



Graduate School of Development Studies

**I Am Also a Mother: Examining the Childcare
Challenges of Sex Workers in Addis Ababa, Ethiopia**

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List of Acronyms

AIDS	Acquired Immuno Deficiency Disease
ART	Antiretroviral Treatment
BVLF	Bernard van Leer Foundation
ETB	Ethiopian Birr
FGD	Focus Group Discussion
FHI	Family Health International
HIV	Human Immuno Virus
MOLSA	Ministry of Labour and Social Affairs
NGOs	Non Governmental Organizations
UNAIDS	The Joint United Nations Programme on HIV/AIDS
SWs	Sex Workers

Abstract

A considerable number of studies have been conducted on sex work in Ethiopia though they have given little insight and understanding on the life of sex workers outside their work environment particularly their role as mothers. This research examines the childcare challenges of sex workers in the city of Addis Ababa, Ethiopia. To achieve this, both the ecological model and the theory of gender and power were used to provide a deeper analysis of the childcare practice and its challenges. The main theme of this work is that sex workers with children struggle daily to deal with dual role of childcare and sex work despite several constraints put on them by difficult living and working condition, and fragmented social support system. It is evident from this study that sex workers who are mothers have specific childcare needs that must be considered by researchers, policy makers and service providers. I used qualitative approach, in-depth interview, focus group discussion and information from key informants for this study.

The findings show that for women, juggling childcare with sex work is very challenging because as breadwinners, they have to bring income through sex work and as mothers they are expected to maintain their household and give care to their children. Furthermore, these women have to deal with the stigma of their work on themselves and on their children as they combine socially acceptable role of motherhood and morally condemned role as a sex worker. Moreover, they have to struggle to minimize the negative effect of their work environment on the lives of their children.

Keywords: Addis Ababa, Sex Work, Sex Workers, Childcare, Housemaid

1. INTRODUCTION

1.1 Background of the Research

Sex work is a widespread phenomenon. It exists in urban and rural areas as well as in developed and developing countries. It is difficult to determine the extent of the sex work industry because it is often illegal and clandestine. However, it is believed that it is increasing substantially in recent years. Changes in political, civil, and socio-economic conditions and population increase are considered as contributing factors for the expansion of the sex work (UNAIDS 2002).

Sex workers (hereafter SWs) are defined as “female, male and transgender adults, mainly young people who receive money or goods in exchange for sexual services, either regularly or occasionally” (UNAIDS 2002:3). In the literature, different terms are used to label women engaged in the sex industry and they include: *sex worker*, *whore*, *fallen women* and *prostitute*. Currently the term SW has gained recognition over the term prostitution because the term is coined by those involved in the sex trade and they consider it less stigmatizing than the term prostitute. In addition, this term acknowledges the exchange of money for sex. The term prostitute on the other hand has a moral claim to it and has been used to blame women who violate the norms of femininity (Rhebergen, 1999; O’Neill, 1997). Therefore, in this study I will use the term sex work. I will also use the term prostitute only in reference to previous studies focusing on female SWs.

Women may enter sex work for different reasons. Some women are forced into sex work while others enter the occupation out of choice (UNAIDS, 2002; Kloos et al., 2007). Many women are involved in sex work mainly because of limited economic opportunities (Kempadoo, 2001; Kloos et al., 2007). In addition, poverty and gender inequalities that limit women’s rights and employment as well as economic independence contribute to women’s engagement in sex work. In many societies women’s reproductive capacity is used to determine their access to social and economic resources hence leaving only limited options for their economic survival outside marriage other than sex

work (Holmes, 1994 ; UNAIDS, 2002). This case is also true in Ethiopia. Many women in Ethiopia migrate from rural areas to towns because of divorce and famine and are forced to engage in sexual activities to get economic support (Kloos et al., 2007).

In Ethiopia, it is estimated that 28 % of all street children are engaged in the sex trade (Wondimu, 1996, in Hoot et al., 2006). Some girls as young as 11 years of age are engaged in SW. For example, Abdella (2001) found that 20 % of children in her sample began their prostitution career before the age of 11 years (in Hoot et al., 2006). Studies also indicate that an increasing number of teenage girls come to Addis Ababa to involve in SW because of poverty (Zane, 2003). However, it is difficult to get reliable data on the exact number of SWs in Ethiopia. Various studies have different data. For example, Wondimu (1996) stated the number of SWs in the country stood at 90 000. Conversely, in Addis Ababa alone, studies estimate the number of SWs at 150000 (Garbus, 2003). A study conducted by FHI (2002) has indicated the number of SWs is about 8000. Mehret, et al. (1990) estimated that 7.1% of the adult female population of Addis Ababa regularly engaged with multiple partners, the majority on a prostitute-client basis.

Most SWs in towns of Ethiopia are divorcees who came from rural areas in search of job and a better life (Pankhurst ,1990 & Hailemariam and Kloos, 1993 in Kloos et al., 2007). Hoot et al. (2006) found that almost 60 % of SWs participating in their research were rural migrants. In Ethiopia, an estimated 45 % of first marriages end in divorce primarily because of early marriage and childlessness (Tilson and Larson 2000). In some parts of the country girls are forced into marriage at the age of eight years to older men. As a result of this tradition, these girls often run away from their husband's place when they get the opportunity to do so. However, returning to their parents place is no longer an option because they have violated cultural norms and are now considered a disgrace to their families. Lacking in necessary skills for even domestic work, the only option for these girls coming to large urban areas is to engage in sex work as a survival mechanism (Hoot et al., 2006; Van Blerk, 2008).

Many SWs face tremendous social stigma as a result of their occupation in spite of structural barriers like poverty and gender inequality that drive the women to prostitution. In addition, they suffer from exploitation, exposure to risks like drug and alcohol abuse, shame and guilt (Lipinge & Angula, 2000; O’Neill, 1997 and Ramey, 2007). According to Bethlehem (2005), the sex trade in Addis Ababa involves mainly women who engage in it primarily because of limited economic opportunities. Duncan et al (1994a) stated that SWs in Addis Ababa were not only poorer than women still married to their husband but also married earlier (in Kloos et al., 2007).

In Ethiopia, sex work is not a criminal offence. The law is vague in its approach to the issue. Framed as an “immoral” act¹, the law somehow gives leeway for society to discriminate prostitutes as immoral. This attitude extends to the area of law enforcement. As we will see later in the paper, law enforcement officials have confused their ‘social roles’ with their assigned work. The law² clearly criminalizes acts of procuring, operating brothels and benefiting from prostitution. Because of this, the Developmental Social Welfare Policy considers prostitution as a social problem and aims to eradicate it (MOLSA, 1996).

1.2 Problem Statement

SWs lives have exclusively been defined by their work thus making it hard to portray them in any other role (Sleightholme and Sinha, 1997). Most of the women who are engaged in sex work have children. Weiner (1996) study on a sample of 1963 street SWs in New York showed that 69% of the women had children with an average number of 2.25 children per family. Sloss (2002) reported that 91 % of the women involved in sex work had children with average number of 3.4 children each (in Sloss and Harper, 2004). In a sample of

¹ Proclamation Number 414/2004 2004: 215 section III.

² Proclamation Number 414/2004 2004: 215 section III, article 634

100 SWs in Addis Ababa, 23 % of the women were found to have children after joining the sex work (Bethlehem, 2005).

Women can have children before or after joining the sex trade. However, the experience of female SWs as they fulfil the role of being a mother and child rearing, have rarely been reported. A study conducted on 131 female SWs in Mexico City revealed that many of the women found their double life as a mother and SW difficult. Many are stigmatized and living in shame as they attempt to hide their work from their families. Despite feeling ashamed about themselves and their disdain for their work, these women expressed 'motherhood' as their main reason for their involvement in sex work and for staying in it (Castaneda et al., 1996). Besides, it is a coping mechanism for many involved in sex work (Wolffers et al., 1999). Sloss and Harper (2004) study on street SW mothers demonstrate that pregnancy and parenting while working on the street created stress on the women as well as making them embarrassed about themselves and their work.

Studies stated that managing parenting and working is far challenging for SWs than for women in most other professions (Sloss & Harper, 2004; Sleightholme and Sinha, 1997). First, most of them are single parents and have to support their families besides the typical feminine care-giving role. Second, the stigma of their work and the environment of the brothel strongly influence the lives of their children (Sleightholme and Sinha, 1997). A study conducted in Kenya indicated that 75 % of the SWs practiced the work at home with little or no privacy. This study also showed that some of the mothers were influencing their daughters to engage in the sex trade. Many times children are left unaccompanied while their mothers are involved in the search for clients with some using their income on drugs and alcohol (Chege et al, 2004). Similarly, in India, children of SWs face difficulties accessing school registration due to lack of birth certificate which requires father's name and proof of residential address (Briski and Kauffman, 2004). In addition, female children raised in red-light areas are vulnerable to sexual abuse. Boys are likely to be involved in sex trade as pimps or selling drugs and alcohol (Sleightholme and Sinha, 1997).

Another study done in brothel communities of Bangladesh showed that girls brought up in brothels are more likely to follow in the footsteps of their mothers work. They are also likely to engage in sexual activity at an early age. The lack of acceptance by the society because of their engagement in sex work and their mother's involvement in the sex trade makes them feel ashamed. Compared to girls, boys are more likely to abuse alcohol and drugs and develop feelings of disorientation. The study results also show that the rate of illness is high among young children in brothels because of the high health risk associated with the wide use of drugs and alcohol. There is also little importance given to the education of the children of prostitutes especially for girls. In addition children are involved in paid work related to the sex trade at an early age including sex work (Ling, 2001).

