

**UNIVERSITY FOR DEVELOPMENT STUDIES  
SCHOOL OF MEDICINE AND HEALTH SCIENCES**

**MOTIVATION AND CHALLENGES OF COMMERCIAL SEX WORKERS  
IN TAMALE METROPOLIS**



**BY**

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PUBLIC HEALTH DEGREE**

**FEBRUARY, 2020.**

## DECLARATION

I hereby declare that this thesis is my own work towards, and that to the best of my knowledge, it contains no material previously published by another person nor material which has been accepted for the award of any other degree in any institution except where due acknowledgement has been made in the text.

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Date



## DEDICATION

This work is proudly dedicated to my father: **ALHAJI ISSAH ALHASSAN**

UNIVERSITY FOR DEVELOPMENT STUDIES



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First and foremost I give praises to Almighty Allah (SWT) for the health and strength throughout my study.

I wish to express my sincere gratitude to my supervisor, Dr. Ziblim Shamsu-Deen for his directives, patience, competence and useful suggestions offered me. I must say that his insightful suggestions and comments helped to give the needed shape and substance to the thesis. I am also grateful to him for inspiring and enhancing my academic training and capacity through his guidance and supportive roles.

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## ABSTRACT

There is high influx of commercial sex workers in the Tamale metropolis and these are mostly involved young girls and women. This study aims at examining the motivation and challenges of the commercial sex workers. The study is purely qualitative and the main tools for data collection for the study were interview guide, tape recorder and observation. The study purposively selected 50 respondents at the point of saturation in the commercial Business District of the Metropolis where they operate. The key findings of the study with respect to motivation were lack of parental care (8%), peer group influence (36%) and financial gains (56%). The study further revealed that majority of the commercial sex workers were migrants from Nigeria. The study also revealed some challenges the commercial sex worker face in the trade, these includes; among others stigmatization (22%) , rape (5%), The findings also did include coping strategies commercial sex workers adopts in dealing with the challenges they are confronted with in their daily operations. Based on the findings, a number of recommendations were made. A call on the exiting of many of the commercial sex workers, who wish to stop the work, was passionately made, in the light of the revelations which suggested that commercial sex work was inherently harmful. To conclude, commercial sex work is inherently risky given the widespread reported incidence of violent attacks, stigmatization, and rape in the course of providing services to their clients.



LIST OF ACRONYMS

AIDS	Acquired Immunodeficiency Syndrome
GSS	Ghana Statistical Service
HIV	Human Immunodeficiency Virus
IDI	In-depth Interview
NGO	Non-governmental Organization
PHC	Population and Housing Census
PTSD	Post-Traumatic Stress Disorder
SSCE	Senior Secondary Certificate Examination
STD	Sexual Transmitted Disease
STI	Sexual Transmitted Infections
UNAIDS	United Nation Acquired Immunodeficiency Syndrome



# UNIVERSITY FOR DEVELOPMENT STUDIES

## MOTIVATION AND CHALLENGES OF COMMERCIAL SEX WORKERS IN TAMALE METROPOLIS

UNIVERSITY FOR DEVELOPMENT STUDIES



**ISSAH, ABDUL-NASIR**

**2020**

## CHAPTER ONE

### 1.0 Introduction

This chapter contains the background of the study, problem statement, the research questions and objectives, the significance of the study, organization of the study, ethical consideration and conceptual framework

### 1.1 Background to the study

Commercial sex work is viewed as the oldest occupation, congregates the expected need of human in exchange for money and been maintained as old as civilization itself (Bindel, 2006, Gangoli et al 2006, Day2007). Various forms of sex trade can be traced back to the times of Greeks and Romans (Posner, 1992).

The term sex worker refers to any individual who exchanges sexual services for anything of value (Donovan, 2005). Even as this definition is broad, some scholars argue that it does not adequately address the issue of consent (Rivera, 2016). Various commercial sex work abolitionists associations and scholars have argued that, at its core, commercial sex work is a form of exploitation because of the purchasing and selling of a human body (Akee et al, 2014 and Immordino et al, 2015). Raymond (2004), argues that, even when people believe they are engaging in the industry at their own free will, they are rather being coerced by a patriarchal society. But in contrast, institutions such as Vixen Collective and Call Off Your Old Tired Ethics (C.O.Y.O.T.E), which on their capacities fights to decriminalize commercial sex work, have argued also that, commercial sex work can be entirely consensual (Rivera, 2016).



Consensual in this case connotes a person which agrees on consented to be a part of the commercial sex industry without being coerced by any external force. Consensual sex workers though have made a cognizant choice to monetize their own sexuality and bodies, these individuals are commonly grouped with those who are actually coerced into the industry against their will and being classified commonly as victims of sex trafficking.

Existing literature most often focuses on sexual servitude as a primary form of human trafficking in lieu of other forms such as forced labor, organ trafficking and military soldiers which creates the absence of agreement with regards to the definition of human trafficking (United Nations, 2008).

Following Harcourt and Donovan (2005) there exist different types of sexual services practiced by sex workers around the world which are grouped into two categories; direct and indirect sex work. Where direct sex work refers to services such as indoor and outdoor commercial sex work as well as escort services. This type of sex work typically involves the exchange of sex for a fee in which genital contact is common. On the other hand, indirect sex work is seen as services such as lap dancing, stripping and virtual sex services (over the internet or phone). In this, genital contact is less common; however a fee is still exchanged for the services. This study however is devoted to direct type of commercial sex work which is commonly practiced in Ghana.



Kelser, 2002, argues that commercial sex work serves men's sexual needs and meets women's economic needs. To the broad minded feminist, sex trade in the sense of contract is seen as private entity (Day 2007). Also, Radical feminist see commercial sex traders as human beings who have been duly reduced to goods and services or an act of selling one's body where by a sex



trader rents out a specific part of their bodies such as the genitals. This kind of view assumes the client buys sex but does not care about the sexual fulfillment and only requires the commercial sex worker to provide him with sexual enjoyment (Klepper 1993). From the moralistic point of view, commercial sex trade offends the moral and cultural principles and as well spreads sexually transmitted infections such as gonorrhea, syphilis as well as HIV and AIDS (Barry 1995). Legal status of commercialization of sex trade is a critical factor defining the extent and patterns of human rights violations including violence against sex workers, where commercial sex work is criminalized. It is worth knowing that, violence against sex workers is often not reported or monitored and discrimination towards commercial sex workers is nearly universal with no legal protection to victims of such violence. There is strong evidence that the criminalization of commercial sex work increases vulnerability to HIV and other sexually transmitted infections. The fear of arrest and police-led sexual and other physical violence, forces commercial sex workers to remain mobile in order to avoid detection by authorities (Gapreport, 2014).

Globally, a number of studies have examined the motivations for entry into the sex trade, most studies are in broad agreement regarding the motivations for entry or remaining in the commercial sex work, including financial motivation, childhood physical or sexual abuse, loss of self-worth, disrupted family life, runaway behavior, homelessness and experience of life on the street (Cobbina, 2011; Hwang, 2004; and Chusick, 2002). To the best of the researchers knowledge, these studies (Cobbina, 2011; Hwang, 2004; and Chusick, 2002) disregarded. Factors that are highly culturally specific. However it is imperative to consider the motivation, the number of people engaged



in the activity and the degree to which each influencing factors contributes to entry into the commercial sex trade. Usually, these factors do not contribute in a singly fold but rather interactive with each forming part of a chain reaction (Chusick, 2002).

From the view point of clinical psychiatry, examining the entry into sex trade as well as any subsequent negative experiences is important in terms of understanding the way personality such as pathology contributes to the motivation for sex work and to psychological adjustment to the trade a fernery. A study by Chudakov (2002) reported a high prevalence of mental disorders among commercial sex workers, such as mood disorder, anxiety disorder, and PTSD. However, it is not clear whether these disorders are the causes for entry in to commercial sex work.

It will be noted that most theoretical approaches in appreciating factors that influence commercial sex trade have limitations. Commercial sex workers and their clients have their own world view about humiliating scenery of commercial trade. Taken advantage of sexuality is not unusual and it is not always the case that men take advantage of women. There are several instances of sexual exploitation by women who used their sexual proficiency to take advantage of men in order to get some favours, money or a promotion at work, (Dorchen, 1990). However, Barry, 1995 and Stuart,

1995 agrees that, commercial sex work is a form of moral decadence because it degrades a woman who is generally viewed as a person of low social statute. Many studies on commercial sex trade in Tanzania indicated a range of reasons for its prevalence and social consequences. A study conducted by NACP in 2010 established that, there are about seven thousand five hundred female commercial sex workers in Dar-es Salaam alone with an estimated number of fifteen thousand male clients who meet theses sex workers in Dar-es Salaam every



night. The commercial industry has been burdened by current trends of technological evolution including the advent of the World Wide Web, live chats, and live videoconferencing. The visibility and availability of commercial sex workers have been increased by these current technologies.

The internet at the same time has provided a converging place for sharing information among those who purchase the services of commercial sex workers but allows for greater privacy and anonymity (Hughes, 2003).

