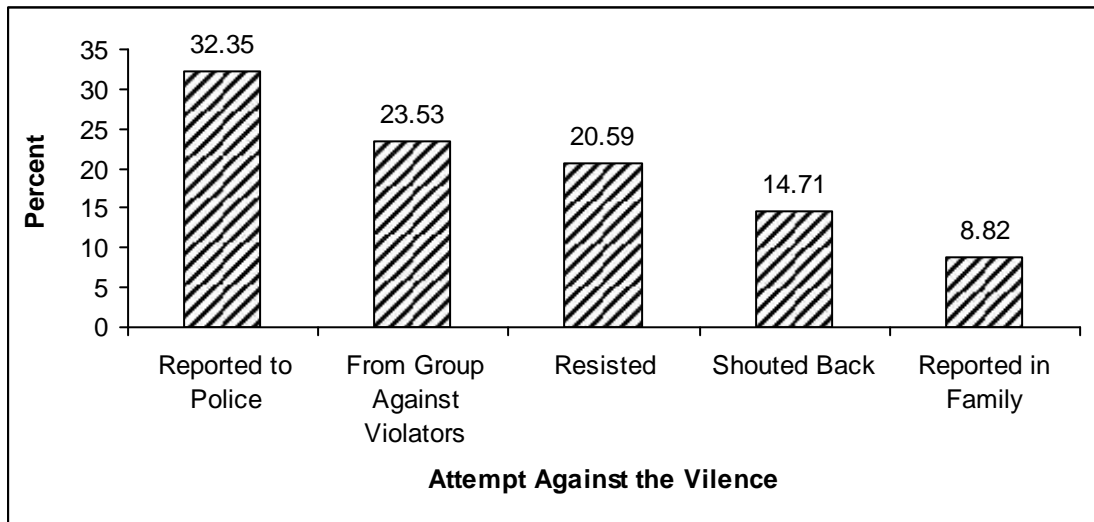
Table 5.18 shows that majority of the female sex workers 74 percent were not attempting against violation due to the fear of society and only 26 percentage dare facing violence without any hesitation.



**Figure 5 .17 : Distribution of Respondent Reasons for not Attempting Against the Violence**

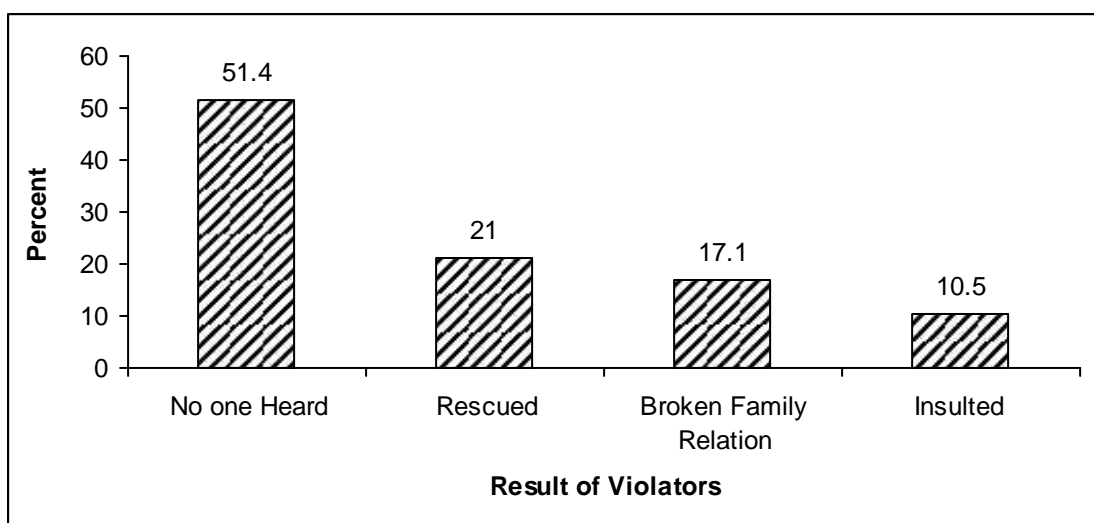
Figure 6.6 shows that 46.4 percent sex workers reasons for not attempting against the violence were fear of social stigma (N=97)23.7 percent of responded that they didn't

defended due to the fear of mental and social isolation 16.55 percent of respondent didn't defended due to the fear due to the Physical Assault, and 13.4 percent responded that they didn't defended due to the fear for sake of family and children, among others.