1.3 Relevance and Justification

In Ethiopia a considerable number of studies conducted on sex work have focused on causes of prostitution, types of prostitution, and consequences of prostitution. Most of these studies have portrayed SWs as social misfits with attitudes and behaviour dangerous to society (Bethlehem, 2005). With the spread of HIV / AIDS, the studies have focused on SWs in a high risk group for the spread of HIV infection (Alem et al, 2006; FHI, 2002; Kloos et al., 2007). Despite growing interest in the study of sex work in Ethiopia, research has given little consideration to understanding the life of SWs outside their work such as their role as mothers or providers for the family. More insight into the women's life as a mother and SW will help to develop programmes and interventions that address their multiple needs. Therefore, the motivation behind this research is to explore the often neglected childcare role of SWs. By doing this, this research aims to contribute to filling this gap by providing the current facts on childcare practice of SWs in Ethiopia. This research will add value to interventions and planning for support programmes at the national and regional level in Ethiopia and contribute to research in this area.

1.4 Research Objective and Research Question

Research Objective

The objective of this research is to explore the childcare challenges of SWs in Addis Ababa.

Research Question

- How does sex work affect child care-giving roles of women engaged in such activity?

In order to answer the main research question, focus was put on issues like background information of SWs; current living condition; women's experiences as mothers and as SWs; and coping strategies of the women with regard to childcare giving.

1.5 Methodology of the Research

This study employed a qualitative methodological approach to understand childcare practice for SWs from a feminist standpoint. The main goal of feminist research is understanding women's experience (David and Sutton, 2004). Qualitative research is important in doing social research with marginalized group like SWs since, it allows one to understand a given research problem from the perspective of the people involved. It gives detail understanding of the issue under study and allows respondents to give detail information on the study area. Most important of all, it gives the participants a lived experience of the phenomenon under study (Creswell, 2007; Marshall and Rossman, 2006). For qualitative data collection, focus group discussions (FGDs), in-depth interviews, and key informant interviews were used.

Focus Group Discussion

FGDs were held to obtain insight on the topic and to get information for the development of in-depth interview. The FGD also helped the researcher to choose interviewees for in-depth interview and through establishing rapport with them. The interviewees were friendly during the in-depth interviews as a result of the rapport developed during the FGDs. The researcher was the

moderator during the FGD. Tape recorder was used and notes were taken. The number of FGDs was three, two with SWs and one with residences of the area in which sex work is popular. Community FGD was conducted to supplement the information obtained from the individual interview and to get the perceptions of the community towards SWs and as well as insight into their childcare practice. Each FGD session lasted about two hours.

In-depth Interview

Data was collected during interviews with female SWs who have children. Interview is appealing to feminist researchers because it is useful tool that shows people's experience and perceptions at greater in-depth. It is also offers opportunity to access people's ideas and thoughts in their own words rather than in the words of the researcher (Reinharz, 1992). Besides, in-depth interview allow for a more balanced dialogue between interviewer and interviewee (David and Sutton, 2004). In this study, the researcher interviewed 15 SWs who had children. These women were mainly accessed through three organizations, two directly working with SWs and one working in poor neighbourhood. Eleven of the study participants were working in their rented houses while the rest were street walkers.

Study participants were asked issues like their background information, current living conditions, their experience as mothers and SWs, and their coping strategy with regard to childcare. Most of the (eleven) interviews with the women were conducted in their houses. This gave me the opportunity to observe their housing condition, part of their daily routine and their work place since for the majority of the interviewed women their residence and work place was the same. Three interviews were carried out with SWs at drop-in centres, the place where they usually come to meet with their fellow SWs, discuss their issues, watch movies, drink coffee and learn from each other's experiences. One interview was conducted in a café, as requested by one of the interviewees. All interviews were tape- recorded and later transcribed by the researcher. On average, the time spent for each interview was an hour and a half.

Key Informant

In order to supplement information from the mothers, I carried out five key informant interviews with representatives of NGOs and residents of the area in which sex is widely practiced. This was principally to explore the NGOs' programmes and methods of working with SWs as well as to get supporting information regarding the nature and extent of the situation the sex trade and childcare practice of these SWs.

In addition, the research was supplemented with informal discussion with some of research participants. Sometimes I sat with the women and the community members while they gathered to drink coffee in one of the key informant houses and observe their interaction. Furthermore, this research was supplemented by my direct observation while I conducted my individual interview and FGDs and walking around the area where sex work was conducted.

Reflexivity and Ethical Dilemmas

During the entire research period, before my departure to Addis Ababa and during my field work, people kept asking me why I chose to do a study on SWs popularly known as the "difficult group to study". During these times my only motivation was from previous brief encounters with SWs. I had participated in an NGO research work: Mapping and Census of Female SWs in Addis Ababa, as a field supervisor for 6 weeks in 2002. I was able to interview them and even now there were possibilities to do so. But it was not easy as I had expected. I had to spend some time to gain the trust of these women. Most of the women were tired of responding to questions related to HIV/AIDS . Bethlehem (2005) revealed that SWs in Addis Ababa were in state of "research fatigue". However, the fact that I was mainly interested to know about their childcare practice made them more interested to participate in this study.

As a young and woman, the research participants were comfortable with me but appearing as an educated middle-class person they kept questioning my perception of them. When I was doing in-depth interviews and FGDs, some of the women repeatedly asked me whether I thought they were bad or dangerous

people. Most important of all, they wanted to gauge my understanding of their situation. As a result I had to constantly reassure them that I am there to learn from their life experiences.

The research participants also asked for verbal consent and the purpose of the study was described before beginning the interviews. Pseudonyms are used to maintain the confidentiality of participants. In addition to the in-depth interview with the mothers, three children were interviewed. Consent of the mothers and the children were sought before the interview. I was aware of the sensitive nature of interviewing children therefore necessary precautions were taken like interviewing children in a way they understand appropriate to their age. Besides to build rapport with the children and to reduce their fear of talking with strangers, I met with the children participants when I went to interview their mothers.

Data Analysis

The information gained through in-depth interviews, FGDs and key informant interviews was transcribed in Amharic, the language used to collect information, and then translated into English. This qualitative data was analysed using content analysis in order to develop some themes and presented in form of statement. In addition, quotations from data collected were used to present participant opinions and feelings in their own words and to give more meaning for the analysis.

1.6 Scope and Limitation of the Research

This research was based on the interview of women who are engaged in sex work and have children. However due to time limit and financial constraints, I didn't include all types of SWs in the city. In this study, only SWs working in small establishment and street walkers were included. Nevertheless, the study will hopefully provide insight on how women engaged in sex work deal with childcare issues besides their work in the sex trade.

1.7 Structure of the Paper

This paper is organized into five chapters. After the Introductory Chapter, the Second Chapter provides the conceptual and theoretical framework used in the paper. Chapter three provides an overview of the lives of SWs and their children. Chapter Four focuses on the childcare challenges faced by SWs. The last chapter outlines conclusions based on the study's discussions and analysis.

2. ECOLOGICAL APPROACH TO CHILDCARE FOR SEX WORKERS

In this chapter I present two theoretical approaches, the ecological model and the theory of gender and power. I employ these approaches in order to describe and analyse the childcare practice and challenges for SWs. Besides, I discuss concepts that are important in understanding and explaining childrearing practice of women engaged in sex work.

2.1 Ecological Model

For this study, I used the ecological model to describe and analyse the child care practice of SWs. The ecological model focuses on the existence of interrelationship between the individual and the social environment. It is developed by Uri Bronfenbrenner as a system model to analyse the social ecology of families. The model views the fulfilment of children's developmental needs related to parental capacity and in turn is related to external factors such as the parents' work patterns, the availability of adequate childcare, the provision of social support by neighbours and friends, the quality of welfare services and the residential area safety (Bronfenbreener, 1979 in Jack, 2000). This model also stated that outcomes are significantly determined by individuals' subjective perception of their own circumstances (Jack, 2000).

Bronfenbrenner (1994) identified four major systems that affect a person: microsystems the relationship between the person and his immediate environment that include the interpersonal relation such as family, school, friends and work place; mesosystems that include the interaction between two or more microsystems like the relation between family and school ; exosystems that consists of the link between different subsystems indirectly influencing the individual such as neighbourhood ;and macro systems –the organizing principles of a given society including values, customs and laws .

The ecological model provides a tool for examining the impact that interaction between individuals and social environments have on individuals childcare practice .The model puts person in environment. Hence, it helps to see the different layers that affect the caregiving role of women involved in sex

work. According to this model, the welfare of the child is embedded in the welfare of the parent. Parent is nested within a context. As a result, the childcare experience of the mother is not only influenced by the knowledge, attitude and practice of that individual mother but also influenced by personal relationships as well as community and larger society factors.

The Bernard van Leer Foundation ³defines care as “the integrated set of actions that ensure for children the synergy of protection and support for their health and nutrition, physical, psycho-social and cognitive aspects of development”. David Piachaud classified childcare in his study of children below five years into three categories. These categories are: basic tasks (such as feeding, bathing and toileting); educational and entertaining tasks (such as reading to, playing with and talking to a child) and indirect supervision activity (being ‘on call’) (Richardson, 1993). Childcare primarily rests with family members. However, extended family, friends, neighbours and other professional caregivers also play a crucial role. Therefore, it is important to look beyond the immediate family environment. Care environment factors, include existing beliefs and practices, physical and social settings, and processes of intervention (BVLFF).

If a SW with her child is placed in the middle of the social environment, there are various layers that influence her childcare practice. For example, the woman is affected by the setting in which she works and lives. Her child care practice is determined by what she experiences in these settings. Does the mother has sufficient income? Is she has stable, safe and comfortable physical environment? What is the perception of the mother in describing the circumstance in which she raises her child/ren? Is she getting support from significant others like family, friends and community? What are the value and norms surrounding motherhood and sex work? How have these things had an impact on the mother and on the child? Thus this model enables the researcher to understand how interaction within and between the layers surrounding the mother produces different effects on the childcare.