A study by Leslie-Rue (2010) revealed that the major factors influencing women into commercial sex work and its related activities are frustrations and dilemmas in love and marriage presumably by both men and women. Often, women who are faced with economic and social challenges are pushed to participate in commercial sex work as well as transactional sex to generate income

Literature in other jurisdictions found economic need and coercion as the basic motivating factors for engaging in commercial sex trade (Odek et al, 2009). Most commercial sex workers globally express the desire for alternative forms of employment but lack the requisite skills to find them (Ngo et al, 2007).

There exists a far-reaching body of literature on commercial sex trade which covers a variety of topics including alcohol and drug use of this sub-population, by Decorte et al, 2011, occupational health risk of commercial sex workers, example Sanders (2004), sexual exploitation of commercial sex workers, example Demir (2010), and the working environment of commercial



sex workers, example Daalder (2007). Again, quite a number of studies have given insights into possible policies of commercial work and its influence on commercial sex workers, example Jeffrey (2009).

Commercial sex trade as a social phenomenon is increasing in Ghana and dominated by children of school going age (Child Labor Prevails in Ghana, 2001). Regrettably, the phenomenon appeared to have attracted little attention in government and the public circles. As a result of this fact, a section of Ghanaians have expressed disgust in recent times at its ascendancy and the careless as well as the overconfident manner with which the recent commercial sex traders go about their work especially within the streets of Tamale where Islam is most dominant and seriously scowls on such a profession. The phenomenon has worsen to the extent that even primary school children are been pinched into it. What is particularly disheartening and disturbing about this phenomenon is that some parents as well as guardians of these young girls involved in this illicit trade are well aware of this problem with some parents particularly encouraging their wards into it with alacrity (Bamgbose, 2002).

Following Dalla (2000), commercial sex work which includes the exchange of sex or sexual activity for food, money, drugs or other commodities is an institution linked to a number of social and health problems such as the transmission of HIV and AIDS, increase in drug use, increase violence and many more.



### **1.1 Statement of the problem**

In low and middle income countries, the average HIV prevalence among commercial sex workers is estimated to be approximately 12%, with an odds ratio for HIV infection of 13.5%

compared to all women aged 15-49years (Gap report,2014). Available data in 110 countries indicated that, the prevalence of HIV infection is almost 12 times higher among sex workers than the population as a whole, with prevalence of at least 50-fold higher in 4countries (Gap report, 2014). HIV prevalence among commercial sex workers is much higher than among the general population. An analysis of 16 counties in sub-Saharan Africa in 2012 showed a pooled prevalence of more than37% among commercial sex workers (Gapreport, 2014). In Nigeria and Ghana, HIV prevalence among commercial sex workers is 8-fold higher than the rest of the population (Gap report, 2014).

The Ghana Aids Commission (2011) estimated that commercial sex workers have the second highest HIV and AIDs prevalence of any other group in Ghana at 11.1%compared with thenational average of 1.5%. Although a lot of studies have been conducted on commercial sex workers, but there is lack of knowledge on commercial sex workers with regards to factors that influence their entry and challenges they face in commercial sex trade in the Ghanaian society. The attitude of Ghanaians generally, with respect to commercial sex trade is characterized by clear lack of concern. According Ghana Aids Commission, (2004), four-fifths of prevalence cases of HIV in adult males were acquired from commercial sex workers.

These challenges together with stigmatization confronts commercial



sex workers on daily basis which should have serve as enough restraint but is not the case as more and more young girls and women are being recruited into the sex industry and society as well as government is acting unaware to their dilemma

Commercial sex work itself is not illegal in Ghana, but asking for sex in a public place incurs a fine on first offence, a crime on subsequent happening and apparently attract a charge. Nonetheless, women engaged in commercial sex trade are undoubtedly evident on the street of Tamale and other parts of the country and many people within the metropolis are amazed to hear that any form of such trade exists. It is evident in many studies also that commercial sex workers contract 2.4% of all new HIV infections in Ghana and have been identified by United Nations and the Ghana Aids Commission as one of the population at risk of contracting HIV and AIDs and many other sexual transmitted diseases. Despite the hunt however, by commercial sex workers to survive the harsh economic realities, the fact still remains that commercial sex workers do experience challenges in the course of duty. The commercial sex industry is overwhelmed with a lot of challenges. With little or no money, obstructive home support, low level of education, Commercial sex workers are at a greater risk of physical violence, sexually transmitted infections as well as low sexual and reproductive health (Obeng, 2014).

. The phenomenon instead of being handled as a health and social problems, commercial sex work is rather been approached as if it is a private issue for only those engaged in it. Even though these young women engaged in commercial sex work come from a society and once they are integral part of the society, their problems should be seen as a societal problem generally because



the implication of their actions has a direct bearing effect on their society. Commercial sex

workers therefore needs to be protected, understood and if possible liberated and rehabilitated so that they can be re-integrated into the society. The little knowledge regarding motivation and challenges of commercial sex workers by the society is counterproductive in handling commercial sex trade as a societal problem. It is against this backdrop that, this current study sought to investigate the motivation and challenges of commercial sex workers in the Tamale Metropolis.

In assessing the motivation and challenges of commercial sex workers in Tamale, the following .question are posed. Answers to these questions will help address the situation.

### **1.2 General Research Question:**

What are the motivations and challenges of commercial sex workers operating in the Tamale metropolis?

#### **1.2.1 Specifically the study addresses the following questions**

1. What motivates the entry of young girls and women into commercial sex work?
2. What are the challenges commercial sex workers in the metropolis face?
3. How are the commercial sex workers coping with the challenges face?



### **1.3 Main objective of the study**

The main objective of the study is to examine the factors that motivate women into commercial sex trade and the challenges they face in doing their business in the Tamale metropolis.

### **1.3.1 Specific Objectives of the Study**

Specifically the study sought to:

1. Investigate the factors that motivate the young girls and women to undertake commercial sex work in the metropolis.
2. Ascertain the challenges they face in executing their work as commercial sex workers.
3. Find out the coping mechanisms they adopt as commercial sex workers to overcome their challenges.

### **1.4 The scope of the study**

The study is limited to Tamale metropolis and focuses on the factors that motivate young ladies into commercial sex work and the challenges they face in operating in the area. Considering the nature of the study, qualitative method of analysis was adopted by the researcher.

### **1.5 Significance of the Study**

The main motivation of the study stem from the belief that none or few studies have been conducted on commercial sex trade in Ghana and Tamale metropolis in particular.



- This study would serve as a stock of knowledge on the activities of commercial sex work in Ghana and beyond. It will help government, NGO's, traditional rulers and other stakeholders who matter in planning and implementing activities regarding young women in the area.



- The study would help contribute to knowledge on predictors or factors that influence young women and girls to indulge in commercial sex work and also highlight the challenges they face in their activities in the Tamale Metropolis.
- The findings of the study can further be used to tailor social and health services for the sex workers and as well provide information to policy makers on how to regulate the activities of sex trade in the Tamale Metropolis.
- Finally, the study when completed would add to literature and serves as reference point for academic purposes as recommendations made may be taken up and built upon.

### **1.6 Organization of the Dissertation**

This study is organized into six chapters. Chapter one is devoted to the background of the study, problem statement, research questions, study objectives, scope of the study and justification of the study. Chapter two of the study focuses on relevant literatures related to the study and was reviewed both theoretically and empirically. Brief description of the study area, the research design, data collection and analysis method used were discussed in chapter three, Chapter four was devoted to the data analysis and presentation of the study result. Chapter five gives a detail discussion of the results presented while the final chapter, chapter six presented the summary of findings, drew conclusions from finding and made policy recommendation from the conclusions.



### **1.7 Ethical consideration**

Ethics refers to the systematic thinking about the moral consequences of decisions (John and Sack, 2001). Privacy is the freedom an individual has to determine the time, extent and general circumstances under which private information will be shared with or withheld from others (Burns

and Grove, 2001). Privacy involves the obligation of the researcher to protect information from respondents from undesirable or any other interactions or sharing. Confidentiality refers to the management of information gathered from respondents while anonymity refers to the principle that the identity of research respondents is kept secret (Mouton, 2001). According to Trochim, 2006, “confidentiality can also indicate a way of not making information given by respondents known to anyone who is not directly involved in the study”. Anonymity is the prevention of disclosure of the information that leads to the identification of the study subject or patient in a report verbal or written. In this study, the research reassured and maintained the respondent’s anonymity and confidentiality. No names or telephone numbers were used in the interview guide. A number of measures were put in place by the researcher to protect the anonymity of research participants, such as use of pseudonyms and paying careful attention to data storage. Codes were given to individual respondents. The researcher also respected the respondents’ rights to self-determination, privacy, confidentiality and anonymity, fair treatment and protection from discomfort and harm and importantly obtained their informed consent. Whichever means of access and sampling was used, studies on commercial sex work is inherently of a sensitive nature since it involved illegal and personal behaviors. As such, particular attention was paid to designing questions towards the study and more so the tact employed in asking the questions in order to

