

Getting out: A Qualitative Exploration of the Exiting Experience Among  
Former Sex Workers and Adult Sex Trafficking Victims

by

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## ABSTRACT

Sexual exploitation is a problem faced by women victimized by sex trafficking and are involved in the commercial sex industry as a result of limited employment options. Negative consequences associated with engaging in sex work in the United States include violent victimization, physical and mental health problems, addiction, isolation from positive social support, and economic instability. These consequences make exiting difficult, and recently Baker, Williamson, and Dalla (2010) created an integrated prostitution exiting model to help explain the exiting process, accounting for the impact of these consequences and identifying the role that failed exiting attempts play in leading women to a final exit. Currently, much remains unknown regarding the usefulness of the model and researchers have yet to explore the process of exiting from the perspective of former sex workers.

This dissertation examines the process of exiting commercial sex work from the perspective of 19 adult women who exited the sex industry and had not engaged in sex work for at least two years. The goal of the study was to compare findings from these interviews to Baker et al.'s (2010) integrated model and to further understand the experience of exiting sex work. A narrative approach to data collection was taken (Wells, 2011), and individual interviews were conducted with each participant in order to elicit narratives about their experiences exiting sex work.

A phenomenological approach was utilized to analyze the data (van Manen, 1990), and five overarching themes encompassing 21 subthemes emerged as key findings. Many of these themes supported the stages of Baker et al.'s (2010) model, including the experience of becoming disillusioned with the prostitution lifestyle as a

precursor to successfully exiting, the likelihood that women will attempt to exit and then re-enter sex work a number of times before finally exiting, and the presence of specific barriers that inhibited the exiting process. Additional themes emerged, offering new information about the importance of involving former sex workers in treatment, the role that children, customers, and other relationships play in helping or hindering the exiting process, and the development of resiliency among women undergoing the exiting process. Recommendations for research and practice are discussed.

## DEDICATION

This work is dedicated to all of the women, men, and children who have been affected by sexual exploitation, who have been forced to make difficult choices, and who continue to survive and hope. May you experience the help and acceptance of so many who seek to shed light on the horrors of exploitation and give voice to your courage and determination.

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## Chapter 1

### INTRODUCTION

Prostitution is often regarded as the “world’s oldest profession”, and has been both accepted and vilified throughout history. Flowers (1998) identified examples of prostitution in ancient Babylonia, the Orient, and Greece among other societies, emphasizing that the terms under which a society accepted or rejected prostitution have changed throughout the course of history. Ideas regarding who a prostitute is and what a prostitute does have also changed over time. Esselstyn (1968) described a commonly held notion that a prostitute is someone who provides sexual services to “anyone on a contract basis” (p. 124), and who is emotionally indifferent towards clients. Current definitions of prostitution in the literature are both broader and less value-laden, identifying prostitution or sex work (terms used interchangeably throughout this paper) as the exchange of sexual services for money, material goods, or other services (Harcourt & Donovan, 2004; Overall, 1992 as cited in Dalla, 2000) on the street, in motels, out of homes or brothels, at truck stops, massage parlors (Williamson & Folaron, 2003) and more recently, over the Internet (McCabe, 2008), a venue that provides greater anonymity and is becoming increasingly prevalent for buying and selling sexual services.

#### **Importance of the Problem**

##### **Prevalence**

For most of American history, prostitution has been associated with promiscuity and moral depravity, with the primary focus of legal retribution and social stigmatization on the person (typically female) who sells sexual services rather than the men who

purchase them (Esselstyn, 1968; Flowers, 1998; Wahab, 2002). Consequently, prostituting individuals are not easily identified and the secretive nature of prostitution is perpetuated, making it difficult to know the true prevalence and scope of the problem. Currently, there is no accurate information available regarding the number of people selling or purchasing sex, though the Federal Bureau of Investigation estimated that in 2007, 77,600 adults (98%) and juveniles (2%) were arrested for prostitution and/or commercialized vice throughout the United States (Puzzanchera, Adams, & Kang, 2009). Mitchell, et al. (2009) calculated a comparable number of juvenile arrests in their study, identifying 1,450 arrests/detentions for juvenile prostitution-related crimes in 2005; however, they discovered that these arrests came from only five percent of law enforcement agencies, with 95% of agencies reporting no arrests in cases involving juvenile prostitution for that year.

This finding points to a number of important problems in determining the prevalence of prostitution among both adults and juveniles. First, a majority of people selling sex are never arrested (Flowers, 1998), as cases involving prostitution remain a low priority for law enforcement (Benson & Matthews, 1995; Mitchell, et al, 2009). Second, prostitution is inherently transient and opportunistic (Harcourt, van Beek, Heslop, McMahon, & Donovan, 2001); people selling sex may move frequently or are transported by pimps or traffickers to go where the customers are located. Another problem in determining the prevalence of sex workers is a result of their arrest for other crimes. For example, individuals arrested in some jurisdictions may be charged with drug use/possession, loitering, or disorderly conduct rather than a prostitution-specific charge

(Flowers, 1998). In addition, law enforcement agencies committed to identifying prostitution problems in their communities may not be equipped to pursue both indoor and outdoor prostitution activity, as the number of individuals selling and purchasing sex has now moved largely indoors, via the Internet. Finally, it is most difficult to assess the prevalence of prostitution among men, boys, and transgender individuals. They are the least likely to be identified and receive the attention of law enforcement, targeted prevention or intervention services, and the interest of researchers (Weitzer, 2005). Ultimately we cannot address the prevalence of men, boys, and transgender prostitutes without first increasing awareness of their existence, decreasing the level of intolerance they perceive within the helping community (Harcourt, et al., 2001), and better understanding how to respectfully gain access to the communities in which they work.

### **Social, Legal, and Personal Cost**

The secretive nature of sex work makes it difficult to identify people involved in selling sexual acts on streets, in cars, motels, at gentlemen's clubs or truck stops, in massage parlors or crack houses (Williamson, & Folaron, 2003), though research indicates that a majority of individuals arrested for prostitution and commercialized vice are women and adolescent girls. Estimates of average age at entry into prostitution range from 14 (Nadon, Koverola, & Schludermann, 1998) to 22 years of age (Kramer & Berg, 2003). The average cost associated with arresting sex workers is high; in Chicago, the Sentencing Project (Allard & Herbon, 2003) estimated the cost at \$1,554 per arrest in 2001, with total costs exceeding \$9 million; more recently, costs associated with arresting sex workers were estimated to be approximately \$1,420 in Phoenix, Arizona (Roe-

Sepowitz, Gallagher, Hickie, Perez-Loubert, & Tuttleman, 2013). Unfortunately, there is not current, accurate information available on the number of people selling or purchasing sex in the United States (Mitchell, Finkelhor, & Wolak, 2009), making it difficult to know the legal or fiscal impact that commercial sex work has on individuals, communities, and society at large.

Sex workers also face personal costs, including the stigma associated with sex work along with physical and mental health issues resulting from past and present trauma. It is well documented that prostituted women report high rates of abuse (Davis, 2000; Nadon, et al., 1998; Potterat, et al., 1998; Silbert, & Pines, 1982) and maltreatment (Dalla, 2001). Once involved in sex work, women remain vulnerable to poverty, and are exposed to coercion by pimps, exploitation, (Williamson & Cluse-Tolar, 2002), and repeated violence (Valera, Sawyer, & Shiraldi, 2001), resulting in additional mental and physical health problems (Farley & Kelly, 2000; Williamson & Folaron, 2003).

Prostitution is frequently associated with drug use, and regular drug use can lead to drug dependency. Women with moderate to severe drug dependency are more likely to engage in sex work than women who are not addicted to drugs (McClanahan, et al., 1999), thus perpetuating the cycle of maintaining a prostitution life style and remaining vulnerable to associated risks. The accumulation of these risks can lead to chronic and serious mental and physical health problems. In addition, an accumulation of legal offenses (Maxwell & Maxwell, 2000) and isolation from positive social support (Williamson & Cluse-Tolar, 2002) may make it difficult for individuals to exit prostitution and helping professionals to assist them in successfully exiting.

## **Relevance to social work practice**

Prostitution affects individuals, families, and communities on a variety of levels, and the social work profession has a distinct responsibility to both help and advocate for those negatively impacted by the consequences of prostitution. For individuals, those consequences may include addiction and legal, physical, and mental health problems. Families are affected by the economic uncertainty accompanying illegitimate employment and stigma associated with prostitution. Communities are negatively affected by prostitution when increased sex trade in an area is accompanied by increased violence and other kinds of illegal activity (Sampson, Raudenbush, & Earls, 1997). According to the Code of Ethics for the National Association of Social Workers (2008), social workers are responsible for upholding a number of ethical principles including the need to challenge social injustice and respect the dignity and worth of a person. Regarding prostitution, social workers must advocate for social justice by supporting policies and programs that acknowledge the victimization sex workers and sexually exploited individuals often experience at the hands of pimps and customers. Social workers must interact with people involved in the sex trade in a way that promotes their dignity and inherent worth as a person, and uphold the social work mission to improve the wellbeing of individuals and society (National Association of Social Workers, 2008). In many cases, this may involve working to better understand the exiting process and to create intervention programs for individuals in the process of exiting sex work. Social workers have a unique opportunity to work actively towards assisting individuals and communities negatively affected by prostitution, as they are often already employed in

settings where they may help, educate, and advocate on behalf of sexually exploited adults and children (Wahab, 2006; Williamson, 2003).

### **Present Study**

This study aims to build upon the current body of research on prostitution exiting, focusing specifically on Baker et al.'s (2010) integrated model (described in detail in Chapter 2). Their model is a very recent attempt to describe the exiting process; it is largely rooted in two well-known and frequently cited models of prostitution exiting, and it accounts for the many barriers women may encounter when going through the exiting process. When discussing future directions for researchers to take, the authors state that their integrated model “can guide researchers toward a deeper exploration into the process of leaving the streets and allow them to ferret out nuances that heretofore might have been missed or clumped with broader concepts” (p.594). This study aims to deeply explore the process of exiting sex work while drawing upon the framework provided by this model to identify concepts related to exiting that may not be emphasized in the current body of research. A qualitative approach was chosen for the study, as qualitative research emphasizes depth, context, and the often complex perspectives of the participants over a controlled research agenda (Padgett, 2008). Specifically, the study involved conducting qualitative interviews using a narrative approach to collecting data. This approach allowed participants to discuss their personal understanding of the experiences they had and attribute their own meaning to these experiences (Muller, 1999). A phenomenological approach to analysis was then used to capture the phenomenon of exiting sex work and provide a description of findings that is both

holistic and analytical (van Manen, 1990). Overall, the goal of the study was to compare stories of exiting told by participants in this study with Baker et al.'s (2010) integrated model and to further understand the experience of exiting sex work. The research questions for this study are:

- 1) What are the lived experiences of adults who have exited sex work?
- 2) Do the lived experiences of exiting told by formerly prostituted adults confirm the stages of Baker et al.'s (2010) integrated model for exiting prostitution?

## Chapter 2

### BACKGROUND LITERATURE

#### **Risk Factors for Entry and Participation in Sex Work**

The question of why individuals enter and remain in prostitution has long been an interest of social scientists and other researchers who have adopted a variety of perspectives to help explain this social problem. Flowers (1998) explained that throughout the last century, society has attributed the problem of prostitution to biological, psychological, sexual or moral flaws in women, economic barriers faced by women, drug-addiction, and experiences of abuse that increase the vulnerability of women who enter prostitution. Recent research supports the latter three of these perspectives and identifies a number of other factors related to prostitution entry and continued participation.

#### **Childhood Abuse**

Silbert and Pines' (1982) frequently cited study of 200 juvenile and adult prostitutes in San Francisco found that a majority of their sample experienced emotional, physical, and sexual abuse as children. While flaws in their study have been identified (see Weitzer, 2005) and subsequent research has found lower levels of childhood abuse among prostitutes (e.g. Roe-Sepowitz, et al., 2011), abuse- specifically sexual abuse- remains a salient risk factor for prostitution entry (Dalla, 2000; Davis, 2000; Kramer & Berg, 2003; Farley & Barkan, 1998; Nadon, Koverola & Schudlermann, 1998; Potterat, Rothenberg, Muth, Darrow, & Phillips-Plummer, 1998; Roe-Sepowitz, 2012; Surratt, Inciardi, Kurtz, & Kiley, 2004).

Prostituted women also report having experienced other forms of abuse and family disorganization including parental alcohol and drug use (Dalla, 2001; Nadon, et al., 1998), literal abandonment (e.g. parental death or removal from family of origin) or symbolic abandonment, including emotional distance resulting from parental substance use or mental illness, neglect, domestic violence in the home, or the experience of a parent leaving the home (Dalla, 2003). Roe-Sepowitz (2012) recently investigated the role of childhood emotional abuse and found that compared to individuals who began prostituting as adults (n= 45), those who entered prostitution as juveniles (n= 26) were significantly more likely to have experienced childhood emotional abuse and run away from home.

Simons & Whitbeck (1991) identified a similar link between running away from home and abuse, positing that child abuse can be an unbearable experience influencing an adolescent's decision to run away. Upon running away, they become vulnerable to sexual exploitation, as it is a means to meet economic need, especially when the adolescent's age prevents them from being legitimately employed (Williamson & Folaron, 2003). When comparing adolescent victims of sex trafficking to non-trafficked youth in a community sample, significantly more prostitutes report running away from home (Nadon, et al., 1998). Similarly, among jailed women with histories of prostitution, those who report running away from home began prostituting earlier than those who never ran away (McClanahan, McClelland, Abram, & Teplin, 1999).

## **Economic Need**

Women entering sex work at any age may do so as a result of economic need (Williamson & Folaron, 2003). These women may have a low level of education, few marketable job skills (Edlund & Korn, 2002; Kramer & Berg, 2003), and face structural inequalities that disproportionately affect women including lower salaries and discrimination (Monroe, 2005), making it difficult to find legitimate employment. In addition, women are more likely to shoulder the burden of childcare and when compared to men and transgender prostitutes, women frequently identify a need to support dependent children (Weinberg, et al., 1999). Among adult sex workers, women report working more hours, making more money, and are less likely to have income outside of prostitution compared to men and transgender individuals (Weinberg, et al., 1999). This desperation to generate income for themselves and their children is certainly a risk factor for both entering and maintaining a prostitution lifestyle. Finally, transgender individuals may also face unique economic barriers due to intolerance from employers regarding their lifestyle choice (Harcourt, et al., 2001). An inability to obtaining legitimate employment, especially when combined with other risk factors such as substance abuse, may increase the risk for prostitution.

## **Race**

Women of color are also likely to be affected by the structural inequalities that influence their entry and continued participation in prostitution (Monroe, 2005). African American women enter prostitution earlier than White or Hispanic women (McClanahan, et al., 1999), and in a study of 309 street-level prostitutes, Kramer and Berg (2003) found

that compared to White women, Hispanic women enter prostitution two and one-half years younger. Much of the current research on prostitution and race addresses racism, classism, and sexism as related forms of oppression that place minority women at risk for prostitution (Monroe, 2005), and future research should explore the specific relationship between race and prostitution.

### **Human Trafficking**

Women and juveniles may also enter sex work unwillingly through the coercion of pimps (Williamson & Cluse-Tolar, 2002) and other forms of human trafficking. Recently, much attention has been paid to the problem of sex trafficking in the media. Efforts among policy advocates, social service organizations, and faith-based communities have consequently begun to recognize and address the needs of individuals who are lied to, coerced, and forced into selling sex (Cianciarulo, 2008). While we know that many individuals begin selling sex as trafficking victims, we do not know the scope of this problem. The same barriers to identifying the prevalence of sex work discussed earlier also prevent the identification of trafficking victims. In addition, pimps and traffickers may work to keep their victims physically and/or psychologically isolated in order to protect their source of income. Finally, while there is clear legal differentiation between the experiences of a sex trafficking victim and a sex worker, it is extremely difficult to distinguish difference in terms of traumatic experience and victimization (Cianciarulo, 2008); someone who may be labeled a “prostitute” may be a victim of trafficking at some point in her/his life.

## **Substance Use**

Drug and alcohol use also play a role in prostitution entry, though the research is mixed regarding whether prostitution most often precedes drug use or vice versa.

Potterat, et al. (1998) found that 94% of the prostitutes (N = 237) they interviewed reported drug use prior to prostituting, while about half of Dalla's (2006) sample reported drug use prior to prostitution entry. For women who do begin prostituting to finance a previously established drug habit, it may be likely that drugs and prostitution become a cycle perpetuating the continuation of both (Young, Boyd, & Hubbell, 2000).

## **Prostitution Lifestyle**

A final risk factor for both prostitution entry and maintenance is found in positive aspects of the lifestyle. In a qualitative study of 21 former prostituted adults, Williamson and Folaron (2003) found that women who first enter prostitution go through a learning phase in which they are focused on the benefits of the lifestyle including the fast pace, easy money, and feelings of empowerment. Other people involved in prostitution help socialize them into the lifestyle and further emphasize the benefits of sex work. When later faced with negative aspects of sex work (e.g. violence from customers or pimps), they are motivated to learn from mistakes and adopt protective strategies including carrying a weapon, using condoms, and screening customers (Williamson & Folaron, 2003) rather than leave the commercial sex industry. Sabella (2010) identified other benefits of sex work including the positive attention from men, feeling loved and wanted, excitement, good sex, and being able to support a drug addiction. While the benefits of the prostitution lifestyle eventually fade for many, others report continued satisfaction,

especially among indoor sex workers who feel control over their working conditions and do not report being affected by social stigma associated with their profession (Vanwesenbeeck, 2005).

### **Negative Effects of Experiencing Prostitution**

Risk factors for entering prostitution are often perpetuated on the street, in hotels/motels, strip clubs, and massage parlors where they are exposed to increased risks for economic instability and poverty, further coercion and exploitation by pimps (Williamson & Cluse-Tolar, 2002), and repeated abuse (Valera, Sawyer, & Shiraldi, 2001), resulting in additional mental and physical health problems (Farley & Barkan, 1998; Williamson & Folaron, 2003). The following section discusses ways in which sex workers may be negatively affected by participating in the sex industry.

#### **Loss of Control**

Experiencing economic instability, coercive and violent relationships, exposure to trauma and substance abuse can result in feeling a loss of control over one's life. Women and girls prostituting under the control of a pimp (i.e. in a trafficking situation) are often taught to abide by strict rules enforced with physical violence (Raphael, Reichert, & Powers, 2010), and thus feel no control over their own actions and relationships. In addition, relationships with traffickers are further complicated by the emotional connection many women and girls have with their traffickers; if a woman or girl believes she is in love with her pimp and/or if she has children with him, leaving may not feel like a viable option. Williamson & Cluse-Tolar (2002) found that if a prostitute working for a pimp does want to leave prostitution, it is likely that she will have to escape; however,

when the pimp feels that the prostitute is no longer valuable he may discard her, leaving her financially vulnerable.

### **Violent Victimization**

Engaging in sex work often places individuals at risk for being violently victimized. In fact, prostituted women are 60-100 times more likely to be murdered than non-prostituted women, and a study comparing prostitute to non-prostitute homicides found that crime scene evidence suggests prostitute victims are either targeted because of their occupation (and the moral judgment placed upon it) or are a “vehicle through whom offenders vent their aggression” (Salfati, James, & Ferguson, 2008, p.535).

Violence is reported by sex workers in a variety of outdoor and indoor settings (Raphael & Shapiro, 2004), though experiences of violence may differ across settings. Church, Henderson, Barnard, and Hart (2001) found that women selling sex outdoors reported being slapped, punched, and kicked whereas women working indoors reported attempted rape. Forty percent of the sex workers in Surratt et al.’s (2004) study report violence from customers in the prior year, and Dalla (2003) found that a majority of prostitute participants in her study (N =46) had experienced abuse from customers, partners, or pimps. Among women (N =222) working in escort services, 50% reported forced sex and approximately half of exotic dancers reported being threatened with a weapon (Raphael & Shapiro, 2004). Among a sample of 100 men, women, and transgender prostitutes in San Francisco, approximately 80% reported being threatened with a weapon and 44% reported being raped while prostituting (Valera, et. al, 2001). When compared to male and transgender prostitutes, women reported more physical

violence, but over half of male and transgender prostitutes reported being robbed by a client (Weinberg, et al., 1999).

### **Addiction**

Adult sex workers are known to frequently use drugs and alcohol (Potterat, et al., 1998; Valera, et al., 2001) and suffer health risks associated with regular drug use. In fact, as many as 94% of women (N= 2,658) report exchanging sex directly for drugs (Logan and Leikefeld, 2000). Crack cocaine use is especially common; among a sample of 325 prostitutes in Miami, 77% reported ever using crack cocaine and 74% reported use within the past 30 days (Surratt, et al., 2004). Another study reported less overall drug use (approximately half of the sample) but when compared to non-prostituting age-matched women, prostitutes were more likely to report drinking more heavily when they drank (Romans, Potter, Martin, & Herbison, 2000). Regular alcohol and drug use can lead to dependency, and women with moderate to severe drug dependency are more likely to engage in prostitution than women who are not addicted to drugs (McClanahan, et al., 1999). Among African American women using crack cocaine, Young et al. (2000) found that prostituting women were more severely addicted. Drug addiction is also common among male and transgender prostitutes, though one study reports that women are more heavily involved in hard drug use (Weinberg, et al., 1999). Whether a person is struggling with addiction before or after prostitution entry, their addiction can be a powerful influence over their decision to remain in the lifestyle, even if arrested; following an arrest for prostitution, women and men with a drug or alcohol addiction are

more likely to be rearrested for prostitution (Roe-Sepowitz, Hickie, Perez-Loubert, & Egan, 2011).

### **Physical and Mental Health Problems**

The accumulated risks associated with past trauma, violence, and drug use common among sex workers (especially street-level sex workers) can lead to chronic and serious mental and physical health problems. In fact, Golder and Logan (2007) found that child abuse, psychological distress and trauma events were all correlated with ever selling sex and with selling sex in the prior 90 days. Young et al. (2000) found that the drugs used by some sex workers to help cope with internal (i.e. trauma and psychological distress) and external (i.e. violent) stressors make them more vulnerable to further trauma and violence, thus perpetuating the cycle that keeps individuals prostituting and drug addicted. The accumulation of trauma experienced by many sex workers often leads to specific mental health problems; when compared to non-prostituted adults, prostituted adults reported significantly higher distress in the areas such as depression, anxiety/phobic anxiety, hostility, and paranoid ideations (El-Bassell, et al., 1997). In a study assessing the prevalence of posttraumatic stress disorder (PTSD) among street prostitutes, 42% (N=100) met criteria for PTSD (Valera et al., 2001), while another study found that 68% of prostitutes (N=130) met criteria for PTSD (Farley & Barkan, 1998). The severity of their symptoms was associated with violent experiences, childhood physical abuse, and rape while prostituting. Indoor workers also identified trauma symptoms; specifically, stressful working conditions were associated with depersonalization, a trauma symptom (Vanwesenbeeck, 2005). Among men, prostitution

has been associated with depression, suicidality, and frequent mental health service visits (Burnette, et al., 2008).

Sex workers who do not meet criteria for PTSD may still suffer emotionally as a result of prolonged exposure to prostitution, realizing that they have not been able to nurture relationships, take pride in accomplishments, or contribute to society (Williamson & Folaron, 2003). For women with children, this may be especially difficult as many report having lost custody and/or contact with children while prostituting (Dalla, 2000; Jeal & Salisbury, 2004; Sabella, 2010). Despite these findings, not all research indicates that sex work is inevitably linked to psychological harm. In one study, female sex workers reported more physical and sexual abuse while working than other non-prostituting age-matched women, but their reported levels of self-esteem, psychiatric symptoms, social support and satisfaction with intimate relationships did not differ (Romans, et al, 2000). However, these same women reported that if they had stopped prostituting at some point, they did so because they were emotionally or physically exhausted, pregnant, tired of the work, and no longer needed the income. These reasons may indicate that sex work is difficult even for the most psychologically healthy individuals.

Physical health may also suffer from extended exposure to prostitution, which is often accompanied by prolonged drug use and unprotected sex, including hepatitis B and C (Harcourt, et al., 2000), general pain in the body, and HIV, which may be higher for men and transgender prostitutes (Valera et al., 2001), though estimates for this illness are not accurate, as many sex workers have never taken an HIV test (El-Bassel, et. al, 1997).