**Figure 5.18: Respondent by Initiatives taken to Attempt against the Violence**

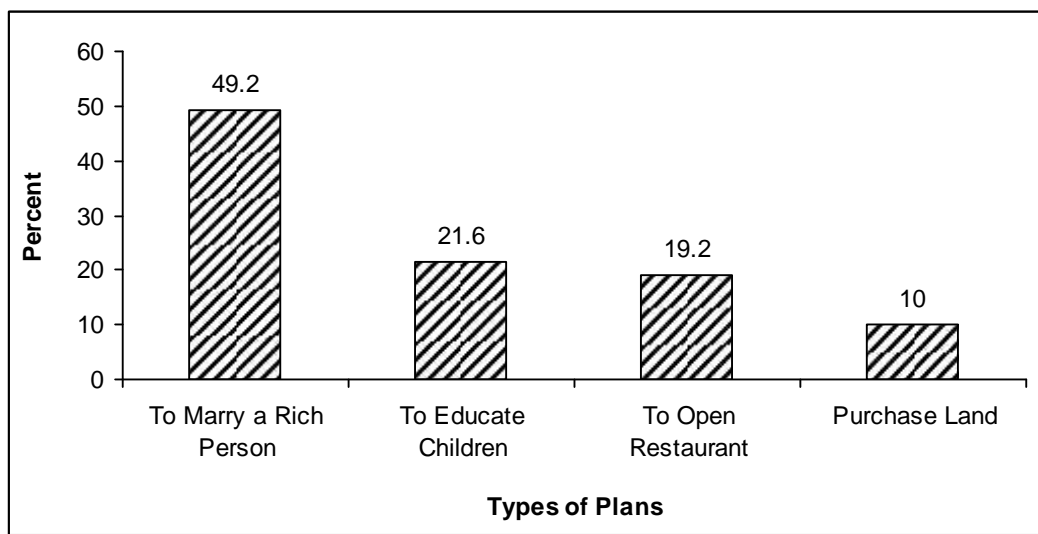
Figure 5.18 represents that among 34 who responded of attempting to defend themselves, initiatives they took were as follows: Reported to Police by 32.35 percent formed group against violators by 23.53 percent, Resisted or Attacked by 20.59 percent Shouted back by 14.71 percent and reported in family only 8.82 percent.



**Figure 5.19: Respondent by Result of Initiation towards Violators**

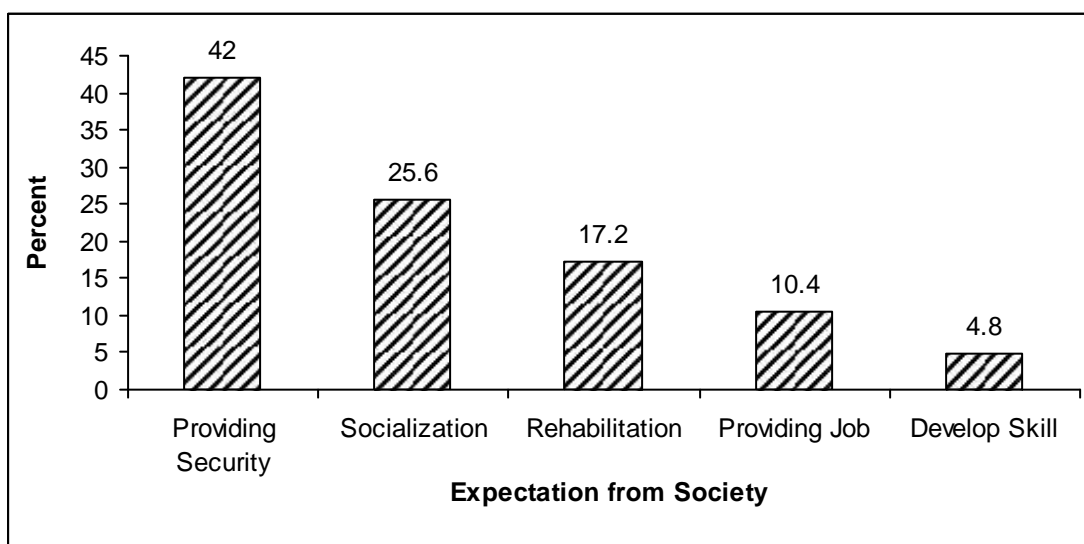
Figure 6.8 shows that among the 34 respondent who take initiation towards violators the result 51.4 percent responded that no one heard me, 21 percent of responded were rescued 17.1 percent of respondent broken the family and 10.5 percent respondent were insulted by their report. The result of the initiation towards violators made by FSWs in respect to the violence may vary depending upon her influence and ability to come forward.