reduce embarrassment and difficulty for the

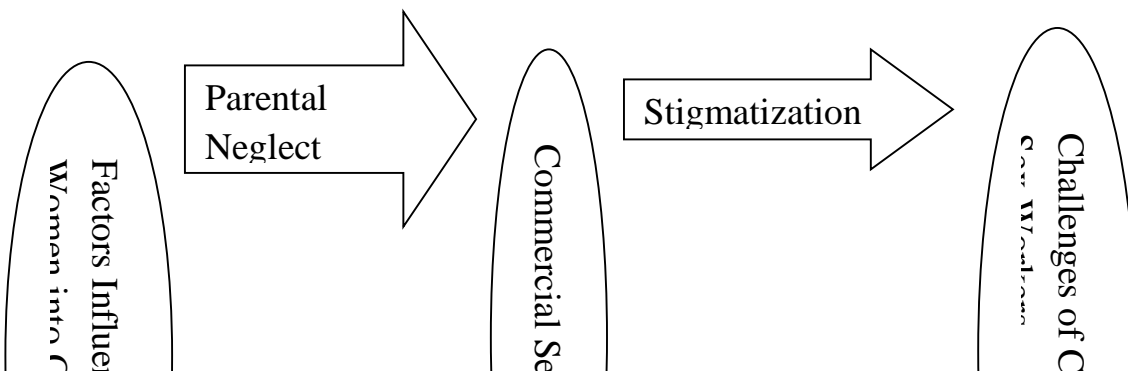


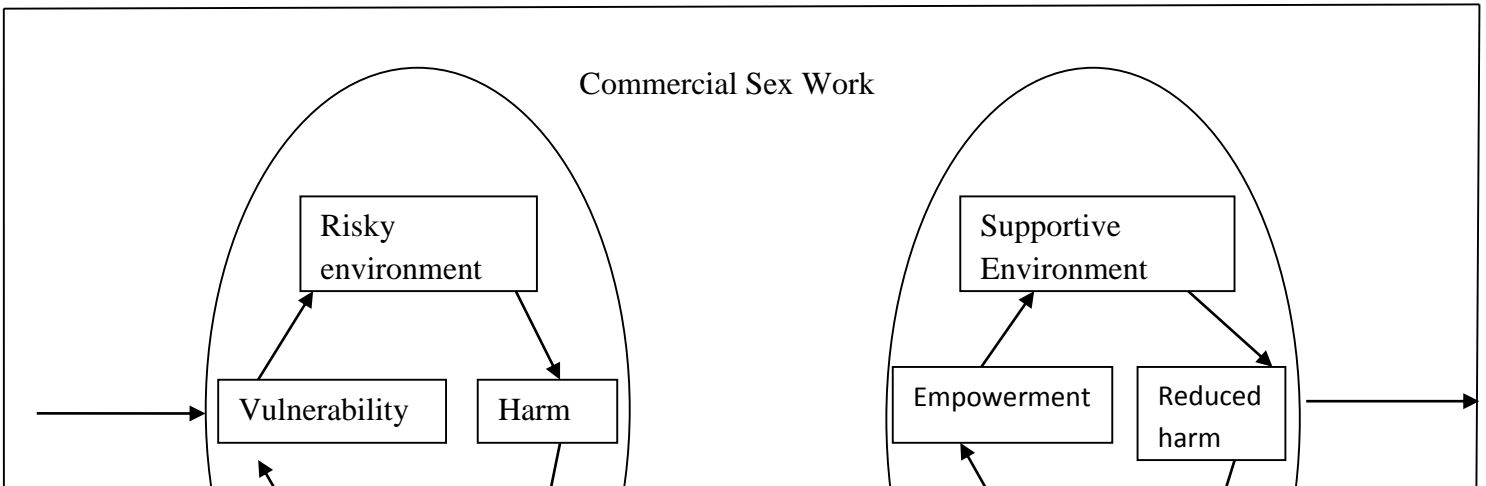
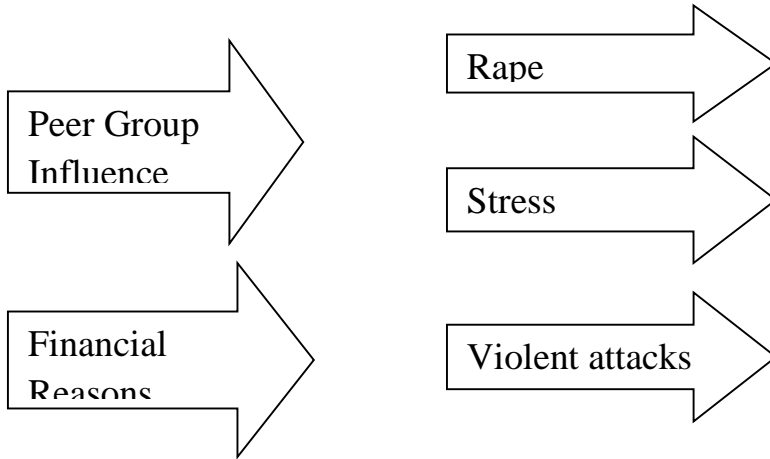
respondents as well as enhancing the accuracy of responses. It cannot be assumed from the nature of commercial sex work that female sex workers are comfortable talking freely about sexual issues and behaviors. The researcher therefore guarded against psychological discomfort which

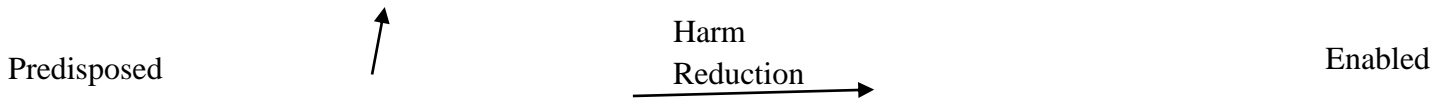
might be experienced by respondents by assuring them that, the study was purely for academic reasons which would eventually informed policy in their favour. The researcher also assured respondents that no harm will come to them during and after their participation in the study. This reassurance was important due to the sensitive and emotional nature of some of the research questions in specific and the issue of commercial sex work in general.



### Conceptual Framework







**Source:** Adopted from Health Canada, 2002

Figure 1.8; Conceptual framework of commercial sex-work harm reduction

Figure 1.8 depicts a conceptual framework for commercial sex work harm reduction. Individuals are predisposed to poor determinants of health upon engaging in commercial sex trade (Health Canada, 2002). The individual commercial sex worker’s vulnerability may act synergistically with the risky environment by exposing her to harm and diminished quality of life (WHO, 2002). The vulnerability of commercial sex workers, coupled with the risky environment, their exposure to harm and diminished quality of life often intensify one another in a cyclical form.



The objective of the harm reduction in commercial sex trade might be to help sex workers move into a more positive cycle of empowerment, supportive environment, harm prevention and

mitigation and improved quality of life. The cycle would enable commercial sex workers to eventually exit commercial sex work.



## LITERATURE REVIEW

### 2.0 Introduction

This chapter reviews relevant literature related to the subject under investigation. Both theoretical and empirical reviews in thematic areas such as: Factors promoting entry to sex work, theoretical reflections of commercial sex workers, Freudian psychiatric model (1905), systematic theory, drift theory and many more were reviewed. This was to enable the researcher identify the knowledge gap and also stay focused with the objectives of the study.

### 2.1 Factors Promoting Entry to Sex Work

Generally, commercial sex workers are perceived as villains or victims. A variety of discourses from a section of feminisms, states that, commercial sex workers are mainly women who do have no real option, since no woman could really choose sex work (Kempadoo, 2005). Female commercial sex workers are rather seen to deserve sympathy, protection from the law and moral forgiveness because their involvement is believe to be coercion by poverty or effects of abuse in the past on their self-esteem and or tricked by deceitful third parties, into entering a debasing, dangerous and damaging commercial activity such as sex work. It is established that, commercial sex workers themselves sometimes confirm this view, emphasizing that they entered commercial sex industry as a last financial and economic resort (Kemadoo, 2005).

A study conducted by Boston University's Center for Global and Health and Development (CGHD) and the Kwame Nkrumah University of Science and Technology (KNUST) found that,



girls and young women who engages in commercial sex trade in Kumasi, face multiple levels of hopelessness.

A good number of young women engaged in commercial sex trade according to the study, lacked education and income earning opportunities and many preferred leaving school early as a significant turning point in their lives. The study further established that, many factors and actors contributed to the processes and circumstances on their pathways into the trade.

Commercial sex workers who are fortunate and strategic earn reasonably high income, save some money and eventually achieve financial stability. Commercial sex work comparatively, can provide young women and girls with a conduit to greater financial stability than they may have found in “kayayei”, transporting goods on their heads (also known as “head porters”) or domestic workers. Even though the earnings comes at a high cost of risk of assault, pregnancy, sexually transmitted infections (STI’s) and HIV and AIDS (Adu-Sarkodie and Beard, 2012)

Following the work of Bucardo et al, (2004), financial gains was reported as a basic motivating factor influencing entry into sex work. In South Africa and other third world countries. Lane (2003) indicated shortage of jobs available to women as a determinant of entry into sex work so as to alleviate them from poverty since they were often uneducated. Although, a lack of

alternative work was given as their reason for entering into commercial sex trade, it was also listed as a factor that prevented them from exiting the sex industry. Once women engaged in sex trade, it became increasingly difficult to find alternative forms of work. Engaging in sex was often initiated as a means of supplementing their income but eventually





became a full-time work (Weiner, 1996; Vanwesenbeeck, 1994). Commercial sex workers indicated that apart from financial gains, there are several benefits associated with the work, including their ability to support their family and children. Specifically, in low and middle income countries, commercial sex workers reported earning more money from the commercial sex work than from alternative sources of unskilled work (Bucardo et al, 2004). The commercial sex workers indicated that their financial gain outweighed the risk involved in practicing commercial sex trade (Bucardo et al 2004). Many African women, who are engaged in commercial sex work for money come from disadvantaged backgrounds, inadequately educated, divorced and lack the skills required for other forms of formal and informal jobs. A startling percentage of commercial sex workers in East and West Africa have received no formal education well more than 10% in most of these studies. Economic and food insecurity makes commercial sex work the sole survival choice for women, principally those with dependents or whose parents have passed on. The effect of poverty on the decision to trade in sex is though not straight forward, however, some commercial sex workers are more accurately described as 'entrepreneurs', have sought financial independence from men by saving and investing money from trading in sex to buy their own bars from which they obtain additional income. Commercial sex workers in Sub-Saharan African often have a common, background of marital disruption.