Sex workers may also contract other sexually transmitted infections (STI), as they are between nine and 60 times more likely to contract an STI than the general population (Jeal & Salisbury, 2004). Prostitution among women is associated with increased visits to emergency rooms (Burnette, et al., 2008), and 71 female prostitutes surveyed in Bristol, United Kingdom all reported chronic illness (e.g. longstanding disability, anxiety or depression, a vein abscess, bronchitis, asthma), while only 59% reported receiving treatment for health issues (Jeal & Salisbury, 2004). Unfortunately, even among sex workers who do report that their health problems have been medically addressed, many are unlikely to follow up with care (Williamson & Folaron, 2003).

Though information is available regarding the health needs of male and transgender sex workers (with a focus on HIV and other STI's), the needs of women have been a greater focus in the literature. Little is known about the health of juvenile prostitutes, though we may assume that their risk of contracting an STI is also higher than the general population and both the risk of violence and prolonged exposure to a prostitution lifestyle may result in similar physical and mental health deterioration.

### **Legal and Social Problems**

In addition to physical and mental health problems, sex workers, including those victimized by sex trafficking, may experience isolation from positive social support and engage in other types of criminal activity. Sex workers actively involved in the lifestyle may distance themselves or feel rejected from positive social support and conventional activities such as school, church, and other political and social institutions (Williamson & Folaron, 2003). It is also possible that prostitution becomes only one of a number of

illegal activities they engage in including property crimes, which is associated with increased prostitution activity and early entry (before age 22) into prostitution (Maxwell & Maxwell, 2000). Acquiring criminal charges may act as a barrier that individuals face if they attempt to exit prostitution and obtain legitimate employment, along with meeting other basic needs (e.g. housing, food).

### **Strengths**

Though researchers generally focus on identifying negative consequences, it is important to identify the personal strengths and abilities that are also associated with prostitution, even among those who no longer engage in sex work. Many prostitutes develop interpersonal skills that help them retain customers (Sabella, 2010), deescalate violent or tense situations in order to avoid violence/physical harm (Sanders & Campbell, 2007), and these skills can remain a strength that is helpful in gaining employment, remaining safe, and developing social support networks upon exiting prostitution.

Prostituting women are also often mothers who profess a great love for their children, an obligation to take care of them, and a desire to regain custody if it is lost (Hedin & Månsson, 2003). Reestablishing a relationship with children is often a primary motivation for exiting prostitution (Williamson & Folaron, 2003); while service providers may not feel that this goal is feasible (Arnold, et al., 2000), they should affirm the love and devotion felt by these mothers and acknowledge it as a strength.

Sabella (2010) found that some women see their difficult experiences in prostitution as valuable for shaping their character and providing opportunities for personal growth. Some women I have met through my involvement with a prostitution

exiting program echo this perspective, explaining that time in prostitution helped them become strong, learn how to endure any hardship, and have great hope and faith. Individuals who feel regret over the relationships and opportunities lost because of prostitution (Williamson & Folaron, 2003) may benefit from exploring the positive ways that their experiences helped to shape the person they are today. Finally, many sex workers who believe that they have willingly chosen their profession and wish to increase the rights of sex workers exhibit strong advocacy and organizing skills (Wahab, 2002).

### **Exiting Sex Work**

Research on prostitution exiting has identified a number of specific needs that should be met in order for individuals to exit and maintain a life without engaging in sex work. These needs are summarized by Dalla (2006) as supportive, emotionally secure relationships, formal support services, and economic assistance including employment. Intervention services that help women meet these needs take a variety of forms ranging from case management (Arnold, Stewart, & McNeece, 2000; Davis, 2000) to diversion programs (Roe-Sepowitz, et al., in press; Wahab, 2006) and residential treatment (Roe-Sepowitz, Hickie, & Cimino, 2011).

### **Supportive Relationships**

Research on prostitution exiting repeatedly emphasizes the important role that positive social relationships play in helping to facilitate and support the exiting process. Dalla, Xia, & Kennedy (2003) found that among female sex workers, having emotional and physical assistance from others (i.e. social support) is positively associated with using healthy coping strategies and negatively associated with the number of difficult life

events. They suggest this may indicate that women who do not have positive social support experience more difficulties because they are forced to rely on themselves, and they emphasize the need for intervention programs to help women access and establish support networks. This need is echoed by Davis (2000) who reported that women exiting prostitution had great difficulty giving up the network of people they relied upon while prostituting, and found that developing positive support (e.g. a support group, case manager, sponsor) was essential to building a life outside prostitution. In addition, Hedin and Månsson (2003) found that among 23 Swedish women who left prostitution, most had to sever all contact with the people they knew while prostituting. Exiting sex work without any social connection was extremely difficult; in fact, only one quarter of the women in their study were able to leave prostitution without family contact. Family relationships include romantic relationships (specifically relationships formed after exiting prostitution), and relationships with children whom are often a primary motivation for exiting prostitution among women. Repairing friendships and forming new friendships is also essential, though it is important to note that upon exiting prostitution, individuals may rely on social workers and other helping professionals (Hedin & Månsson, 2003) who should help and encourage the formation of other supportive relationships.

### **Formal services**

Formal support and professional services must be available for prostitutes who face a variety of internal and external barriers to exiting. Drug and alcohol detox and/or treatment may be a primary need for individuals who prostitute in order to fund their

addiction (Arnold, et al., 2000). Prostitutes who desire to regain custody of children or repair family relationships may also need the help of legal and/or social services (Arnold, et al., 2000). While these services may be available from organizations that help victims of violence (e.g. domestic violence shelters) or deal with general physical and mental health, the research emphasizes the need for treatment aimed specifically at addressing the multi-faceted needs of prostitutes (Dalla, 2006; Roe-Sepowitz, et al., 2011). This need is also evident among individuals with mental or physical health problems. They need treatment from service providers that are knowledgeable and sympathetic towards this population (especially for transgender sex workers, see Harcourt et al., 2001) and who are aware of prostitution-specific experiences that may place individuals at risk for increased mental health problems.

One group who may be at risk for increased mental health problems includes women who enter prostitution as juveniles as they report higher clinical levels of dissociation relative to women who began prostituting as adults (Roe-Sepowitz, 2012). For these women, trauma may accumulate throughout childhood and/or while prostituting. Suffering from a serious mental illness may also act as a barrier to exiting, as some individuals who begin prostituting and maintain a prostitution lifestyle suffer from serious psychiatric conditions (Flowers, 1998). In fact, stabilizing mental health symptoms was among the greatest challenges reported by staff in one community-based prostitution-exiting program (Arnold et al., 2000). Roe-Sepowitz et al. (2011) also found that the severity of mental health issues was identified as a barrier to successful exiting among a group of 49 women in a residential prostitution exiting program, as women who

left the program early reported more serious mental health issues overall than women who stayed in the program.

Though the severity of mental health problems experienced by sex workers is varied (McClanahan, et al, 1999), the need to include mental health treatment in interventions designed to help women exit prostitution is clear (Dalla, 2006, Kissil & Davey, 2010). Hedin and Månsson (2003) found that women who successfully exited prostitution utilized a variety of mental health resources during the exiting process. Initial contact with a knowledgeable social service worker was important during times of crisis, and many (60%) engaged in psychotherapy at some point to address trauma and symptoms of PTSD, improve self-esteem, establish healthy boundaries, and construct a new identity. It is important that the type of therapy is effective in addressing the variety of problems sex workers may face (Napoli, Gerdes, & DeSouza-Rowland, 2001), and that the services are tailored to meet differing levels of need. For example, Davis (2000) found that upon initially exiting prostitution, women utilized services that helped them meet basic survival needs, and later they needed the opportunity to therapeutically deal with their traumatic experiences.

### **Employment**

Prostitution affords many a relatively high wage for a low skill job (Sanders, 2007). In order to exit prostitution, individuals must be willing to work for a lower wage and may need to pursue education in order to have the opportunity to obtain legitimate employment that meets their needs (and the needs of dependents). Unfortunately, having a criminal record limits employment opportunity (Maxwell & Maxwell, 2000) as many

employers will not hire felons, and the social stigma associated with prostitution may further limit work opportunity or result in discrimination (Månsson & Hedin, 1999). One solution is to decriminalize prostitution (Sanders, 2007) though this may not necessarily abolish stigma; this solution also does not take into account the real financial and educational needs of former sex workers. People exiting prostitution must be encouraged to pursue a job that is realistic and pays adequately (Arnold, et al, 2000) by helping professionals who are able to assist them in this pursuit.

### **Readiness to change**

A final component to prostitution exiting is a willingness to change. Regardless of the services available, one is only able to change if s/he is motivated. Exiting prostitution requires a motivation to change and disillusionment with the prostitution lifestyle (Williamson & Folaron, 2003). In one prostitution-exiting program, women who did not complete 90 days of treatment were significantly younger than those who completed 90 days (Roe-Sepowitz, et al., 2011) suggesting that the younger women may not yet be disillusioned with the prostitution lifestyle. Davis (2000) also found that younger women were more likely to drop out of treatment, and Dalla (2006) noted that the women in her study who had been involved in prostitution for the longest period of time appeared to exit quite easily as prostitution was no longer profitable or rewarding.

### **Intervention Services for Women Exiting Sex Work**

As discussed earlier, women who want to exit prostitution need access to comprehensive services that address mental health and social support needs. They also need the opportunity for legitimate employment (Monroe, 2005) and may need help with

childcare (Benson & Matthews, 1995), drug treatment (Jeal & Salisbury, 2004) and safe housing (Dalla, et al., 2003). Due to stigma associated with prostitution even among health professionals, individuals with prostitution experience need access to service providers that are knowledgeable and sympathetic (Harcourt, et al., 2001). These service providers may be found working in a variety of settings including domestic violence shelters, drug treatment facilities, or health clinics. However, Zweig, Schlichter, & Burt (2002) suggest that women who are facing multiple barriers (including addiction, mental and physical health problems, domestic violence, and prostitution) need treatment that specifically addresses their unique stressors.

Unfortunately, services addressing prostitution and sex trafficking are few; Farley (2010) identifies only 13 states that have organizations specifically helping prostituted or sexually exploited individuals (at least one has closed since the time that these services were published on the Prostitution Research and Education website). Of these organizations, a few appear to offer long-term residential programming (e.g. the DIGNITY program in Arizona), a few offer transitional housing, and the remaining offer case management and out-patient services. Another intervention option available in some states is the prostitution diversion program. There are at least four such diversion programs, though the requirements and services provided vary by state (Roe-Sepowitz, et al., 2011). The effectiveness of each intervention type has not been compared, but researchers have identified useful components of residential treatment, community-based case management, and diversion programs in helping women exit sex work.

## **Residential Treatment**

While not every woman who wants to leave sex work needs residential treatment, it may be an appropriate option for those who can benefit from intense long-term help rebuilding their lives. Roe-Sepowitz, Hickie, and Cimino (2011) discuss one such program that offers adult women safe housing, employment or education assistance, individual and group counseling, access to additional mental and physical health services, and peer support. They compared women who were and were not successful in completing at least 90 days of treatment, recommending that residential treatment providers should train staff to recognize symptoms of mental illness and negative coping strategies, and should provide group and individual therapy to address trauma symptoms. If applicable, program participants should also engage in family therapy before transitioning out of the program and should have access to a clinician trained to address dysfunctional sexual and relationship issues (Roe-Sepowitz, et al., 2011). This cross-sectional study does not identify the success of residential treatment in helping women stay out of prostitution, and future research should examine its effectiveness relative to other intervention modalities.

## **Community-Based Case Management**

Another current intervention available in selected cities for women who want to exit sex work may best be described as case management. A number of organizations identified by Farley (2010) provide some form of case management that often includes crisis management, peer support, referrals for counseling and/or housing, and

employment or legal help. This type of intervention is less intensive than residential treatment, but can still provide the variety of services these women may need.

The Council for Prostitution Alternatives program is an example of a case management intervention that first addresses immediate needs, then helps the women recognize the self-destructive nature of prostitution, heal from past abuse, and prepare for life outside of prostitution with the help of parenting skills programs, job training and an emphasis on building non-deviant support networks (Davis, 2000). Only a small number (n= 73) of the 399 women who began the program left sex work by the time of Davis' (2000) study, highlighting the difficulty serving this population and the need for further research in understanding the most effective way to help women exit sex work. Davis notes that the program's biased perspective (i.e. they believe all sex workers are victims of an oppressive system) may not align with the experiences of all women who want help leaving sex work, especially those who see their primary barriers to exiting as structural and legal (e.g. difficulty finding employment with a criminal record or that pays a living wage; Sanders, 2007).

Another example is a case management intervention in Florida that utilized a similar approach. First, outreach workers were employed to go on the streets or into jails to identify women with sex work experience who had criminal justice involvement and who wanted help exiting sex work (Arnold et al., 2000). Case managers then assessed the women's needs, referred them elsewhere for mental health and/or substance abuse treatment and housing, and provided some basic services including group meetings. Case managers interviewed for the study noted common barriers to exiting including drug

addiction, mental health problems, violent victimization, child custody issues, difficulty finding employment, and the “glamorous” side of prostitution that some women were not yet ready to exit sex work. Interestingly the women who did engage in the program reported that the attention and personal interest from staff members was a primary reason why they agreed to participate; this finding supports Roe-Sepowitz et al.’s (2011) recommendation that intervention program staff must be trained to engage and recognize the treatment needs of this population.

### **Diversion Programs**

A third relatively new intervention modality utilized by some states is the prostitution diversion program. Minimal attention in the research has been paid to the effectiveness of these programs, though the research thus far appears promising. This approach is in some ways similar to other case management programs, for the diversion programs often offer (or refer elsewhere) a variety of services including mental health and drug treatment and job skills training, while also placing legal pressure on the women to complete the program in order to avoid jail time.

Two recent studies have examined the effectiveness of prostitution diversion programs. First, Wahab (2006) interviewed program participants, staff, and program directors of the Salt Lake City Prostitution Diversion Program. This program offered three phases of programming across 38 weeks. Program components included individual and group counseling, life skills training, and referrals for additional treatment if necessary. Qualitative findings indicate that the program did help keep women out of jail and provided a safe place for them to discuss difficult life issues.

More recently, Roe-Sepowitz et al. (2011) examined the City of Phoenix Prostitution Diversion Program. This program involves 10 classes or meetings (e.g. 12-step meetings and life skills classes) and a 36-hour class offered during the course of one week that covers topics including life skills, relapse prevention, self-esteem, domestic violence, and sexually transmitted diseases. Findings indicate that among 448 women and men (all men identified as transgender) who agreed to participate in the diversion program, those who completed the program were significantly less likely to be rearrested during the 12 months following program completion relative to participants who did not complete the program. This finding speaks to the usefulness of the program in preventing rearrest, but does not indicate the efficacy of the program in reducing overall participation in sex work.

### **Models of Exiting**

Researchers have proposed various models that identify and account for the experiences women undergo when exiting sex work. Among the most commonly cited are the models described by Swedish researchers Hedin and Månsson (1999) and British researcher Sanders (2007). Both models are identified as strongly influential in the development of Baker, et al.'s (2010) integrated model, and are discussed briefly below.

Hedin and Månsson (1999) proposed a model of exiting based upon interviews with 23 women. They identified five phases of prostitution including drifting in, ensnarement, pre-breakaway, breakaway, and post-breakaway. In the pre-breakaway stage, sex worker considers exiting and may explore alternatives to prostitution. Next, the woman decides to exit prostitution; this could be an immediate turning point or a gradual

process. Third, the woman must struggle with the challenges she faces as she is stuck between her old and new life. Finally, the woman finds a new identity through occupational and/or family roles. This model emphasizes structural factors (employment opportunity, public discourse related to prostitution), relational (strength of informal and formal relationships), and individual factors (self-esteem, hope for the future) influencing the exiting process.

Sanders' (2007) model approaches exiting from a different perspective; she focused only on exiting and identified four types of transitions out of sex work including 1) a reactionary transition resulting from violence, health issues, or a life event like pregnancy or prison, 2) a gradual transition resulting from access to formal services such as safe housing, drug treatment, or mental health counseling, 3) a natural progression away from sex work motivated by a desire to change or a disillusionment with the prostitution lifestyle, and 4) an unsuccessful exit in which an individual "yo-yo's" back and forth between seeking services and re-entering prostitution. Sanders (2007) emphasizes personal agency, cognitive transformations, and a supportive legal/structural/political climate as integral to the exiting process.

Most recently, Baker, Dalla, and Williamson (2010) developed an integrated model by drawing upon the two prostitution-exiting models discussed above and two general models of behavior change (Stages of Change by Prochaska, DiClemente, and Norcross and the Fuchs Ebaugh's Role Exit model, as cited in Baker, et al., 2010). Their model proposes six stages to the prostitution-exiting process: 1) *immersion* in sex work without any thought of exiting, 2) *awareness* resulting from both a feeling of

dissatisfaction in life and a conscious connection that sex work is a reason for dissatisfaction, 3) *deliberate preparation* to exit sex work exhibited through seeking out formal and informal support, 4) *initial exit* from sex work where a woman follows through with preparation and leaves prostitution, 5) *reentry* into prostitution that may result in either a re-immersion into the prostitution lifestyle or another attempt to exit, and 6) *final exit* in which a woman permanently leaves sex work.

### **Theory**

A theory for prostitution exiting has not yet been established, though larger theories of human behavior and more specific behavior change models can be drawn upon to inform the current study. First, the ecological systems theory is discussed as a broad theoretical framework for understanding the various influences that help and hinder women from exiting prostitution. Second, Fuchs Ebaugh's Role Exit model (1988) is discussed as a specific four-stage model that addresses behavior change over time, and can be useful for understanding how sex workers exit a stigmatized profession. This model also informed the integrated model for exiting prostitution (Baker, et al., 2010) that is the focus of the study, and a discussion of this six-stage model will conclude the chapter.

#### **Ecological systems theory**

One useful theory for understanding prostitution is the ecological systems theory, commonly used by social workers to help explicate the ways in which an individual and the environment interact and reciprocally influence each other (Payne, 2005). The theory posits that humans can only be understood within the context of the systems they inhabit

(Ashford, LeCroy, & Lortie, 2006). Furthermore, people are healthiest when their environment is supportive and when they can influence their environment as they are being influenced. Payne (2005) explains that when problems (e.g. poverty or discrimination) are introduced, a person is less likely to influence their environment and they may become stressed by life transitions, pressure from the environment, and relationship difficulties. For prostituted individuals, these life transitions may include running away from home, prostitution entry (often in a sex trafficking situation), adapting to a prostitution lifestyle, the beginning of a drug addiction, becoming disillusioned with prostitution, and/or attempting to exit. Environmental pressures may include poverty and economic need, the threat of arrest, or violence from pimps or customers. Relationship difficulties may include strained (or severed) relationships with children and family and coercion, exploitation, or violence perpetrated by pimps or customers.

This theory explains how a person internalizes these stressors based upon their perception of the stressors and may begin to feel that they are not able to control their environment (Payne, 2005). Prostituted women may often feel that they are not in control of their environment if they experience poor health, compromised safety, economic instability and conflicts with multiple systems including antisocial associates (e.g. pimps, drug dealers, friends engaging in prostitution), law enforcement and the criminal justice system, and the broader culture that stigmatizes prostitution.

Ecological systems theory does an excellent job of emphasizing our need to understand the various systems that can affect someone exiting prostitution. However, it does not provide a framework for identifying the order in which stressors should be

addressed or the needs that must be immediately met upon first exiting prostitution. For example, some research on prostitution exiting (discussed earlier in this paper) indicates that immediate needs are safety and stabilization, while other services like psychotherapy are useful once a person has safely exited and is more stable in their new environment.

If this theory is adopted by researchers focused on understanding the exiting process for prostituted women, it may be used as a framework for identifying and addressing all of the systems that impact sex workers including interpersonal systems (Hedin & Månsson, 2003) and the historical, structural and political systems (Sanders, 2007; Wahab, 2002) that prevent or facilitate exiting prostitution. Finally, ecological systems theory emphasizes the need for humans to find an environment in which they fit best and are able to reciprocally influence. For women exiting prostitution, this may mean they find a program that meets all their treatment needs while helping them to develop a healthy sense of personal agency so that they can begin to feel control over their new environment.

### **Role Exit Model**

Fuchs Ebaugh (1988) began investigating the process of exiting a role by interviewing former Catholic nuns in the early 1970's. In an effort to identify a general process of "becoming an ex", she and her colleagues interviewed people who had exited a variety of other roles through divorce, widowhood, job changes, ideological (e.g. political, religious) changes, and transitioning out of a stigmatized lifestyle (e.g. as a prison inmate, alcoholic, prostitute). Fuchs Ebaugh (1988) explained that exiting a role involves disengaging from a role that was once a central part of one's identity and

working to establish an identity that accounts and acknowledges the ex-role. This process happens within a social, cultural context over time, often beginning before an individual is even aware that they want or need change. The process of exiting a role involves four stages: first doubts, seeking alternatives, the turning point, and creating the ex-role. Furthermore, the process varies depending on the degree to which a former role was central to one's identity, the duration one lived within the role, how easily reversible the role is (e.g. widowhood is not reversible, alcohol addiction is), and the degree of control one had over her/his exit (Fuch Ebaugh, 1988). Other factors influencing the exiting process include the negative or positive reactions among one's support network, the perceived options regarding the possibility of a new role, and the experience of exiting a role alone or as part of a group. Each of these factors is inherent to the experience of leaving prostitution, as is discussed in the research on social support (Hedin & Månsson, 2003) and structural influences on employment and the availability of services (Sanders, 2007); it also supports the idea presented in the ecological systems theory that multiple systems affect an individual's ability to create positive change in their life, and identifies specifically the difficulty in various stages of a life transition for people exiting a role. While this model is not meant to be understood as a theory, it provides a broad look at the common experiences people undergo when leaving one identity to pursue another. Specifically, it frames the experience of former sex workers within the larger context of leaving one role for another, as it is often part of the human experience.

### **An Integrated Model for Prostitution Exiting**

Baker, et al. (2010)'s model can arguably fit within the larger framework of ecological systems theory, as it specifies the variety of systems that interact with an individual when exiting prostitution and accounts for the stress involved with life transitions, environmental pressures, and difficulties in relationships (Payne, 2007) Drawing upon other research on behavior change (i.e. the Stages of Change by Prochaska, DiClemente, and Norcross and the Fuchs Ebaugh's Role Exit model) and the components of prostitution exiting identified in the literature (Hedin & Månsson, 1999; Sanders, 2007), Baker et al. (2010) proposed a six-stage model that they believe best identifies the process women undergo when exiting sex work. Through this model, the authors compare parts of the general and prostitution-specific models that are similar while pointing out unique features of each model. For example, they note that Sanders' (2007) description of a *reactionary* exit from prostitution is similar to Hedin and Månsson's (1999) *turning point*, while her explanation of a *natural progression* exit from prostitution parallels *contemplation* in the Stages of Change model. Baker et al.'s (2010) in-depth analysis of these models results in a thoughtful and detailed description of what exiting prostitution may look like for most women.

Their model is not a major theory (nor is it explicitly rooted in a major theory), and so its usefulness cannot really be compared to ecological systems theory. However, because much of the literature on prostitution exiting has been exploratory up to this point, their model is a step forward in the relatively small field of prostitution and sex trafficking research as it considers what prior exploratory research has already identified (e.g. risk for prostitution entry, barriers to exiting) and provides an organized way to

understand the exiting process. This model also specifically draws upon Fuch Ebaugh's Role Exit model, a larger model of behavior change that links what we know about the process of adopting a new identity to what we know about exiting prostitution for women. Baker et al.'s (2010) model has not been tested, so its usefulness is not known. An important way that this model can be either supported or challenged through research is to confirm or disconfirm its usefulness, as I intended to do with this study.