Figure 5.19 states that out of 250 Female Sex Workers, 70percent of the sex workers said they had future plan and 30 percent of Female sex workers had no future plans.



**Figure 5.20: Respondent by Types of Plans**

Figure 5.20 shows that 49.2 percent of Female sex worker they would like to get married with rich person(N=176), 21.6 percent of respondents were planning to educate their children 19.2 percent of respondent want to open their own restaurant and 10 percent of Female Sex worker purchase land for making their own house in Pokhara city. Out of them who would like to get married with rich person may discontinue this work otherwise they will continue in this line of work for a few more years



**Figure 5.21: Respondent by Expectation from Society**

Figure 5.21 illustrates that total of 250 respondents were asked regarding their expectations from the society, 74.49 percent 42 percent responded that Society should provide security, 25.6 percent support to socialization, 17.2 percent want to rehabilitate with their own previous origin with the help of society, 10.4 percent expect for Job and 4.8 percent expect supporting for develop skill .

## 5.9 Access to Services

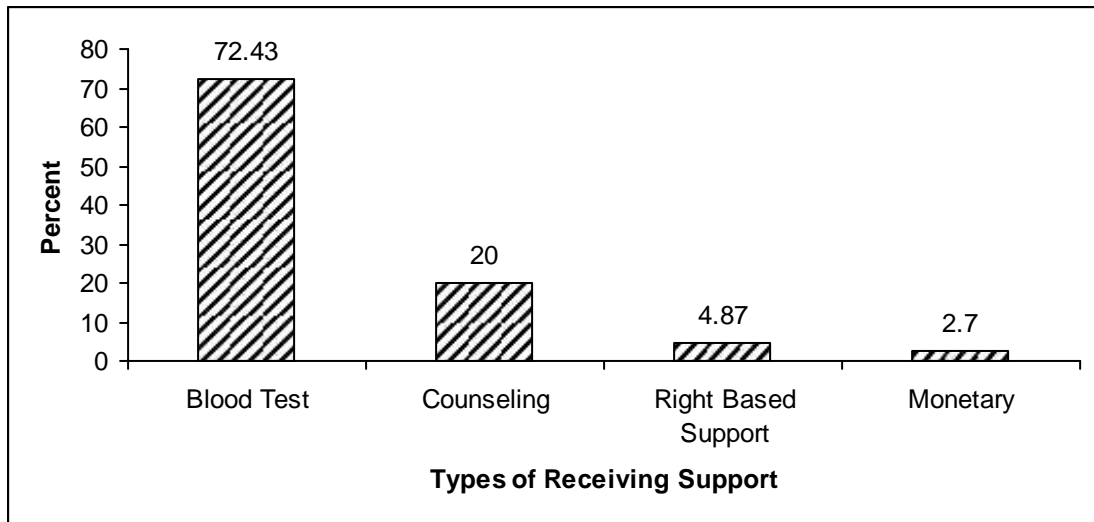
Various NGOs and Government sector are actively involved in HIV prevention activities which focus on FSWs as vector of HIV Transmission. FSWs were asked about the services they have accessed from various organizations. Access to services keeps them aware on their health and welfare. Similarly, the services received by the respondents and services expected by the respondents could be tallied to identify the gap for designing tailored interventions.