Most studies reported that, between one and two-thirds of commercial sex workers were divorced or separated. In a large study in Senegal, 63% of commercial sex workers were divorced and cited consequent economic factors and lack of occupational choices as reasons for engaging in commercial sex trade (Bucardo et al 2004).

A study in Kenya found that half of the commercial sex workers who had ever been married, had done so following divorce and looking for a job as a single woman to cater for the children, or trying to escape divorce related stigma (Agha & chulu Nchima, 2004).

Although only reported by a handful of studies, mainly in East and Southern Africa, the evidence suggest that typically more than two-thirds of commercial sex workers have children and with adult dependents. More so, children maybe, born in the course of the commercial sex trade since contraception use among commercial workers is by no means universal. A survey on sex trade in Kenya showed that, about 90% of the women engaged in sex work to have one or more children with about 61% of commercial sex workers working in bars and other drinking avenues also supporting one or more family members (Agha &chuluNchima, 2004).

A qualitative study by a Ugandan on sex trade found that commercial sex workers ascribed their choice of sex work to limited options following teenage pregnancy, school dropout and unfaithful relationship.

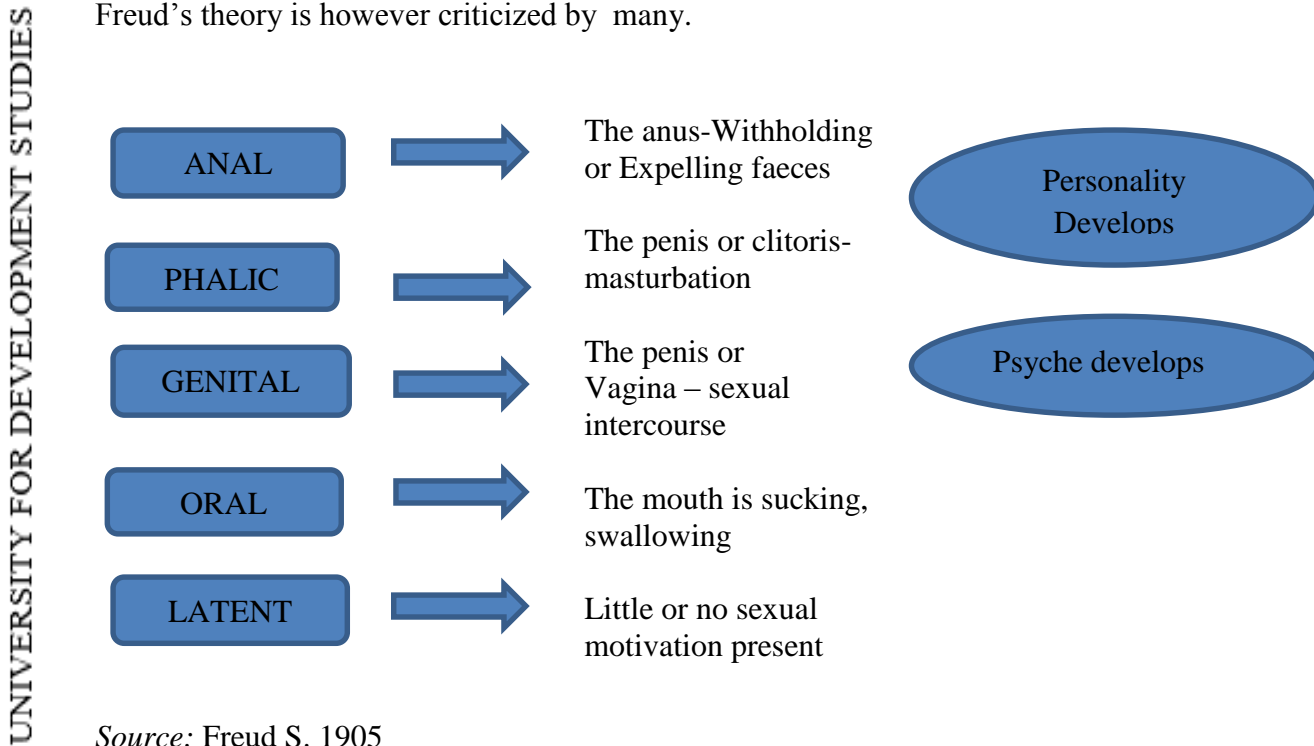
## **2.2 Theoretical reflections of commercial sex workers**

While theoretical conceptions of deviant behavior range from role, strain to psychoanalytic theory. Orientations to the study of the commercial sex worker have shown considerable homogeneity. Many theories concerning this occupational group has employed, almost exclusively, a Freudian psychiatric model.



### 2.2.1 Freudian psychiatric model (1905)

Sigmund Freud is considered to be the father of psychiatry. Among his many accomplishments is, arguably the most far-reaching personality schema in psychology and Freudian theory of personality. The Freudian theory of personality has been the focus of many additions, modifications and various interpretations given to its core, point. Despite many reincarnations, Freud's theory is however criticized by many.



**Figure 2.2.1: Freudian psychiatric model**



Freud (1905) revealed that, psychological development in childhood takes place in a series of fixed psychosexual stages; anal, phallic, genital, oral and latency. These according to Freud are called psychosexual stages with each stage representing the fixation of libido (roughly translated as sexual drives or instincts) on a different area of the body. As a person grows physically,

certain areas of their body become important as sources of potential frustration, pleasure or both. Freud believed that life was built around tension and pleasure; he is of the believed that all tensions are due to the build-up of libido (sexual energy) and that all pleasure came from its discharge. In describing human personality development as psychosexual, Freud conveyed that what develops in human is the way in which sexual energy accumulates and discharged as we mature biologically. The discharge of the accumulated sexual energy has a direct influence in pushing women into commercial sex work. Freud argued that the first five years of life are crucial to the formation of adult personality. The idea must be controlled in order to satisfy social demands; this sets up a conflict between frustrated wishes and social norms. The personality and Psyche develop in order to exercise this control and direct the need for gratification into socially acceptable channels. Gratification centers in different areas of the body at different stages of growth making the conflict at each stage of human development psychosexual.

The commercial sex worker has thus been described in various studies as masochistic of infantile mentality that is unable to form mature interpersonal relationships, regressed, emotionally dangerous to males and as normal as the average women (Vanwesenbeek, 1994). Psychological approach to the study of commercial sex workers were seen as different from non-commercial sex workers, because of marginal mental ability and abnormal sexual proclivities. Ellis (1937) stated

that, commercial sex workers act against the public order. They do not act in accordance with societies expectations and usually thought of as been receptive and monogamous. A study by Gluecks (1934) on five hundred females in Massachusetts and came to the conclusion that commercial sex workers in contrast with other females, are not able to control their sexual



desires. Also a study by Kemp (1936) on five hundred and thirty street commercial sex workers in Copenhagen (Denmark) with focused on the hereditary dimension reveal, women's entrance in the world of commercial sex work can be explained by the fact that their mothers were already "abnormal". The strength of the psychological approach lies in the fact that attention is paid to the background characteristics of the women involved. The weakness however, is that the psychological test used were not well developed and no research among control groups were done. The psychoanalytic approach subsequently dominated in the 1960s and 1970s and was embedded in Freud's theory about "infantile sexuality. These psychoanalytic studies were based on a small number of participants, varying from two to twenty, who were very often patients of the researchers. The scientists supporting this approach states that, the commercial sex workers' adult sexual behavior is related to their early stages of sexual development. According to them commercial sex workers frequently reported that as little children, they were raised in situations in which traditional family love was lacking. The exclusive use of psychoanalytic models in trying to envisage behavior and the consequent neglect of situational and cognitive processes has been steadily lessening in the field of psychology.

The focus now is on the interpersonal processes which help define the deviant role, the surroundings in which the role is learned and limits upon the endorsement of the role. In other words, in studying commercial sex work, one must not only consider the personality construction of the participants but also the construction of their community and the path-ways as well as routes in which the learning and enactment of the behavior commence. Based on these



inclination Social scientists stated that, highlighting the impact of social relationships, social processes and subcultures on the process of decision making. In this interdisciplinary approach, multiple factors were seen as underlying the women's entrance into "the life".