## Chapter 3

### METHODOLOGY

This study is best understood from the philosophical framework of constructivism. A constructivist framework proposes that humans build and make sense of their world through interacting with it. The epistemological position of this framework is that true knowledge is found in the ways in which individuals create meaning from their experiences (Duffy & Chenail, 2008). Individuals are all influenced by their cultural and historical context (Payne, 2005); they understand and account for their experiences as a part of interpersonal relationships. A constructivist paradigm accounts for the fact that each individual has unique experiences and thus forms their sense of reality based upon these experiences. Reality is viewed as a relative construct, though shared social constructions can contribute to a group or society viewing reality in a similar way (Payne, 2005).

Creswell, Hanson, Plano Clark, and Morale (2007) advised that following the identification of an interpretive paradigm (i.e. constructivism), researchers should identify the research question that will inform the research design and guide the researcher toward her or his goal. This process was undertaken in the present study, resulting in the development of specific research questions identified in Chapter One. These questions are rooted in an understanding of the research in this field and seek to build upon prior knowledge while allowing room for new information about the existing process to emerge from individuals' experiences within this process. A narrative approach to data collection was utilized because it supports a constructivist framework by

allowing narrators to tell their stories from the perspective of their experience, rooted in a particular social context (Wells, 2011). Furthermore, Squire (as cited in Wells, 2011) specifically links constructivist ideology to narrative inquiry, stating “narratives are a way in which individuals make sense of themselves and the world” (p.5). A phenomenological analysis was then employed to develop the results for this study; this approach to analysis emphasizes meaningful experience over hard facts and allows meaning to emerge from the participants words without expectation or constraint, thus supporting a constructivist framework.

### **Ethical considerations**

DiCicco-Bloom and Crabtree (2006) identify four ethical issues that may arise when collecting qualitative interview data including the need to reduce risk for unanticipated harm or exploitation, to protect participants’ information, and to inform participants about the nature of the study. Each of these issues was addressed in a number of specific ways. First, the study was approved by the Institutional Review Board (IRB) at Arizona State University. To reduce risk for exploitation, I avoided recruiting participants that were formerly clients at the agency in which I previously conducted therapeutic groups. In addition, the compensation provided to participants (\$20 gift cards) was not extravagant, and therefore not likely misinterpreted as purchasing cooperation from participants (Padgett, 2008). To reduce the risk of unanticipated psychological or emotional harm, participants were informed prior to starting the interview that they were able to terminate the interview at any time. If they began to feel distressed, they could withdraw from the study at any point, and the information letter I provided prior to

beginning the interview included contact information should they have questions or concerns following the interview. I also chose a neutral location in a social services office that participants were familiar with, and offered to meet elsewhere (at a location of their choosing), though all participants willingly came to the social services office for the interview.

### **Confidentiality**

Another important ethical consideration is confidentiality of participants' information. Confidentiality was maintained by 1) utilizing pseudonyms rather than participant's real names or identifying information in any document for the research, including audiotapes sent to a transcription service, 2) storing documents and audiotapes in a locked office that only I and my dissertation chair have access to, and a password-protected website that offers cloud storage, and 3) providing participants with an information letter prior to beginning the audio taped interview. This letter discussed the nature of the study, any risks and benefits of participating, and the freedom to refuse participation at any point without consequence.

### **Positionality, Power, and Influence**

Sex work researchers have a unique responsibility to understand the experiences, needs, and diversity within the population they study. Challenges arise as researchers deal with 1) the unknown size and boundaries of the population, 2) the hidden and illegal nature of prostitution activity, and 3) the heterogeneity of the population (Shaver, 2005). These challenges translate into ethical issues for researchers when attempting to recruit research participants and later generalize findings from small homogeneous samples to a

large heterogeneous population. If sex work researchers do not proceed with care throughout each stage of their research, they may unknowingly exploit or further stigmatize participants and present inaccurate findings that hinder our knowledge about sex workers' experiences and needs.

While social scientists have long sought to “bracket” their own beliefs about a phenomenon they are investigating, van Manen (1990) a well-regarded phenomenologist, suggests instead that it is better to clearly state our own beliefs, biases, and assumptions so that we can come to terms with these assumptions “not in order to forget them again, but rather to hold them deliberately at bay and even to turn this knowledge against itself” (p. 47). Thus I feel it is imperative to discuss my own experience with the phenomenon under investigation for this study. Prior experience working with, studying, educating, and advocating for prostituted and sex trafficked adults and adolescents has certainly influenced my personal perspective on exiting as the best option for most sex workers. I have been a part of various agencies working to provide safe housing, physical and mental health care services, education and employment opportunities, and specifically address trauma symptoms via a psychoeducation group I have facilitated for a number of years. This work has allowed me to hear the stories of hundreds of current and former sex workers, and sex trafficking victims, over the years. I have heard countless stories of violence and abuse, pain, regret, and an overwhelming lack of alternative choices among individuals who “choose” sex work. I am aware that without careful reflection, these experiences could hinder my ability to present any findings that contradict with my role as a provider and supporter of specific formal services. I strove for this type of careful

reflection from the beginning, as I structured the interview question and prompts to avoid value-laden language, and then throughout the data collection and analysis.

Researchers must also be aware that participants could be intimidated or influenced by their role for a number of reasons including their connection with certain individuals, government, or other institutions and their level of education or perceived knowledge. I acknowledge that my roles as an outsider (i.e. having never been a sex worker), an educated person, a social worker, and an individual involved with prostitution-exiting services (that many participants are familiar with) may differentially impact participants' view of me, along with their level of comfort sharing personal details, and the pressure they do/do not feel to participate in my study. In order to reduce any perceived power differential and increase trust, I endeavored to be clear about the purpose of the study in the information letter each participant received. I provided participants with the gift cards (i.e. compensation) prior to beginning the interview so that participants felt they could end the interview at any time, I used common language in interviews (meeting literacy and language needs of participants), and demonstrated proficiency in developing rapport with participants as evidenced by their willingness to share, and to exhibit a range of emotions (e.g. laughing and crying). I also considered participants' needs/requests when selecting a convenient time to meet, and accommodated their schedules. In addition, I addressed prostitution as a revenue-generating activity rather than identity category or deviant activity, as suggested by Shaver (2005) so that participants felt comfortable discussing commercial sex work from their own perspective.

## **Narrative Data Collection**

A narrative approach to data collection was selected for its emphasis on collecting stories about the lived experiences of individuals, how these experiences unfold over time (Creswell, et al., 2007), and how they are situated within personal, cultural, and historical contexts. Creswell, et al. (2007) differentiate between two perspectives taken by narrative researchers: 1) narratives are collected for the purpose of analyzing themes across stories, and 2) narratives are descriptions of events that can be reconfigured to create a larger story. This study adopts the former perspective as it is best suited for examining and reflecting upon the stages of exiting described by the theoretical model informing this study (Baker, et al, 2010). Narrative research has been defined in a number of different ways, though the term will be used for this study to identify an approach to qualitative inquiry that seeks out personal stories from participants who were encouraged to use their own words and categories to narrate their life experiences (Muller, 1999). Narrative data collection emphasizes the lived experience of each person, recognizes the importance of multiple perspectives on a topic, supports the notion of a socially constructed reality that is rooted in a specific context, and acknowledges the impact that a researcher will inevitably have on the research (Muller, 1999). As a result, researchers collecting narrative data often view their role in the interview process as a collaborator, and the final product of a completed interview as a co-construction.

This perspective demonstrates a strength of the narrative approach to data collection, as many other approaches to research (especially quantitative research or approaches rooted in a positivist paradigm) attempt to ignore or limit what many view as

the inevitable impact a researcher has on the research process. However, critics argue it may also invite personal bias into collecting and analyzing data. To address this problem, a number of measures can be adopted including developing an open-ended question, follow-up questions, and prompts to use throughout the interview that are non-directive (DiCicco-Bloom & Crabtree, 2006) and by allowing participants to feel comfortable enough to relay honest, in-depth information.

### **A Phenomenological Approach to Analysis**

Narrative inquiry has roots in phenomenology, (Ricoeur, as cited in Riessman & Quinney, 2005), a philosophy and research method that seeks to understand the meaning ascribed to human experiences. More specifically, a phenomenological analysis is well suited to revealing meaning inherent in the narratives people tell about their experiences, and as such, was considered an appropriate approach to analyzing the narrative data collected for this study. This approach to analysis also allows the researcher to gain access to the phenomena under investigation from the perspective of those who have experienced it. Phenomenological inquiry is in many ways a creative endeavor, as researchers attempt to capture both unique and universal ways of being in the world. As such, it is not useful for attempting to solve problems in a concrete or definitive way. Instead, phenomenology seeks to derive meaning from an experience. The first research question for this study is an example of a question that seeks to find meaning; while this question will not directly solve a problem, it may provide answers that help me (and others) become more helpful and act in more thoughtful ways towards individuals experiencing this phenomenon (van Manen, 1990).

Phenomenology became a prominent philosophical approach in Germany in the early 20<sup>th</sup> century, and was made useful by Edmund Husserl, a philosopher who separated himself from the positivism that dominated scientific inquiry (Bernstein, 1978) at that time. Other philosophers helped develop phenomenology as a philosophy and method of analysis include Heidegger, who emphasized interpretation (hermeneutics), Gadamer, who positioned the researcher as an active part of the study (Dowling, 2007), and van Manen (1990), who provided a framework for asking questions regarding the nature of a phenomenon as an “essentially human experience” (p. 62). Van Manen also provided a structure for engaging in phenomenological analysis, requiring researchers to first select an experience to study that is of serious personal interest, and then to investigate experiences as they are lived rather than merely conceptualized. Next, researchers must reflect upon the themes that appear to be essential to the experience, and engage in writing and rewriting. This process allows one to become immersed in the data (Crabtree & Miller, 1999), an essential step in this type of analysis. Throughout the process, van Manen (1990) recommends remaining constantly aware of the research questions guiding the study, as this singular focus can help prevent the researcher from being distracted, wandering down unrelated paths of inquiry, or searching out confirmation for one’s own (biased) preconceived ideas about what the data will reveal. This structure served to guide the analysis for the present study.

### **Establishing Rigor**

All researchers should offer evidence that their research demonstrates fidelity, transparency, respect for participants, beneficence, appropriate skill level, and is a

contribution to their respective fields (Duffy & Chenail, 2008). In quantitative research, these strengths are manifested in the validity and reliability of the research; however, qualitative research often emphasizes trustworthiness, a concept that aims to address rigor and accountability while permitting the flexibility that makes qualitative research rich and meaningful (Padgett, 2008). To ensure the trustworthiness of the study, an audit trail was used to clearly delineate the path taken to analyze and reflect upon the data, and demonstrates how codes were added, defined, eliminated or combined. In addition, member checking was utilized, as three participants were asked to verify the interpretation of their transcribed interviews and the overall findings from the study. I also engaged in negative case analysis, which involves looking for disconfirming evidence in the data (Padgett, 2008); for example, I asked participants what they missed about their former life in prostitution and gave them the opportunity to discuss what about “the life” was positive for them. Finally, I made a strong commitment to intellectual honesty (Borkan, 1999) demonstrated by 1) engaging in reflexivity by continuously examining my perspective on interpretations of the data and 2) exploring alternative hypotheses that may not confirm the model that the codebook is based upon.

### **Method of Analysis**

All interviews took place at the Catholic Charities’ DIGNITY Diversion Office in central Phoenix, Arizona. Participants were notified that they could choose another location if they wanted, but all participants were familiar with the office location and chose to come there. Interviews lasted between 21 and 57 minutes, with an average length of approximately 38 minutes, and were audio-taped and sent to a transcription

service (Verbalink) to be transcribed. Transcribed interviews were then entered into the nVivo software package for the purpose of analyzing textual data. The initial proposed plan of analysis was to employ a template approach wherein codes were created to coincide with the descriptions of exiting stages described in the Baker, et al. (2010) model. However, upon immersing myself in the data, it was determined that this approach would limit the exploration of the depth and richness in each story. Thus, a phenomenological analysis was employed; reading the transcripts carefully allowed several overarching themes and subthemes to emerge from the data. Though phenomenological analysis does not require that data be coded, a codebook was created to increase the rigor of the analysis, and provided a way to clearly identify and explain each theme found within the data. In addition to codes that emerged from the data, a few *a priori* codes were derived from Baker et al.'s (2010) model; this model also served as an additional analytical lens. The inclusion of *a priori* codes is often utilized when there remains much that is unknown about a phenomena but prior research on the subject under investigation cannot be ignored. For example, Weegmann and Piwowitz-Hjort (2009) studied recovery from addiction by collecting narrative data, but acknowledged that significant research on this topic in the past had already identified common themes in addiction recovery, so they drew upon those themes when structuring interview questions and analyzing data.

An audit trail was kept to record the process I went through in understanding, defining, and refining codes during the development of the codebook. Throughout the process of creating codes and developing the codebook, I sought feedback from other

researchers and practitioners with knowledge on this topic and they were instrumental in the decision-making process. Funding constraints did not permit an additional analyst to code the data, however, one researcher who had read approximately 30% of the interview data was able to offer input; we met frequently and underwent a process of discussing discrepancies in interpretation and resolving them as a team (Brotto, Heiman, & Tolman, 2009). I also created timelines for each participant to help identify the chronological order that events occurred in. Upon completing the analysis, I utilized member checking to ensure my results were reliable; I was able to meet with three participants, allowed them to see the timeline I created for their stories (to ensure accuracy) and then explained my results. All three participants, who are also employed at an agency as case managers working with prostituted and sex trafficked adults, confirmed the coding scheme and agreed with the way in which each code was defined. In addition, I informed them of the practice recommendations I planned to discuss in Chapter 5 of this paper, and they were supportive of my recommendations.

## Chapter 4

### DATA ANALYSIS AND RESULTS

#### **Procedure**

A purposive sampling strategy was employed to recruit individuals who have past experience selling or trading sex. This sampling strategy allowed for the deliberate contact and selection of participants based upon their ability to meet specific criteria (Padgett, 2008) including: 1) age 18 or older, 2) have some experience with selling or trading sexual services for money, safety, shelter, or other commodities, and 3) self-report that a minimum of two years' time has passed since they last sold or traded sex. Regarding the age criterion, participants were required to be age 18 or older because the exiting model that is under investigation for this study was developed to explain the process of exiting among adults; thus, only adults were included in the study.

The literature on a length of time out of sex work that best predicts long-term success is sparse, though recently Roe-Sepowitz, et al. (2011) found that among individuals arrested for prostitution and enrolled in a prostitution diversion program, a majority who recidivated did so within the first 10 months of the arrest. While measures of recidivism do not accurately capture the number of individuals participating in illegal activity, it still may indicate that the first 10 months are a crucial period of time for recidivism, and that individuals who are not rearrested within this time frame are more likely to permanently exit the prostitution lifestyle. Thus, I felt that a minimum of two years outside the prostitution lifestyle was sufficient criteria for this study. Other than the two year minimum, no limit was placed upon length of time out of sex work. The

decision to include individuals who have been out for any number of years (following the two year minimum) was made with the intent to include people who had experienced very different access to services, and who may have experienced barriers in unique ways over time.

### **Recruitment and Sampling Method**

Recruitment of participants took place through my personal involvement with a local prostitution diversion program. My involvement with the program brought me into contact with an individual who was able to connect me with other individuals who met criteria for the study and were willing to participate; thus, I employed a snowball sampling technique. While this technique inherently limits generalizability, it is commonly used when studying hidden populations (Padgett, 2008).

Another consideration when recruiting participants involves determining a sufficient sample size. Though qualitative researchers often utilize small samples relative to those used in quantitative research, the size of a sample in a qualitative study should be logical and intentional considering the depth and intensity of the interviews (e.g. if participants are a homogenous group and/or are interviewed at length on multiple occasions, the researcher is justified in using a small sample)(Padgett, 2008). Each participant was interviewed only once, and a heterogeneous sample was desired; therefore, a larger sample is justifiable.

With these considerations in mind, I initially recruited and interviewed 21 individuals; 19 interviews are included in the final analysis. One participant's interview was excluded because her experience trading sex was very limited (e.g. she agreed to

have sex with a friend in exchange for drugs a few times), and upon finishing the interview we agreed that she did not adequately meet the second criterion for this study. The other participant's interview was excluded because she was the only transgender individual I was able to identify and recruit for this study, despite efforts to recruit both male and transgender individuals. Her experience was distinctly different from other participants, especially regarding availability of formal support services, informal support networks (e.g. with other transgender survivors of sex work and sexual exploitation), and barriers to legitimate employment; thus, it was determined that the interview should be excluded from the analysis.

The 19 interviews were determined to be sufficient, as a point of data saturation had been reached. Saturation occurs when the collection of new data no longer contributes new knowledge to the concept being investigated (Bowen, 2008). All qualitative researchers do not follow the process of identifying a point of saturation uniformly; rather, it is the responsibility of the researcher to give evidence of saturation (Bowen, 2008). Throughout the first couple of interviews, each participant presented new information regarding how they became aware of a desire to exit sex work, any attempts to exit unsuccessfully, barriers encountered throughout the exiting process, supports they utilized throughout the exiting process, and the manner in which they finally exited sex work. As the interviews progressed, I began hearing similar experiences from participants who experienced sex work very differently. For example, two of the final participants I interviewed, Annie and Samantha (pseudonyms) had very unique experiences. Annie was a victim of sex trafficking at age 15, and had exited sex work by

age 21, much earlier than other participants. Samantha had only ever experienced indoor sex work, whereas a majority of participants had engaged in street-level prostitution. Despite these unique experiences, at the time I interviewed them, their narratives echoed similar themes including drug use as barrier to exiting, utilizing substance abuse treatment services, and the use of both formal and informal support services. Following the completion of the 19<sup>th</sup> interview, I reflected upon the recurring experiences I had heard and determined that though I had sought out participants who experienced sex work in unique ways, I was no longer collecting new data and had reached a point of saturation.

### **Interview Procedure**

Data collection took place between February 2013 and April 2013. Each interview began by providing an information letter (see Appendix A) to participants (taking the place of an informed consent document) and allowing them time to read through the letter and ask any questions for further clarification. Next, participants were asked to fill out a brief demographic questionnaire (see Appendix B), identify a pseudonym that would be used to link their questionnaire to the audiotaped interviews, and were provided with a gift card as compensation for participation. Finally, the audio taped interview took place. The purpose of utilizing a demographic questionnaire was to obtain basic information that was not otherwise the focus of the interview but provided insight regarding where participants are coming from. The purpose of interviewing participants was to collect narratives, and as such, the interviews began with an open-ended question that allowed participants to respond freely (Wells, 2011). Specifically, the question participants were

asked was: “Can you please tell me the story of your exit from sex work, prostitution, or a sex trafficking situation, beginning with the first time you thought about getting out?” This question was constructed with the hope that its broad nature would effectively instigate narrative telling; this was often the case, providing rich and varied responses; however, a number of prompts were utilized to clarify and elicit deeper responses as participants recalled the exiting process they went through (see Appendix C). Initial interviews raised a few important topics I had not initially considered, and thus these interviews served to inform the remaining interviews. Two prompts were added to the initial interview schedule as a result.

Some researchers attempt to remain uninvolved in this process, but Wells (2011) explains that researchers who believe that narrative is a co-constructed product resulting from the exchange between interviewer and interviewee are more likely to become involved, ask additional questions, and listen actively. This approach was taken in this study as it coincides with a constructivist perspective, acknowledging that the mere presence of the interviewer shapes, builds, and affects the participant’s understanding of their own story. Interviewers working to co-construct narratives with participants must balance an active interviewing style while conveying a non-judgmental attitude (Wells, 2011) and maintaining relative consistency across interviews, which I attempted to do.

## **Results**

A total of 21 former sex workers were recruited to participate in the present study, and 19 were included in the final analysis. A majority of participants identified as White (n = 11), followed by Hispanic (n = 4), Black (n = 3) and biracial (n = 1). At the time of

the interviews, participants ranged in age from 25-59, with an average age of 44.5 years. Age at prostitution entry ranged from 13 to 31, with an average age at entry of 20.6 years. Sixty-seven percent (n=12) of participants were victims of sex trafficking at some point in their lives. Specifically, nine participants (47%) reported first engaging in sex work before age 18, and five of those who entered before age 18 reported ever working for a pimp or trafficker; four participants who entered sex work as adults also reported working for a pimp or trafficker. Participants spent between two to 31 years involved in the sex industry, with the average time spent involved in sex work (including time as a victim of sex trafficking) was 14.7 years ( $SD= 9.5$ ). At the time of the interview, the length of time spent out of sex work ranged from 3 to 27 years; a majority (n= 16; 84%) had been out for 10 years or less. The most common type of sex work participants engaged in was street prostitution (n=16; 84%), though a majority of participants (n=12; 63%) experienced more than one type of sex work (see Table 1). For a visual timeline representing the exiting process for each participant, see Appendix F.

Several careful readings of the data provided opportunities to become immersed in the data, to “listen deeply” and reflect upon themes as they emerged from the data (Borkan, 1999, p. 181). This reflective process resulted in the identification of five overarching themes (preparation, initial exits, hindering factors, helping factors, and change) encompassing 21 subthemes (see Appendix A). A number of these themes (and subthemes) coincide with stages in Baker et al.’s (2010) model, and the ways in which the results from this study support or enrich the model will be discussed.

Table 1. Demographics

	Frequency (N=19)	<i>M (SD)</i>
Race		
White	11 (57.9%)	
Hispanic	4 (21.1%)	
Black/African American	3 (15.8%)	
Biracial	1 (5.3%)	
Age at time of interview		44.5 (9.2)
Age at prostitution entry		20.7 (5.9)
Length of time in sex work		14.7 (9.5)
Length of time out of sex work		9.1 (5.6)
Ever worked for a pimp	8 (42.1%)	
Type of sex work		
Internet call girl/escort	5 (26.3%)	
Dance/strip club	6 (32.6%)	
Telephone call girl	7 (36.8%)	
Street prostitution	16 (84.2%)	
Pornography	7 (42.1%)	
Brothel/massage parlor	4 (21.1%)	
Current level of education		
< High school	3 (15.8%)	
High school/GED	14 (73.7%)	
College degree	2 (10.5%)	
Employment status		
Unemployed	5 (26.3%)	
Part-time	3 (15.8%)	
Fulltime	11 (57.9%)	

### Preparation

Before exiting sex work, and often preceding unsuccessful attempts to exit, many participants recalled thoughts and experiences that lead up to their final exit. Some entered through a trafficking situation, or felt compelled to enter in order to meet a need and they recalled feeling a desire to get out from the very beginning. Others did not consider exiting, either as a realistic option or something they were interested in doing,

until the very moment they were forced to exit due to a serious injury or an arrest. Those who did consider exiting at some point prior to a final exit did describe having experienced similar feelings and experiences, thus leading to the development of four subthemes within the larger theme “preparation”. These subthemes are: Awakening, Disillusionment, Planning, and Reduced Connection with the Lifestyle, and they coincide with the initial stages of Baker et al.’s (2010) model<sup>1</sup>.

### **Awakening (*Visceral Awareness*)**

Before becoming consciously aware that they wanted to exit sex work, many participants spoke about a single moment or period of time when they began to awaken, as if from a sleep or stupor, and started to feel the impact of difficult circumstances more intensely. What they had accepted or ignored in the past was becoming uncomfortable and/or painful. They discussed starting to feel for the first time, or talked about how the numbness they had adopted as a coping mechanism slowly- or suddenly- stopped working. This experience of awakening to the difficult reality of their life in sex work coincides with Baker et al.’s (2010) description of “visceral awareness”, as a time when women become aware, at a subconscious level, that they are unsatisfied with life in sex work, though they have yet to make a connection between these feelings and their involvement in sex work.

Nine participants reported experiencing this phenomenon. Cleo Little recalls an experience where she was raped and assaulted by three men in one night, saying, “It was like for the first time I finally felt these men really beating on me...any other time it was

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<sup>1</sup> Coinciding stages from the model are listed next to each theme in parentheses.

like, ‘Oh, that’s a piece of cake. I can handle that.’...but that particular [night]- that was different.” She went on to recall, “I’m looking up in the sky, and I’m talking to God, and it seemed like the moon was getting brighter and brighter and brighter the more I just sat there and talked.” Other women described experiences of being tired and weary, of an uncomfortable feeling in the pit of their stomach, having a moment of clarity, desperation, or having a sensation that the numbness was wearing off. Michelle explained, “I just started not being numb anymore and just reality started creeping in and I started thinking about family and it just started coming at me real hard.”