**Table 5.19: Distribution of Respondent by Receiving Support**

Receiving Support	No of Respondent	Percentage
Yes	185	74
No	65	26
Total	250	100

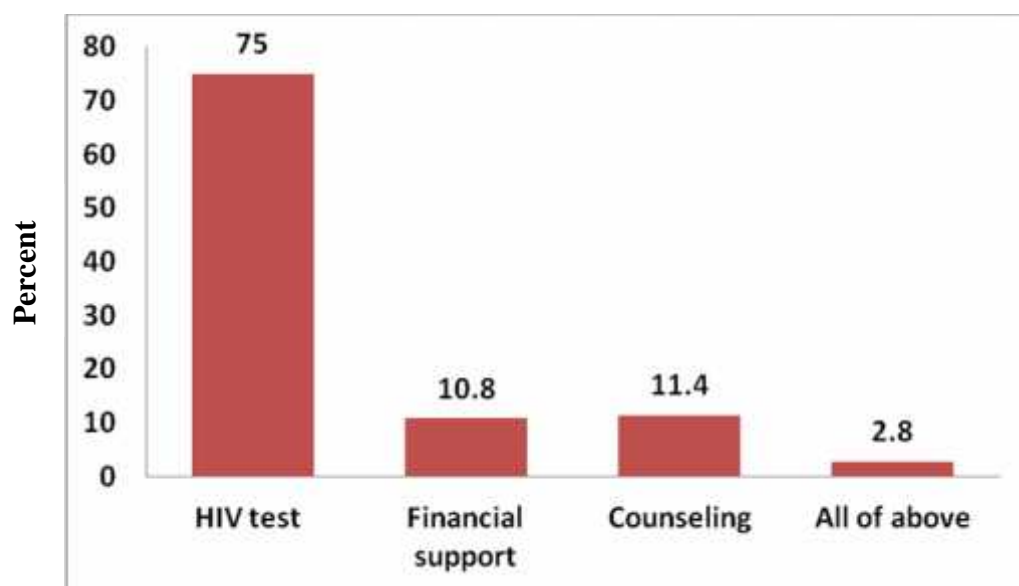
Source: Field Survey, 2012.

Table 5.19 shows that, When asked either they have received any sort of support or services from any organizations, 74 percent responded that they have received any services where as 26 percent responded that they were not received any kind of support from any organization.



**Figure 5.22: Distribution of Respondent by Types of Receiving Support**

Figure 5.22 illustrates that responses who ever received services 72.43 percent were Blood Testing Services, 20 percent were Counseling/Psychosocial support, 4.87 percent were Right Based, Advocacy/Legal Support and only 2.7 percent were receiving Monetary support.



**Figure 5.23: Distribution of Respondent by Expected Support**

Figure 5.23 illustrates that the expectations related to support and services made by Support and services expected by Female Sex Workers. 75 percent of respondent want to easy access on HIV testing, 11.4 percent were expect easily counseling facilities 10.8 percent expect financial support and 2.8 percent of Female sex worker expect HIV test, counseling and financial support.

### **Case Studies of FSWs R1**

*R<sub>1</sub> came from poor family. She has never known her real mother. Her mother was died when she was very young. Her father remarried and he was addicted to alcohol. She has never gone to school. She was grown up under torture. When she reached 13 years, she decided to leave her home and go to Kathmandu to live with her neighbors' aunt's house. She feels odd to stay there and, she lived there 5 months only. She quest her better life in course of time she met one sister, and she begins to shared her pain and sorrow frequently. That sister advice her you can get good job in Pokhara. She easily believed on her. Then she went Pokhara with golden dream and brighter future. It was her first chance to visit Pokhara. She fully relied on that sister but her sister was very clever she came with her in Pokhara. They entered Pokhara and went one of the restaurants of Baglung Bus Park. She received 5 thousands but it is great surprise to her. With her great surprise that sister was disappear from the hotel. Hotel owner pointed to enter the room at that time she was so surprised and noticed she was sold by that sister. At the hotel she couldn't resist the behaviors. So she decided to leave the hotel secretly and returned Gorkha. Hardly she reached in Gorkha. Arriving home is the sad event for the parents'. The parents gave torture and she couldn't bear it. She had no way then she came to Pokhara in the same hotel at Baglung Bus Park. This situation compelled her to involve in sex profession. She was highly conscious about AIDS and STI. She had been working in brothel since five years. She earned handsome amount but she could not save it.*