Study by (James 1976, Rosenbaum 1981 and Miller 1986) reported multiple motives as determinants for engagement in commercial sex work, of which financial concerns were the most important, followed by early negative sexual experiences (incest) and peer pressure. The financial reasons very often is tied in with drug dependence which becomes very clear in Rosenbaum's study among 100 heroin-using women of whom more than half were involved in commercial sex work. Social class was also considered an important explanatory variable for women engaging in the world of commercial sex work. In this so called structuralist approach, social stratification and money were key issues. Commercial sex workers were seen as innovative persons who turn to illegitimate means like commercial sex work in order to earn money when lawful means were insufficient or blocked (Merton, 1957).

Davis (1937) called this "social utilitarianism" and suggested that commercial sex work created a possibility for affectional and non-threatening outlets for the needs of men. He saw commercial sex work as functional in family oriented society and a way to prevent divorce. Those behind this

structuralist approach view the organization of society and its control on individuals as critical, but the ideas, views and values of the individuals involved are ignored.



### 2.2.2 Systematic Theory

Systematic theory is a theory that looks at the relationship between individuals, their surroundings and the manner in which the environment impacts on their lives. A study by Mathews, (2008), created a three-stage model to map a woman's path into sex work. The first phase is labeled predisposition stage, in which childhood deprivation and family disintegration occurred. The second phase is called marginalization stage where the child is separated from her family either through her own agreement such as running away or through forced removal, the third stage been the final stage is the facilitation stage which occurs when the child is enticed or groomed by people such as peers and pimps eventually leading into commercial sex work. Mathews (2008) finding indicate that most women passes through at least two of the three stages or phases along their path towards engaging in commercial sex work.

### 2.2.3 Drift Theory

The drift theory focuses on women without giving sufficient cognizance to the relationship between her and her environment. There are several explanations for the drift theory. Pheterson (1998) describe the whore stigma in terms of which is believed that, the psychological consequences of sexual abuse have little to do with entry into commercial sex work. Rather Commercial sex work, unchastely, sexual abuse and badness' all fall under common denominator of stigmatization. In this situation, the girl who has been sexually abused either has to repress her experiences or give away her reputation (Vanwesenbeek, 1994). It is argued that,



for women who are already branded as whores as a result of sexual abuse, it is simply a small shift into commercial sex work as opposed to other women who hold the status of decent women. The deviant stigma attached to sexual abuse is internalized by the women concerned due to labeling, public branding and subsequent victimization (Vanwesenbeek, 1994). This theory is supported by Dalla (2006) who indicated that a sexual abuse victim, begin to view herself as debased, also referred to as mortification of self. The debased self is internalized and the behavior is then simply congruent with the label the woman has given herself.

The criticism of the drift theory is that not all girls who are isolated or display deviant behavior enter into commercial sex work. Rather, these factors should be seen as a stepping stone or incidents that combined with other factors leading to entry into sex commercial work.

There is a correlation between childhood victimization and entry into commercial sex work. Earlier research by Hwang and Bedford, 2003; Lane, 2003 revealed a high incidence of childhood victimization among commercial sex workers in comparison to a normative abuse was both sexual and physical and was perpetrated mainly by a family member. Sexual abuse carried out by a close family relative over a long period and involving a severe act such as penetration appeared to create the greatest psychological and social long term damage (Dalla, 2006; O'Neill, 2001). Parents and

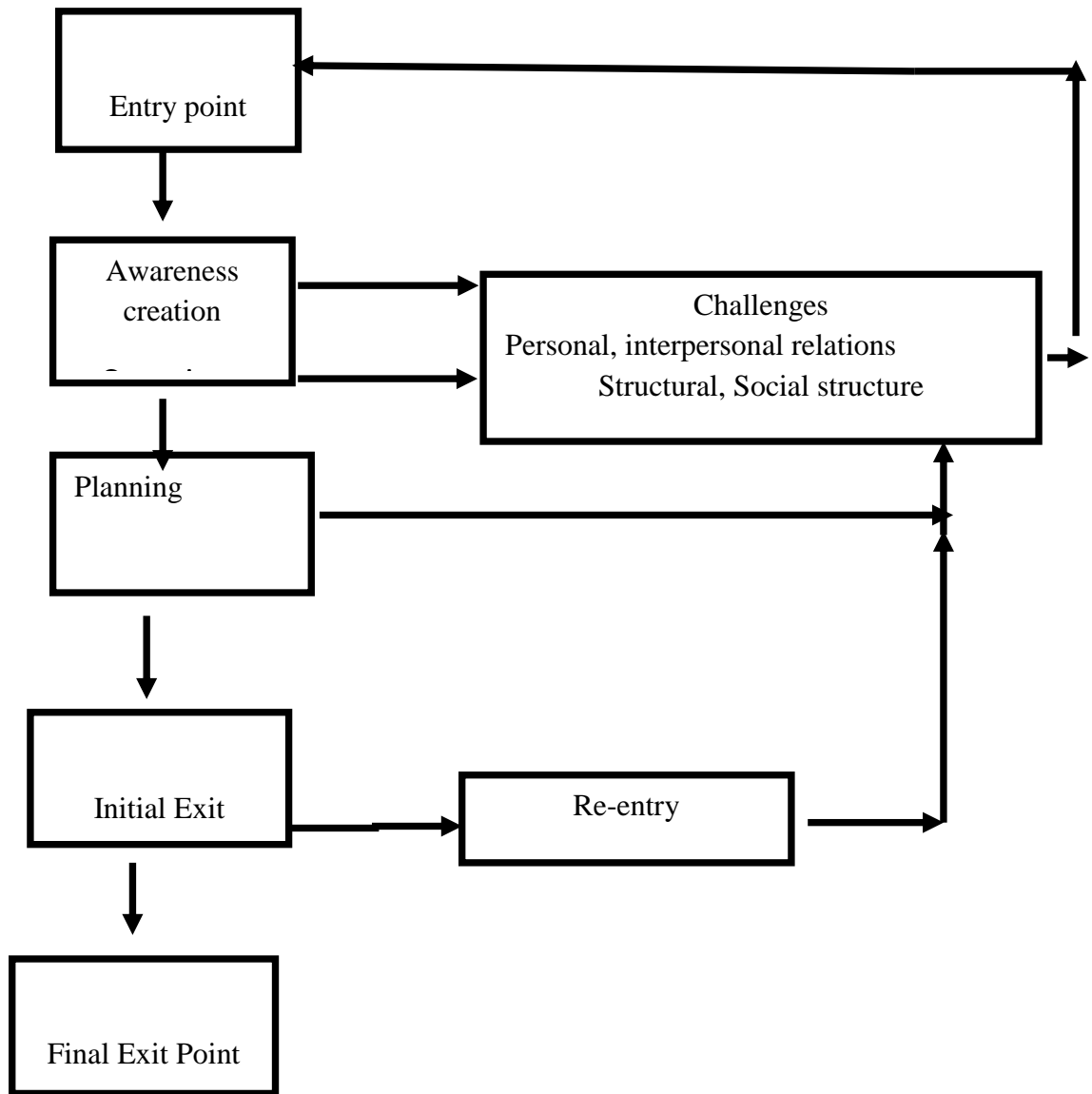
family members who are indulged in emotional and verbal abuse often elicit psychological consequences similar to those of physical and sexual abuse (Dalla, 2006). Simons and Whitbeck (1991) report that a specific experience of child sexual abuse creates attitudes about oneself and sexual acts that promote the exchange of sexual favours for financial rewards. The findings were supported by Kidd and Kral (2002) who indicated that commercial sex work could be linked to earlier feeling of sexual abuse.





The cognitive repercussions of childhood sexual abuse include learnt behavior where the child may have learnt to associate sexual acts with reward, this is particularly so in the case of a child who is rewarded for sexual activity with an adult. In adulthood, this interaction plays out in the negotiation between the sex worker and the client on payment for a sexual activity (O'Neill, 2001). Following the work of Dalla, 95% of street sex workers reported experiencing some form of literal or symbolic abandonment as children as a cause of entry into sex trade. Literal abandonment is experienced as physical abandonment while symbolic abandonment is experienced as emotional and psychological abandonment. Many sex workers also admitted in their response that, their parents died when they were children or that their parents literally left them to fend for themselves, hence the engagement in commercial sex trade (O'Neill, 2001). Just as several forms of physical abandonment were reported, so were many forms of symbolic abandonment. The most significant and damaging form of symbolic abandonment was a parent failure to recognize and prevent sexual abuse. Others did report the abuse to their mothers and were subsequently blamed for provoking the perpetrator(s) of the abuse (Dalla, 2006).





*Source:* Adopted from Dalla, 2006

**Figure 2.2.4: Integrated model of entry and exiting commercial sex work**

The framework examines commercial sex work in six stages, from the entry to exit and re-entry of young girls and women. The first stage is seen as the starting or the entry point where a woman is totally immersed in commercial sex trade and has no thoughts of leaving or any

conscious awareness of the need to change. This stage is similar to both pre-contemplation (Prochaska et al., 1992) and pre-breakaway (Mansson and Hedin, 1999). Length of time a commercial sex Worker will stay in this stage may vary dramatically from several months to many years and some women may never move beyond entry stage (Dalla, 2006).