2.2 Theory of Gender and Power

The integrative theory of gender and power was developed by Robert Connell (1987). According to this theory, gender relationships between men and women are characterized by three distinct and interdependent structures. These three structures are the sexual division of labour, the sexual division of power and structure of cathexis.

Sexual Division of Labour

The sexual division of labour refers to the allocation of particular types of tasks for particular categories of people depending on one's gender. This gender-based division of work became apparent in allocating tasks such as paid and unpaid; productive and reproductive work. Women are often responsible for domestic labour (reproductive work) which includes biological, generational and daily reproduction. Productive work is often attributed to the male and is often given higher economic value (Connell, 1987; Pearson, 1992). For example, "childcare is work which women are expected to carry out as a labour of love. It is seen as a duty, for which they can expect to receive neither wage nor a great deal of thanks (Richardson, 1993:2). Even when women participate in paid work, their participation is often less than that of men's and they remain in highly sex-segregated jobs. Besides, the remuneration they receive is low and often their work is less valued (Wingood and DiClement, 2000). Therefore, this leads to the economic inequality between men and women.

Studies indicate that women's work is characterized by high demand and low control. According to Karsasek and Theorell's Job Strain Model, jobs can be ranked by the demand or strain exerted on the workers as well as the level of control that the workers has in his/her job. Women working in high demand and low control works like sex work are more likely to experience depression and anxiety (Wingood and DiClement, 2000).

³ http://www.bernardvanleer.org/partners/care/care_ia_framework accessed on 31 October 2009

The sexual division of labour contributes to socioeconomic impoverishment of women in many parts of the world. For example, in Ethiopia women's low status is expressed in their lack of decision making opportunities, property ownership, laborious work on the farm and home which is not acknowledged. A small percentage (30.8%) of female employment in the formal sector engages in clerical job, earning below 200 ETB (\$ 20) per month. Women are mainly employed in the informal sector, where earning and security is low. The percentage of women in professional positions is only 29% compared to men 71% (Cherinet and Mulugeta, 2002).

Sexual Division of Power

The sexual division of power explains inequality in power created through control, authority, and coercion between men and women. The sexual division of power is maintained by social mechanisms such as abuse of authority and control in relationships. In addition, it is maintained by social mechanisms like the media. The media often depict women's value as inherently linked with their sexuality, either as sex object or mothers. This portrayal of women may set a precedent that woman should fulfil the sexual obligations for men with total disregard for their own needs (Wingood and DiClement, 2000; Raj, et al., 1999).

It is important to acknowledge that all questions about sexuality have to interpret in the imbalance of power between men and women (Troung, 1990). The control of women's sexuality is the basis for the social relationship between men and women in a patriarchal society. The separation between the wife (the 'respectable' women), and the prostitute (the 'fallen' women) serve to divide women and to strengthen patriarchal ideology. As a result, prostitution is considered as an expression of 'cultural hegemony' of men over women (Rowbotham, 1973 in Troung, 1990). According to Overall (1992:721), "prostitution is structured in terms of a power imbalance in which women, who are the less powerful, sell to men, the more powerful. That power imbalance ensures that women's sexuality is constructed very differently from that of men, and yet also, paradoxically, that male sexuality is socially constructed, defines the standards for evaluating human sexual activity".

Structure of Cathexis

Cathexis is described to as the structure of effective attachment and social norms. The structure of cathexis defines socially appropriate sexual behaviour for men and women. It dictates proper sexual behaviour for women and is characterized by the sexual and emotional attachment that women have with men. As a result, it determines women's self-perception and idea of impurity and immorality (Connell, 1987; Wingood and DiClement, 2000; Raj et al., 1999).

There is a sexual double standard in patriarchal societies. "Patriarchal society defines a male's honour in terms of his conduct in public life and permits him the freedom to formulate his own rules in matter of sexuality, it allows him access to sexual pleasure in varied forms and with several women" (D'Cunha, 1992:38 in Lim, 1998). For this reason, sexual desire of male constructs an uncontrollable need through the safety net of prostitutes (Sullivan, 1995). For a woman, chastity until marriage and monogamy after marriage constituted critical elements of 'decent'. Once a girl/woman had sexual intercourse outside formal marriage she was considered as 'ruined' and no longer fit for marriage (Kempadoo, 2001). Family, religion and school systems shaped women to be dutiful daughters, virgin girlfriends, devoted wives and sacrificing mothers. This differential treatment between men and women is based on deeply rooted socio-cultural assumptions about the difference in sexual nature of men and women (Lim, 1998).

Stereotypical gender norms states that women should have sex only for procreation and women who are not abiding to the prevailing moral code are condemned and perceived as bad girls, suffering a 'whore' stigma (Lim, 1998; O'Neill 1997;Wingood and DiClement, 2000). Whereas, prostitutes sell non-reproductive or "commercial sex" while the legal wife sells reproductive sex (i.e., sex with children). Hence, prostitution and marriage are largely incompatible for women or the two are mutually exclusive (Edlund and Evelyn, 2002). In contrary, women are expected to see motherhood as their most desirable adult role in life. Having a child is a principal way for a woman to become socially acceptable as well as considered as a 'real women' and it should have been within an institute of marriage (Richardson, 1993). As Papanek (1994) stated

“the ideology of the ideal women will be in conflict with the identity of sex-worker, but both are part of the multiple identity of women involved in sex work who need constantly to negotiate between them ” (in Wolffers et al., 1999:42).

As stated above, both the ecological model and the theory of gender power can provide better understanding of childcare practice and challenges of SWs as they tend to give explanation on how individuals and social environment interact including gender and power relations. Besides, the two approaches identify different layers, ranging from individual (SW mother) to societal (values, norms and laws) and how these layers influence each other and eventually childcare giving role of the women engaged in sex work.

3. OVERVIEW OF THE LIVES OF SEX WORKERS AND THEIR CHILDREN

This Chapter presents a general overview of the lives of SWs and their children. It presents findings related to their background, reasons for entry into sex work, living and working conditions, experience of pregnancy and childcare arrangements. The final section of this Chapter shows the perception of the women towards their dual role as mother and SW.

3.1 Socio-Demographic Characteristics of Respondents

In this study, 15 SWs who have children participated. The youngest interviewee for this study was 21 and the oldest was 45 years old. The mean age of the respondents was 27. This indicates that the women are in their young ages. Most of the study participant came to Addis Ababa when they were young.

These women have a low level of educational attainment as all of them didn't join secondary school. This implies that they have fewer opportunities to join formal employment and this restricts them to participate in low paying informal jobs like housemaid. According to a 2001 Central Statistic Authority (CSA) report, in Ethiopia 84 % of rural women had no education compared with 67 % of men (in Van Blerk, 2007)

The period the women worked as SW ranged from 15 months to 18 years. The average age of entry to SW is 20 years of age. One of the key informants noted that:

When I was a sex worker and now working to help other sex workers, I had have a chance to meet with many SWs. When I ask them when they started this work they usually responded that it is at a young age. Most joined between the ages of 15-22 years

Among the 15 study participants, 12 of them came from outside Addis Ababa. The majority of these women came from rural villages. This finding is consistent with other studies made in Ethiopia. Hoot et al. (2006) found that almost 60 % of SWs participating in their research were rural migrants.

This study revealed that escape from early marriage, domestic violence; marital disruption, parental death and urges to support family are the major

reasons that pushed the study participants to come to Addis Ababa. Some of the respondents mentioned the reasons that pushed them to come to Addis.

In rural area you have to get married when you are child otherwise you are not considered woman. You are expected to marry when you are seven years old. Actually I was I 'old' when I got married, at 12 years of age. I was living with my in-laws and expected to prepare food including milling but I was not good at domestic work since I used to farm with my father before his death. So my father in-law and my husband kept nagging me so .I escaped from my in-laws house and came to Addis following my cousin living in Addis (Asenakeche)

As Geertz (1961) states, marriage is not seen as a means to make individuals happy, instead it serves the interest of the parents. They choose a spouse to expand their social networks as well as strengthening the existing ones (in Rhebergen, 1999). One participant went on to explain:

I came with my uncle from Woita Sodo to Addis. When my uncle asked me to join school, I refused and started to work as domestic worker. I planned to send for my family. I wanted to work during day and attend class but he refused me to send me (Meron).

Another participant stated that:

I came to Addis seven years ago. Now I am 22 years old. Back then, when I saw my brother coming from Addis well dressed and had bought us cattle and clothes, I thought it is easy to live in Addis. The reality is different; I didn't expect such a difficult situation (Hewane).

As the women stated how they moved from the rural villages to find a better life in Addis Ababa, most of these women started to work as housemaids and lived with relatives. Many experienced maltreatment at the hands of their employers and relatives.

Among the 15 women interviewed, 12 of the respondents gave birth after they started SW while the other three were mothers before they joined the sex trade.

3.2 Entry into Sex Work

Different studies (Kempadoo, 2001; Kloos et al., 2007) reveal that there are many reasons that forced women to join sex work. These factors include

economic, social and political. This study revealed that women/girls are involved in SW for different reasons which include lack of employment opportunities, the desire to earn more money, peer initiation, and solicitation from brokers. Some of the women stated their entry into sex work as follows:

Women who have hotels and who rent rooms for SWs solicit other women in whatever way to join sex work.

I was working as a cook in one of the hotels in Addis. One day the owner approached and asked me whether I want to work as a SW instead of being a cook in the kitchen and convinced me that I would earn more money in the sex trade (Tizeta)

I was having problem with my employers because they refused to pay my salary for six months for work as a housemaid. I came to visit a broker and met a woman there. She was renting rooms for SWs. She told me that many women are working as SW and nothing bad will happen to me if I take care of myself. She is the one who pushed me to start this work (Asenakech)

Friends who are known to the women/ girls also provided entry into sex work, some even willing to coach the women until they internalised the activity and make the work became more appealing.