Some women experienced this awakening when they became tired of going in and out of jail, experiencing the discomfort of a transient lifestyle, and paying attention to other older women out on the streets with them whose lives they did not want to emulate. Party Girl said, “I began looking at them and saying to myself, ‘Oh God. I don’t want that to be me.” Cathy recalled, “I remember vividly standing on the sidewalk at 19<sup>th</sup> Avenue and Mountain View Road thinking God, I’m 45 years old. What happens in 20 short years at 65 when normal people are retiring and spending their golden years with their grandkids?” Finally, others spoke about relationships with customers that began to make them aware. Tracey talked about relationships with several regular customers and she said, “You get to know they have families, and after a while, that just really- like I don’t care how high I got, I don’t care how busy I stayed- I just had this...little voice inside my head saying, ‘Would you want somebody to be doing this to your family or your husband?’”

### **Disillusionment (*Conscious Awareness*)**

Sometimes following a period of awakening (described above), participants were involuntarily removed from sex work (i.e. an arrest), or they sought treatment for other issues (i.e. substance misuse), and they began to believe that sex work was a primary reason for their dissatisfaction. This awareness came about suddenly for some and very gradually for others. Participants' stories of becoming disillusioned coincide with Baker et al.'s (2010) description of "conscious awareness" in their exiting model. In prior research on prostitution exiting, becoming disillusioned with the prostitution lifestyle is described as an important precursor to exiting and most (n=16) of the women in this study experienced this in very unique, often difficult ways. Two participants recalled becoming suicidal when they could no longer continue living in their current situations. Crystal said, "When I first wanted to get out I was actually trying to do it myself...I had a guy pull a gun on me and I walked up, put my forehead up against it, and said 'Go ahead. You've got to clean up the mess, not me.' That's how bad it was." Jezebel recalled losing custody of her children and feeling suicidal. She said, "I was gonna blow my brains out or I was gonna quit." Others echoed her sense of desperation, following a first experience with a violent customer, feeling trapped but unable to identify a way out, or even while experiencing relative comfort; Tracey talked about being in a nice hotel room purchased by a generous customer when she just walked out: "I said out loud, 'Good riddance.' And I didn't know where I was going or what I was going to do, but I was just like, 'I can't do this anymore.'"

Porsche spent 31 years involved in the sex industry before suffering a violent attack by a customer that left her unable to return to the industry. She had not intended to

exit the sex industry prior to the attack, but still admitted, “You get tired of the people, the things you have to go through to make money and you want out so you think, ‘I’ll go out one more time, this’ll be my last time, I’ll do it one more time, my last time, God help me, my last time.” For many participants, experiencing disillusionment did not immediately result in an effort to exit sex work. Instead, they spoke about wanting to leave situations that they did not know how to get out of. Six participants who described feelings of disillusionment did not end up exiting sex work until they were arrested one last time or experienced life-threatening injuries.

### **Planning (*Deliberate Preparation*)**

In Baker et al.’s (2010) model, the third stage involves deliberate preparation to exit sex work. Six participants in the present study described this process in their efforts to gather information, seek out others who had received help exiting sex work, or look into formal services that they might utilize. Lori had a friend in a drug treatment program, and she decided to call the friend and inquire about that program. Ness spent a few months locating a drug rehabilitation program that would accept her Medicare insurance, and two women recalled keeping a flier or business card among their belongings in case they ever wanted to call for help. Cleo Little described stashing a piece of paper with the phone number for a program that helped prostituted women in a shoebox where she kept important papers, saying, “I kept that piece of paper because I said, ‘One day I’m going to use this paper.’ That was my purpose for keeping it...that was an important piece of paper, ‘cause six years later I found it.” Most of the women who described planning and preparing to exit did successfully follow through. However, it is important to note that a

majority of participants (n=13; 68%) did not describe ever planning or preparing to exit, indicating that this is not a necessary step to go through in order to successfully exit sex work.

### **Reducing Connection with the Life (*Deliberate Preparation*)**

Another way that several (n=4) participants also demonstrated deliberate preparation to exit sex work was when they tried to sell sex less frequently, engage in less risky behavior (e.g. working only indoors and avoiding street prostitution), began working a legitimate job while still selling sex occasionally, or only doing business with regular customers. One woman described regular customers paying her rent or supplying drugs, another woman recalled, “Trying to do it on my own, but I was still going to bars, getting drunk...the person that paid for the beer is the one that got sex.” (Crystal)

Another participant left an abusive trafficking situation, but continued to work independently for a while; however she still considered this step as part of her journey towards exiting. Sarah recounted a period of life where she no longer considered herself a sex worker/prostitute, but was “still jumping in and out of cars...playing games trying to get money.” At that time she had a supportive probation officer who was helping her with resources, she was meeting other requirements of probation, but hadn’t completely quit utilizing sex work as a way to make ends meet. Sarah’s experience demonstrates how some women may continue to participate in sex work as their connection to the prostitution lifestyle is weakened, eventually leading to their final exit.

### **Initial Exits (*Initial Exit and Re-entry*)**

Fifteen women told stories about prior attempts they had made to exit. This supports Baker et al.'s (2010) model, as they emphasized that initial exits and re-entry into sex work were typically a part of the exiting process. While some of the women in this study recalled a particular exit attempt with great detail, many described their initial attempts as chaotic. Contrary to the model's design, it was difficult to separate initial exits from re-entry into sex work because they were not described as separate or distinct events. Ten women utilized substance abuse treatment services (e.g. inpatient or outpatient drug rehabilitation programs, sober living/"halfway" houses) at some point; at least seven of these women explained that addiction was then a primary force compelling them to re-enter sex work. Jezebel said, "I tried [exiting] several times, went to several treatment centers, but nothing worked...I'd been in shelters, too, for battered women. I went to shelters for battered women, but the drugs always pulled me out of there 'cause I was really addicted." Two women specifically mentioned staying at domestic violence shelters several times in an effort to exit the sex industry, and nine women recalled staying with friends, family, a boyfriend, or husband during periods away from involvement in sex work.

When asked to clarify the number of times they recalled trying to exit, women spoke of multiple attempts, of thinking about it often, and a few participants emphasized that many of these attempts came within the year or two preceding a final exit. Crystal recalled approximately seven attempts to exit within the two years preceding her final exit, and Shelly recalled ten attempts over two years where "I was really in and out of jail, in and out of rehab, in and out of my mom's house." Other women recalled multiple

attempts over decades of involvement in sex work. Cathy remembered trying to exit approximately one time each year, for nearly 20 years. Jezebel estimated 20 or 30 attempts to get out. Tracey recalls three or four concerted efforts to exit, but said, “I can’t even tell you how many times I, like, swore off doing it, said I’m not going to do it anymore...I said to myself, ‘I’m not going to do it today’, or ‘I’m not going to do it tomorrow’, or ‘I don’t want to do it anymore’...more than 100 [times].” Other women wanted to exit but could not find the resources that connected them to support. Annie said, “Every time I got locked up I’d tell myself I wasn’t gonna do it anymore...A few times after getting locked up and not having a job, even though I wasn’t using, I would go back [to prostitution] to make money to pay off something...” Other women also talked of wanting to stay out of sex work after being released from jail, but did not have someone to pick them up and they were unsure of where to seek out resources (other than regular customers, boyfriends, or acquaintances who used drugs). The number of attempts many of these women made to exit speaks of a willingness and motivation that service providers can draw upon when engaging in outreach or providing assistance to this population.

### **Hindering Factors (*Barriers*)**

In the research on prostitution exiting, much attention has been paid to the personal, structural, societal, and relational factors that create barriers to successfully exiting. These hindering factors were confirmed in the stories told by participants for this study and were spoken of more frequently and with greater detail than other components of their exiting story. The strength of these barriers was multiplied when they were

woven together with other barriers, creating a kind of web that became very difficult to untangle from, even among the most determined participants. To elicit greater detail about these hindering factors, I asked several questions that prompted deeper and thicker descriptions, including: 1) “Can you tell me about the people who may have hindered your attempt to get out?” 2) “What kinds of barriers did you come up against while trying to get out?” and finally, an additional prompt was added after several participants spontaneously spoke about legal barriers as an important part of their story: “Can you tell me about any legal barriers you faced while trying to get out?” The subthemes identified under the overarching theme “Hindering Factors” included: Lifestyle, Relational Difficulty, Presence of Negative Social Networks, Addiction, Economic Need, Legal Barriers, Adult Roles/Responsibilities, and Stigma.

### **Lifestyle (*Individual Barrier*)**

Williamson and Folaron (2003) described the process of “learning the lifestyle” of prostitution as exciting, glamorous, fascinating, empowering, and provides an immediate income (p. 276). For women who experience poverty and abuse, this lifestyle can seem like the only option to feeling confident and secure. While the glamour and promise of the lifestyle fades over time (Williamson & Folaron, 2003), many participants in this study found it very difficult to give up the culture, identity, freedom, power, and fast money that the lifestyle promised them. Of the 19 women in this study, 14 discussed the role that the lifestyle played in making exiting from sex work very difficult.

The culture associated with the lifestyle is glamorous and exclusive; once a participant joined, they felt that they belonged to something special. A majority entered

sex work as an adolescent or young adult, during a developmental period of life where belonging and identity are very important. Thus, the lifestyle met this need and provided a framework for understanding themselves, their ability to succeed, and their place in the world. Cleo Little described the glamorous and exiting life she entered, at age 15:

It ain't so much the money, because how could it be the money when we're giving it to a pimp, how could it be the money when we're giving it to the drugs? It's the freaking lifestyle, man. It's the freaking lifestyle...due to my experience for me, it's the lifestyle. It's the people, it's the places and the things. It's the lifestyle...Once you're out there in them streets...it's lit up. I mean if you can get on Bell Road and don't go to jail, man, it's lit up.

Sasha, another participant who also entered sex work as an adolescent, echoed the excitement and explained how it felt to belong to this exclusive subculture:

You got this pimp who doesn't recognize you by your name. You get a street name. He gives you your whole name so to speak, but then you turn into bitch and ho' and that's how you're referenced. That doesn't feel good either, but it's where you're at, it's how you're living and you just get through that moment. You're happy to be out there and around the other girls jumping in and out of cars and hotel rooms or whatever. It becomes a lifestyle. You become addicted to the lifestyle as well.

This exciting culture provides a life that is lived one moment at a time, without thought of the future or life outside sex work. Michelle explained this sense of feeling trapped by it, saying, "I never thought about getting out of it. I never thought about doing anything, but I never thought I'd survive. I just didn't think beyond the day or the hour." This kind of thinking, common among survivors of violent and traumatic experiences (Herman, 1992), can make even considering an exit from exploitative circumstances nearly impossible.

Another way that the lifestyle was described as a barrier to exiting was in the ease and accessibility of it. Unlike exiting other roles where going back is difficult and may

mean putting in time and effort (e.g. entering a new romantic relationship, getting a new legitimate job), re-entering sex work is something many participants described as a decision that could be made at any moment. Annie, a young woman who was compelled by her boyfriend's parents to sell sex at age 15, said "Every time I said I was done I meant it, but it was so easy and it was so accessible and it was such a lifestyle." She explained that even after getting sober, going through treatment, and beginning a legitimate job, the glamour and accessibility of the lifestyle remained a significant barrier:

It took me a while not to be able to glorify it in a lot of ways...I think there was always in the back of my mind this thought that this wasn't gonna last. Sobriety wasn't going to last. Me not working in that life wasn't gonna last. Eventually I was gonna go...I do believe in triggers in the life because there are certain things that no matter how long I go without doing it, there will always be that quick thought in the back of my head that says I know what'll fix this.

This insight is important, especially for those interested in helping women and girls out of trafficking situations. While we have an understanding about the cravings and triggers that overwhelm people recovering from drug and alcohol addiction, we do not always acknowledge the strong pull that the prostitution lifestyle can have for someone who has successfully exited sex work.

The ease and accessibility of the lifestyle is made more alluring by the freedom and fast money it can provide. Tracey described this freedom, saying "I'm making these men feel good. I'm making my money. Nobody's telling me what to do". She also explained that as a mother with young children, this freedom provided the flexibility to both financially provide for and spend time with her children. Participants' experiences with financial stability varied, as some only experienced street prostitution that barely

provided the means to support a drug habit while others made enough to live comfortably for a while. However, no one was able to make the income sustainable. Monique said, “You have hopes that one day you’ll hit a financial state where you’re going to stop and you can take care of your kids and they can get whatever they want. Every mother wants their kids to have things they didn’t, you know...you keep hoping that the dream is going to happen.” When women realized that the dream of becoming financially secure was not going to happen, they still struggled to let go of the familiarity and identity that the lifestyle provided. Another participant named Sarah described the early days of recovery, saying, “I used to walk up to that house bawling at the end of the day because I still walked like a prostitute, still talked like a prostitute...[but] I was trying to stay sober and not turn tricks.”

### **Relationship Difficulty (*Relationship Barrier*)**

Relationships acted as both the support that helped pull women through the exiting process and the barriers that made exiting difficult. A majority (n= 14) of the women in this study mentioned that stressed or severed relationships with family, children, and romantic partners created a significant barrier to exiting and inhibited the recovery process.

**Children.** Thirteen participants had children before or during their involvement in sex work, and their relationships with children were a source of guilt, stress, and heartache. For many women, the sadness and guilt that accompanied losing custody of children as a result of involvement in sex work and/or drug addiction was a primary factor that kept them from attempting to get out. Angelica explained this experience:

Oh God, I thought I was just the worst human being 'cause I wasn't a mother; because as a Hispanic in our culture, the women are the mothers. You're the mother, the nurturer. You take care of everything and everybody. You give life. That is your main purpose for existing. That comes before everything else, a career, everything was being a mother. I so totally failed in that. That's one of the things that kept me out there much longer.

Women spoke with depth and intensity regarding the sense of loss associated with losing children, and feeling shame, as they believed that they were not "good" mothers. Crystal had four children; the first was a product of incest when she was an adolescent, and after having three additional children, she relinquished custody of them all. She recalls being abusive to her children and said, "There was a lot of guilt. That helped keep me running, and that's part of my anger. You know, I felt like I had abandoned my children; a good mother doesn't do this." Sarah experienced similar feelings of loss and shame, recalling,

When I lost my two boys I thought I'd lose my mind. The guilt, the shame, the devastation. All these things... You feel so nasty anyways, or I did. I can't speak for other women, but you just feel like this is everything that a mother's not supposed to be and when I'm sober I am none of this but the dope has me and I can't stop.

These women felt the weight of expectation to be in caretaking, nurturing relationships with children but were not able to meet these expectations. Sasha explained this, saying "Motherhood was obsolete until after I got out of prison...my parents took responsibility for my children...and my parents protected them from me...I didn't have that maternal instinct and things of that nature...I missed out on a whole lot."

Upon exiting sex work and recovering from addiction, many women regained custody of children and continued to struggle. After lengthy periods of time away, they were not sure how to discipline or bond with children, and a majority regained custody of children as single parents with limited income. Maria spoke about this struggle, saying

that when she lost custody of her children, her oldest daughter was five years old; when Maria regained partial custody, she was 14: “I don’t know how to do this, but it was definitely a learning curve because there were times I’d wanna just buy my way out of guilt...it was really, really hard not to buy their love out of guilt and realize that, ya know what, they’re kids, they love me, I’m part of them.” Jezebel recounted a similar struggle:

It was really hard because I didn’t even know how to be a mother before I started using drugs because my mother wasn’t an example that I would wanna follow, but it just took trial and error. I asked my kids to forgive me and I let them vent...I think I’m the best mother today that I’ve ever been.

Like Jezebel, many of the women who told of the ongoing struggle to navigate parenting and accept the loss of children for whom they never regained a relationship with also told of success. Relationships with children played a central role before, during, and after the exiting process (confirming prior research in this area, see Hedin & Månsson, 2004), and the data from this study demonstrates the need for programming aimed at helping this population to provide services that address motherhood and parenting in straightforward and tangible ways.

**Intimacy.** Another aspect of relational difficulty experienced by women throughout the exiting process was in navigating intimate relationships with others, including friends and romantic partners. In early recovery, this could mean that even basic socialization and relationship building presented challenges. One participant talked about an inability to trust anybody else, because she had suffered so many betrayals; she felt like it would be easier to stay where she was than suffer the “heartbreak” of broken trust. Cleo Little talked about the way in which her relatively isolated life in sex work made adjusting to a more diverse world quite difficult. She said:

Let me tell you something, I never, ever, ever lived in the same house with another race...and some of the girls was nice to me and some of the girls wasn't. Because I was the only Black girl at that house...and let me tell you something else that was hard for me. Because to learn how to socialize with normal people...was kind of a challenge for me.

The difficulty with trust, forming friendships, and learning to communicate with others created barriers before and during the exiting process. Upon exiting, many women told of continued struggle as they formed new relationships and realized that they were not prepared for intimate connection, vulnerability, and physical touch. Maria told of rejecting healthy affection from close friends saying, "I didn't wanna be insulated, I didn't want anyone touching me." She viewed all men as selfish, wanting only to take something from her, and when she got into a new romantic relationship she said, "It took me a real long time to get out of hooker mode during sex and it took me a long time to get out of that rubber band intimacy. The come here. It's like naming your dog Stay. Here stay." Her analogy expresses the internal struggle of simultaneously wanting someone close and far away at the same time, and this was something many other women spoke about as well, talking in general about sexual issues that may have begun during sexual abuse early in life, and telling more specific stories about how they struggled with intimacy in relationships. Angelica recalled:

To my marriage's detriment, I was very adamant about when we had sex...then I realized why I was like that. I was so hard core about it because I didn't have any choice before...and I realized I carried that over into my marriage. I would tell my husband no just because I had to feel that power 'cause I was stripped of it for so long.

Annie recounted a similar, ongoing struggle: "After I got clean, it took me a long time to be sexual again at all...I didn't want to be touched. It was almost as if I had the fear in

the back of my mind that if anybody touched me at all that everything was gonna break and I was gonna go back.” She went on to talk honestly about her current relationship, and while she feels that she now has a healthy understanding of her sexuality, “there are certain things sexually that I’ll never be able to do again ever. I can’t wear lingerie. I can’t do it. I cannot bring myself to even remotely go there. So there’s little things like that just stick with you.”

### **Negative Social Networks (*Relationship Barrier*)**

Relationships played another important role in the hindering of the exiting process. Participants described these relationships as negative connections with friends, pimps, and customers who forced or encouraged them in remaining involved in sex work. The strong presence and influence of a negative social network acted as a barrier to getting out and staying out.

**Friends.** For Sasha, the process of trying to exit sex work and stay sober was often interrupted by friends who wanted to use drugs with her. She said, “Somebody always knew where I was and it [recovery/sobriety] would be interrupted...” Cathy, another participant who became involved in prostitution to support a drug addiction said, “The people that hindered me from getting out would be the people that I was hanging out with at Sunny Slope. My fellow drug addicts and alcoholics.” For some women, these negative peers can also become exploitative. Crystal, a woman who entered sex work after escaping an abusive relationship, talked about how friends did not want her to recover from addiction because they profited from her exploitation. If she continued to make money by selling sex, she would help pay for their drugs as well:

*Crystal:* ‘Well, its’ easier to get somebody back in [sex work] because you know that person is going to bring in the money; they’re going to get you high, you know.’

*Interviewer:* ‘So you would’ve probably helped them if you’d stayed in.’

*Crystal:* ‘Yeah Yeah.’

*Interviewer:* ‘So in some ways you guys, even though you never had a pimp, people were pimping each other out, you know, all the time.’

*Crystal:* ‘Yeah.’

**Pimps.** Another relationship that created a significant barrier to exiting was a relationship with a pimp or trafficker. This relationship has long been understood as a significant barrier to exiting commercial sex work, as pimps use force, coercion, and any manner of threat or manipulation to keep victims from leaving. Many participants in this study talked about pimp control, but had managed to escape their trafficking situation long before they exited sex work, and thus did not appear to be a trafficking victim at the time they exited. Cleo Little worked for pimps for many years before becoming addicted to drugs and managing to escape:

I had a pimp at that time and I felt like I was dedicated to him. The more I wanted to get out, the scarier it got, because it’s like once you choose a pimp and you get with that pimp, it’s like you done made this commitment and he owns you now, and their ain’t no getting out of that shit. There’s no getting out of it...And I remember when I was in New York City, I wanted to come home for Christmas, and I couldn’t...I was with him [the same pimp] for 7 years, and the next pimp, I was with him for about, oh, 14-15 years.

She continued sex work as a “renegade”, on her own, for many years and by the time she exited, she was not looked at as a trafficking victim, despite spending a majority of her adolescence and young adulthood under pimp control. Another common experience is in the case of a boyfriend or romantic partner who benefits from a woman’s continued involvement in sex work. Samantha, a woman who left the sex industry after

working exclusively for escort agencies and other indoor/higher end locations (and did not identify as ever working for a pimp), explained,

I was making all the money. I was paying the car payment. I was paying the house payment. I was the one that had the money, plus I had the drugs and I was paying for the money for us to get high...I remember he was the one that said, 'We really need some money. Can you just turn one trick?' I said, 'Okay, I will.' Even though I didn't want to do it.

**Customers.** Relationships with customers also represented another negative component of many participants' social networks, and served to keep them involved in prostitution. Six participants discussed developing relationships with customers that 1) they hoped would help them get out, or 2) the customer's continued presence in their lives made it difficult to sever ties with sex work. Monique described meeting customers that promised to take her out of "the life", but she explained, "there's always a catch. There's always something in it for them. You know, they're not trying to help you; you've got to remember that. So I've been through a lot of those ones, you know?" This experience represents intent to get out that was thwarted by customers who interacted with her and exploited her further when falsely offering help. Crystal explained a similar experience; she talked about her first attempts to exit, saying: "Well, it started out with some older trick, you know, with the 'I'm going to take care of you. We're going to do this. We're going to do that.' Picked me up out of jail, took me back, and the first thing he did as soon as we got to his house was just paw me." In this instance, she was promised help out of the life by a man who then sexually assaulted her. Women like Crystal who had limited resources and social support relied upon customers to help them get through difficult times (e.g. getting a ride from jail, meeting a quota set by a pimp, or

supplying drugs), and the customers did help meet immediate needs with the expectation that the woman would remain involved in sex work and continue to be available to them for purchase.

In fact, a number of participants described relationships with customers who clearly understood their situation but did not intervene in any way. Angelica, a woman who was trafficked by a violent man for a number of years, described being badly beaten by him and then attempting to work with black eyes and bruises. She believed that the customers saw her injuries, but went ahead purchasing sex with her anyway. She said, “They just didn’t ask. They knew. They didn’t ask. They were scared of him too.” Customers knew that she worked for a dangerous man- one they were also fearful of- but that did not motivate them to provide help or to stop purchasing sex from a woman who was visibly in distress. These examples underscore the importance of addressing demand as a primary driver of sex trafficking victimization, and highlight the complicated, rarely discussed, relationship that many sex workers have with customers.

### **Addiction (*Individual Barrier*)**

Prostitution and addiction have long been associated in the research, specifically among individuals engaged in street-level prostitution and Baker, et al.’s (2010) model acknowledges the important barrier addiction can be when attempting to exit sex work. In a recent critique of their model, Öhlund and Grönbladh (2012) argue that they do not adequately acknowledge the fact that for many women, substance abuse is the primary problem and when substance abuse is treated, women are no longer interested or compelled to sell sex. This critique is worth considering, as all 19 participants in this

study suffered from drug addiction at some point prior to exiting, and a number of women did talk about prostitution as merely a means to supply their drug addiction. For example, Samantha said:

What happened was I was struggling with drug addiction. So that's really the biggest part of the story of getting out...For me, the adult industry was a means for being able to afford the amount of drugs that I needed to stay high on a daily basis. When I was ready to get sober, everything just fell into place after that.

When asked to clarify the relationship between drugs and prostitution, many participants described them as inseparable: "My drug and alcohol use...it got to the point where they went hand in hand." (Cathy). "Prostitution was a way of keeping my drug habit going." (Party girl). "If I wouldn't have started heroin, I would never have prostituted." (Candy). Sarah said, "I didn't think about anything, except for keeping my high going. When I'm sober I am none of this, but the dope has me and I can't stop."