In the second stage, awareness comprises of two parts. Visceral awareness and the deliberate preparation. Visceral awareness refers to the gradual realization that all is not well as it used to be. In this, a woman experiences “gut” feelings about leaving commercial sex work, yet these feelings cannot be or are not articulated to herself or to others (Taylor, 1968). It is plausible that a woman could ignore or deny these feelings and return to a place of complete immersion in the sex industry. Visceral awareness could be fleeting, intermittent or last for an indefinite period of time before the feelings move into conscious awareness. Conscious awareness occurs when these uneasy feelings reach a woman’s conscious level. She acknowledges her feelings and begins to process them consciously thereby enabling her to verbalize what she had previously felt at the gut level. She may begin talking to others about what she is thinking and feeling. Based on her ability to verbalize her thoughts, this stage corresponds to contemplation (Prochaska et al., 1992), first doubts (Fuchs, 1988), pre-breakaway (Mansson & Hedin, 1999), and Sanders’ (2007) gradual planning and natural progression stages. The next stage, deliberate preparation, is similar to Sanders’ (2007) gradual planning and natural progression stages. Here, a woman begins assessing both formal and informal support resources. It is in this stage that she is most likely to make initial contact with formal support providers (e.g treatment centers, support groups) available within her community and to speak with family and friends about life “on the outside”.



Although some actions are evident (e.g phone calls to treatment centers), little, if any, behavioral change actually occurs. Thus this stage is characterized by cognitive processing as well as data and information gathering. Again, given individual variability and personal initiative, a length of time spent in this stage could vary dramatically. It is worth revealing that, a woman maybe acting on her own accord (i.e. ,personal desire to exit) or maybe forced by others (e.g., family, children’s services, the criminal Justice system) to start planning her exit. The initial exit stage is when the woman begins actively using informal (e.g., moving in with a family member) and formal (e.g attending counseling) support services. Clearly, work done in the earlier stage of deliberate epreparation may be critical to her success at this stage of the exit process, particularly if awoman’s needs are extensive(e.g. housing, employment skills, substance abuse, or mental health problems). It is also important to note that, in some communities, services maybe numerous and readily available, whereas in others, they may be minimal and or difficult to access. Not only is access to formal and informal support critical at this stage of the exit process but also each woman’s receptivity to those services. To illustrate this, some women may enter a drug treatment program and will be actively engaged and ready to change, they may rely on their systems (e.g. sponsors), internalize knowledge gained and then apply newly acquired skills to their own lives.Others may begin in a treatment program, fail to utilize available support or internalize knowledge and therefore be unable to make behavioral changes. These women will likely abandon the program prior to completion and eventually return to the sex industry. It is in this stage of the model that a woman’s internal desire and motivation to exit commercial sex trade is severely tested. The initial exit stage captures the reality of the “entry-exit-re-entry” cycle of street-level commercial sex



work and the variability of paths out of the sex industry. In other words, some women engaged in commercial sex trade may seek out and utilize available services and never return to the street based commercial sex work (their initial and only exit); where as for others, the initial exit maybe short-lived and result in re-entry. For the woman who is successful at exiting the first time, this stage Is similar to turning point and creating an ex-role (Fuchs Ebaugh, 1988), natural progression (Sanders,2007), action and maintenance (Prochaska et al.,1992), and both break away and after the breakaway (Mansson& Hedin, 1999). For the woman who returns to commercial sex work, the next stage in the framework, re-entry, parallels Sanders' (2007) Reactionary transitions. Re-entry into commercial work may result, yet again, in a complete re-immersion in the commercial sex work. It is important to point out that after re-entry, two path ways in a woman's developmental experiences with the exit process are possible. On the other hand, a woman may recycle through each of the stages. Yet because of earlier exit attempts, she may engage in greater contemplation or deliberate preparation strategies, thereby making her next exit successful. On the other hand, re-entry might stimulate feelings of being "stuck" or "trapped" because of previous failed attempt (s). Therefore, despite conscious awareness of a need to change, she may lack the confidence, initiative, coping skills, or necessary resources to allow her to engage in deliberate preparation. These women present a significant challenge to service providers because, despite their desire to exit commercial sex work, their lack of behavioral action makes them invisible to formal support providers. The last stage been the final exit stage, most often occurs after a series of exiting and re-entering cycles. Based on available literature, it is unlikely that a



woman will reach final exit on her first exit attempt because, once one is immersed, the barriers (i.e. individual, relational, and societal factors) to exit success are extensive at each stage of the process.

### **2.2.5 Limitations**

The framework is based on women in street-level commercial sex work, Therefore, it is geared only towards these women and does not address the needs of women in different types of commercial work. More research is needed on all people in commercial sex work to gain better understanding of the strategies they use to enter and how they can exit commercial sex work.

### **2.3 Challenges of commercial sex workers.**

Commercial sex workers are often seen as “victims or villains”. A range of discourses, from some feminisms stated that, commercial sex workers are women who have no real choice since no woman could really choose sex work (Kempadoo & Mellon, 1998). Rather, commercial sex workers are seen to deserve sympathy, legal protection, or moral forgiveness because they are forced by poverty or the effects of previous abuse on their self-esteem or tricked by unscrupulous third parties into engaging in undignified, risk and damaging commercial sex activity. Kempadoo and Mellon (1998) stated that, commercial sex workers themselves sometimes confirm entering into the sex trade as a last financial resort,



### 2.3.1 Stigmatization

Goffman (1963/1986), noted in his classic work on the psychology of stigma that occupation is an ingredient that is closely related to person's social identity. Individuals are Stigmatized because they demonstrate socially undesirable attributes that taint, spoil or fault their identities. The meaning attached to stigmatized individual is that he or she is uncharacteristic, flawed, defective or handicapped and therefore, lesser to the people who Stigmatize against them. Besides, the stigmatized individual is seen to be "dangerous" to "be avoided" and thus leads to rejected by society. As a result, the stigmatized individual becomes marginalized, detested hence regarded as a social outcasts. Commercial sex work has been under-represented in psychological research and their subjective psychological experiences have been especially over looked.

The individuals identified as stigmatized group when identified increases the level of distress by the anticipated stigma and negative treatment they receive caused by the stereotypes of their identities. This shows that the predictors of psychological distress such as depression and anxiety strongly relates to a person being identified with a stigmatized group, these anticipations comes to life through experiencing over discrimination or endorsed stigma which can be as delicate as social avoidance and devaluing (Quinn and Earnshaw, 2013).



Hiding and lying about her commercial sex work identity, results in fatigue, Nervousness, pressure and unwanted psychological stress. On the other hand opening up on her commercial sex work would require her to be extra careful about whom she can interact with and what she can say. Continual vigilance with its concern about the possibility of being destinated generates anxiety and fear of exposure which greatly limits her social activities. Consequently, she

experiences significant stress and anxiety. Living in deception, or what Goffman (1963/1986) describes as “modes of double living” not only affects her emotionally, but also becomes an obstacle for establishing an on-stigmatized career path because commercial sex work is greatly stigmatized due to its illegality and counter-cultural nature. Disclosing a history of commercial sex worker is likely to put individuals with a history of sex work in a gravely disadvantaged position, which leads former commercial sex workers to hide their history and hence lie about their career (Tomura, 2009)

### **2.3.2 Hazards of working as a commercial sex worker**

Commercial sex workers together with other marginalized groups such as men who have sex with other men counterpart and injecting drug users are considered to be prone or at risk of contracting HIV and AIDs and other sexually transmitted infections. However, prevention campaigns aimed at sex workers does not only reduce HIV and AIDs transmissions that result from paid sex but, they can also play a pivotal role in restricting the overall spread of HIV in a country. Proof of This can be seen in countries such as Cambodia, the Dominican Republic, India and Thailand, where general reductions in the national HIV and AIDs prevalence

have been largely attributed to HIV and AIDs prevention initiatives aimed at commercial sex workers and their clients. It is difficult to talk about commercial sex workers as a single ‘group’, because those involved in the sex trade come from a diverse range of backgrounds and cultures. Consequently, the levels of risk that they face in the area of HIV and AIDs infections varies significantly depending on the country that they live in, whether they work on the street or from brothel and whether they have access to condoms and other





protective items (UNAIDS,2009) For instance a well to do commercial sex worker providing services to businessmen in London, may face a different level of risk Compared to a poor girl who is being coerced to sell sex in a red-light district in Thailand. There can equally be significant variations within countries. For instance, in India, HIV and AIDs prevalence is 4.6 percent among commercial sex workers in Mumbai compared to about 24 to 29 percent among brothel-based commercial sex workers in Maharashtra (Suryawanshi et al, 2013).

Despite this diversity among commercial sex workers, they often share common factors in their lives. Regardless of their background. Some of these factors increase their level of exposures to HIV and AIDs. In general, commercial sex workers have a comparatively high numbers of sexual partners. This in itself increases their likelihood of becoming infected with HIV whether they use condoms consistently and correctly or not. The reality however is that, commercial sex workers and their clients do not always use condoms. The 2010 UNAIDS global report found only 86 countries representing 90 percent of Commercial sex workers not using condoms and likely to be infected with HIV even if they use condoms with their last client, while 78 percent of commercial sex workers are reported to be using condoms (UNAIDS,2011). In some cases, commercial sex workers have no access to condoms, or are not aware of its importance and in other jurisdiction they are simply powerless in negotiating for

safer sex (using condom). Clients may refuse to pay for sex if they have to use condom and will rather resort to intimidation or violence to have unprotected sex. The other strategy may be to offer more money for unprotected sex, a proposal that can be so tempting to resist if the commercial sex worker in question is in desperate need of income.