I left the house where I worked as housemaid and started looking for another job. I met my friend who I knew while I worked as housemaid in the neighbourhood. She asked me if I was still working as housemaid. Then she told me that working in the sex trade was good because you live as you want. She said, “as a SW, you can do whatever you like. If you want, you can sleep during the day and work during night. There are people who prepare everything for you including making your bed. I will show you how things work. It is better than working as a housemaid.” Then asked her to take me to this job and the next day I started working

The desire to earn more money is another reason why women/girls prefer to enter into SW. The findings of this study revealed that SWs expected to obtain an income better than they could earn in other occupations. As one of FGD discussants who worked as street walker stated:

I lived on the street for seven years. When I gave birth I understand that my child needed many things. I started to working as shoe shiner but the money I get from shoe-shining was not enough so I decided to do SW.

The failure to get and sustain employment in the city even as domestic worker is mentioned by the interviewee as a cause to entry into SW.

Even to get a job as a housemaid, you need to have someone who can be a guarantor for you but for SW you don't need any qualification or collateral.

For some women, entry into SW is as a result of picking up the habit from others. As one of the women reported:

I was living with my father and step-mother but my relationship with my step-mother was not good as a result I started to live with my mother ... She was living in area where SW was practiced and I had the opportunity of seeing women working in the sex trade. When life with my mother became difficult for me, I started to working in the sex trade

Some participants in the community FGD revealed that some women are working as SWs because they were lazy and Sex work was less demanding. This may be because of the negative attitude attached to sex work. Conversely, SWs considered their work is demanding and difficult. In addition, FGD participant stated that failure to meet basic needs, forced many young girls to opt for glamorous city life leading to disagreement with family members. Some SWs went as far as returning to their villages to lure young girls by promising them better living conditions.

Most of the women didn't start SW immediately in an attempt to support themselves. They lived with relatives and /or work as housemaid before joining this work. This is consistent with Van Blerk (2008) study that states that many women involved in sex work have experienced abuse and maltreatment at the hand of their employers. One interviewee stated:

I came to Addis with my aunt while I was 12 years old. She was very cruel and she was beating me too much. If I did something wrong, I would not eat dinner. As a result, I decided to do domestic work but after a while my employer refused to pay me my six-month salary .At that time I was very frustrated and wanted to poison myself.

Another sex worker stated that:

I lived with my aunt for two years and during that time I had to work for her as a domestic worker during the day. I had to clean

cow dung in the cattle sheds. At the time I had started night school but I had to stop after coming face to face with a hyena on the way to school. My aunt had the option of allowing me to join day school but she declined. To make things worse, I was raped by my aunt's son. I started working as domestic worker for one year the conditions were just as bad as those with my aunt.

To sum it up, we can say women join sex work in a response to poverty, limited employment opportunities, economic problems and gender inequalities. Therefore it is important to look at broad socio-cultural and economic conditions which give rise to sex work in general.

3.3 Living Condition and Work Schedule

All the eleven women working in small establishments live and work in a small room rented from landladies. They pay 15-40 ETB (1.50-4.00 USD) per day for a room depending on their size and conditions of the room. Only few houses are made up of bricks, most are made up of iron sheets, plastic and cartons. Many of the rooms are very tiny and can only accommodate one small bed, and small box which the women use to put their belongings. One of the women stated the house she rent is so small and only has space for a bed so she put her items with the landlady. The houses the women rent may or may not include facilities like toilet and water. In this case the women have to pay extra money to get these services.

Most of the time the women have to pay the house rent every day. Some of the landlords allow the women to pay it when they get the money others are very strict on daily payment.

I usually pay house rent everyday if I have money otherwise I pay within a week when I find money. I am happy about this arrangement (Meaza).

I was working in a place where Areke⁴ is sold. When I have sex with a client for a short time I get five ETB and from this, I have to pay one Birr for the 'madam' (Rhale)

⁴ A traditional alcoholic beverage which is distilled and made of grains

When clients visit, children are not allowed to stay in the room. As a result children play and wonder around the street. Children as young as three years understand that when the customers come, they have to leave the room. Infants are kept asleep under the bed or on the floor or in small bed behind curtain. The women bath and massage their small babies to fall asleep 'faster' before clients come at night. Young children are sent away to play or spend the day with someone. Those children who are spending the day with other people come to their mothers place to eat. Some children spend nights in front of shops or on the street corners. Some of the women force their children to take up adult roles such as cleaning the house and taking care of family members. As nine years-old girl stated:

I can prepare food-cook for the family including cutting onions and tomatoes. I can do anything my mother asks me to do. I carry water home and get my mother her drugs because she is HIV positive and therefore taking Anti Retroviral Treatment (ART). I give her the medicine on time; prepare coffee when she wants or for my father when he comes back from work.

Most of the participants in this study had a fixed daily routine. Some work during night while others both during the day and at night. They wake up late during the day because they have worked throughout the night. The women took the afternoon off to rest until evening when work for them begins again.

Some of the women also had one or more addiction, which included chewing chat, smoking cigarette and/or shisha⁵ and use/abuse of alcoholic drinks. Those women who chew chat passed the afternoon chewing chat with friends taking it with coffee. For the women who didn't chew chat, they usually passed the afternoon drinking coffee.

During my field work, I was able to observe that during day time some women standing in front of their rooms waiting for clients. In addition, I observed in the afternoons in one of the resident houses SWs, the youth and the owner of the house chewing chat and drinking coffee together.

⁵ Flavoured tobacco

On the other hand, some of the women use the day time to conduct domestic work, childcare or other activities that generates income.

At night I work business while during day time I wash clothes for other people or sell small staffs (Asenakech)

During day time I spend my time with my nine month baby, washing her clothes and cooking food (Meron)

Those women working on the street usually came to NEKAT SWs drop-in center to watch movies, to drink coffee and to discuss issues which concern them during the afternoon.

3.4 Pregnancy at Sex Work

12 out of the 15 study participants gave birth after they entered into sex work. Some women compelled to become pregnant as they had not used any contraception. Two of the women stated:

The woman who took me from the broker house for kitchen work solicited me to start SW in her hotel. When I started the work, I didn't know how to use condom properly that's the reason why I became pregnant. When my belly became big the madam fired me, it was eight months old (Tizeta)

When I became pregnant for the first time I didn't know I thought my belly had become big because I gained more weight. (Rahel)

This is supported by key informant who stated that

There are many women who don't even know their pregnancy because had they known about it they could have considered an abortion

This indicates that the women have very limited knowledge about their body, sexuality and reproductive health.

Sometimes children are conceived when women develop a fixed relationship with one of the customers. Some women decided to continue pregnancy and have children, with the hope of security and support.

I developed an intimate relationship with one of the customers and became pregnant. I wanted to abort but he promised to help with

the baby so I decided to keep the pregnancy. However, I didn't receive any penny from him (Abebeche)

Children could be born during a period of withdrawal from SW due to marriage or extended period of cohabitation

After I worked in a bar for a month I met a guy who used to come there and started to have sexual relation. After two months we decided to live together...we separated after eight years. Now I have a daughter who is 5 years old (Mebrat).

While I was working as a SW I met my husband, a police officer. I became pregnant and gave birth but while the baby was just two months, he was transferred to work in another place and at first he used to send money from there for three months but after that I never heard anything from him (Tizeta).

Most of the study participants know specifically, who the partner was, when they conceived the child. In most instances, the partner left the woman before or after the child was born. A woman revealed that

When I was working in a bar I met a guy who is a friend of the owner and started to live together. After I discovered about my pregnancy, I informed and he refused to accept responsibility.

These partners are customers who eventually formed fixed relationships which women got into for emotional and practical reasons. As one of the key informant noted that

When you start the work as street SW you need to have a guard to protect you from the attack of other guys. This guy has to be a strong person and we usually call them boyfriend as they call us lada⁶. Eventually one develops emotional attachment with such a guy and start to have sex without condom with him. When you became pregnant, he leaves you and looks for another woman.

Some of the women had experienced more than one pregnancy due to different reasons. As one of the women who is six month pregnant stated

This is my fourth pregnancy though the first time since I didn't know how to use condom ; the second time I was living with my "husband" and he wanted to have a baby, but after the baby came,

⁶ A taxi which bring daily income for the owner and they use this name in relation to the daily income the women brings to the guys

he was transferred to work in another region and he stopped sending money so I started to do the work again. When I became pregnant for the third time I didn't know how I failed to prevent the pregnancy and I decided to abort. I became pregnant for the fourth time since I made love without condom with my boyfriend. Now I decided to keep the pregnancy as my experience with abortion was not good.

Most of the study participants stated that working SW while pregnant is difficult and it doesn't go together. Most of the women experienced feeling of anxiety and stress when they were working SW as pregnant women. In particular, they worried about the health of their unborn child and risking their lives.

It is disgusting to be pregnant while doing SW but what option do you have? When I was pregnant someone beat me and I fell down and the position of the foetus was changed though it was fixed at the hospital (Hewan).

It was hard to work while I was pregnant as I was afraid that either client might hit my child or I might bear a dead child (Tsedale).

It is difficult having sex while you are pregnant. The client is asking you to do sex in any kind of way but you can't do as they wish. Once I was having rough sex and I get sick and problem on the foetus occurred. As a result I stopped work for a month...you know some guys ask you to have sex without condom ...what use has the condom if you are pregnant already? Most of the time I quarrel with clients because of this condom issue and break the deal (Asenakech).

Some of the women revealed that their pregnancy affected their work in one way or another even decreasing the income they get from the work.

When you are pregnant you work with fear of either the guys hurting you or your unborn baby. There is no freedom to fight when you are pregnant compared to when you not. When you are pregnant they beat you and leave, you can't follow them (Meron).