Despite this clear connection, and the emphasis some participants placed on treating substance abuse as the primary problem, a majority of participants also discussed the need to address prostitution experiences. In the example above, Sarah talked only of her addiction to drugs but later in her interview, she shared the difficulty she had leaving the familiarity of sex work, including the validation and approval it provided. Other participants talked about entering substance abuse treatment programs, but as they began to recover, they found that they needed treatment that specifically addressed prostitution as well. This was often true for women who became involved in sex work before becoming addicted to drugs. Ness experienced extreme poverty as a child, suffered abuse, and began selling sex as a young adolescent. When asked if drugs or prostitution was the primary issue for her, she said, "Drugs were first. Prostitution, I used it as a tool to get

back at people.” In this statement Ness describes how prostitution provided a sense of power and control. Many other women in the study who described feeling powerless in other parts of their lives echoed this belief and substance abuse treatment alone will likely not address this core belief. Ness did recover from drug addiction and exited sex work by entering a substance abuse treatment program; however, she eventually also became involved in a program for women exiting sex work, and is still involved with the program five years later.

### **Economic Need (*Structural Barrier*)**

Economic need is another barrier supported by a large body of research on prostitution and sex work, and 12 participants in this study described the important role that prostitution played in providing for basic needs, supporting children, or becoming the only viable income source for someone with limited education and/or employment skills. Cleo Little experienced this problem, saying, “I didn’t stop until [age] 47...it was hard, because there was nowhere to go. And even if I stopped for a week, I didn’t have a job or anything like that. I didn’t even have my high school diploma, so I didn’t think I was even employable...I never even tried looking for work.” While sex work provided a means to survive, it left women without other options and very disconnected from the rest of society. Many participants described the significant stress associated with economic need during their exit from sex work.

Samantha described this process, saying,

The thing with getting out of the industry is how are you gonna make a living. That’s the biggest, hardest part of it. You can turn a trick and make a few hundred dollars whereas you would work a 9 to 5 job, hourly payroll and get taxes taken

out...what you would make in a week working your ass off, you can turn in 1 or 2 tricks.

The reality of accepting a low wage job that pays weekly or monthly can feel stressful, even impossible, for women who have spent years making relatively large amounts of money that is paid immediately, on the spot. This difficulty is something that must be addressed in treatment, as the early months following an exit are among the most difficult. Annie described her first few months of treatment, saying:

It had been so long since I had had a normal job. I was covered in track marks. I weighed 89 pounds. I was hardly employable...the first 90 days were really, really hard and then after that it was a constant reoccurring thought because what else are you gonna do...[back] then, the money was huge. It was massive.

Annie describes a very complicated situation as a former victim of sex trafficking, involved in inpatient treatment for heroin addiction at age 21, and constantly preoccupied with worry about meeting basic needs outside of selling or trading sex. This preoccupation made exiting difficult for many women who knew that without significant financial help or personal savings to draw from, they would have to go without any income for weeks while they looked for work and waited for the first few paychecks to come in.

### **Adult Responsibility (*Individual Barrier*)**

Fear, a lack of experience, or a lack of confidence in the ability to carry out adult responsibilities were commonly experienced by participants in this study who had spent a significant period of their adult lives in sex work. Participants spent an average of nearly 15 years in the sex industry; the oldest age at entry into sex work was 31, and nearly 70% were under age 25. This is an age when many young adults are gradually learning how to

manage adult responsibility and take on adult roles (e.g. employee, renter, tax payer).

Lori explained the impact of a lengthy isolation from normal experiences, saying, “We are isolated in that life and so far away from anything normal, that when the normal life comes back you don’t know how to do it.”

Seven other women talked about difficulty adjusting to the expectations that accompany adulthood. When asked about the barriers that made life difficult as she exited sex work, Michelle said, “Just getting my life back. Getting a job and getting my ID back and getting my family back.” In this statement, Michelle lists “getting my ID back”, a task many would consider relatively simple, right alongside other tasks (finding a job, fighting for custody) that we might normally expect to be quite stressful. Other women echoed the feelings of stress and worry that accompanied relatively simple life tasks: “Of course I don’t know how to budget money” (Maria). “I guess I was learning to deal with problems, learning to solve problems in a responsible way...and I wasn’t used to that” (Party Girl). “My biggest fear was the responsibility. Because when I say I’m going to be somewhere, I have to be there” (Crystal). Fear of responsibility, or failing under the pressure to meet the expectations placed upon them early in recovery, was something that women were often preoccupied with. This is a common experience for individuals recovering from addiction, and is something treatment programs often seek to address (Marlatt & Witkiewitz, 2005). However, an emphasis on this barrier is rarely a focus of research or treatment literature in regards to exiting prostitution.

Monique first began selling sex at age 15 and remained in the commercial sex industry for 27 years. She spoke at length about the difficulty adjusting to life outside of a

prostitution lifestyle: “You know what else is hard? Not living in motel rooms...there’s no kind of regular skills for us at all, period. House cleaning, none of that...I didn’t even know how to put gas in a car; I had to learn.” Monique went on to talk about watching television to learn life skills (many for the first time) at 42 years old.

**Stigma (*Societal Barrier*)**

Another important barrier that a majority (n = 11) of participants discussed was stigma, defined for this study as feelings of shame and experiencing judgment or being ostracized because of involvement in sex work. Participants described feeling ashamed when they were still involved in sex work because they felt uncomfortable around others, they believed people would judge them, or they felt that once they had participated in sex work, they could not be anything else, anything other than a sex worker. Annie explained this belief saying, “In my own head I couldn’t do anything else. I didn’t know how to do anything else. I was never gonna be able to do anything else.” Sarah described similar feelings, recalling a memory of walking around in the mall, thinking that everyone knew she was in prostitution: “I thought I had...hooker written on my forehead. Junkie written on my forehead...I felt so dirty. I couldn’t even think of getting out because I couldn’t imagine what I would do when I got out.” In these descriptions, the stigma attached to prostitution (and made more difficult by addiction, another stigmatized experience) was extremely powerful, preventing and even paralyzing women from making a move towards exiting or reaching out for help. Sasha described this paralyzing fear that kept her from even reaching out to her family for help, saying:

I would go to pay phones and call home. As soon as somebody would answer I was speechless ‘cause it’s like what am I gonna say, I’ve been out here

prostituting. I'm strung out on drugs. I'm really screwing up. Can you help me. So the shame would kick in and I would just hang up the phone. I wouldn't actually reach out for that help.

Upon exiting sex work, many participants continued to feel judged and ostracized, even within the treatment facilities and programs where they initially sought help. Lori told the story of an unsuccessful attempt to exit, explaining that after getting a job at a restaurant, the director of the program spoke about her in front of other clients, saying:

I can remember the director of that program saying, 'She has no reason to get a job. She is 30-something years old, still can make really good money'...and he kind of put me up on Front Street, like letting everybody know I was a prostitute...then they don't treat you the same, they don't look at you the same.

Another woman recalled participating in Alcoholics Anonymous, where she could talk about addiction, but could never talk about prostitution because "either the women don't talk about what they did openly or it's very frowned upon to discuss in mixed company." Even women who recognized that they had been forced into sex work and were victims of a crime felt stigmatized. Amanda recalled being encouraged to seek a therapist to deal with her sex trafficking experience, but upon hearing her story, the therapist didn't respond well: "She was like, 'Um, I think I'm gonna have to refer you out.' Which is fine if you refer out but at the same time, her reaction was like, I'm way too broken for even a school counselor to take care of me, you know?"

Stigma, as a barrier to exiting sex work and sexually exploitative experiences, was a burden that many participants carried for a long time, and some continue to carry still. Porche said, "I've been everywhere in the world, [had] everything you ever wanted to have, okay, but being seen as a prostitute- [that] stays with you when you lose the money, you know?"

### **Legal Barriers (*Structural Barrier*)**

During the first few interviews, participants spoke often and at length about the difficulty they experienced because of legal issues, including court fines, restitution, old warrants, and a criminal record including felony charges and multiple arrests. This led to the inclusion of a specific prompt that was used throughout the remaining interviews to help participants recall any experience with legal or structural barriers that most (n=15) participants had experienced. One woman had as many as 50 arrests on her record before exiting sex work, and others had accumulated charges for prostitution, fraud, theft, assault, weapons charges, and drug-related charges. So often, these legal issues were linked to other barriers (e.g. addiction, negative peers, sex trafficking victimization), and women who spent many years in prostitution before exiting were forced to deal with significant legal issues right away, before they had time to develop coping skills, stress management, a knowledge of resources available to them, and a belief in their own self-worth.

Cathy had 17 arrests, 12 convictions and two felonies on her record. She said they created “barriers all the way around, especially in new recovery because nobody knows if you’re gonna stay there or not and not everybody’s willing to take a chance.” Crystal described being arrested 23 times in four years; unlike many participants with felony histories, she was able to get a job, but she said, ‘as a felon the only place you can live is- I used old resources, you know, slumlords. No questions asked, but it was still in my old hood.’ This initial exit attempt was not successful, and she was not able to successfully exit until she was provided with an opportunity for safe housing much later in her story.

After 18 months in recovery at a residential program for women exiting sex work, Lois got an apartment alone and debts she had ignored for 20 years began to surface. She said,

I had an extensive criminal record, I didn't ever clean up my messes. I had a lot to clean up, which was overwhelming...I [had] a little apartment, I had a nice job...then all of the sudden the job I was working decided to close...I got scared. And I started like not opening the mail, just throwing it away. First I would just pile it up, and then the piles were scaring me. Then I stopped answering my phone 'cause it was always somebody, you know-'cause I was barely just paying my rent and putting gas in my car...I wasn't making enough; I wasn't there mentally, and I was afraid. I was getting stuff from lawyers, you know. And so then I relapsed.

While it is expected that women leaving a type of work that is illegal in nearly every county in the United States would have experienced the legal consequences of their past choices, the data from this study presents a very complicated picture of women with lengthy criminal histories that turn into nearly impossible barriers once they exit sex work.

Many women told stories about having to continually explain their record nine or 10 years after their last arrest. A majority of participants who had employment at the time of the interview were employed in community agencies and substance abuse treatment programs, but have had difficulty obtaining employment in other sectors. Cleo Little explained,

I was working with recovery programs...but whenever I would go outside of that area, which was a small portion, I mean a real small portion [of available jobs], it was very hard. Those felonies were like-if they ran a check on me and they go all the way up to the what, seven, 10 years, and they would always come up.

With employment options limited to low paying positions in substance abuse recovery or other community agencies, it is difficult to see how women with so many other barriers could be successful in achieving a full, sustainable, and healthy existence. Thankfully,

participants in this study provided insight into many of the helpful, supportive factors that helped alleviate the burden of these barriers as they began their exit from sex work.

### **Helping Factors**

While facing numerous barriers before, during, and after their exit from sex work, participants were also confronted with factors that facilitated and supported their exit. These helping factors built resiliency within participants and facilitated their exit. Furthermore, these factors are an important part of understanding the exiting process that has not been a focus of research in the literature on prostitution exiting. To elicit greater detail about these helping factors, I asked several questions that prompted deeper and thicker descriptions, including: 1) “Can you tell me about the people who helped you get out?” and 2) “What kinds of services were helpful to you (such as counseling, treatment, case management, safe housing)?” The subthemes identified in the overarching theme “Helping Factors” included: Survivor Presence, Relationship Connection, Legal System Involvement, Spirituality, Feelings of Empowerment, and Fear of Consequences.

#### **Survivor Presence**

The friendship, solidarity, and presence of other “survivors”- or former sex workers and victims of sexual exploitation- was an important helping factor that participants mentioned while telling their stories. Thirteen participants spoke about the impact of women who had exited sex work before them, or women who were exiting alongside them and could relate to their struggles. The importance of experiential knowledge held exclusively by peers who have lived through a particular condition or experience is well established in the recovery literature (Solomon, 2004), and the data

from this study confirms the vital role that peer support/peer provided services has for this population.

The women in this study reported meeting survivors involved in street outreach, programming specifically targeted to help sex workers, and in other programs. For example, Sasha told of hearing a woman who had experienced addiction and prostitution speak in an Alcoholics Anonymous meeting that she attended. She said, “It was the first time I had cried in years. It touched me and it gave me hope.” Sarah also encountered survivors that were integral to her recovery in unexpected ways. She talked about a counselor who gave her a memoir written by a former sex worker, and she described it saying, “It’s like the AA book for prostitutes and that book was gold to me. I’m like, oh my gosh, somebody understands me.” She also had a “house mom” at the sober living home where she was staying early in recovery who left the sex industry many years prior. She felt that this woman was able to challenge and confront her because “She was who I was.”

Annie described initially exiting sex work as a product of undergoing substance abuse treatment, but becoming involved with women who were exiting alongside her (or had a history of prostitution experience) was what helped reduce her desire to re-enter sex work. She credited them with her recovery, saying “Having a network of women that I could sit with in those moments was a lot of it.” Like many women in this study, she believed strongly that a survivor was vital to long term recovery, saying, “I don’t think there’s a chance in hell that any of the women that you’re dealing with are going to open up, are going to change, are going to get any better unless they can find somebody they

can relate to.” Likewise, Candy credits being connected with other former sex workers as the key component to her recovery; she initially sought out substance abuse treatment for heroin addiction as she believed that this was her primary problem. However, she realized that her experience in the sex industry left her feeling isolated and stigmatized, so she moved into a residential program for prostituted women, saying, “I went in there to be with other prostitutes and I fit right in, and I was also getting my drug habit [treated], too...I [was] back with the prostitutes, the old prostitutes because they can relate to me.”

A number of women emphasized the formal role that survivors should play in treatment and recovery programs. Tracey believed that having a survivor run the residential program she attended was very important for her. Party Girl explained that even incorporating survivors to come share their stories and be available to women and men exiting sex work was helpful:

Women that have success, women that have been there, that have done this...somebody that has actually lived that lifestyle and can say, ‘I remember being afraid...[but] now I can’t imagine doing what I did- the girl that I used to be.’...Women coming in and sharing their stories, anybody that has been there and done that and now is living a safe life or a drug free life can greatly impact, I believe.

### **Positive Social Network**

The presence of supportive relationships is an integral part of recovery for women exiting sex work and sexually exploitative situations. In their study of 23 Swedish women exiting prostitution, Hedin and Månsson (2004) explained that supportive relationships were necessary for women initially breaking from a prostitution lifestyle. While these supportive relationships could be survivors (as discussed above), other individuals have

the ability to provide the connection that helps pull women out of the sex industry, if they desire to leave. Nearly all (n=16) participants in this study spoke about the important connections with parents, children, friends, staff members at treatment programs, and law enforcement officers who demonstrated care, concern, and provided the accountability for women to successfully exit.

**The Network.** When many of the participants in this study answered the prompted question, “Can you tell me about the people who helped you get out?” They responded by explaining the network of supports they developed in recovery. Their descriptions included a list of people who met different needs. Sasha explained that as issues arose during recovery, she became connected to more and more people who could help with specific issues: “So it’s just a whole different network of people because there’s so many different frickin’ issues.” She described this network of people as including AA sponsors, helping professionals, family members, and friends she met through engaging in treatment. Lori told the story of relapsing, where she began to use drugs again and sell sex to pay for drugs. Friends from the prostitution-exiting program she attended came by her house, her mother came and moved her belongings into a storage shed (in an effort to prompt her to return to the program), and so she reentered the program. She then described the people who provided classes within the program, saying that they “Had a way to be interpersonal with us and it helped build self-esteem. Like here’s these normal girls and they actually like hanging around with us, they actually like coming, they actually care enough to come here.” For Lori, the friends, family, and service providers in her life all provided the help and support that facilitated her exit. Other participants also

emphasized the depth and breadth of these support networks, referring to “the web of people I could call if I was really having a bad day” (Ness). These answers speak to the need for a diverse variety of options for people to meet and form relationships, and the unexpected ways in which genuine care, empathy, and accountability became a “lifeline” that women held onto throughout the exiting process.

**Children.** Many of the women who discussed broken relationships with children as a significant barrier to exiting also talked about how the desire to regain connection with children was a primary force that helped pull them out. Cathy explained that when she had a “glimmer of hope that I would be reunited with my kids- that kept me going.” Tracey told a powerful story of leaving a residential treatment program because she wanted more contact with her daughters than the program permitted. She explained to her 14-year-old daughter, “I can’t go back...I need you closer to me.”, but her daughter told her to go back:

Whenever we looked at digital clocks, like if it was 1:11, 2:22, or 11:11, whatever, if it was all the same number, we used to say, ‘Oh, make a wish’ or you know, “Say a prayer’, or whatever. And my daughter said, ‘Mom, at 5:55 every morning and at 5:55 every night, I pray for you.’ She said, ‘Go back. We’re going to be okay.

For Tracey and other women, being able to regain contact with children was an important part of recovery. Unfortunately, there remain few resources throughout the United States that provide services to women exiting sex work who have custody of children or hope to regain custody as they go through recovery.

**Support in the Criminal Justice System.** Another important source of support came from within the criminal justice system. Nine women spoke specifically about

probation and surveillance officers, judges, treatment while incarcerated, and law enforcement officers who helped support a transition out of sex work. Sarah's experience was among the most profound:

As crazy as it may seem, probation is one of the huge things that saved my life and got me out of it because that probation officer and surveillance officer believed in me and every time they'd see me go off the path, they would put me back on it...my surveillance officer picked me up [from jail], took me directly to treatment for addiction and everything...they believed in me because they'd seen what I had done. It makes me cry.

Her example demonstrates the powerful and influential role that individuals within the criminal justice system can have in providing physical/tangible and emotional support. This is especially true for women who are isolated in the prostitution lifestyle, and the only people outside "the life" they may come into contact with are police officers, probation, and jail staff. Maria talked about regular conversations with a vice enforcement officer she referred to as a "social worker with a gun" who would see her on the street, wait to speak with her, and made concerted efforts to get her into an alcohol rehabilitation program. Crystal experienced similar compassion from law enforcement, saying:

Believe it or not, a lot of it [help] came from the police officers. They got tired of seeing me out there. You know, before it was like, 'Hey Little Bit' (my street name), you're looking better, but when are you going to do something?'...that was part of my support system actually.

She then explained that she had a surveillance officer who would come over to check on her and stay for a while to help her study for the math portion of her upcoming GED test. Other women spoke about being arrested, in a vulnerable place where they wanted to

change, and having the option to attend programming in jail; this opportunity built skills, confidence, and hope that they could remain sober and out of sex work once released.

### **Formal Support Services**

Fifteen participants talked about the role that formal support services played in the story of their exit from sex work or sexual exploitation. Nearly all of these participants enrolled in drug and alcohol treatment (including detox programs) before engaging in any services that addressed other issues, including experience in prostitution. A few women received out-patient drug and alcohol treatment while living in a residential program for prostituted women. Their experiences serve to confirm the need for addiction treatment early in recovery, or for services (i.e. prostitution-specific programs) to prioritize substance abuse recovery. Six participants specifically mentioned counseling services (individual or group) as important parts of recovery for them as well, and a number of others expressed regret that they hadn't received any counseling earlier in their exiting journey. Some participants also mentioned mental and physical health issues that they had to address, and these issues should likely be another primary focus of early treatment as mental and physical health needs can turn into significant barriers if left unmet. In addition to counseling services, participants spoke about the role that 12-step meetings played in offering consistent support, and many discussed the importance of access to a residential program. Safe housing is a common need among women exiting sex work, especially when they are choosing to leave behind their primary (or only) source of income.

When describing how their experience with formal support services helped facilitate their exit from sex work, many women spoke about the way in which these programs met their need for structure, safety, and security. Lori said, “There was rules where I couldn’t do the stuff that I got away with at the other place.” Cleo Little described how choosing to enter a residential program “saved” her life because it provided safety, even when it felt unfamiliar and uncomfortable. Samantha described her halfway house in the same way, saying, “I will say that the halfway house saved my life because that was where I was taught structure. You got up every morning. Your meals were served at a certain time. You had to leave to go to work or look for a job. There was a curfew. So it was very structured.” Tracey also spoke about structure, and the feeling of safety that staff support and accountability created:

We were never alone, and I just- the presence, that safety, that security, that accountability was- that was the thing that I think kept me there, kept me bonded to the staff, kept me bonded to the other women...they held us really close to them...and that was what was important to me.

Finally, it is important to remember that the formal services women in this study accessed are representative of what was available to them at the time and place they exited sex work. Many participated in the same prostitution-exiting program, one of very few such programs available in the United States. Thus their experiences are shaped by access to this program, and likely by contact with the community of survivors that the program has produced in successful graduates. While a program like this one is not available to everyone, the fact that most participants were not able to successfully exit without some assistance from services specifically targeted to address the needs of prostituted women is an important finding that emerged from the data. While women

attempted to exit by utilizing a variety of other formal services (including domestic violence and substance abuse treatment), receiving prostitution-specific programming was a key component to their eventual success.

### **Spirituality**

Almost half (n=7) of participants spoke about spiritual beliefs that helped provide hope and motivation to exit sex work or helped them through the difficult parts of recovery. Participants spoke about finding comfort in talking to God and in believing God was able to change them in the ways that they felt powerless to change themselves. Shelly explained that early in recovery, she began “really getting spiritual” and credits her spirituality as having played a vital role in her successful exit. Jezebel recalls, “My faith that there really is a God and that if I just have a little bit of trust, he’d help me and that’s what sustained me.” Party Girl remembers a period of spiritual transformation in jail and “without the programs- the spiritual program...I feel I’d never made it.” These strong statements indicate the importance of affirming and supporting women’s spiritual beliefs and providing ways for them to practice their faith as it can be an important factor that facilitates the exiting process.

### **Feelings of Empowerment**

Many of the hindering factors discussed earlier in this chapter resulted from lack of experience or competence (e.g. adult responsibilities, limited employment skills) and abusive relationships that left women with low self-esteem. As women started their exiting journeys, many began to experience feelings of empowerment, becoming aware of their newfound competence, skill, and ability. Eleven women discussed feelings of

empowerment defined as confidence, self-esteem, self-worth, being valued, accepted or trusted by others, feeling capable and educated, and believing they had the skills to advocate for their own needs. Sarah told a story of a boss at work who trusted her with a set of keys; this demonstrated that someone believed in her. Lori described empowerment as “positive reinforcement all the time”. Maria said that after exiting sex work, she knew that she was “valued and that my opinion counts and that I’m actually capable, which is worth its weight in gold.” Angelica told a story of regaining custody of her daughter. Before exiting, her sister and brother-in-law had custody of her daughter and because she was not consistently in her daughter’s life, she felt powerless when her brother-in-law was rude or unexpectedly changed the visitation rules for her. After exiting, she said her brother-in-law realized “that he couldn’t control me anymore. For him it was all about controlling...but I wouldn’t play his game...I refused to let him do that to me.”

This subtheme, feelings of empowerment, represents an aspect of recovery from sex work or sexual exploitation that supportive people and formal services can help facilitate. Opportunities to develop skills, demonstrate responsibility, and practice pro-social behavior can be given to women, along with the encouragement that they are capable of succeeding.

### **Fear of Consequences**

A final factor that helped motivate women to exit sex work was a fear of consequences. Eight women discussed coming to a point just before exiting or after they had exited sex work where they believed that the consequences of staying in- including legal consequences such as felony charges or prison time, suffering from more violence,

or being further separated from children- were among the factors that drove them to exit and stay out of sex work. Ness explained the strength of this factor saying, “I think the only thing that I needed to get sober was a healthy fear of consequences and a healthy fear for my life. Those two things are the only things that finally made me get out.” Other than Ness, four other women referred to a fear of continued violence, even losing their lives if they remained involved in selling or trading sex. Party Girl remembered vividly, “I can remember, even one time, it just seems like I felt like I saw my coffin and I’m hearing bells and everything going on, and I remember being so afraid.” Tracey feared that as her children grew, they would not want to continue being in her life because she had not been in a place where she was actively engaging in parenting. Annie recalled recognizing that if she re-entered sex work, she would be tempted to use drugs again, and so the desire to stay sober helped keep her out. A number of participants talked about accumulating criminal charges and they knew that any additional arrests might result in a felony conviction or prison time. Shelly explained that for her, the fear of legal consequences “Was good because that was a boundary for me. Some people don’t care, but for me it was a boundary that I didn’t wanna cross, getting a felony...once I was starting to get out, I didn’t wanna go back to jail.” Shelly’s quote demonstrates one negative consequence of sex work that may be reduced or eliminated by legalizing sex work. However, it is difficult to predict how legalization would impact other factors (i.e. reducing barriers such as addiction and eliminating the need for helping factors such as formal support services), and how it would actually help women who enter the sex industry due to a lack of other options (Agustin, 2005).