### **R<sub>2</sub> Own Story**

*R<sub>2</sub> used to live in remote village. I have five members (Father, mother, brother and two sisters) in my family. Being elder of the family I always worried about my family and I am curious. One of my friend's life style is standard. She used standard mobile, dresses and foods etc. that facilities lured me and I asked her about. She suggested me to go to Pokhara and you can get nice job there. Then I decided to go to pokhara with her. After one week we moved Pokhara. At four PM we reached Baglung Bus Park and she lead me towards hotel and let me sit inside the counter. She talked with hotel owner and she easily accepts me. She put vegetables in front of me and I processed as usual. Next morning my friends is not there and asked my owner where is she? Owner replied that she is in next hotel. Than all of a sudden at 3.30 PM one boy called me from inside the hotel and I went there. He told something to me but I feel shy I never heard that before. I report my owner but she is trying to motivate*

*towards that work and I concern my friends she also suggested me we have no education no proper skill so what can we do for earning money be secret I also performed that work she stress me don't hesitate. Still I could not accept it. At night I am in my bed under the ladder in small room there was not light and my hotel owner husband destroy my virginity and I am cried, silently he gave me 1000 rupees. But still I feel odd but I have no option to support my brother, sister's education and my parents. In such a way I involved this profession but now it is addiction for me. I want to leave it but this profession never leaves me".*

### **Group Discussion**

*In course of the research time I concerned with 7 respondents for Group Discussion. They are as follows:*

*Group Discussion and its finding: At the very beginning I asked with them how you arrived in this profession and places. They replied with their own painful story and ultimately we reached the conclusion that the root cause is poverty. They began to express their past; during the insurgency, period we migrated in the town for security and good job. We had no skill and education but in another side. We had to solve our hands to mouth problem and equally we saw the modern life style of our friends. So, we had no any option than we involved in the profession.*

*At my second question I raised the questions of violence for this issues, they became very serious and seriously they expressed their physical torture, pain and suffering. For example biting the Nipple of the breast and they hit and bite different parts of the body, supposing we were non-living object.*

*At my third query: Why you did not complain to the police for your violence, sometimes they maintained great silence and one of the respondent to talked here is no law and order for the poor and we like people, who cares our problem there is no serious response and legal remedies in practical life. But there are numbers of legal books they are only for rich and handful people. If I report, they suspect and began to query upon us. Some time they give us mental torture, what to say further more about the complain. Who listened our pain? Who manages us? People always try to exploited and black mailing us so we don't have any more to say. At that time some of the respondents were weeping bitterly.*

*I put next query about alcohol and drugs, they spontaneously expressed they were in pain. For the pleasure and satisfaction of the client, they began to drink alcohol and injecting drug. Later on it is addiction for them. We want to leave drug but drug can not leave us. "When we take drug and inject we feel relief and can handle up to sixteen clients a day".*

*At last I put one query about the satisfaction of their profession, they replied that they had no any option, they are uneducated, no any skills. So they were compelled to do this profession. This is very easy to earn but society always hates them, ignores them and humiliates. They said, "Whatever we earn we spend It. Slightly, we can save little amount even though we are not satisfied. R1, R2, R3, R4, R5, R6 and R7."*

*Ok, thank you for all your kind cooperation. I wish your progress, happy and healthy in the days to come.*

## **CHAPTER - SIX**

### **SUMMARY, CONCLUSION AND RECOMMENDATION**

#### **6.1 Summary of the Research**

The term 'sex worker' refers to a wide area of people who sell sex, and who work in a variety of environments. They include women, men and transgender people and people who may work either full time or part time, in brothels, or bars, on the street or from home for example. Sex workers, along with other marginalized groups such as men who have sex with men and injecting drug users, are often labeled a 'high risk group' in the context of HIV and AIDS

The contemporary incarnation of sex-positive feminism appeared more recently, following an increasing feminist focus on pornography as a source of women's oppression in the 1970s. The rise of second-wave feminism was concurrent with the sexual revolution and rulings that loosened legal restrictions on access to pornography. In the 1970s, radical feminists became increasingly focused on issues around sexuality in a patriarchal society. Some feminist groups began to concern themselves with prescribing what proper feminist sexuality should look like. This was especially characteristic of lesbian separatist groups, but some heterosexual women's groups, such as Red stockings, became caught up with this issue as well

The theoretical approach of this study is guided by Pro-sex-work feminism Pro-sex-work feminists have raised concerns about people's difficulty accepting the view that some women stay in the sex industry because they enjoy the work. In this research some concepts were incorporate Radical feminist theories. Radical feminist theorists, view sex workers as sexually subordinate to men, and believe that sex work reduces women to a commodity and is equivalent to violence against women. Also concern with Global biological theory of Addition, Social Learning and Adaptation theory and Gender based theory. Likewise gender theory explain in this research social cognitive theory of gender-role development and functioning integrates psychological and socio structural determinants within a unified conceptual framework. In this perspective, gender conceptions and role behavior are the products of a broad network of social

influences operating both family and in the many societal systems encountered in everyday life.