When I was pregnant even if I have problem with clients I return their money (Tsedale).

On the other hand, others noted that their pregnancy caused little or no difference to their work.

After late hours there is nothing like she is pregnant...clients only consider that you are a woman. So you can find clients when you

are pregnant especially those who come drunk and sometimes there are clients who say they like pregnant stuff (Rahel).

There is no problem with guys but it creates inconvenience for you (Asenakech).

I was trying to hide my bellybut I didn't care if a client identify my pregnancy after he paid me since I wasn't going to reimburse the money I received (Teblet).

Few of the strategies mentioned by women in order to minimize the effect of pregnancy on their work include using costumes that hide their expanded figure and to go out for work in late hours.

Most of the women stated that they didn't change most of their behaviour that they had before they became pregnant.

While I was pregnant I smoke, drank and chew chat. I started chewing chat and smoking cigarette immediately as I started the work (Rhale)

Most of the women who gave birth after joining sex work continued their work until late pregnancy. Some informed that they were working up to the nine month of gestation. However, most of the women took at least few days to two month break before they start their work after the birth of the infant.

If you are healthy you work until you give birth. You can't say I have to take a break since I reached this month of pregnancy this works only if you are married. Otherwise you work until you give birth and resume your work within 3 days after delivery (Ayenalem).

I worked until I became eight month pregnant. I took rest for two months after I delivered my baby. I used the money from my saving from Iquib⁷(Abebech).

I started business three months following the birth of my baby. The house rent was covered by NIKATE⁸ (Rhale)

⁷ Iquib is an association established by a small group of people in order to provide substantial rotating funding for members in order to improve their lives and living conditions

⁸ NIKAT is a SWs drop-in centre established by SWs

Women who have a support can have a short time break from their work before and after delivery but those who don't have any support have to struggle to work. As the NIKAT manager stated

One of the members of NIKAT was working until she became 8 month pregnant. Members of NIKAT support her for two months, one month before and one month after delivery. But there are women who resume their work within three days of delivery. You beg someone who you know to look after the baby. If you don't have support what can you do?

3.5 Childcare Arrangement

Fifteen of the study participants had children and the total number of these children was 19. One of these children is 25 years old. The other eighteen children are below 14. Fourteen of the women were living with their children because one of the women gave one of her child for adoption and the other child for her boyfriend's family. Another woman gave her child for adoption after the FGD was conducted. During the interview, this woman told me that she gave the child to his father but later I discovered that she gave her child for adoption. It is possible to say that the ideology of femininity, women as a sacrificing mother didn't give her the comfort to tell me that she gave her child-up for adoption. The idea of sacrificing mother was also stated during FGD with community members. As one of the study participants said that "it is better for SWs not to give birth. Once they gave birth they have to raise their children at whatever cost". Being a good mother can imply raising ones child at whatever cost and not giving you right as a mother. This is in contrary to Rhebergen (1999) study of Javanese SWs which revealed that good mothering sometimes entails accommodate one's child somewhere else including adoption.

One woman reported having a child who joined SW and stopped after a while.

My daughter dropped out of school when she was in grade seven and started to work as a housemaid. She dropped out of school because I wasn't able to pay but during that time she met a boy friend and gave birth to a baby but her baby died. Then she started to work in a bar for three years. There she met her current boy friend. Now she stopped sex work and is living with him.

One of the women rented a room close to where she lives for her daughter to protect her from her work environment and to supervise her closely. Another

woman pays money for a lady from the neighbourhood to allow her child to stay with her during night. This woman stated the turning point at which she decided her child not stay with her

One day I had a very difficult client and we started fighting ...my child wake up and looking at the client said that please, don't disturb me I have to sleep I want to go to school tomorrow. My son was around three and had started to attend kindergarten. The man felt bad and left the room ...the next day I decided to look for a place for my child to sleep during the night.

But the problem of this kind of arrangement is that the children have to come again and live with the mother whenever the mother has an argument with the other woman.

Another woman keeps her daughter during the day and sends the child to her father's place to spend the night there.

Community FGD participants stated that most of the SWs live with their children though there are informal living arrangements like extended family, women's parents, and child's father.

As stated above there are different childcare arrangements. However, most women prefer to keep their children with themselves because as a good mother, women are expected to raise their children by themselves.

3.6 Sacrificing Mothers: Perception of the Women Towards Their Dual Role

Most of the study participants stated they worked for the wellbeing of their children though some of them initially denied they have a lover. They wanted to create an image of a mother working for their children. Later during in-depth interview most of the women mentioned their lovers. By stating they are solely working for their children, they adhere to societal norm of femininity.

I hate this job and people do not join this work because they like it but because of their problems. To sell one's body for a living is the most disgusting thing one can do. I started the job because of my child. I love my child more than anything. Even I am a prostitute, I am taking good care of him. Though he is blind I send him to school...I didn't beg because of him I prostituted ...I sacrificed myself for my child (Meaza).

It is hard. What can you do if you don't have education or family who support you? It could be nice if I didn't give birth once I gave birth it is my responsibility to raise my child even by sacrificing myself (Asenakech).

I don't want to cut price I request from clients but sometimes I reduce it, if I couldn't find money how can I buy milk for my child (Meron).

I also observed that most women had pictures of their children and some of them even invited me to see their albums to see the picture of their children at different ages. This is consistent with what Castaneda et al. (1996) stated that SWs use positively evaluated role of a mother in order to compensate for a negatively evaluated role of street SW.

The aim of this chapter was to gain insight into the lives of SWs and their children. Majority of women in this study were young rural migrants who came to Addis Ababa for looking better life. They join sex work in a response to poverty, limited employment opportunities, economic problems and gender inequalities. Before joining sex work, most of the women work as housemaid and had experienced abuse by their employers and relatives. Currently, they are living in small houses they rented for business and residence. Most of these women experienced pregnancy and found it difficult to cope with sex work. Besides, most of them are living with their children under the same roof. These women are trying to adhere to the norms of the society by stating that they are solely engaged in sex work for the wellbeing of their children.

4. THE CHALLENGE OF BEING A SEX WORKER AND MOTHER

Women are the primary important members of the family, predominantly as a mother, in taking care of their children. In this connection most of the study participants revealed that they are caring for their children by themselves. Thus, this chapter deals with pressure women face between expectation of appropriate gender roles by childrearing and the pursuit of economic sustenance through sex work.

4.1 Nature of the Work

4.1.1 Earning a living: Financial Condition of the women

For most women who engage in sex work, economic need is the bottom line where entry into prostitution concerned (O'Neill, 1997). The finding of this study revealed that SWs get income better than they could earn in other occupation available to them. This is consistent with Lalor (2000) study of juvenile prostitute in Addis Ababa. Although, the women didn't directly inform me the money they get from their work, it is possible to estimate the income they get indirectly. The majority of women working in their rented house have to pay 15-40 ETB per day /450-1200 ETB per month (\$ 38-\$ 100) for the room they rented for business and residence. Even though, there is no minimal wage state nationally in the country, some government institutions and public enterprises set their own minimum wages. Public sector employees, the largest group of wage earners, earned a monthly minimum wage of approximately 320 ETB (\$31) (US Department of State, 2008).

Rooms rented from landlords require financial contribution mostly per day, which take major part of the women income. Besides, accommodation⁹ provided by landlords is filthy and substandard. That is why most of the women

⁹ The rooms were generally very small, non-ventilated and unhygienic. The rooms are rented from individual owners. In general, the environment was not conducive for the health of the SWs.

complained about the unnecessary advantage taken by landlords from room rent. This is also shared by one of the key informant

I remember there were only 3 SWs around our area which had many shops and butcheries. Now people prefer to rent their rooms for SWs ...most people who rent their rooms are government employees but they want short cut to get money. Making huge money from small room which only fits for small bed ... (Eyayu)

Every day the women have to struggle to get daily earning in order to pay many aspect of their finance including room rent and food. In order to fill this quota a SW might be enticed with an offer of extra payment for unprotected sex or reduce the cost of the sexual service. Only few SWs have been able to save a considerable amount of money. One woman stated that she helps her mother from the money she gets from the work and she owns a house back at the village. Another woman mentioned that she managed to build a house for her family back in the countryside. But for many it is a struggle for daily survival.

I can't say I can get this much per day because there are times in which I didn't get anything for three days or more but I can tell you how much I pay for my room rent since it is fixed (Asenakech).

I don't want to say this work is good. It is hard ... there are many women who lost their lives due to HIV/AIDS. The money you get is not enough for saving because you pay too much for house rent. How can you save and change your life? (Meron)

The intermittent nature of the income and the high amount of money they pay for room rent has put constraints on their income. Many stated their desire to quit their work, if they manage to save enough amounts. However, at the moment, it is difficult to save. Not enough for their children, not enough for the future. In practice many continue to work in the hope to get more money, able to save and quit.

4.1.2 Sex Work and Household

Eleven of the study participants practiced sex work at home. These women are struggling to accommodate sex work and childrearing under the single roof. They are afraid that their children would observe their work and the negative effect it would have on their behaviour.

My 7 years old child often stays outside until mid night. I work overnight as my clients come after my child slept and started to talk. This makes me worry because even he can't see he can hear their voice and he usually asks me why they came here at this hour while everybody is sleeping. I told him, he is just a visitor then he said why he doesn't leave then... (Meaza)

My friend has a four years daughter who sits at the gate and call guys, please, get in we have beer, Arekie and so on. She also locks the door inside and she said don't knock the door am with someone (Tizeta).

In FGDs the participants agreed that the work and the living place being together have an impact on children since the chance for children to see the activities of the mother is higher and that potential for affecting them negatively is also high.