## **Change**

Change, the final overarching theme identified in this study, was talked about as participants told the stories of their final exit, recalled instances when they felt secure in their recovery or knew that they had undergone enough change that they would no longer return to sex work. The process of change happened differently for each participant in this study, reflecting their unique experiences in sex work, the circumstances surrounding their final exit, and the varied challenges they faced. Participants also discussed the changes that took place in their identity, describing the kind of women they are today.

### **Final Exit**

The stories told about the final exit from sex work and sexually exploitative situations were uniquely personal, as women often utilized similar services to exit (recall the prostitution-exiting program available in the city where participants lived), but described very diverse experiences. The data from this study support the models of prostitution exiting that Baker et al. (2010) rely upon to inform their integrated model. For example, Sanders (2007) typologies of exiting were demonstrated in some women who exited at a dramatic turning point while others did so through a gradual or natural process. A dramatic turning point happened for two women forced to exit following extremely violent attacks from customers: Porsche was ran over by a car and Monique suffered traumatic brain injury. Three women left the states where they were living in an attempt to escape temptations to use drugs or engage in sex work; they started their lives over in a new place and did not return. Five women credited their exit to criminal justice system involvement; Angelica said, “God saw in his infinite wisdom to do it for me. I got

arrested again for the last time and I'm like, okay, there has to be something else. There just has to be. And that's when I started going to all the groups in jail...and I started listening to people." Sasha explained that serving a five year prison sentence for drug-related charges "was my exit out of prostitution because I was separated from everything that I had known...I started doing the self-help programs...I was able to recognize and have awareness and decided that I wanted to change my life."

Other women experienced a gradual exit. For example, Samantha talked about taking time off from the escort agency she worked for to attend substance abuse treatment. She had planned to attend treatment and then return to her job in the sex industry because "I didn't have any other job opportunities lined up...so what ended up happening was I got sober and I didn't go back." The time away, opportunities for other employment, and a recognition that she did not enjoy selling sex without drugs or alcohol in her system all contributed to this natural progression out of the sex industry. The data also affirms the importance of supportive relationships (Hedin & Månsson, 2004), as approximately half of the participants in this study did credit a relationship with a family member, friends acquired in treatment settings during prior attempts to exit, or having prior knowledge of treatment options as important components of their final exiting story. Even when facing significant barriers, the presence of helping factors (i.e. positive support networks, survivor presence, and formal services) reduced the power that these barriers had, and paved the way out of "the life".

### **The Moment I was Done**

In an effort to further explore key elements of the exiting process, participants were prompted with the question, “Tell me about when you knew you had succeeded in leaving prostitution” (the question was often paraphrased, e.g. “Was there a moment or a time when you said, ‘I’m done, and I know I won’t go back’?”). Participants’ answers revealed the unique and varied experiences that women undergo when making such significant life changes. Some recalled a dramatic instant in which it became clear that they no longer wanted to engage in sex work. Others recall a gradual awareness, and a few even talked about the ongoing struggle of continuously making conscious choices to stay out of sex work. These stories again reflect the reactionary, gradual, and natural progression out of sex work first described by Sanders (2007).

A number of participants remembered a specific opportunity to sell or trade sex (e.g. cars pulled to the side of the road, regular customers approached them), or begin using drugs again, which they believed would lead them to prostitute again (e.g. they found a crack pipe, someone offered drugs). Recounting these stories elicited a visceral reaction from some women who told of knowing instinctually that they could not get in the car, pick up the pipe, or pick up the phone. For other women, the moment was less dramatic but still powerful: Tracey recalled that phone call from her daughter, who asked her to return to treatment. Samantha talked about a moment after two years away from the sex industry, when she turned one final trick. Though it wasn’t a horrible experience (he was a former regular customer who was kind and paid her well), she recalls thinking to herself, “I was just kind of like, I’m better than this now and I had had two years of

sobriety under my belt and I started having the kind of integrity in my life where I was able to be accountable.”

A few participants talked about the decision to finally enter some type of treatment (substance abuse or prostitution-specific programming) as the defining moment in their lives. Cleo Little said, “To be honest, when I picked up that phone and them people told me they was coming to get me...I knew it then.” Crystal called a residential prostitution exiting program, telling them, “I’ll do anything, whatever you say.” Ness entered substance abuse treatment and recalls, “sitting on my bed in my dorm in treatment just thinking, I never have to sell my body again. That was very profound for me because I had been doing it for 13 years. It was very profound for me to sit there and say I don’t have to do that anymore.”

Other women recalled a more gradual journey to that awareness, and their examples reveal the opportunity that both community-based programs and programs within the criminal justice system have to provide the space and time necessary for the awareness to take root. Sasha recalls becoming aware that she couldn’t return to her life in sex work while serving time in prison. She began attending 12-step meetings, and thinking, “When I first attended the 12-step meetings, I was just like these people are crazy and I don’t belong here...then I started hearing bits and pieces and then I could see myself in all of these people.” She got out of prison, had to attend a prostitution diversion program, where she interacted with women who were still involved in sex work. She knew then, “There is no way I’m ever going to live like that again ever.” Michelle experienced a similar gradual awareness, as she went through a year-long residential

program for women exiting sex work: “When I started working and started doing normal things again, I was like, okay, I’m never doing that again. Going through all that counseling and building my self-esteem. It just brings you to a point ‘till you’re like okay, that’s it.”

### **Identity**

A final prompt participants were given near the end of the interview was aimed at learning about the process of how identity changes among women who have exited sex work and sexual exploitation. Fuchs Ebaugh (1985) described the process of changing identity as an experience influenced by others who support the change, by feeling in control of the decision to change, and by finding ways to incorporate the old role into one’s new identity. The women in this study demonstrated many of these components of identity change in response to the question, “How has your identity changed?” Responses reflected a sense of empowerment, ownership over choices, and pride in accomplishments. Women spoke of being survivors but also of identifying with other roles and relationships, giving back to others, and feeling productive; these descriptions reflect healthy developmental tasks associated with middle adulthood (Shriver, 2004). For example, Samantha said, “Today my life is very meaningful. I make a difference in people’s lives...I do things today that give my life meaning. I get up every day and I have a purpose.” Party Girl similarly reflected, “Instead of taking from people and life, I choose to be a blessing to people.” Women also spoke about being at peace with themselves, feeling smart and talented, taking pride in boundaries and healthy relationships, and knowing that they have a support system to rely on. Candy suffered

from heroin addiction and remained involved in sex work for 25 years. She continues to experience significant health problems due to prolonged drug use, but described herself positively saying, “People like to be around me. I’m somebody worth something.”

Many described their former selves as feeling lost, not knowing who they were, and of transforming through the exiting and recovery process into someone with a solid sense of who they are. Amanda said, “Now, I know who I am. I’ve like, given myself permission to be the parent that I want to be and the wife that I want to be and really accepting and nurturing the aspects of my life that are me.” Sarah described her own identity change process, saying

I feel like I matter. I feel proud. It makes me wanna cry. I hate the fact that I hurt the people I hurt by doing what I did, like my children, but I’m glad that my life was what it was because I help people. Everything I’ve done is not gonna be in vain if I can go help somebody else and ease their pain...I have respect for myself and I’ve learned to love myself. I had to put little stickies on my mirror for years that said, ‘You are a treasure and a temple.’ ‘You are a good person.’ Because I would wake up in the morning and everything would hit me like a ton of bricks...it was like this voice kept telling me, oh, you’re dirty, you did this, you did that...but now that voice is gone.

Sarah’s example demonstrates the process of exiting a role described by Fuchs Ebaugh (1985), as she exited sex work (a turning point in her identity), and went about creating a new role through positive affirmations and silencing the voice that fought against this identity transformation. Shelly also recalled a transformation in which she went from someone without a defined identity to someone with a strong sense of self:

I was a mess, a total mess...I don’t even know who I was. I was just this crazy person, like hurt, in pain inside and broken, distressed, all the things that you would think when your heart’s broken. That’s how you feel out there. Now I’m whole. I respect myself...I respect boundaries. I’m such a different person now.

The question about identity provided an opportunity for participants to share the progress and sense of accomplishment they felt about their exiting journey, and demonstrated the possibility for change to occur at any age. Crystal's response to this question is an eloquent example of this change process:

I am nothing like the person my mom gave birth to. I am nothing like the person that my brother said I was. And I am nothing like the person that I was out there. I can't put a name on it...I'm happy. I'm an overachiever. I'm driven. And I don't have that anger anymore.

## Chapter 5

### DISCUSSION

The goals for this study were two-fold: To better understand the process of exiting the commercial sex industry among women and to investigate the usefulness of Baker et al.'s (2010) prostitution exiting model. As themes emerged from the stories told by 19 female participants, new insights about the exiting process were identified along with evidence of support for Baker et al.'s (2010) exiting model. The findings from this study also offer important practice implications regarding the needs of prostituted and sex trafficked adults that can be useful for social workers, mental health professionals, and other service providers.

“Preparation” was the first theme identified in this study, and it included four subthemes coinciding with stage two (Awareness) and stage three (Deliberate Planning) of the exiting model. However, women did not always experience stage two prior to an initial exit as the model indicates; in fact many women became aware that they wanted to leave the sex industry only after an initial, often involuntary, exit. Others became gradually aware as they progressed towards a final exit, and still others explained that they wanted out from the moment they entered the sex industry. In addition, limited support was found for stage three as only a few women spoke about consciously seeking out assistance prior to an initial or final exit. Overall, this process was often lengthy and circular, with women attempting many times to exit. Their conscious awareness (called “disillusionment” in this study) grew throughout each exit and re-entry into sex work, culminating in a final, successful exit.

The chaotic and unpredictable nature of women's lives before they exited indicates that there is not a particular moment or stage where providing services or conducting an intervention would be most effective. A harm reduction approach, including survivor-lead outreach services or a drop-in program where women are able to learn about available services, may be effective ways of reaching both women who are actively searching for a way out and women who are not yet ready or disillusioned with "the life". These examples also demonstrate ways in which women can be connected to two important "helping factors" identified in this study: survivor presence and formal support services.

Motivational interviewing is another useful technique that could be employed when working with women who are not yet ready to exit sexually exploitative situations, or women who are selling sex to support an addiction. Drawing upon the stages of change model developed by Prochaska, DiClemente, and Norcross (1992) motivational interviewing principles have been used to work with individuals who are mandated to treatment or are in the early stages of change (Mullins, Suarez, Ondersma, & Page, 2004; van Wormer, 2010). Some of these principles include establishing rapport, emphasizing client strengths, avoiding shame, blame, or confrontation, leaning into resistance, and reframing the "client's story in the direction of decision making" (van Wormer, 2010, p. 207). For clients who express some interest in change, motivational interviewing techniques include emphasizing the freedom to choose (e.g. "no one can make the decision to exit sex work for you, it is your decision to make"), providing education in a neutral manner, and helping clients become aware of their own intrinsic strengths. Many

of the participants in this study interacted with service providers, both in voluntary and mandated treatment settings, prior to a final exit from sex work. Utilizing these techniques may have helped these women who were early in the change process when they first engaged in services; an emphasis on training service providers in motivational interviewing techniques may assist women in the future from exiting upon the first opportunity they encounter.

### **Challenges**

Participants in this study confirmed many of the challenging barriers identified in Baker et al.'s (2010) model. Under the overarching theme "hindering factors" several subthemes found in this study coincide with the barriers described in the model including: addiction, adult roles/responsibilities, and a prostitution lifestyle (individual barriers), relationship difficulty, negative social networks (relationship barriers), legal barriers and economic need (structural barriers), and stigma (societal barrier). The emphasis on addiction as a primary barrier is an important outcome from this study; it serves to support prior research (Logan, & Leikefeld, 2000; McClanahan, et al., 1999; Roe-Sepowitz, et al., 2011) and provides direction regarding primary treatment needs. It also provides implications for substance abuse treatment programming, as a majority of women in this study sought substance abuse treatment services.

While some have argued that substance abuse treatment alone will likely be sufficient for drug-addicted prostituted women (Öhlund and Grönbladh, 2012), participants in this study emphasized the role that prostitution-specific services played in their eventual recovery. Thus, one recommendation may be to incorporate sex trafficking

and sex work-specific questions during intake and assessment to better identify these women among the larger population of women seeking substance abuse treatment services. Another recommendation is to provide prostitution-specific services in treatment (e.g. survivor/peer provided services or specific counselors and treatment staff trained to work with prostituted and sex trafficked clients) and/or to have available prostitution-specific resources for clients who disclose these experiences.

In addition to substance abuse treatment needs, economic difficulty is another barrier in Baker et al.'s (2010) model that the data from this study supported. Participants emphasized the immediate and extreme economic hardship they experienced upon exiting sex work, and services should aim to provide emergency support in an effort to reduce the impact of financial loss that occurs upon exiting. Formal services should also address the role that economic need played in sex work involvement, acknowledge the difficulty of seeking out legitimate employment, and provide opportunities for women to learn budgeting, and financial responsibility as they move forward in recovery.

Relationship barriers were also evident within the stories told by participants, and this study provided further insight into the ways that relationships can inhibit the exiting process. The experience of losing children and feelings of guilt and grief associated with their loss became a significant barrier to exiting for many women in this study. Women need opportunities to explore these feelings and be provided with practical support as they seek to regain custody and re-enter a parenting role.

Difficulty experiencing intimacy in relationships during and after the exiting process was also commonly discussed, echoing prior research indicating that women

exiting sex work need counseling services specifically tailored to address sexual issues, behavior, and related concerns (Roe-Sepowitz, et al., 2012). Customers represented another problematic relationship for participants, and the role that customers played in making exiting difficult is another important finding from this study. While plenty of research has been devoted to understanding the motives and behaviors of men who purchase sex (for example, see Monto & Milrod, 2013), little is known about the relationship between customers and sex workers, and how that relationship impacts women in the sex industry. Participants in this study occasionally described violent customers, but more often discussed “regulars” or “sugar daddys” they developed relationships with over time. They spoke about being helped or taken care of by these customers, but the help was limited to the extent that customers did not assist women out of the industry, even when they made it clear to their customers that they wanted out. Participants also described customers who promised help, only to discover that the customer did not intend to help but was interested in coercing women into providing sexual services. Understanding customer relationships and providing opportunities for women to talk openly about these relationships should be incorporated into treatment for women exiting sex work.

Addressing the prostitution lifestyle as a salient barrier to exiting is another important treatment recommendation to emerge from this study. Williamson and Folaron (2003) discuss this barrier to exiting, though they conceptualized this barrier as something women became disillusioned with prior to exiting. In this study, women spoke about the lifestyle as something that they identified with and struggled to let go of even

after exiting. Women frequently reflected upon the ways in which they identified with the values and cultural norms of the prostitution lifestyle throughout the exiting process. This specific barrier can be reduced by providing access to survivor/peer mentors who are able to identify with the experience of living within those values and norms, and can help lead women (who want to exit) in a process of self-discovery, developing new values and expectations that support a life after sex work.

### **Sex Trafficking Victimization**

The women in this study also present a very different picture of sex trafficking than is commonly perpetuated in media and anti-trafficking advocacy efforts. While a majority of participants were victimized by sex trafficking at some point in their lives, they were no longer considered victims of trafficking when they exited. Cleo Little had been trafficked by two different pimps throughout late adolescence and early adulthood (age 15-35), but when she finally exited, she had been working alone for many years. She was not provided services as a trafficking victim, and does not fit the profile we typically associate with trafficking victimization. Her story should make us question our preconceptions about what sex trafficking looks like and about the possibility of someone like Cleo Little successfully navigating adulthood without trafficking-specific intervention and assistance. To better identify women like Cleo Little with a history of sex trafficking victimization, questions regarding trafficking victimization should be included into intake and assessment forms at agencies that may serve current or former victims. These agencies include substance abuse treatment, halfway houses/sober living homes, sexual health services including HIV/AIDS and sexually transmitted infection

testing and treatment, and domestic violence programming (e.g. shelter/safe housing and victim advocacy services).

### **Resiliency**

Another important finding to emerge from this study is the impact that helping factors had on building resiliency (i.e. the ability to overcome and adapt amidst difficult circumstances) within participants and facilitating their successful exit, even amidst significant barriers. While barriers were specifically identified in Baker et al.'s (2010) exiting model and have been a clear focus of research in prostitution exiting, the elements that provided help are not often emphasized. The women in this study spoke at length about the people, services, situations, and beliefs that helped facilitate their exit. They also discussed their current identity in ways that indicate the absence (or mastery over) former barriers, and a complete recovery from the difficulties they once experienced. This hopeful finding is important for women early in recovery and for professionals engaged in the complicated work of helping women exit "the life".

In addition to overcoming or adapting in the face of difficult circumstances, resiliency is also the ability to maintain psychological and physical wellbeing despite exposure to adverse conditions (Terte, Becker, & Stephens, 2012). The hindering factors experienced by every participant in this study are adverse conditions, and the ways in which they overcame hardship demonstrates how resiliency is developed within women exiting sex work. Terte et al. (2012) conceptualize resiliency as a combination of personal, social, and physical resources, and the helping factors that emerged within the study support this conceptualization. Personal resources that built resiliency within

participants included the subthemes spirituality, feelings of empowerment, and fear of consequences. Social resources included survivor presence and positive social networks, and physical resources included formal support services, as these services needed to be physically available where the women lived. Women developed resilience throughout the exiting process as they developed these resources, even though they continued to face barriers. For example, Sasha described exiting sex work while living in the same neighborhood where she had always used drugs and sold sex. She was able to continue along a path of successfully exiting by drawing upon internal resources (spirituality, fear of consequences) and relying upon a new growing social network of friends from church, including people who offered her rides to church events and provided her with new clothing.

This example of the positive impact that supportive relationships can have on building resiliency echoes prior research on prostitution exiting (Hedin & Månsson, 2004). However, the in-depth exploration of these supportive relationships provides new information on the unique role that survivors play in helping women develop resilience, and indicates that programs aimed to help exiting women should involve survivors in service provision. This study also shed light on the important role that individuals within the criminal justice system can play in contributing social resources that build resiliency. Providing access to prostitution-specific services within jail settings and prioritizing prostitution and sex trafficking education and awareness training for law enforcement officials may increase the resiliency of criminal justice-involved sex workers and increase opportunities to successfully exit.

## **Limitations**

All participants included in this study are women, and so results are not generalizable for men and transgender sex workers and minor victims of sex trafficking. A criticism of this approach may be that there are more gaps in our understanding of the exit process for men and transgender sex workers and juvenile sex trafficking victims; thus research should focus on these groups. However, it is important for our understanding of exiting among women to move forward by building upon what is already known and verifying that our knowledge reflects the lived experiences of former sex workers. Better knowledge of this process for women will provide a useful starting point for researchers to begin identifying and advocating for the needs of others who have experienced sexual exploitation or have a desire to exit sex work.

A second limitation for this study is its exclusion of any former sex workers that did believe sex work was a healthy and viable choice for them. Instead, the perspective on sex work in this study is shaped by the experiences of participants who all chose to leave sex work (with the exception of two who exited involuntarily following extreme injuries), and they all believed that engaging in sex work is not something they chose willingly or enjoyed participating in. All participants described wanting and/or attempting to exit before they exited a final time.

In addition, I believe narrative data collection is an interactive process, whereby my role as an interviewer also shaped the conversation. I had previously met 9 participants prior to interviewing them, and had interacted often with three of these participants in professional settings. I often nodded in agreement when participants

discussed the negative aspects of sex work, or referred to my own knowledge and experience volunteering with the prostitution exiting programs that many participants went through. Thus, findings from this study are not generalizable to anyone who considers sex work a legitimate and preferred profession. However, I do believe the findings are representative of many women engaged in sex work who are left with few choices outside prostitution.

In an effort to make participants comfortable discussing positive aspects of sex work involvement, I asked participants near the end of the interview, “What, if anything, do you miss about your former life (in prostitution)?” A few women talked about missing the freedom and excitement, the traveling they were able to do, “easy money”, old friends who were killed as a result of violence or a drug overdose, and the attention that made them feel attractive. Participants often then minimized these positive aspects, explaining that the benefits of participating in sex work would still not compel them to reenter. For example, “Sasha said, I think I liked the chaos and the confusion...I think about it or I’ll laugh and think about some of the crazy things that I did in comparison to the peace and serenity and calmness that I have in my life today.” I reviewed these answers in an effort to engage in negative case analysis so that I might identify ways in which the data contradicted my assumptions (Padget, 2008); however, Sasha’s response (above) exemplifies how the responses to this question did not clearly contradict the assumption that exiting sex work was the best option for participants in this study.

There are also some methodological limitations to this study that should also be considered. First, only one interview was conducted with each participant, thus limiting

each participant's story to the memories she was able to recall in one sitting. Often researchers who employ a phenomenological approach to analysis interview participants on multiple occasions (Padgett, 2008), but considering the relatively narrow focus of the research questions, one interview was determined to be sufficient. Second, all participants currently live in the same southwestern city and have access to geographically-specific services. Narratives are nested within a particular cultural context (Muller, 1999), and all participants told stories embedded within the context of the southwestern United States; thus, their experiences are not generalizable to women exiting in other parts of the country or throughout the world. Finally, all themes that emerged from the data were identified, defined, and coded by the primary researcher. While other key informants (e.g. study participants and knowledgeable colleagues) provided input and affirmation regarding the clarity and truthfulness of the codes, no other coders were utilized to demonstrate reliability. While this is a common method of verifying a coding scheme in qualitative research, it is less common and/or expected in phenomenological analysis (Marques & McCall, 2005).

### **Future Research**

The importance of resiliency identified by participants in this study is one area future research should explore. Individuals, governments, and community organizations throughout the world seek to begin new programs (or expand existing programs) to help sexually exploited individuals, and it will be increasingly important to know how we can help these individuals develop the kind of resiliency that facilitates successful exiting and recovery. Future research should seek to explore the exiting process among men and

transgender individuals and among minor victims of trafficking. While our collective awareness of forced and coerced sex work grows throughout the world, much remains unknown about the gender, cultural, and developmental differences in victims' treatment needs. Researchers should focus on testing treatment interventions to further develop the empirical knowledge base within this field, and research attention should focus on the development of preventive interventions that reduce the likelihood of sex trafficking victimization.

Another area of research that should be developed further is in identifying and testing effective interventions for sexually exploited women with children. A majority of women in this study are mothers, and relationships with children were a focus throughout many of their stories. However, this aspect of their lives is not often a focus of treatment and much of the available sex-trafficking specific programming does not providing safe housing to accommodate children or parenting classes and support. Researchers should seek to identify effective ways of helping women with children exit sex work, as motherhood is an important part of their identity, being able to parent children is an important motivation for exiting, and finding ways to eliminate the financial and emotional barriers to exiting while taking care of children is necessary for remaining out of sex work.

Finally, future research should also seek to compare the experiences of sex trafficked individuals and sex workers throughout the world. Little is known about the similarities and differences among sex workers across countries that treat the sex industry as either a legal or illegal activity. Finally, it is my hope to expand this research by

replicating the study with women in other parts of the world, using this framework to understand cultural differences in the exiting experience, service needs, and both the internal and external resources that contribute to resiliency.