Commercial sex workers have indicated that, when they ask clients to use a condom, they turn to offer double price to have sex without the condom. These women are trying so hard to provide for their children and families, So they take the offer” Ndeye Astou Diop, Aboya (an organization that works with HIV positive women in Senegal).The clients of sex workers are fuelling HIV transmission, because They act as a link between commercial sex workers and the general population. Many women do not report using condoms with their husbands and may therefore be at risk of HIV infection if their partners frequent commercial sex workers. This is particularly true for wives of migrant workers who travel long distance and spend extended periods of time away from home .High HIV prevalence among male clients of commercial sex workers has been detected in studies globally (Jin,2010)

### **2.3.3 Discrimination against commercial Sex Workers**

Throughout Africa, commercial sex workers experience extreme stigma, discrimination and consequent social marginalization which in turn deepen their vulnerability to HIV a acquisition and other sexual transmitted diseases (Izugbara, 2005). They face numerous setbacks in accessing health and social services including STI and HIV testing and treatment (Richter, 2010). These setbacks are further entrenched where commercial sex work is illegal as it is the case in many continent except Senegal. Criminalization of commercial sex work prevents commercial sex workers from reporting violence to the police or seeking legal resources after rape or Sexual assault (Gould, 2008). Indeed violence is a persistent theme in the lives of commercial sex workers across African region with long term consequences



including stress, depression and low self-esteem (Wojcicki and Malala,2001). A survey by Elmore-Meegan,et al, (2004) on commercial sex work in urban and rural Kenya, revealed a significant portion (35%) being raped and( 17%) physically assaulted by client.

Also, a study by Agha and Nachima (2004) in Namibian on commercial sex workers found that 72% of commercial sex workers had in one way or the other experienced physical abuse with client abuse accounting for (18%), intimate partners (46%) and the police (9%). There is increasing documentation of police harassment and brutality against commercial sex workers across Africa, which involves assault, unlawful arrest, rape,extortion and demands for sex or money as bribes.

#### **2.3.4 .Commercial Sex work and drugs**

Commercial sex work and drug use have long been synonymous with one another (Mathews,2008). It is normally debated whether or not drug addiction leads to commercial sex work or commercial sex work leads to drug addiction (Dalla, 2006). The relationship between commercial sex work and substance abuse is a complex one and is described in two ways. In the first place, drug use or abuse of drugs may lead to financial loss which will result finally in commercial sex work. On the other hand, financial hardship leads to commercial sex work which can then introduce commercial sex workers to drug use (Dalla,2006). Earlier research findings show that in the vast majority of cases, drug use precedes commercial sex work and more specifically sexual activities.



Opposing evidence however, indicates that drugs and stimulants are used as coping and adopting mechanisms as precursor to entry in to commercial sex work (Dalla, 2006; Young et al, 2000). Young et al (2000) found that drugs were used to cope with the psychological and emotional distress of sex work, which might increase sex workers dependency on drugs.

The pattern of drinking have independent effects on sexual decision-making and on condom negotiation skills and correct condom use is globally been accepted. Studies have shown that women with heavy episodic drinking patterns are more likely to use condoms inconsistently as well as incorrectly; experience sexual violence and acquire an STI including HIV. The links between substance abuse and commercial sex work may however be tedious to extricate, since in some cases the former may explain women's entry to the commercial sex industry itself. The use of alcohol among clients and commercial sex workers at the time of purchasing sex is common, even though only limited number of studies have adequately measured this association. Studies in three cities in South Africa found that alcohol and other drugs are commonly used by commercial sex workers to lower reticence, increase courage to approach clients and help them cope as well .A research in Nairobi, Kenya found that, as much as 35% of home based commercial sex workers consumed alcohol daily with higher percentages of commercial sex being club-based (53.3%) and bar based (60%). These instances suggest, the nature of commercial sex work environment itself may in part predicts the drinking patterns of commercial sex workers and accordingly their risk behavior. In some jurisdiction such as Zambia and Lusaka, commercial sex workers have been found to deliberately eschew alcohol while working in order to maintain control over themselves (Agha and ChuluNchima,2004).



### 2.3.5 Commercial Sex and Satisfaction

Literatures on commercial sex work provide conflicting findings regarding whether or not commercial sex workers were satisfied with the work they do or not. According to Some findings, commercial sex workers have reported being happy with their work and are not ready or willing to leave the profession. Other findings report them feeling trapped and unable to leave the industry. Results from these studies suggest that, there is little difference in their satisfaction as commercial sex workers and other women working in other industry. This however appeared to be insufficiently researched into (O'Neill, 2001).

The connection between level of commercial sex worker and her job satisfaction is influenced by a number of factors such as the environment in which commercial sex work takes place. Street level commercial sex workers are more prone to victimization and abuse. However, commercial sex workers in brothels report being less vulnerable to physical and sexual abuse but are often under the control of managers of the brothel. A reasonable number of brothel based commercial sex workers report that, they have to share half of their pay with the owners of the brothel who dictates their condition of work including working hours and punish them when they go wrong or against their rules. The ability of commercial sex workers to negotiate the factors in their working environment determines largely commercial sex workers level of job satisfaction (Fick, 2005).

A study by Baral, et al, 2013 found more physical violence in street commercial sex work compared to brothel commercial sex trade in South Africa. The study however found no difference in the incidences of post-traumatic stress disorders (PTSD) in these two types of



commercial sex trade, suggesting that the emotional experience of commercial sex work is essentially traumatizing regardless of its indoor or outdoor location. Boyyer, Chapman, and Marshall (1993) suggested that women in indoor commercial sex work such as strip clubs, massage brothels, and pornography had less amount of control of the conditions of their lives and probably faced greater risks of exploitation, physical harm and enslavement far more than commercial sex workers on the street. Some commercial sex workers have said that they feel safer in undertaking the business on the street as compared to the brothels in the United States where they were not allowed to refuse customers. They also explained that on the street, they could reject customers who appeared dangerous. On the street according to them, friends could make a show of writing down a customer car license plate number, which they considered a deterrent to customer violence. A customer could easily be traced using such methods, whereas a brothel customer's identity would likely be protected by brothel managers making it difficult to prosecute him for violent. Commercial sex workers in brothel base or clubs are not encouraged to complain about violence to owners or pimps. If they do, sometimes they are fired for these protests even when they are being raped. Sexual abuse and violence is one of commercial sex workers' major occupational hazards. But again, commercial sex workers face vulnerability to sexual violence from non-clients, including the police, sex workers can face violence and abuse from clients if they try to insist on condom use (Karim et al 2014). This brings about questions regarding clients' equal responsibility for practicing safer sex in their operations. Clients of commercial sex workers may serve as transmitters of HIV, to the sex worker or to the clients' other sexual partners. Given that transmission of HIV is more likely from male to female



partners than the other way round, commercial workers, especially female sex workers are more at risk of contracting sexually transmitted infection (STI's) including HIV and AIDS, than are their clients. In almost all cases, regardless of whether the sex worker is male or female it is the client who should be wearing condom in the process. Obviously, there is a need for interventions aimed at clients. Because, clients represents an extremely hard to reach population especially when commercial sex work is criminalized (Distiller, 2001).

### **2.3.6 HIV/AIDS and Association with Commercial Sex Work**

The prevalence of HIV among commercial sex workers is at 13%, the Ashanti region mirrors the national median and has the second highest commercial sex workers prevalence following Greater Accra (165%). Commercial sex workers have been seen increasingly as a population at high risk of vulnerability to HIV infections due to their biological and behavioral risk factors. A study by Asamoah-Adu et al, 2001 found that one fourth of roamers, whose operation is moving from bars, hotels and on streets and one half of seaters, who also work from home, acquired HIV within the first six months of sex work.

In 2010, over two hundred and twenty five thousand (225,000) adults in Ghana were reported HIV positive with an overall prevalence of 1.3%. The northern region has the fifth highest prevalence with 3.1% . since the overall prevalence is over 1%, the epidemic is considered to be generalized but it is also 27 concentrated within high risk populations. But among commercial sex workers, HIV prevalence in 2011 was 12.9% compared with 2.1% among pregnant women and 2.2% in the general female population. However, knowledge of condom use and lubricants



as a form of HIV prevention was relatively high at 81% in both groups, but HIV testing was much higher among seaters at 70.7% compared with roamers 55% (Asamoah-Adu, 2001).

### **2.3.7 Reasons motivating the Use and Non-use of Condom among commercial Sex Workers**

Many reasons are responsible for condom use among commercial sex workers. An increase in the use of condom among commercial sex workers was observed among sex workers in organizations where condom use policy existed compared with commercial sex workers in other establishments without such policies in the Philippines (Pena, Tiglao and Liu, Morisky, 2002)

Again, a study in the Republic of China on environmental support measured by commercial sex workers perception of condom accessibility, managerial and social support of condom use in commercial sex outfits has been found as an important determinant of HIV prevention behaviors among organized- based commercial sex workers (Liu and Li, 2008). There exist mixed findings on alcohol intake and condom use. As some studies reported a high propensity of commercial sex workers not using condom if alcohol were taken prior to the sexual act, others think there is no relationship between alcohol intake and use of condom.