Most of the mothers shared the difficulty of juggling the care of a baby and their nature of work. As one women stated

When my child was a baby she would sleep for a while and wake up when it was time for work. When I am comforting her my work time is gone and I lose business. My landlady was nagging me to give her money. I stressed too much in between and sometimes I said to myself I have to kill this child and ended up giving my child for adoption...I also faced problem with my second child. After I make her to sleep and start my work she calls me mom. Then the customers said you have a child and leave you. There are also guys who asked you to reimburse money after they paid you if they identify you have a child

As the above quotations shows for some of the clients of the SWs it is unacceptable to be a SW and a mother because these women are doing to combine the role of ideal women (a mother) and the role of SW (a whore). This is consistent with what Wolffers et al. (1999) said about the conflict between the identity of ideal woman and identity of SW in which SWs with children need constantly to negotiate between them. Besides, for women involved in sex work, taking care of children, especially at early age is a tiresome and time consuming task. Studies also revealed the difficulty of taking care of children during infancy. Piachaud (1994) found that, on average, fifty hours a week spent on the basic care of children (in Richardson, 1993).

Four of the study participants work on the street. They live far away from where they do their work. This is not only because of fear of discovery but also to maintain their work place identity and residential identity separate. One of the women stated how this distinction is crucial for her as follows:

I was born and raised in this area and it is not decent to work in a place you grow up. Besides I don't want my daughter to know what I am doing because if she knows it will hurt her. She is always asking me what I am doing ...one day I took her to the restaurant where I wait clients and introduced with the owner. I showed her the waitresses and informed her I am also a waitress

As the women stated, they find it difficult to juggle the two roles. They are usually working during late night hours and difficult for them to find someone to look after for their children. As a result they leave them looked up in the house when they go out to look for clients. Asnakech explained her experience as follows:

I started to live with my six years old child when she was less than three years. Sometimes when she was baby I locked her some other times I prepare her food and clothes beg neighbours to look after her. Now she is growing and she doesn't want to go to neighbours house. When I am dressed and planning to go she said to me why you leave me alone, can I come with you? If she couldn't fall asleep I change my clothes and stay with her. To avoid this condition sometimes I wash people's clothes during day time and limit the days I work per week on the street

As stated above by Asenakech, this condition creates feeling of inadequacy as a mother. These women feel torn between meeting the need for income as breadwinner and expected childcare role as a mother. Wolffers et al. (1999) study among brothel based SWs in Surabaya found the existence of multiple identities and multiple roles.

Participants in the community FGD also supported these findings and discussions revealed that some of the women are not staying for long in one place. As they stated the women change from place to place if they find the place they work is not good for their work as a result the children drop out of school. The children have to adapt to new environment this can be a source of stress for the children. Besides, the participants stated that some of the children don't get enough sleep because their mothers don't allow them to come home

and sleep on time unless the women was finished doing business. Furthermore, children have to leave home early in the morning if the women start work early in the morning. As a result, even if they go to school they might not attend class well.

Some of the women work during night others work during day and night. They woke up late in the morning since they work throughout the night. Children have to wait to eat until the mother wake up from sleep, this might be mid day. Besides, children have to stay outside the home until their mothers finish doing work. This exposes children to violence, abuse and inappropriate behaviour. They also expose to cold especially in the rainy season. As one of the key informant who is a counsellor stated that

While I am speaking with SWs coming to us for counselling they informed me that their children have behavioural problems. Even some of the children are started visiting SWs. This is associated with children exposure to inappropriate lifestyles. Their mothers rent bed for clients during night and the children sleep after the business is stopped. They watch movies inappropriate for their age. Until they return home they pass their time on street.

4.1.3 Violence

Women involved in sex work are often vulnerable to abuse and violence. A study carried out in Ethiopia by Lalor (2000) indicated that 93 % of a sample of 30 SWs between the ages of 14 to 18 has been beaten while working on the streets. Three out of four raped at least once, and one in three had become pregnant at an average age of 15. Likewise, all the study participants stated that they have experienced abuses in one way or another. These abuses include assault, denial of payment, deliberate removal of condom, rape and robbery.

For most of the interviewed women violence from the client is their usual encounter.

One day a guy refused me to use condom and wounded me with a bottle of beer (Rahel)

This can be explained by the power imbalance between men and women in patriarchal society. Socio-cultural and gender norms portray women as sex object that should fulfil the sexual desire of men by disregarding their own needs and concerns.

The abuse is not only on the women sometimes it can also involve their children

When I have disagreement with client instead of fighting with me they want to attack my child...once I had conflict with one client and we started fighting then he run to kick my child while she was sleeping (Tizeta)

Interview with the key informants also confirmed that children are vulnerable to violence and abuse by their mother's clients

There is an instance which I remember, where a woman was fighting with her client... the client tried to hang the neck of her baby. When she went to call the police the guy attempted to rape the baby (Eyayu)

Interview with children of SWs also verified children observe the violence performed on their mothers as well as on other women working as SW.

I don't like fight though children as well as adults fight in this area. Children fight when they are playing by saying this is mine. Adults fight when guy come to their house to drink soft drinks and refused to pay and they get bleeding. The fight is frightening. The women cut each other their faces with razor blade while guys pierce ladies with knives and teeth get knocked out during the fight (Tewodros, 10 years old boy)

As the women stated community and police consider violence against a SW as something she deserves. The women pointed out that the police as rude and uncaring who treat them badly and even not consider them as human. This is also shared by one of the key informant

Once I met one police in the meeting and asked why the police did not treat SW with her client equally when they came to police station. The response I got was that we (the police) are part of the society and we accept what the society accepts and we reject what the society rejects.

Hoot et al. (2006) study on child prostitutes in Ethiopia reported that 24 % of respondents involved in the study state that they feel not confident to report abuse and conflict to the police because they know their pleas will ignored. Even though, sex work is not a criminal offence, the police reaction to the SWs is the reflection of how social norms are deep rooted. This also indicates the existence of direct as well as structural violence against SWs.

With regard to violence against SWs, most of the community FGD participants believe that violence against them is high because they are involved in work which is bad, which harm themselves as well as the community. This perception of the public is related to the stigma attached to the work. This is consistent with literature. According to Vanwesenbeeck (2001) reasons for the high incidence of violence cannot be reduced to the nature of the work but must be considered in the context of social stigma attached to sex work.

Steps taken by SWs to protect themselves from violence include exchange of identity card of customers who enter to the rooms besides each other, and to run to a friend who is shouting for help. Those working on street wait clients in a place which they can see each other and register the car plate which picked a friend. If something new or unusual happen they share information for each other.

4.1.4 Drug Use

Addiction to different substances like consuming alcoholic drinks, smoking cigarettes, and chewing chat is common among SWs. Most study participants stated that they develop the habit of taking different types of drug and that for most women, entry to SW and the use of substance occurred simultaneously.

I started chewing chat and smoking cigarette immediately as I started the work. My friend who was also SW has been chewing chat and smoking cigarette and I thought these things are part of the work (Rahel)

I wasn't drink alcohol before but the boyfriend I met immediately after I entered into SW forced me to start drinking, he even made me drunk and raped me without condom that is how I became pregnant (Meron)

Those women who chew chat and smoke cigarettes were asked why they do these things and they reported that they chew chat to prevent sleep and cold. According to them, chat make them awake and not to feel the cold during the night as they work for long hours and in late hours waiting for clients from 10:00 pm until 5:00 am. As one woman stated,

I am not addicted to anything but I have to chew chat to prevent my sleep. You feel strong when you take it because if you sleep

early, your landlord might not be happy. Sometimes I sleep in 5:00am since I have to wait clients. (Meaza)

FGD participants also revealed that substances like cigarette, chat and alcoholic drinks are consumed by most SWs. They also affirmed the common reasons mentioned by most of the women; chewing chat and smoking cigarette prevent sleep and cold.

There are few SWs who stated that they don't use substances like alcohols, chat and cigarettes. The major reason mentioned is that substance use and addiction is not going together with childcare. Even some stopped their habit of chewing chat or drinking alcohol after they gave birth to a child in order to use the money for the provision of their children.

Now I stopped drinking even when clients invite me drink I take the money and save it to buy milk for my child but while I was pregnant I drank a lot and I wasted all the money left from house rent and iquib for drink (Meron)

I am not using any substance since it is not going with childrearing. I have feed and pay for my child school. If I am addicted, what money is left for my child? I was chewing chat before I gave birth but after my child birth I stopped. If I don't have money nobody is going to buy bread for my child. I know her father doesn't give me any penny so I don't want to waste money (Abebech)

Even those who use substances mentioned the economic and social cost of using them. As two women stated

I chew chat and smoke cigarette especially I am addicted to cigarette. Now I stopped drinking though in the past I used to drink a lot. While on a drinking spree with my friends, my house was robbed twice and the thief got all my belongings including my child's clothes. The neighbours became angry with me by saying how could you drink while you have a child and the girl who was keeping my child also became angry with me by saying I am not keeping your child for you to go out and drink but to help you to work. When I went with friends I was the one who pay for their drinks (Tsedale)

I spent my money on chewing chat so I couldn't change my life. There are times in which I didn't have any money as all the money was spent on cigarettes, chat, and alcohol (Alemetu)

I was able to see Alemetu chewing chat repeatedly in the morning while I went there for my field work while most the people chewing chat prefer the afternoon. This can be associated with the chat addiction she has. During the time of the interview she was also chewing chat. Alemetu described her addiction as follows:

My addiction becomes my child. If I can I want to save money for my child whether I am alive or dead but I have to decrease my expenditure. I spent 34 birr per day for chat only.

Some women push their children to go out and play when they are chewing chat while others allow their children to stay with them. This is related with the mother perception of the effect of observing the act on the children.

When we chew chat and drink coffee my son sits with us . I don't allow him to play outside since I am afraid he might fight with other children (Tsedale).