This study focuses on identification of the interplaying factors of women in the entry to sexual work and consequences or impacts that it causes to the sex workers. Impacts may be short term like Violence due to this profession, income for entertainment, livelihood and use of condoms during sex and longer impacts are the plans made for future and consequence of unsafe sex and violence. The study was carried out in Pokhara among Female Sex Workers. The nature of the research was Observational, Descriptive and Analytical.

The study consisted of web-based literature review, review of secondary data and a field study involving interaction with Female Sex Workers through structured questionnaire for Data Collection. Pre-testing of questionnaire was conducted to improve the validity of the questionnaires. Both Quantitative and Qualitative methods were used and the study Design was respondent driven as already identified female sex workers help in identifying the new respondents.

The study is based on cross sectional descriptive study design. The interview technique was applied to collect primary data among 250 female Sex workers with non probability purposive sampling technique. Simple statistical methods were used. The result of the study was present with simple and cross tables, bar graph, pie chart and figures. Some case studies were taken during observation and by taking interaction with Female Sex Worker.

### **Major Findings**

- ) Most of the respondent were in the age group of 15-19 years which is 52.4 percent followed by adolescent and 20-24 years.
- ) On the base of originality 34.8 percent of the respondents were from Kaski district, majority of them from Dalit Community is found 36.4 percent and 36 percent are Gurung, 65 percent were received secondary level education and 67 percent are unmarried.
- ) First sexual contact took place with clients, regarding the nature of first sex which is 71.2 percent and 94 percent reported of being mutually agreed.

- J Major enforcing factors of respondent choosing sex works was due to poverty, which was 77 percent, 14 percent were lack of other skills, 6 percent due to peer's pressure or influence and 3 percent due to coercion or pressure, 46 percent involved 2-4 years ago.
- J The major place of solicited was from restaurant which is 42.8 percent and 36.4 percent from Hotel, 78 percent of the respondents willing to leave their profession.
- J The earning level of the respondents was ranges from 4000 to 45,000. Out of the total 20.4 percent earn below Rs 4,000, 22 percent earns Rs 25,000-29,000, 19.2 percent were earn more than Rs.30,000 per month, out of 250 respondents only 91of respondent have another source of income rather than sex work.
- J Most of the respondent were satisfied with there job which is 73.57 percent of the total as it is the means of earning to fulfill their needs.
- J Most of the respondent were found having safe sex practices which was reported 66. 8 percent. Majority of female sex worker (72.8%) using drug, 33.52 percent of FSWs used (N=182) alcohol,78 percent of the respondents wanted to leave their profession
- J All the respondents were found aware about HIV/AIDS. 73.2 percent of Female Sex worker were fully aware about HIV/AIDs, 47.55 percent get knowledge about HIV and AIDS from NGO worker or NGO visit by office.
- J Respondents were found facing many problems of violence. 52.4 percent of the female sex workers were facing violence, 36 percent of FSWs feel the violence from their clients, 47.33 percent of responded being Physical assaulted such as beating and touch all part of body.
- J Majority of the female sex workers 74 percent were not attempting against the violence and 26 percent FSW attempt against Violence. 46.4 percent sex workers reasons for not attempting against the violence were fear of social stigma (N=97)
- J Sample respondents were found having future plan Among them (N=176), 49.2 percent would like to get married with reach person,21.6 percent educate their children 19.2 percent open their own restaurant and 10 percent of Female Sex worker purchase land.
- J The respondents were found having the support from different organizations 74 percent responded that they have received any services from NGOs, 72.43 percent were received free Blood Testing service, 75 percent of respondent expect to easy access on HIV testing

- ) The strength of this study for the researcher is that it is new subject for an investigator so it is very beneficial for carry out further study.
- ) The researcher experiences ease in data collection due to good cooperation of the respondents, the members of Child and Women Empowerment Society and Naulo Ghumti Nepal. Sufficient literature has been collected from various books, journals, research reports, internet and websites from which the researcher has gained a lot of information on this topic.