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APPENDIX A  
CODING SCHEME

Theme	Subtheme	Definition	Exemplary codes
Preparation	Awakening	An instinctual feeling that cannot be articulated, a sense of clarity or a new understanding about their situation. This could be a gradual or sudden experience.	“I just started not being numb anymore and just reality started creeping in and I started thinking about family and just starting coming at me real hard.”
	Disillusionment	A belief articulated that involvement in sex work is a primary reason for their dissatisfaction.	“I was back out, did it for a while, got really sick of it again and just knew it was time.”
	Reducing Connection with the Lifestyle	A woman might sell sex less frequently, or engage in less frequent risky behavior, begin working a legitimate job, but remain connected to the sex industry by keeping contact with regulars or working occasionally.	Well, I would stay off the streets because I either had three or four regulars that would come to my apartment... and pay my rent up for me in exchange for sex.”
	Planning	Gathering information, seeking out others’ help, looking for services that might assist with exiting sex work (and/or addiction).	“I kept that piece of paper [with service program phone number] because I said, ‘One day I’m going to use this paper.’ ...that was an important piece of paper, ‘cause six years later I found it.”
Initial Exits		The attempts to exit sex work prior to a final exit (defined as the exit preceding the interview for this study). These attempts could include utilizing informal support, formal services, or exiting involuntarily (via arrest).	“It was probably a duration of two years where I was really in and out of jail, in and out of rehab, in and out of my mom’s house or whatever and then finally [exited].”

Hindering Factors	Lifestyle	The glamour, comfort, excitement, or future promise/potential associated with the lifestyle that accompanied sex work acted as a barrier to exiting or impeded the recovery process following a final exit.	“It’s the freaking lifestyle...It’s the people, it’s the places and the things. It’s the lifestyle...the part of it where you’re on your own and ain’t nobody telling you want to do except this pimp.”
	Relationship Difficulty	Difficulty associated with broken or stressed relationships including family, children, friendships, and romantic partners.	“There was a lot of guilt. That helped keep me running, and that’s part of my anger. You know, I felt like I had abandoned my children; a good mother doesn’t do this.”
	Negative Social Networks	Individuals (friends, pimps/traffickers, and customers) whose presence made exiting difficult because they forced the individual to stay in sex work or made it easier to stay in than to exit (by providing access to drugs or income).	“The people that hindered me from getting out would be the people that I was hanging out with at Sunny Slope. My fellow drug addicts and alcoholics.”
	Addiction	Addiction to substances acted as a barrier to exiting or made the recovery process difficult.	“I was really bad on crack cocaine... Outside of paying for a weekly rental hotel room, all my money went to drugs.”
	Economic Need	An inability to generate income outside sex work that made exiting difficult.	“The hardest part for me to be out of the lifestyle was when there was a car payment due or facing eviction...”
	Adult Responsibility	Fear, lack of experience, or lack of confidence in the ability to carry out adult responsibilities such as	“There’s no kind of regular skills for us at all, period. House cleaning, none of that...I didn’t

		holding a job, paying bills, cleaning or cooking, or other tasks associated with adulthood.	even know how to put gas in a car, I had to learn.”
	Stigma	Feelings of shame because of involvement in sex work and others’ perceptions of people involved in sex work/prostitution.	“Of course I thought I had a sign on my forehead that let everyone know I was a former prostitute....”
	Legal Barriers	Legal barriers including criminal record, warrants, or fines associated with involvement in the legal system, and related structural barriers including difficulty finding employment or safe housing, obtaining current identification and other documents.	“I have 17 arrests, 12 convictions and 2 felonies. So the biggest barriers have been my felonies. It takes a long time to do anything with those.”
Helping Factors	Survivor Presence	Contact with survivors (former sex workers) who acted as role models and demonstrated that a life without sex work was possible.	“The house mom was so awesome. She used to be a prostitute...she was who I was...it was comforting and it gave me hope.”
	Positive Social Network	Relationships with family, friends, or professionals whose care and support helped women be successful in their exit. These relationships provided encouragement, inspiration, accountability, respect, and practical help.	“Having that web of people that I could call if I was really having a bad day, it worked wonders for me.”

	Formal Support Services	The experience of accessing formal support services assisted a participant in exiting.	“The program saved my life. The program made a better woman out of me...I felt safe. You know, that was like- that was the only place for me.”
	Spirituality	Spiritual and/or religious beliefs that helped provide strength and motivation to exit, or provided hope during the exiting journey.	“My faith that there really is a God and that if I just have a little bit of trust, he’d help me and that’s what sustained me.”
	Feelings of empowerment	Feelings of confidence, competence, self-esteem, value, and acceptance that helped women maintain recovery and stay out of the sex industry.	“I started changing when I started getting confidence in myself.”
	Fear of Consequences	The consequences of staying involved in sex work (or returning to the sex industry) motivated a participant to exit or stay out of sex work.	“I think the only thing that I needed to get sober was a healthy fear of consequences and a healthy fear for my life. Those two things are the only things that finally made me get out.”
Change	Final exit	Exits prostitution for the last time (prior to the interview).	“He [cousin] and his wife paid for me to come out to Phoenix...He had a janitorial service. I started working. I stayed and I never went back and that was it.”

	The moment I was done	A specific event or a gradual process that lead a woman to believe that she was no longer interested or compelled to re-enter the sex industry.	“When cars would stop and I would say, “No, get out of here.”
	Identity	How a participant describes herself, and how it has changed throughout the exiting process.	“I’m a lady now. Simple as that. That don’t even need to be explained.”

APPENDIX B  
INFORMATION LETTER

Prostitution Exiting Study:  
A Qualitative Exploration of an Integrated Prostitution Exiting Model

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My name is Kristi Hickle and I am a doctoral student at Arizona State University, and I am working under the direction of Dr. Dominique Roe-Sepowitz in the School of Social Work. I am asking you to take part in a research study because I am trying to learn more about the experiences of adults who were involved in prostitution and have made the decision to exit prostitution. I want to learn about how people make the decision to exit prostitution, how they overcome barriers to exiting, and what kinds of resources they relied on to help them exit prostitution (such as programs, friends or family). I want to learn about your experiences so that I can help improve the services for people who are involved in prostitution, including services for people who want to exit prostitution.

If you agree, you will be asked to fill out a brief survey (written set of questions) and participate in an interview that will be audio taped. The survey will ask basic questions about your life, included some related to your experiences in prostitution. The interview will begin with the open-ended question: “Can you please tell me the story of your exit from prostitution or sex work, beginning with the first time you thought about getting out?” There is no time limit to answer this question, and I may ask more questions to make sure that I understand the story that you are telling me.

Participation in this study is completely voluntary. You do not have to be in this study and there will be no consequences if you decide not to participate. If you do choose to participate, you are free to say no later and withdraw from the study at any time. While participation is voluntary, I realize that I am asking you to commit a portion of your time to participate and so I am offering to provide compensation for your participation in the form of a \$20.00 gift card to Target or Walmart. You will be provided the gift card at the start of the interview. If you choose to end the interview at any point, you may still keep the gift card.

All of the information that I collect in this study, including the audio-taped interview, is confidential. The results of the study will be used in my dissertation as a part of the requirement to complete a doctoral program. The results may also be used in presentations and publications, but I will never identify you, and no other participants in this study will know that you participated. I will maintain confidentiality by asking you to choose a pseudonym (false name) to identify your information, and I will not disclose your real name. The audiotapes containing your interview will be kept in a locked cabinet at Arizona State University and will be destroyed when the study is completed.

There are no known risks from taking a part in this study, and while there may be no direct benefits to you for participating either, I want to use the information I learn from your participation to benefit others by helping improve services for people trying to exit prostitution. If you have any questions about this study, please feel free to contact me at 480-703-7128 or the Arizona State University Office of Research Integrity and Assurance at 480-965-7772. By filling out the attached survey and participating in the interview, it means that you have read this form and that you are willing to be in this study.

Respectfully, Kristi Hickle, MSW

APPENDIX C  
DEMOGRAPHIC QUESTIONNAIRE

Name: please choose a pseudonym (fake name) \_\_\_\_\_

Date: \_\_\_\_\_

1. Current age: \_\_\_\_\_

2. Gender: \_\_\_\_\_

3. Race/ethnicity (circle all that apply):

- a. White (not Hispanic or Latino)
- b. Black or African American
- c. Hispanic or Latino
- d. Asian American
- e. Native Hawaiian or other Pacific Islander
- f. American Indian or Alaska Native
- g. Two or more races (please identify):  
\_\_\_\_\_  
\_\_\_\_\_

h. Other: \_\_\_\_\_

4. Age at prostitution entry: \_\_\_\_\_

5. Length of time out of prostitution: \_\_\_\_\_

6. Type of work you ever participated in (circle all that apply):

- a. Internet call girl activity (or working as an escort)
- b. Sex work out of a dance/strip club
- c. Telephone call girl activity
- d. Street prostitution
- e. Pornographic photos or films
- f. Brothel sex work

7. Did you ever work for a pimp? Yes No

8. If so, were you working for this person when you left prostitution? Yes No

9. Are you currently employed? Yes No

a. If so, are you employed full-time or part-time? Full-time Part-time

b. What is your current occupation: \_\_\_\_\_

10. What is your current level of education?

- a. Grades 1-6
- b. Junior high (grades 7-8)
- c. Some high school
- d. High school graduate
- e. GED
- f. Some college
- g. College degree
- h. Graduate degree
- i. Other \_\_\_\_\_

APPENDIX D  
INTERVIEW SCHEDULE

**Narrative interview question:** “Can you please tell me the story of your exit from sex work, prostitution, or a sex trafficking situation, beginning with the first time you thought about getting out?”

Prompts:

- Was there a time when you first started to feel dissatisfied with life because of your involvement in prostitution? If so, what was happening to make you feel this way?
- Can you tell me about the first time you tried to leave or get out?
- Can you tell me about the process of exiting, including any times you attempted to exit but reentered prostitution for a period of time?
- Can you tell me about the people who helped you?/Can you tell me about the people who may have hindered your attempt to get out?
- What kinds of services were helpful to you (such as counseling, treatment, case management, safe housing)?
- If you did not utilize any services (such as counseling, treatment, case management), what do you think would have been helpful to you?
- What would have needed to happen in your life for you to get out earlier than you did?
- What kinds of barriers did you come up against while trying to get out?
  - *Can you tell me about any legal barriers you faced while trying to get out?\**
- Tell me about when you knew you had succeeded in leaving prostitution.
- What do think would be helpful for social service providers to know about people involved in prostitution?
- What should these people know about helping others get out of prostitution?
- What, if anything, do you miss about your former life (in prostitution)?
- How has your identity changed?
- *Are you a mother? Tell me about how you experienced motherhood while involved in prostitution and through the process of exiting\**
- How many times did you attempt to leave prostitution before you finally left?

\*Note: These questions were added following the first few interviews in which participants mentioned these concepts as important in the process of exiting.

APPENDIX E

CODEBOOK

Code: **Awakening** (*Visceral awareness*)

**Definition:** An instinctual feeling that they did not that cannot be articulated, a sense of clarity or a new understanding about their situation as a difficult or undesirable one. This could be a gradual or sudden experience.

**Inclusion:** Descriptions of feeling tired, missing family/children, keeping resources at hand even when one has no plan to call/access them, when drug use increased and started to feel uncomfortable,.

**Exclusion:** Any mention of thoughts specifically about wanting to exit, or any mention of planning to get out.

**Key example:** “I just started not being numb anymore and just reality started creeping in and I started thinking about family and just starting coming at me real hard.”

Code: **Disillusionment** (*Conscious awareness*)

**Definition:** A belief articulated after a specific event or resulting from a growing awareness that involvement in sex work is a primary reason for their dissatisfaction.

**Inclusion:** Descriptions of thinking or knowing that it was time to get out.

**Exclusion:** Any vague description of feeling tired, weary, or discontent. Any specific descriptions of planning to get help, or actually seeking out help.

**Key example:** “I was back out, did it for a while, got really sick of it again and just knew it was time.”

Code: **Planning** (*Deliberate Preparation*)

**Definition:** Gathering information, seeking out others who received help exiting sex work, looking for services that might assist with exiting sex work (and/or addiction).

**Inclusion:** Any mention of a specific service, program, or individual that a participant considered contacting, and eventually prepared the way for the m to exit.

**Exclusion:** Any discussion of thinking about a desire to get out, or any description of actually exiting.

**Key example:** “I kept that piece of paper [with service program contact number] because I said, ‘One day I’m going to use this paper.’ That was my purpose for keeping it...that was an important piece of paper, ‘cause six years later I found it.”

Code: **Reduced Connection with the Lifestyle** (*Deliberate Preparation*)

**Definition:** In an attempt to get out on her own, a woman might sell sex less frequently, or engage in less frequent risky behavior (e.g street prostitution), begin working a legitimate job, but remain connected to the sex industry by keeping contact with regulars or working occasionally.

**Inclusion:** Deliberate attempts to sell sex less frequently without completely breaking from the lifestyle.

**Exclusion:** Any formal or informal exiting attempts that ended in relapse; any description of planning to get out or merely being dissatisfied with sex work involvement.

**Key example:**

*Cleo Little:* Well, I would stay off the streets because I either had three or four regulars that would come to my apartment... and pay my rent up for me in exchange for sex.”

Code: **Initial exits** (*Initial Exit and Re-entry*)

**Definition:** The attempts to exit sex work prior to a final exit (defined as the exit preceding the interview for this study). These attempts could include utilizing informal support, formal services, or exiting involuntarily (via arrest).

**Inclusion:** Descriptions of exit attempts, a list of the number of unsuccessful attempts, and descriptions of re-entering sex work again.

**Exclusion:** Any description of a final exit.

**Key example:** “It was probably a duration of two years where I was really in and out of jail, in and out of rehab, in and out of my mom’s house or whatever and then finally [exited].”

Code: **Hindering factor – Lifestyle** (*Individual Barrier*)

**Definition:** The glamour, comfort, excitement, or future promise/potential associated with the lifestyle that accompanied sex work acted as a barrier to exiting or impeded the recovery process following a final exit.

**Inclusion:** Discussing the culture of sex work or referring to “the lifestyle”, “the life”, or the excitement and freedom associated with sex work that made exiting difficult.

**Exclusion:** Specifically discussing people associated with the lifestyle or a focus on economic need

**Key example:** “It’s the freaking lifestyle. Due to my experience for me, it’s the lifestyle. It’s the people, it’s the places and the things. It’s the lifestyle...the part of it where you’re on your own and ain’t nobody telling you want to do except this pimp.”

Code: **Hindering factor - Relationship Difficulty** (*Relationship Barrier*)

**Definition:** Difficulty associated with broken or stressed relationships including family, children, friendships, former and current romantic partners.

**Inclusion:** Difficulties with reconciling old relationships, prior abusive relationships, being separate from children and difficulty associated with reconnecting to children, issues with intimacy and/or trust in new romantic relationships, and difficulty forming friendships

**Exclusion:** Relationships associated with the criminal justice system, or relationships specifically affected by stigma and judgment because of a participant’s involvement in sex work

**Key example:** “There was a lot of guilt. That helped keep me running, and that’s part of my anger. You know, I felt like I had abandoned my children; a good mother doesn’t do this.”

“...I didn’t want to be touched. It was almost as if I had the fear in the back of my mind that if anybody touched me at all that everything was gonna break and I was gonna go back.”

Code: **Hindering factor - Negative Social Network (*Relationship Barrier*)**

**Definition:** Individuals including friends, pimps/traffickers, and customers whose presence made exiting difficult because they forced the individual to stay in sex work (i.e. pimp/trafficker) or made it easier to stay in than to exit (by providing access to drugs or immediate income)

**Inclusion:** Any discussion about friends in the life, pimps/traffickers, or customers/johns who desire to keep someone in the life or provide access to drugs or money that is immediately available.

**Exclusion:** Difficulty in relationships that would otherwise be positive supports (e.g. family/children, treatment program staff or peers in recovery)

**Key example:** “I’ve been with this trick for 12 years. I can just go make this money.”  
“The people that hindered me from getting out would be the people that I was hanging out with at Sunny Slope. My fellow drug addicts and alcoholics.”

Code: **Hindering factor – Addiction (*Individual Barrier*)**

**Definition:** Addiction to substances acted as a barrier to exiting or impeded the recovery process following a final exit.

**Inclusion:** Any discussion of substance use as it played a role in making an exit difficult, or as a primary addiction (where prostitution was secondary to addiction to substances).

**Exclusion:** Any discussion of people or structural barriers related to substance use

**Key example:** “I was really bad on crack cocaine. That was my pimp at that particular point in time. Outside of paying for a weekly rental hotel room, all my money went to drugs.”

Code: **Barrier- Economic Need (*Structural Barrier*)**

**Definition:** An inability to generate income outside sex work that made exiting difficult.

**Inclusion:** Any discussion about needing income, difficulty sustaining income or worry about financial stability before or after exiting sex work.

**Exclusion:** Mentioning economic need as it specifically related to sustaining addiction.

**Key example:** “The hardest part for me to be out of the lifestyle was when there was a car payment due or facing eviction...”

“I went through the Diversion program, but still I had no money, no cigarettes, no nothing and I thought oh, I can must do this and it’s okay.”

Code: **Hindering factor – Stigma (*Societal Barrier*)**

**Definition:** Feelings of shame because of involvement in sex work and others' perceptions of people involved in sex work/prostitution.

**Inclusion:** Any discussion about feeling embarrassed, ashamed, or ostracized because of involvement in sex work, a belief that others are judging someone because of this involvement, or an experience when someone were judged or ostracized because others knew of past involvement in sex work.

**Exclusion:** Relationship difficulty that is not specifically related to the stigma associated with sex work.

**Key example:** "Of course I thought I had a sign on my forehead that let everyone know I was a former prostitute, drug addict for a long, long time."

"I could never do anything else. I didn't know how to do anything else. I was never gonna be able to do anything else."

Code: **Hindering factor- Adult roles and responsibility (*Individual Barrier*)**

**Definition:** Fear, lack of experience, or lack of confidence in the ability to carry out adult responsibilities such as holding a job, paying bills, cleaning or cooking, or other tasks associated with adulthood.

**Inclusion:** Any discussion about fear, uncertainty, or frustration over completing tasks that one associated with adulthood/adult responsibility

**Exclusion:** Any discussion of adult responsibility as it specifically relates to relationships

**Key example:** "There's no kind of regular skills for us at all, period. House cleaning, none of that...I didn't even know how to put gas in a car, I had to learn."

Code: **Hindering factor - Legal Barriers (*Structural Barrier*)**

**Definition:** Legal barriers including criminal record, warrants, or fines associated with involvement in the legal system, and related structural barriers including difficulty finding employment or safe housing, obtaining current identification and other documents.

**Inclusion:** Structural barriers include: Legal barriers or barriers associated with access to services.

**Exclusion:** Individual-level (e.g. a lack of confidence) or relationship-based barriers (a lack of resources or social support)

**Key example:** "I had an extensive criminal record, I didn't ever clean up my messes. I had a lot to clean up, which was overwhelming."

"I have 17 arrests, 12 convictions and 2 felonies. So the biggest barriers have been my felonies. It takes a long time to do anything with those."

Code: **Helping factor- Survivor Presence**

**Definition:** Contact with survivors (former sex workers) who acted as role models and demonstrated that a life without sex work was possible.

**Inclusion:** Any discussion of peers exiting sex work alongside a participant, coming into contact with treatment program staff, or hearing stories told by survivors.

**Exclusion:** Descriptions of important relationships with people who had not experienced sex work or sexual exploitation.

**Key example:** “The house mom was so awesome. She used to be a prostitute...she was who I was...it was comforting and it gave me hope.”

Code: **Helping factor- Positive Social Network**

**Definition:** Relationships with family, friends, treatment program staff, or individuals connected to the criminal justice system whose care, concern, and support helped women be successful in their exit. Relationships were described as supportive when they provided encouragement, inspiration, accountability, respect, and practical help.

**Inclusion:** Any discussion about motivation to regain relationships with children, about the various people in a new social network that helped during recovery, and people they interacted with while involved in the criminal justice system.

**Exclusion:** Any explanation that links the relationship’s impact specifically to the survivor role.

**Key example:** “Having that web of people that I could call if I was really having a bad day, it worked wonders for me.”

“A lot of [help] came from police officers...that was a part of my support system, actually.”

Code: **Helping factor- Formal Support Services**

**Definition:** The experience of accessing formal support services assisted a participant in exiting.

**Inclusion:** Any descriptions of inpatient or outpatient treatment, substance abuse treatment, residential programs, court-ordered programs, or support group meetings.

**Exclusion:** Any specific mention of an individual/relationship within formal programming

**Key example:** “The program saved my life. The program made a better woman out of me...I felt safe. You know, that was like- that was the only place for me.”

Code: **Helping factor- Spirituality**

**Definition:** Spiritual and/or religious beliefs that helped provide strength and motivation to exit, or provided hope during the exiting journey.

**Inclusion:** Any mention of God, spiritual connection, faith or practicing religion as it related to playing a role in the exiting process.

**Exclusion:** Any discussion of individuals (e.g. pastors or friends/programs affiliated with religious organizations) that were helpful.

**Key example:** “My faith that there really is a God and that if I just have a little bit of trust, he’d help me and that’s what sustained me.”

Code: **Helping factor- Feelings of Empowerment**

**Definition:** Feelings of confidence, competence, self-esteem, value, and acceptance that helped women maintain recovery and stay out of the sex industry.

**Inclusion:** Any discussion of interactions with others or the growth of individual self-worth that provided feelings of empowerment.

**Exclusion:** Any specific emphasis on a type of formal services or specific relationships as key to positive change.

**Key example:** “I started changing when I started getting confidence in myself.”

Code: **Helping factor- Fear of Consequences**

**Definition:** The consequences of staying involved in sex work (or returning to the sex industry) motivated a participant to exit or stay out of sex work.

**Inclusion:** Any discussion of legal consequences such as felony charges or prison time, suffering from more violence, or being further separated from children.

**Exclusion:** Any discussion emphasizing the presence of positive reasons to exit sex work.

**Key example:** “I think the only thing that I needed to get sober was a healthy fear of consequences and a healthy fear for my life. Those two things are the only things that finally made me get out.”

Code: **Final exit**

**Definition:** Exits prostitution for the last time (prior to the interview)

**Inclusion:** Any discussion of exiting sex work voluntarily (e.g. utilizing formal or informal support services) or involuntarily (e.g. exiting after arrest/incarceration or becoming injured)

**Exclusion:** Any exit that is followed by a re-entry into sex work.

**Key example:** “He [cousin] and his wife paid for me to come out to Phoenix...He had a janitorial service. I started working. I stayed and I never went back and that was it.”

Code: **Moment I Was Done**

**Definition:** A specific event, a moment in time, or a gradual process that lead a women to believe that they were no longer interested or compelled to re-enter the sex industry.

**Inclusion:** Any decision to enter treatment, an experience where they were rejected an opportunity to return to sex work, or a gradual awareness that they no longer wanted to return to sex work.

**Exclusion:** Any discussion of a desire to exit that is followed by a relapse or a period of re-entering sex work.

**Key example:** “When cars would stop and I would say, “No, get out of here.”  
“When I made that last phone call to Dignity.”

Code: **Identity**

**Definition:** How a participant describes herself, and how it has changed throughout the exiting process.

**Inclusion:** Any discussion of character, role, or relationship that helps to define how a participant sees herself, hope for the future, how others perceive her.

**Exclusion:** Any emphasis on a concrete part of their exiting story.

**Key example:** “I’m a lady now. Simple as that. That don’t even need to be explained.”

APPENDIX F

INTERVIEW PARTICIPANT EXITING TIMELINES

“Lori”

Often thought about getting out, but did not pursue it.