I chew chat three times per week. I don't want my daughter watching me while I am chewing. I feed her lunch and allow her to play with friends (Abeba).

All community FGD participants stated that addiction is not going together with childrearing. Consumption of substances makes it difficult for mothers to effectively take on their parental responsibility. They wondered if the woman is addicted how she can raise her child. Before feeding her child she has to satisfy her addiction. A child also learns things from his mother and if the child sees her smoking repeatedly the child can start to smoke the leftover cigarettes. In support of this idea one of the participant said that “you will not harvest what you have not sown”. This implies what is expected from a mother, to be a good role model for her child.

As stated above drug and alcohol while coping mechanisms in the work of SWs, they also subsequently drain the income they get from their work which in addition to being harmful to their health compromises their care-giving including restricting their ability to adequately provide for the child. This is consistent with Keith (2005) study of SWs in USA, the use of substances enables women to undertake sex work, at the same time threatens her relationships and related resources for optimal parenting of their children. Besides, the use of

alcohol and problem drinking are associated with unprotected sex (Alem et al., 2006).

4.1.5 Health Issues

Women in the sex business are vulnerable to many diseases including tuberculosis, and respiratory illnesses. Besides they have specific health needs that can be seen as ‘occupational health hazards’: these includes sexually transmitted infections (STIs), specific contraceptive needs and childcare (Gangoli, 2002). Likewise, health was an issue for the women participating in this research. Many of them suffered from cold, chest problem, genital area infection and STIs. Two of the study participants stated that they are suffering from AIDS and had started to take ART. Many of the SWs use condom only with clients, not with partners. This can often lead to infection. For SWs who are mothers, continuous sickness hampers their ability to work and to have income for the care of their children. The women also suffer anxiety and depression. As one of the women stated

I have a head ache due to many thoughts and worries and haven't slept for the last three days. I worry about where to get money for my child school, how to cover his transport cost? ...nobody is helping me if I didn't worry who is going to worry then? (Meaza)

Studies indicate that women working in high demand and low control works like sex work are more likely to experience depression and anxiety (Wingood and DiClement, 2000). A study conducted in Nigeria identified that the high prevalence of psychopathological symptoms among SWs (Akinawo, 1995).

Sex work differs from private sex mainly the main motive for the former is money. SWs may need money urgently for pressing needs which leads them to neglect sexual health considerations. Some SWs choose not to work during menstruation but other do. This study identified that SWs use different methods to continue their work during menstruation. These often include taking oral contraceptives, washing genital areas with different liquids like alcohol, whisky, mineral water; inserting tissue paper and other soft materials. As one of the key informant stated

Only few SWs who have saving and very cautious not working during menses. But most of the women are working during their periods especially if you are addicted you don't have any option

As stated above, SWs use different strategies to manage menstruation and continue their work. The use of different liquids which are not suitable for use in genital area may have health implications. Studies indicate that sexual practice during menstruation could lead to the higher spread of HIV compared to sex during non-menstruating time. This is related to more viral practice in the vagina during menstruation (Sarkar et al., 2005; Edwards, 1992).

4.2 Relationships with Others and Support System

Childcare is primarily fall on the mother. However, the childrearing practice can be related to the kind of social support the women had. Family, friends, neighbours and other caregivers also play crucial role in childcare. Hence, it is important to look at the family environment and beyond.

4.2.1 Sex Work and Family life

The role and responsibilities of raising a child is dependent upon the kind of family support available to the mother. Most of the study participants don't have communication with their families. Stigma of the profession and the reaction they expect to receive if they disclose their work like pestering and other negative social reactions make them not be open about their work. Thus some of the SWs cut their communication with family.

Apart from knowing my work, my family don't even know where I am staying. If they knew what I am doing they wouldn't allow me to work like this. I lost the courage to tell them as I would break their hearts. Its better they think I am still living with my husband (Alemetu)

It is like 16 years since I left my family in rural village and haven't visited since then. How can I get there without having something to give them since they consider me rich as I live in the city. Besides I don't want them to see me while doing this job (Tsedale)

Some of the women who have communication with family hide their job either partially or completely. Only few disclosed to some of the family members who they think they trust or situation forced them to disclose.

I have never gone to visit my family since I gave birth but before, I used to visit them every year. Only my sister knows about my work, she discovered while she was living with me when I gave birth but she is not going to tell my family. If my father heard, he would be sad as he is a religious person. My sister asked me to let the child stay with family but I said no because they live in rural area and might give her away for early marriage. My parents gave me up for marriage when I was seven but I managed to escape that's the reason why am here in Addis (Abebeche)

I am living with my sister and brother. My sister who is 12 is the one who assist me in childcare and cooking. My brother sometimes gives me money but the other family members living in the countryside don't know about my work. Why should I tell them because if I do, they wouldn't consider me as human (Hewan)

As stated above most of the women don't have relationship with their parents and other relatives in their native village as well as the place they currently live. Even those who have communication maintained a relation which is superficial. This affected the childcare option of the women and limited the family support network and the actual support they can get through this network.

One woman mentioned the stigma attached to SWs and the reaction they received as a result as follows

I asked my child's father to take the child to live with him since I have to do business during night but his family said that don't bring the child you gave birth from *Shermuta*¹⁰. I don't know how he managed to convince them because currently she spends some nights at their place, but they discriminate me, when I go their house as they don't even greet me (Abebech)

Family is one of the social support system individuals can have. However, this is not the case for most of the SWs as engagement in the sex work and its associated stigma prevents them from establishing valuable relation with their

families and getting childcare support. As a result most of the SWs are forced to leave their children outside during their working hours or locked up in the house. Besides, as Abebech revealed the stigma attached to the work seriously hampers their chance for marriage and establishing a family.

4.2.2 Lovers, Boyfriends and ‘Husbands’

During FGDs with the women most of them denied about having affairs. A possible reason for this is that many of the women claim that they are working for their children. However, during in-depth interview, they confirmed having an affair with partners they live with. They call them lovers, boyfriends and ‘husbands’. These partners are customers who eventually formed fixed relationships and most of the time the women become providers to their lovers ‘needs. As two of the key informant stated

There are some women who have children but support their lovers. These women give a major part of their expenditure for their lovers as they are dependent on them like their children. The maximum age of the lovers is around 25 (Atsedu)

Most of the women have boyfriends from the village who don’t work or earn a living. If the woman provides his food, clothing and addiction, why he needs to work? ...youths living in the area who are in the age group 19 to 21 have lovers who work as SW but when they became pregnant they reject them (Eyayu)

Discussion with the women also revealed that some of the women are covering their lovers’ costs of living and other additional cost. When I asked them about this situation they revealed that, “it is not a problem because we love them”. However, two of the women stated that their lovers do not take any part in childcare. Their lovers’ usually come during the night after the children sleep because if their lovers are staying home they can’t do business. Hence, they finish their work before the lovers show up. Women need these partners for emotional and practical reasons. These guys give security and protection from the attack of other guys but ironically these guys who are supposed to protect

¹⁰ Shermuta is a word which is usually used to denote SW in Ethiopia

the women, abuse, scold and beat them. Besides, having a lover is adding the number of dependents on her and drains the income she gets from the work. This dilemma of the women is explained by Rahel as follows:

I stayed with my boyfriend for two years, the one I met him while I was pregnant. We used to chew chat together and with time we started to live together. I was the one who was paying for his food, chat, alcohol, cloth, shoes but he used to nag, scold and beat me. Once he beat in my eyes and I got seriously ill. I was patient with him since he was taking care of my child when I went for business. But now it is hard for me to give him money so I decided to break my relationship with him. ... I tried for two weeks to keep the child using my saving but it is difficult to keep my child and doing business so I gave the child to his father.

But informal discussions with her friend revealed that Rahel gave her child to one organization but prefers to hide it so that she can avoid the stigma of not being able to raise her child by herself as a self-sacrificing mother.

As the above quote shows, receiving money from SWs places the men in subordinate positions, which could only be countered by showing excessive masculinity in other areas such as being violent and abusive.

Few of the women stated that they don't have boyfriends and even blame those with boyfriends

I am angry with these women who give the money they earn by selling their body to their boyfriends (Mebrat)

This idea is also supported by community FGD participants and key informants who call the act of spending on lovers as a 'useless'. In the literature, a distinction made between the 'good' SW, a women works for her children, and the 'bad' SW, a women works for her own pleasure (Rhebergen, 1999).

Most of the women stated that they are having sex without condom with their lovers and they often change partners. This is a risk factor for the transmission of STIs including HIV/AIDS. Two of the respondents as already alluded they are HIV positive and started taking ART. They have one child each and one of the children (10 years boy) is positive and is also on ART. As one of the woman stated,

It is four years and half since I started ART, I was bed ridden for four months but even if I am sick I have to continue to live and work (Aynalem)

Studies revealed a general avoidance of condom use in non commercial contact among SWs (Varga, 1997; Van Blerk, 2007). The major reasons for non use of condom in private sex are SWs need to separate their work life form their personal life; and avoidance of violation of trust and intimacy associated with condom use (Varga, 1997).

4.2.3 Landladies

Most of the women stated that landladies rent their rooms in expensive cost. It ranges from 15 to 40 birr for a room per day. Most of the rooms are very tiny and made up of sheet of iron and not have access different facilities like water and toilet. Respondents think that the establishment owners receive money more than they deserve.

Some landladies keep the children while the mothers are with client. However, most of the landladies do not allow small children to sleep with their mothers since they think they spoil the bed with urine.

Some of the women consider the landladies as being brutal to them while others consider them as good people.