## **6.2 Conclusion**

The study entitled “Interplaying factors in the entry to sexual work and its impact: A Study in Pokhara” conducted among 250 female sex worker by applying cross sectional descriptive research design, non-probability purposive sampling technique and technique of interview were used to collect data.

This study explores the multifaceted dimensions of socioeconomic characteristics of the Sex work, as majority of the Sex workers in Pokhara are adolescents and dwell from the rural areas of Kaski and surrounding districts. The proportion of the unmarried sex workers is high and Majority of them was from the indigenous community or Janajatis and Dalit. The factors reinforcing in the sex work were Poverty and peer’s pressure. The unsteady family source of income leads the female to seek for economic provision through sex work. This study shows that, those who are in sex work are not accepted and stigmatized based on social, economic and moral grounds. Despite having higher literacy level and proper knowledge on HIV transmission, the practice of unsafe sex is prevalent. Consequences of sex work varied from individual to individual, for some this has been a steady source of income and means of survival whereas for some this has created an indifferent situation where they were violated and ostracized. The earning from sex work had made some of them economically independent.

## **6.3 Recommendation**

This study opens frontiers to study the human rights related issues of female sex workers. The broader implications of this result can be an attention of policy makers towards decriminalization of sex work, as in an impoverished country like Nepal, female will continue to enter into sexual work to eke out their living. The effort

should be directed towards eliminating the root cause of sexual work which is poverty and providing alternative premises to those who wish to leave sex work and providing safe ground to those who wish to continue.

On the basis of the study findings the following recommendations have been made:

- ) This study was carried out in organizational setting where only a minimum number of sample size was included, therefore, it is recommended for further study in large scale and in the community setting with snow ball sampling technique.
- ) It is also recommended for the government to implement the Women Empowerment program and more clear Legal context of sex work.
- ) Comparative Studies related to violence among different settings of sex work in relation with human rights of sex workers Questionnaires.

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## 2. Educational Details

Q.N.	Questions	Coding Categories	Skip
2.1	Educational Details	Illiterate.....1 Literate.....2 Formal Education.....3	Skip to 3 for answers other than formal education
2.2	Level of Education (for those attaining formal education)	Primary.....1 Lower Secondary ....2 Secondary.....3 Higher.....4	

## 3. Marital Details

Q.N.	Questions	Coding Categories	Skip
3.1	What is your Marital Status?	Never Married.....1 Married.....2 Divorced.....3 Widow.....4	If never married skip to 4, if divorced or widow skip to 3.3
3.2	What does your husband do?	Laborer Foreign Employment Unemployed Others	To be asked to Married only
3.3	Do you have children? ( Parity)	Yes No	If No skip to 4
3.4	How many children do you have	1 2 3 4 5	
3.5	Age of children respectively		

## 4. First Sexual Intercourse

Q.N.	Questions	Coding Categories	Skip
4.1	With whom did you make your first Sexual Contact?	Clients Husband Boyfriend	

		Relatives Others	
4.2	What was the nature of first sexual contact?	Mutually Agreed Coerced Others	

### 5. Occupational Details

Q.N.	Questions	Coding Categories	Skip
5.1	Why did you choose this work?	Lack of other skills Coercion/ Persuasion / Pressure Poverty Peer's Influence Others	
5.2	How long have you been working as FSW?	Pls. Specify completed years	
5.3	Where do you solicit your clients?	Restaurant & Hotels.....1 Home / Dwellings.....2 Streets.....3 Others(pls. Specify).....4	
5.4	Through which means do you accost customers?	Pimps Hotel Owners/Employers Peers Self- Solicitation Others	
5.5	Are you satisfied with your Job?	Fully agree Agree Disagree Fully Disagree Others	
5.6	Why?		
5.7	Do you want to leave this Job?	Yes No	
5.8	Why?		
5.9	Under what Circumstances, would you be ready to leave this profession?		