Friend convinced her to enter a halfway house for substance abusing adults. However, she became uncomfortable there (staff called her out on prostitution stuff), and she was still meeting up with a sugar daddy

Left that program, went to Dignity Program, had 18 months clean, built supportive community, rekindled relationship with mother

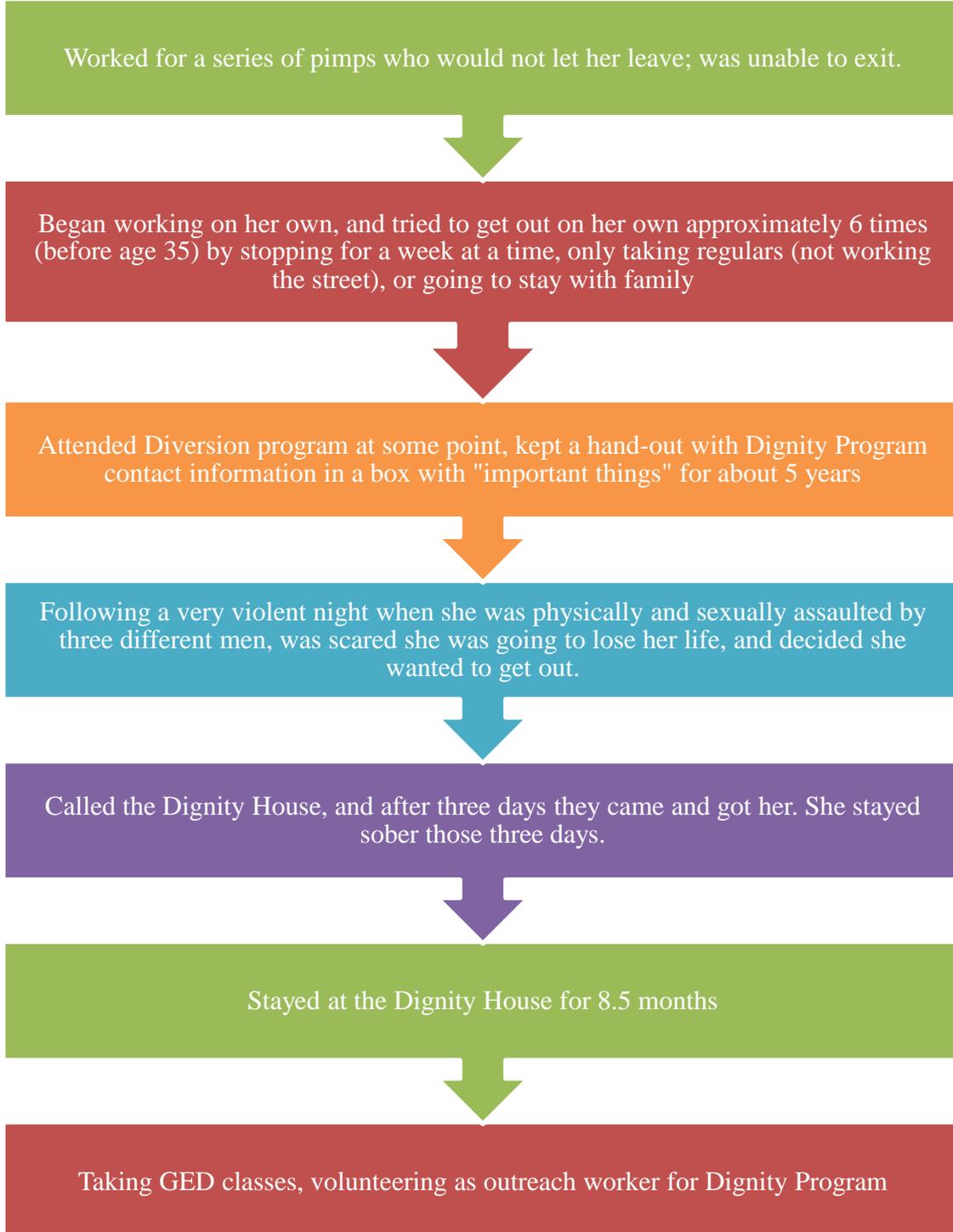
Began struggling with legal/structural barriers (criminal record, old debt/creditors) and self doubt. Began using again, and started prostituting to fund drugs

Friends intervened, mother intervened, Dignity house called law enforcement to notify them of where she was.

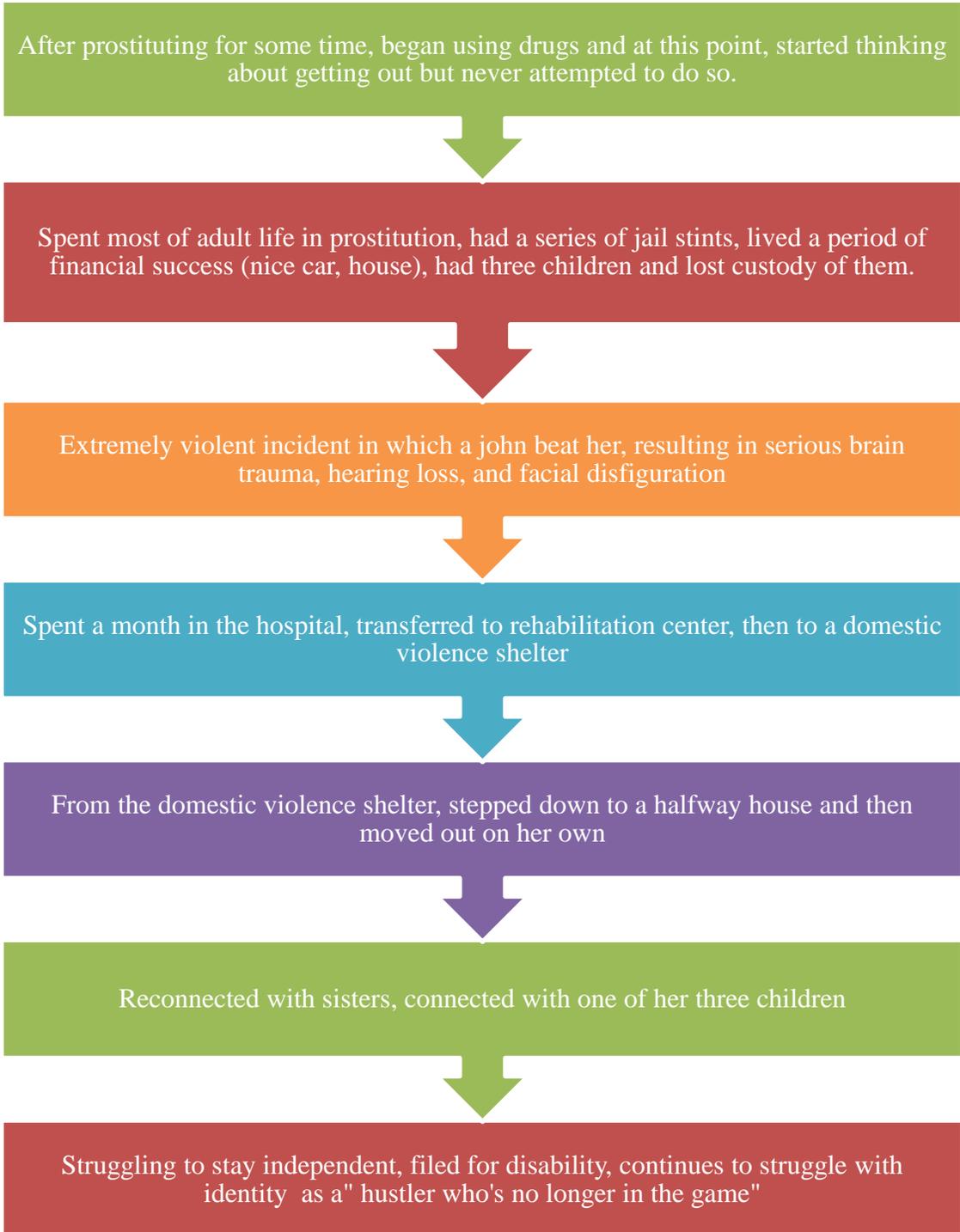
Was rearrested, went to jail, and was referred to the Diversion program. Left jail and was admitted back to Dignity house

Now works as an intake specialist at a prostitution diversion program, has contact with her son, owns a condo and a beloved dog.

“Cleo Little”



"Monique"



“Crystal”

Wanted to get out a number of times, but did not know how. Engaged in risky behavior (e.g. when a man put a gun to her head, she asked that he shoot her).

Was stabbed in back and left in an alley, began realizing the increasing danger she was in.

Tried to reduce contact with drug/prostitution lifestyle, stayed with a regular trick whom she thought would help her. When she realized he really wasn't going to help, she went and stayed with friends (in same neighborhood she used in).

Relapsed, was arrested for the 23rd time (in 4 years), she went to the Dignity group in jail, and decided to enter the Dignity residential program. Was there 3 months.

Left Dignity program, stayed again with (the same) friends, and tried to stay out on her own by maintaining reduced contact with prostitution and drug/alcohol use. Having a felony made getting a job difficult, and she ended up having a "really bad relapse".

Detoxed self at home for 3 days, re-entered the Dignity program

Completed Dignity program, now lives independently, has 4 dogs, completed her Associate's degree and has a steady job in a peer support program.

“Shelly”

After about 2 years in prostitution, started to "not feel numb anymore", started getting tired of the lifestyle. Started thinking about family, felt strong desire to get out

Family tried to help her get out by helping her get into various drug rehab facilities, but none address prostitution issues. Went through a period of about 2 years where she was in and out of rehab, jail, and family members' homes, trying to get out each time.

Was in jail for a period of time, then was released, tried to quit the prostitution lifestyle on her own again but was unable to. She was sent to jail again for 3 months. While there, she began inquiring about programs to help her get out.

Asked judge to place her in Casa de Amigas (residential treatment center for substance abuse), and he did. While there, she learned about the Dignity program; she contacted the program and was admitted.

Completed the Dignity Program.

After graduating, reunited with boyfriend whom she eventually married, and now has full custody of both children.

“Sasha”

Thought about leaving prostitution "every single day", but the fear of the unknown, the drug addiction, and familiarity of the prostitution lifestyle were barriers to really getting out.

At some point during 10 years in prostitution, she was arrested for prostitution, enrolled in the prostitution diversion program, and never showed up.

Was arrested numerous times with varied lengths of jail time. Finally, was arrested on drug charges, sentenced to 7 years, participated in "self-help programming" while in prison, and decided she wanted to change her life.

After serving 5 1/2 years, she was released to a halfway house. While at the halfway house, she went to get her driver's license address changed at the DMV, was notified she had a warrant for the old prostitution arrest.

She was allowed to reenroll in the prostitution diversion program, where she became increasingly involved with supportive services- diversion programming, 12-step groups, and friends through people she met in recovery.

She currently works in a substance abuse recovery program, is involved in both of her daughters' lives, and has a 3-year-old granddaughter. She considers recovery a life-long process.

“Maria”

Decided to get sober, but was still working in the commercial sex industry. Her sponsor confronted her and challenged her to think about how her involvement in sex work affected other people.

Decided to move to Arizona from Las Vegas with her ex-husband, to get away from the environment she worked in.

She gave the relationship another change but it did not work out. Moved out but had difficulty finding work and stable housing.

Considered prostituting again, but was able to rely on the support of some women she met in a recovery program.

Got a customer service job, then a slightly better job, weathered financial difficulties with a fiance and did not return to prostitution.

She currently has a job, is in a stable relationship, and has contact with at least two of her children.

“Sarah”

Prostituted to support drug addiction, began to grow tired of it, had accumulated charges, and was introduced to probation and surveillance officers who were supportive.

Complied with requirements of probation (e.g. community service), but was still selling sex. Ended up in jail, and the judge ordered rehabilitation. Surveillance officer picked her up from jail, and took her to New Arizona Families for drug rehabilitation.

Rehab counselors recommended the Dignity program to address prostitution issues. Entered the Dignity program, turned a trick and it made her physically ill; this brought an awareness that she did not want to prostitute.

Was asked to leave Dignity program after 3 months, entered an all-women's halfway house, relapsed (substance use) and then began prostituting again.

Contacted former surveillance and probation officers and asked for help; they assisted her in getting into Maverick House, another substance abuse program. From Maverick house, went to Step One, a halfway house. Relapsed but when she was discharged for a dirty UA (as a result of the relapse), she was sober.

Was on the streets, decided to walk up to Dignity house in the middle of the night. They took her in until Maverick House had a bed available for her to re-enter their program.

Completed Maverick House programming, entered Step One, and after one year as a client, was hired as management where she remained for nearly 5 additional years. All 4 children are back in her life, and she shares custody of the younger 2 children.

“Annie”

Experienced a very violent incident with a customer (someone she knew), and that prompted her to think about getting out

Was arrested on a drug charge on her 21st birthday, was court-ordered to treatment.

Was discharged from treatment, got high, but did not go back to prostitution.

Ran into a friend whose girlfriend had moved to Phoenix and went through the Dignity program. He suggested she do follow her example and move to Phoenix; she got on a plane and moved.

The friend's girlfriend met her at the airport, drove her to a detox program and from there she was discharged to the Solution, a 90-day substance abuse program.

From there, she moved in with a friend she met in sobriety, and got connected with other survivors through AA meeting

Is currently engaged and in a healthy relationship, sees a therapist (whom she has been going to for some time) that specializes in trauma, and has a job working with at-risk adolescents.

“Ness”

Attempted to exit a couple of times the same year she finally exited. Once, by enrolling in a drug rehabilitation program; she didn't feel that they met her medical needs, so she left and tried to stay sober and out of the life by living with her mother, but her sister didn't want her there so she left, and relapsed.

Found out in October that her insurance (through disability) would cover a rehabilitation program, and began planning to enroll as soon as she was admitted.

Continued prostituting and using drugs until she experienced a violent incident December 24th; a friend was shot while protecting her. This incident really scared her and she called the program. They permitted her to come in early January, and she was able to remain sober until then.

Though it was difficult- she kept her bags packed and often wanted to leave- she completed the rehabilitation program and was discharged to a halfway house.

Stayed at the halfway house only one week, after problems with the house manager and other residents. Went to a homeless shelter and stayed there two months.

Due to a probation violation while using, she had to go to jail for two months; was discharged back to the homeless shelter where she stayed an additional two months until she was approved to have her own apartment. She currently works providing pizza delivery.

“Samantha”

While working as an escort at an agency, she realized that she needed help with her drug addiction. She planned to go back to work at the escort agency once she was sober.

While living at a sober living home and attending recovery programs (including 12-step meetings) she began working as a housekeeper, and felt satisfaction in the work she was doing at an "honest" job.

Remained involved in programming, developed a stronger spiritual connection to God, but after approximately two years sober, she needed money and decided to prostitute. She turned one trick, at the pressure of a boyfriend with whom she shared financial responsibility; she told herself she didn't want to do it, and afterwards decided she would never go back.

She credits her spirituality and her desire to remain sober as motivation to stay out, and broke up with the boyfriend following the last trick.

Is now happily married, attending school to become a medical technician, and enjoys new hobbies such as attending dance classes.

“Jezebel”

She tried to get out several times by entering drug treatment or domestic violence shelters, but relapsed each time due to drug addiction

Eventually her children were taken from her custody. After a visit with them one day, she became suicidal. She began praying, and was feeling desperate for a way out when she received a phone call notifying her of an uncle's death, and that she would get a ticket to come back home for the funeral.

She went to the funeral, where she ran into a cousin that she used to do drugs with. He was sober and encouraged her to get sober as well. She went back home to Michigan after the funeral, but called her cousin soon after returning, and he invited her to come to Phoenix.

She went to Phoenix, began working for her cousin's janitorial service, and never went back to prostitution. She decided she wanted to stay in Phoenix, and needed a job that generated more income. She taught herself to use a computer, and was hired at the American Heart Association.

After about one year, she was able to get her children back. She moved them down to Phoenix with her, struggled to taking on a parenting role again, but got through that time. She credits a strong relationship with God for her strength in getting through that time. She went on to work for a newspaper for 20 years, is retired now and occasionally volunteers her time and creativity to anti-trafficking advocacy work.

“Cathy”

Recalls attempting to get out of the prostitution lifestyle at least once per year for the 15-20 years she spent in the life.

Began getting tired of the prostitution lifestyle, being in and out of jail, missed her children and grandchildren, including those she had never met. Dignity programs and 12-step programs in jail helped her to give "hope" that there might be something different for her.

After getting out of jail again, she decided she wanted to get out of prostitution. A boyfriend picked her up upon release and they moved out of the area she prostituted in.

Began to get bored and did not want to search for a legitimate job, so she started traveling back and forth to the area she initially left. After approximately one month away, she returned to this area and began prostituting and using again. Within two weeks she was living with an elderly man, selling drugs out of his house and facilitating prostitution of other girls. She recalls standing on a street corner, praying "God, get me out of this".

Nine days later, she was arrested and went back to jail again, a second felony arrest, she was found possessing narcotics. She was facing the possibility of significant prison time, but she chose to more fully engage in jail programming while there, specifically the Dignity classes. After one Dignity class, she requested to do an intake for their year-long residential program.

Her probation officer advocated for her, and she was given only 5 months' jail time. She was granted early release (on month); her probation officer picked her up and drove her for an intake at a rehab facility, where she stayed 30 days.

After the 30 days were up, she was picked up by a Dignity program residential staff member. She was at the Dignity program for a year and successfully completed the program. She now works as a staff member of a program helping other women exit prostitution.

“Angelica”

Family attempted to get her off the streets and into a detox program; she did not stay there long, and was picked up by a man. During the 4 years she was with him, he trafficked her, subjected her to beatings, locked her indoors, and threatened to kill her if she escaped.

She attempted to leave him three times; one of those times, she ran out of the house, escaped to an apartment complex and requested that the manager call the police. When the police arrived, they spoke with her and her trafficker; she recalls that they assumed she was a drug addict and that she was inconveniencing him (the trafficker). She had no where else to go, so she got into his car and went back home with him.

She attempted to ask johns for help on occasion, but they were also afraid of her trafficker so they did not help her escape. Finally, she requested that a john drop her off at a motel, began working independently from the motel, worked briefly for another pimp/trafficker, and was arrested shortly thereafter.

Got out of jail, went to a halfway house, then moved in with her mother. She got a job and attempted to stay sober, but didn't engage in any substance abuse recovery programming and relapsed.

Began working in prostitution again, but reports feeling tired, and "no matter how many drugs I used or how much money I made or how many men I had sex with, I was starting to feel and that terrified me". Got arrested again for the last time, and was accepted into a rehab program in the jail.

Left jail, and had planned to be picked up by a regular trick who had been putting money on her books; instead, she noticed that her daughter was waiting to pick her up. She left with her daughter, and went to live with her mother again. She was able to get rehired at a previous job (as a waitress)

Lived with her mom about 9 months, worked hard to regain custody of a daughter, met her current husband, began working at the Catholic Charities Dignity Program. Married, bought a house, and still works for Catholic Charities.

## “Party Girl”

After being trafficked at age 15, and involved in prostitution about 5 years, she began using drugs. Remained addicted to drugs and involved in prostitution for about 20 years.

Was arrested and had to spend 40 days in isolation, where she spent time thinking, praying, reading her Bible and reflecting. She remembers thinking "I need to change."

Stayed in jail 4 months, never receiving services for drug addiction or prostitution issues; however, she listened to a survivor come and speak, and took a card with her phone number on it.

Was released from jail, and had no where to go. Became involved in using drugs again, and without any money, needed to turn a trick to pay for a place to stay. Rented a motel room, started to drink but the alcohol did not make her feel calm. She started feeling paranoid and suicidal, and pulled out the card, and called the survivor speaker she met while in jail.

The woman took her to a shelter run by a church group called Victory Outreach, that she enjoyed and stayed for a couple of weeks, but did not receive any help with her addiction. Her addiction went untreated, making it difficult to handle stress.

After an argument with another girl at the shelter, she left, prostituted to get money, and began using drugs again.

Continued to have thoughts about dying on the streets, and had a desire to get out. Went to Victory Outreach a few more times, and ended running into a cousin who invited her to church the following day.

Became increasingly more involved in church, and received support from people she met there. As her involvement increased, and she received more support (e.g. help with housing and clothing, and gained new friends) she stopped selling sex. She worked a few low paying jobs, got married and divorced, eventually became interested in caregiving and got her CNA license. She now speaks regularly at diversion and mentors women who are getting out of the life.

“Tracey”

Started feeling guilty about what she was doing, as daughters got older, she started worrying that they would know what she was doing, grow apart from her, or follow in her footsteps. She started feeling uncomfortable when she thought about her regular customers' families, but could not exit the life because of an increasingly problematic drug addiction.

Was staying in a home paid for by a regular "sugar daddy", and began to feel that she just had to get out. She picked up her stuff and walked out, but her addiction kept her from getting out "all at once". Ended up deciding to go into a halfway house where a housemate encouraged her to attend drug treatment. She attended for a number of weeks, relapsed, went back to an old boyfriend and reconnected with regular customer(s).

Had a strong desire to get out again. She knew she needed something more intensive and long-term, so she called her friend (from the halfway house), the friend connected her to Dignity Program, they came and picked her up. She stayed 30 days and then relapsed (drugs). She left the house, called her old regular (sugar daddy) and asked for money. He gave her what she needed, but she did not want a relationship and knew that he did. She had wanted to stay out of the life and knew that she could not on her own, because it money was too easy.

She stayed with her brother for 2 weeks, went to a drug treatment program (Maverick House), and then went back to Dignity house.

Stayed at the Dignity House one year, completed the program, stayed at the 3/4 house an additional 10 months. Continued to maintain relationships with daughters, and currently has a good relationship with them. At the time of the interview, was struggling to find employment again, but remained optimistic. She has a close relationship with many of the women she lived with at Dignity.

## “Candy”

After using heroine and prostituting for many years, and losing custody of four daughters during that time, she had a fifth daughter. Her daughter was removed from her care at a young age because she was not sending her to school, and this prompted Candy to seek help for her addiction.

Went to detox, spent 6 months in a drug treatment facility, transitioned to a halfway house, but had trouble fitting in because she was stigmatized by housmates who hadn't experienced prostitution. She had trouble finding employment with a very limited employment history, and struggled to stay sober. She heard about the Dignity program, and wanted to go there instead.

Was admitted to the Dignity program, where she was able to "fit right in" with the other women, and also address drug addiction issues. Graduated from the program, moved onto manage a halfway house, but relapsed with crack cocaine.

Attempted to stay away from prostitution during her drug relapse, but got desperate for money on one occasion, and decided to walk the street . One man pulled over, but decided not to pay her for sex. She realized that she had to be done- she was "too tired and old".

Has struggled with complex health issues and drug addiction on and off since exiting prostitution. She has not used heroine again since she first got clean and went through the Dignity program, and has not prostituted since. She recently turned 50, left an abusive relationship, and continues to rely on the support of fellow survivors.

“Porsche”

After working in the commercial sex industry for many years, she became addicted to drugs following the death of a friend. She then remained in sex work for another 20+ years while struggling with drug addiction. She was married for a period of time, and stopped prostituting, but would occasionally go back to it to pay for drugs or when she was "mad", presumably at her husband. She also reports that after loosing a lot of money, he "put her out on the street", and she prostituted to get other basic needs met.

Experienced violent encounters with customers/johns, including one time where she was stabbed several times by someone who allegedly had killed a number of other women before her . She recalls going back to prostitution after that event, and while she could not recall how many times she exited and re-entered sex work, she said, "I've been done so many times".

Was injured badly by a customer (a "19-year-old kid") who ran over her with his car. She reports nearly dying and having injuries so severe that she was in a coma for a period of time, had multiple surgeries, and spent a very long time recovering.

She recalls coming out of the coma and seeing her daughter who was very distraught. She realized that she wanted to be there for her daughter and her grandchildren, and knew from that point that she would not return to prostitution. She is currently enrolled in the City of Phoenix Prostitution Diversion program to take care of a 12-year-old charge. She talked often about the glamour and money that came with her former life, and feels that she has had the opportunity for another chance at life and wants to help others.

“Amanda”

Attempted to escape while working for a pimp. He had recruited her while she was on the run at age 16; she worked for him for approximately 7 months before asking a woman who was "watching her at the apartment" to borrow her car. She drove the car to a friend's house; she did not tell the friend she was in prostitution, but said she was in a bad situation. The friend said he would help, but would not let her stay there. She became scared because she didn't know where she would end up, and so she went back to her pimp.



At some point thereafter, the police began investigating the massage parlor she was being trafficked out of, and her traffickers told her to leave for a couple of weeks. She left, went to an aunt and uncle's house in California, and did not go back.



Got a job and made some friends at her new home, but stayed only 6-7 months in California because her aunt was abusive. She ran from there to escape the abuse, and came back to Phoenix.



Became more heavily involved in drug addiction and had friends that engaged in prostitution, but she did not go back to prostitution. She attributes this to the fact that she was not allowed to use drugs while working for her pimp, so the vivid memories of her experiences kept her from going back.



While still using, began dating the man who became her husband. The relationship, along with the relationship he formed with his children- and having a child of her own- motivated her to stop using drugs. She began suffering from severe PTSD, but was eventually able to find a counselor that treated her trauma. She continues to engage in therapy, is attending school, and is actively involved in anti-trafficking advocacy work.