House owners don't like us to look at them; they don't consider us as human. They call as Shermuta. They said you act like something else while you are SW (Alemetu)

I have a nice relation with the owner though the old landladies used to discriminate us but the current landlady is young. For the old landladies when offering us coffee, they always asked us provide our own cups and also plates for injera¹¹ (Abebech)

Sometimes house owners don't allow us to use toilets especially if we are coughing since they directly related it with HIV/AIDS so we have to be careful not to show up when we are sick (Teblet)

¹¹ Local bread similar to pan cake mainly made of staple crop known as teff.

As the above quotations revealed, it is important to acknowledge that in patriarchal system it is not only men who dominate women but women are also playing their role in subjugating other women.

4.2.4 Neighbours

Neighbours provide protection to SWs from abuse; support them at the time of illness or burial. SWs are involved in social activities like visiting the sick, attending funerals and weddings. Neighbours and SWs can be a member of same iquib. Most of the study participants stated their interaction with the neighbour as smooth and integrative. This can be associated with the wide practice of SW in the areas in which the women live.

I don't have problem with the community. They don't say bad things in front of us but I am not sure what they said behind my back. They didn't isolate us. They eat with us and play with us. I didn't see any bad thing (Mebrat)

Most people who are living around here are poor like you. They might talk behind your back but not in front of you. You don't meet with people much as during day time most of the women sleep. They start their work during night when the non SW women sleeping. Those who work as SW and those who don't work have the same character. Sometimes, the owners of the house are sleeping on top of your room with their children thus it is difficult to separate owners with SW. Those who complain about SWs negative influence in the area are those who have better living standard (Aynalem)

Some of the SWs have a mixed feeling about the relation between themselves and their neighbours

Sometimes I leave my child with neighbours while I go out to look for business. They call my daughter as child of prostitute and when I return back she asks me what is meant by prostitute and why they call me prostitute. I usually avoid such questions since I don't know what to answer (Asnakech)

As stated above the neighbours claim to be caring for the children at the same time stigmatizing the children due to their mothers' work.

All of the community FGD participants stated that they didn't discriminate SWs.

We don't discriminate them but their bad behaviour isolates them from the community. If they get in trouble or became sick we are the one who help them and also if they are sick, we take care of their children

Even though, most of the SWs and community FGD participants think there is no discrimination or stigma towards SWs, I was able to observe the existence of stigma from their statements during the discussions. As stated by SWs in some occasions some parents don't allow their children to play with their children. While community members feel that their children are influenced negatively by the act of SWs, they also believe that there is no benefit from sex work for the women as well as their clients. In some extreme cases, few of the community discussants believe that SWs have to be removed from the society since they disturb the area by exhibiting morally and socially unacceptable behaviours. There was a general agreement among the community FGD participants that childcare and sex work is incompatible. Their feeling are expressed as follows

I don't think that the child of SW becomes good citizen while he/she grows up seeing bad things.

Now the time is improved why not they use contraceptives? They became pregnant. Their life and their children's life became difficult. If they want to have children, they should get married because it is good when it is within marriage

They are a burden for the community, when they get sick we are the ones who collect money and take them to hospital and care for their children

It is not possible to say that the interaction between SWs and their neighbours is harmonious. Their relation is cooperative as well as perverse. This has limited the childcare support the women get from the community.

4.2.5 Government and NGOs Activities

Few organizations are working on sex work and they are more focused on HIV/AIDS, condom promotion and STIs. The view of SWs as high risk group for the transmission of HIV infection has directed the focus of interventions on health and medical issues. Only recently few started to include reproductive health issue particularly contraceptive use. Betemariam (2002) points out the

limited availability of services for SWs in the major towns of Ethiopia. NGOs programmes have focused on provision of skill training for SWs so that they can leave SW. Organisations working with young SWs have focused mainly on establishment of drop-in centres for the provision of a range of services including education, recreation, washing facilities, advocacy, preventive and curative health services (Cherkosie, 2000 & FHI, 2002 in Van Blerk, 2007).

4.3 Coping Strategies of the Women with regard to Childcare and Sex Work

SWs with children use their own mechanisms to cope with their role as mother and SW. Most of them have stressed their socially acceptable role as a mother in order to compensate their morally unacceptable role as SW. Besides they practice culture of sharing among themselves. In line with this some of the study participants said that during pregnancy if a women cannot manage to get client those friends who get business share with her what they get. This can be in cash, or in kind and further, the other strategy is saving through iquib certain amount of money in order to use during delivery and for some emergency cases like the illness of a child. There are also other coping strategies such as looking after the child while waiting for clients outside one's door; renting a house and make the children to live there; make arrangements with someone to look after the child during night with payment and asking friends and neighbours to look after the children when they go out for searching clients.

As stated above, there are certain things the women do to balance the childcare and sex work. However, there are factors which they cannot control like the negative reaction of their family, neighbours and community towards their work.

Almost all the women stated that their interest to leave the work if they get assistance in getting skill training and income generating activities. Besides, they share similar dream for their future, including educating and providing their children, marrying, finding steady work, owning a home and living a normal life.

5. CONCLUSION: SEX WORK AND MOTHERHOOD

The aim of this study was to explore the childcare challenges of SWs in Addis Ababa which is not illuminated by other researches in the Ethiopia. To achieve this, ecological model and theory of gender and power provided a deeper understanding of the livelihood of women involved in sex work.

The findings of the study showed that majority of women engaging in sex work are young rural migrants looking for a better livelihood. They join sex work in response to poverty, limited employment opportunities, economic problems and gender inequalities they experience .Before joining sex work, most women worked as housemaid and experienced abuse either by their employers or relatives. Currently, they are living in small houses they rented for business and residence.

As SWs, the women experience pregnancy and parenting while workings. Majority of such pregnancies are unplanned as the women have very limited knowledge about their body, sexuality and reproductive health. Even with pregnancy, these women continue working as they need the income for survival despite the risks to the unborn babies and themselves. The study discovered the existence of social networks among SWs whereby they support each other and this provides some sort of security. For example, during late pregnancy if one SW can't get money the others will share her from what they get. However, their social ties and support network is fragmented due to stigma attached to their work.

The study participants found combining motherhood while doing sex work to be challenging even though for some women it is the main reason for their engagement in sex work and for staying in it as well as coping with it. For women, juggling childcare with sex work is very challenging because as breadwinners, they have to bring income through trading with their bodies and as mothers, they are expected to maintain their household and give care to their children. They also have to deal with the stigma of their work on themselves and on their children as they combine socially acceptable role of motherhood and morally condemned role as SWs. Meanwhile, they have to struggle to minimize the negative effect of their work environment on the lives of their children.

Another childcare challenge is the unhealthy living arrangement, not conducive for their children as most of them use the same room for their business and residence. Children living in this condition seeing their mothers' activities will be affected negatively and might step in the same activity. The mothers also worry that their children will be affected negatively by observing their activities. To earn income is a daily struggle to cover the cost of living given the irregular nature of their income, high house rentals expenses which put considerable constraint on their income eventually affecting the quality of their childcare.

Violence is another challenge faced by SWs in various forms i.e. assault, denial of payment, deliberate removal of condom, rape and robbery. Besides, their children are vulnerable to abuse by their mother's clients as the study identified cases of physical and emotional abuse on the children. The women revealed that even though they are abused by clients they don't get much support from the police and the community. Structures like the police that are supposed to protect all citizens do not work for SWs because of the social stigma attached to sex work.

The nature of work makes SWs vulnerable to health problems. Many of them suffered from colds, chest problems, genital area infection, STIs and even HIV, as two of my respondents stated. Many of them use condoms with clients, but not with regular partners and many times work during menstruation to sustain their income, thus exposing themselves to more health related problems. Some women even use clandestine ways of managing their menstruation such as applying different liquids like alcohol, whisky, and mineral water to wash their genitals, which may have health implications.

Finally, the findings show that women in this study join sex work as a viable economic activity due to limited employment opportunities. Trying to combine two seemingly contradictory tasks at the same time, motherhood and SW, is challenging. They strive to be the best mothers to their children, but given the nature of their work, living condition and lack of support system, it is difficult for them to fulfil their role and responsibility in taking care of their children in a desirable manner. Current interventions on sex work are more focused on

prevention of STIs including HIV/AIDS as well as provision of skill training for SWs so that they can leave the sex work. Such interventions do not consider the multi-dimensional needs of SWS including their specific childcare needs. Thus, future interventions should address such areas which are mostly overlooked.

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Appendices

Annex I: Interview Guide –Sex Workers

Time: _____

No. of Respondent: _____

Date: _____

Place of Interview: _____

Back ground Information

Age: _____

Education Status: _____

Marital Status: _____

Place of Origin: _____

- Can you tell me about yourself since childhood?
- Why did you join sex work?
- How did you start sex work?
- How do you explain your experience in raising child/ren as a mother and sex worker?
- How your works affect your pregnancy, parenting and child care?
- What difficulties you experienced while raising your child/ren? (small children, adolescents)
- What kind of supports did you get while raising your child/ren? (father, other family members, friends, neighbour, government , NGOs)
- How do you perceive the impact of your work on your children?
- What kind of coping strategy you used to balance your work and child care?
- What do you think about the future?

Annex 2: Focus Group Discussion Guide for Sex Workers

- Why do women/girls join sex work?
- How do women start sex work?
- How is the attitude of families and societies towards sex work?
- How do sex workers deal with pregnancy and child care?

- What do you perceive the impact of sex work on childcare practice of sex workers?
- What challenges sex workers face in raising their children?
- What kind of support available for sex workers with regard to childcare?

Annex 3: Focus Group Discussion Guide for Community members

- Why do women/girls join sex work?
- What are the major problems encountered by women in such activity?
- How is the relationship between the community and sex workers?
- How do you see the impact of sex work in the area?
- How do you see the childcare practice of sex workers in this area?
- How do you see the impact of sex work on the childcare practice of sex workers?
- What are the challenges of sex workers in raising their children?