## 6. Economic Details

Q.N.	Questions	Coding Categories	Skip
6.1	How much do you earn in a month? (in thousands)		
6.2	Do you have income source other than this Profession?		
6.3	If yes What??		
6.4	Do any of your family member earn for living?	Yes No	

## 7. Safer Sexual Practice:

Q.N.	Questions	Coding Categories	Skip
4.1	Have you ever had sex without condom?	Yes No	
4.2	If yes with Whom?	Spouse Client Boyfriend Others	
4.3	Why?	He is my husband/Boyfriend He coerced me / didn't listen to me I was unconscious/ Intoxicated Others	

## 7. Knowledge on HIV & STI

Q.N.	Questions	Coding Categories	Skip
5.1	Have you ever heard of HIV or the illness called AIDS?	Yes.....1 No.....2	
5.2	Where do you know about HIV/AIDS first time?	Friends.....1 Radio/TV.....2 Newspaper.....3 Poster.....4 Doctor.....5 NGOs.....6 Teacher.....7	

5.3	Can you say how HIV transmits (Multiple)	Sharing of syringe.....1 Unsafe sex.....2 Infected blood.....3 From infected mother to child...4 Others.....5	
5.6	Please mention how can we prevent ourselves from HIV transmission? (Multiple)	Use sterilized piercing/ cutting equipments .....1 Safer sex.....2 Use always screened blood.....3 Avoiding gestation by infected mother.....4 Avoiding Breast feeding.....5	

### 8. Drug Abuse

Q.N.	Questions	Coding Categories	Skip
	Do you use any types of Drugs?	Yes No	
	Which one do you use?	Alcohol Cigarette Marijuana Injecting	

### 8. Women's Violence:

Q.N.	Questions	Coding Categories	Skip
11.1	Have you ever experienced Violence?	Yes No	If No skip to 11.8
11.2	Who was the perpetrator?	Police Client Husband Others	
11.3	What type of violence you were inflicted upon?	Physical assault Mental harassment Social Stigma and Isolation Others	
11.4	Did you make any attempt to defend yourself?	Yes No	

11.5	If not Why?	Fear of social stigma Fear of physical assault Fear of mental and social isolation For the sake of owns family and children Nobody is going to listen or support me Other.....	
11.6	What initiative did you take?	Resisted or Attacked Reported in family Reported to police Formed a group and retaliate back Shouted back	
11.7	What was the result of your pursuit?	No body heard me I was rescued I was insulted My family break relationship with me	
11.8	Have you ever been incarcerated?	Yes No	
11.9	What was the charge against you? (personal or family reasons are not much significant)	Raided while accosting clients Raided while having sexual relations Personal or family reasons	

**9. Future:**

Q.N.	Questions	Coding Categories	Skip
12.1	Have you any plans regarding your future?	Yes No	If No skip to 5.3
12.2	What are your plans?	To buy a land To give higher education to children To marry a richer guy To open a restaurant or brothel	

		oneself others	
12.3	What are you expectations from society?		

**10. Access to Services:**

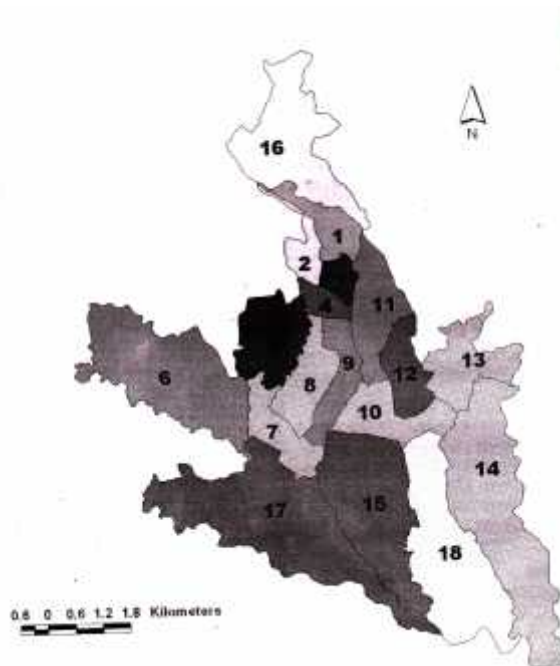
Q.N.	Questions	Coding Categories	Skip
13.1	Have you ever received help, support or services from any organizations?	Yes No	If No skip to 13.3
13.2	What type of support?	Blood testing Monetary Rights based Support Counseling Others	
13.3	What type of services do you need most?		

## Appendix II

### Map of Kaski District



### Map of Study Area (Pokhara)



**Appendix -III**  
**Photo Gallery**



**Group Discussion with Respondents**



**Group Discussion with Respondents**