Morrison et al (2006) in his study examined the quantity of condom use when sexual intercourse was preceded by alcohol use and when it could not be established that alcohol intake was not associated with people who engage in sexual risk. But another study reported that commercial workers with heavy periodic drinking patterns are more likely to use condoms inconsistently and





incorrectly, experience violence and acquire sexual transmitted infection, including HIV( Sam and Kapiga, 2008).

About half of commercial sex workers in Pretoria South Africa, reported to be too intoxicated by recreational drugs to the extent that, it became so difficult for them to negotiate for condom use during sex (Parry and Morojele, 2006)

Self efficacy is the belief that the individual is able or capable of performing a certain behavior given a situation. It refers to a cognitive evaluation by which one integrates knowledge, past experience, emotional states in other to form a decision about whether or not the individual can perform the behavior (Bandura, 1986). Self-efficacy forms part of the constructs in the health belief model and have been assessed in respect to condom use, it has been reported to increase condom use among commercial sex workers around the world (Oladosu, 2001).

### **2.3.8 Socioeconomic and Occupational Context of Commercial Sex Work**

It is established that most commercial sex activities takes place in unhealthy and unregulated working environment, with minimal or no promotion of safe sex, limited control over clients behavior and encouragement of a high client turnover among commercial sex workers (Oyefara, 2007). Social structures appeared to be another socioeconomic factor that affects the work of commercial sex workers in their operations. This refers to the laws or policies that requires or prohibits behavior. Social structures provide guidelines to limit high risk behaviors and it can also provide a framework for discouraging high risk and encouraging low risk behaviors (Scribner and Farley, 2000). Commercial sex workers operating in bars/brothels do have a



different social structure compared with their counterparts on the street. Organized based commercial sex workers often work under conditions that promote condom use between the commercial sex workers and their clients (Morisky et al., 2002).

### **2.3.9 Prevalence of Condom Use among Commercial Sex Workers**

Prevalence of condom use among commercial sex workers is vital in the control and prevention of sexual transmitted infections which includes HIV and AIDS as commercial sex workers and their customers represents an important source of the transmission of these infectious diseases. A study conducted by Norman, in Tanzania and Kenya reported that 19% of commercial sex workers are consistent in the use condom with their most recent partners. It emerged that factors connected with consistent use of condom were relation to most recent partner, study site, difficulty in requesting the use of condom and making the actual request for its use (Norman, 2003). However, a study conducted in Ghana using a total of four hundred and fifty commercial sex workers in Accra, Kumasi and Techiman demonstrate that, education on the use of condom was very low representing 14%. But the consistent use of it with their clients was comparatively high representing 49.6%. In absolute terms, two hundred and seventy-seven (277) of the study respondents did not use condoms all the time (Risser and Kessie, 2007).



### **2.4. Reasons for non-condom use**

A lot of factors account for the non-use of condoms by commercial sex workers. However, the refusal by clients remains the most significant reason for the non-use of condom (Risser and Kessie, 2007). According to (Adu-Oppong et al, 2007), commercial sex workers cited client

refusal (73%) and brutality (43%) as some of the reasons for non-use of condoms. Close to three quarters of studies on commercial workers revealed having had sex with a customer who refused their request for use of condom and other studies revealed that their co-sex workers would turn down a customer who refused to use condom in the process (Adu et al, 2007). It is believed that condom –use is influenced “pimps” or controllers in the commercial sex industry. In the sex industry, controllers refer to people who employ the women and young girls to practice paid sex business. Aklilu et al, 2001, a study conducted in Ethiopia found that 7% of non-use of condom was basically an order from managers of brothel based. This practice according to Umar et al, 2001 is that, managers accept or directs their employees to have sex with clients without condoms only when clients are more than willing to offer more money. Again, in Kinshasa, Merson et al, 2006 established that about a quarter of commercial sex workers do have sex without condom because of extra income. Non-use of condoms in commercial sex trade is also attributable to the concept of emotional buddies resulting in commercial sex workers perceiving some of their customers as clean and others as dirty. Customers who seems regular in the commercial sex business are equally often regarded by commercial sex workers as being clean, healthy and safe to have sex without condom with compared with those who comes to purchase sex once in a while (Varga, 2001). A study by Wojcicki et al 2001, reported that pleasure accounts for non-use of condom by commercial sex workers especially with non-commercial partners. Condom use is often proffered by commercial sex workers with non-regular partners so as to create a barricade to intimacy with clients and to take control of themselves as well as their customers (Sanders, 2002).



The Health Believe Model (HBM), indicates that, individuals are more likely to adopt healthy behaviors upon perceiving themselves to be susceptible to illness and perceive the consequences of such an infection to be severe, believe also that an effective solution to the infection exist and that, they can overcome the barriers in adopting to the behavior that is effective (Wilson et al 1992). Studies in the past established that perceived benefits are inversely associated to the use of condoms and that having knowledge in sexual transmitted infections or even HIV, skills in condom use and susceptibility or severity do not have direct effect on the use of condoms. The studies found that, effects on the use of condoms were mediated by perceived benefits as well as self-efficacy. The studies found no association between perceived benefit and sex without condom use (Stanton, Fang, Kamali, Li, Wang, 2009).

## **2.5 Health conditions commercial sex workers experienced**

Sexual transmitted infections spread mainly through direct contact where the vagina, anal and oral sex are involved. Predominantly, the resulting health conditions caused by these direct contacts includes but not limited to; genital herpes, genital warts, human immunodeficiency virus (HIV), gonorrhea, Chlamydia, hepatitis B, syphilis. These infections can vertically be transmitted, that is, mother to child during pregnancy or delivery, tissue transfer and blood transfusion (Hsieh et al, 2014). It is establish globally that, sexual transmitted infections are the key to socioeconomic and reproductive health impediments. Problems' arising from improper treatment of sexual transmitted infections includes; adverse outcomes such as abortions, pelvic inflammation diseases, ectopic pregnancies, stillbirths, infertility, lower abdominal pain and cervical cancer (Samuels et al, 2012). Sexual transmitted infections and its management which appeared syndromic in low and middle



income countries such Ghana is usually manifested of regular sets of signs and symptoms with features that easily direct its treatment especially in the absence of laboratory investigations ( Hseih et al, 2014). Diagnosing a specific infection by a health professional on the basis of observed signs and symptoms is a method that relies exclusively on clinical algorithms (Hseih et al, 2014). The susceptibility of women to HIV increases through sexual transmitted diseases (Samuels et al, 2012). Cervical cancer is among the dangerous cancers that affect women and is mostly increased with unsafe sex with multiple sexual partners. This is mostly mistaken for sexual transmitted infections. The increasing health consequences and the increased risk of HIV is vital for effective diagnosis and treatment of sexual transmitted infection (Samuels et al, 2012). Sexual transmitted infections such as trachomatis, Chlamydia and Nesseria gonorrhoea are contracted with no symptoms (Odukoya et al, 2013). In women for instance, it takes a period of time for signs and symptoms to manifest and most women may not even have the knowledge to suspect they have contracted sexual transmitted disease and for that matter may never seek treatment. This therefore makes treatment of sexual transmitted infection in women less successful.

Okereke, 2010, in Nigeria, found that majority of women in commercial sex trade who contract sexual transmitted infections do not seek treatment in health care facilities but rather purchase over the counter drugs for self-treatment. Another study by Sekoni et al, 2013 revealed that, improper treatment of sexual transmitted infections among commercial sex workers may result in the problem of antibiotic resistance in the near future to some of these sexual transmitted infections such as the epidemic of multiple drug resistant strains of Neisseria gonorrhoea. It is essential therefore, to effectively identify and treat any new customer of a sex worker who has sexual



transmitted infection regardless of manifestation of signs and symptoms or not. Even though, it is difficult to undertake contact tracing in a situation where the sexual transmitted infection have been contracted through commercial sex with unknown customer (Samuels et al, 2012). Commercial sex workers are exposed to high risk of HIV infection especially with multiple clients where they have limited power to negotiate safe sex coupled with poor health seeking behavior and high burden of sexual transmitted infections (Sekoni et al, 2013). To add to the above, commercial sex workers are confronted with occupational health and safety risk. For example, commercial sex workers are normally exposed to HIV, drug and alcohol use, urogenital problems, physical violence and rape together with musculoskeletal injuries and some cases death (Scorgie et al, 2013). The use of contraceptives is not often reliable as commercial workers in most cases do not have the power to negotiate its usage and for that reason, unwanted pregnancies and termination of pregnancies are common as well (Sutherland et al, 2011). Scorgie et al, 2013 found in his study that, 86% of commercial sex workers had engaged in at least one abortion case. The study further found that, commercial sex workers lack knowledge on how to prevent themselves from contracting sexual transmitted infections and how to prevent its spread. Even if they do have the knowledge, the situation in which they operate gives them little power to exercise this knowledge. Clients of commercial sex workers in most cases, coerced them to have sex without using condoms or offer them huge sums of money for sex without condom (Scorgie et al, 2013). Commercial sex workers in low and middle income countries perceive violence to be superior and stronger hazard than HIV (Scorgie et al, 2013). This indicates that commercial sex workers



undergo series of hazardous conditions in their day to day activities (Scorgie et al, 2013). Generally, studies on commercial sex work in low and middle income countries focused mainly on sex workers getting their clients infected and client's partners. Virtually, commercial sex workers are regarded as vectors of infectious diseases who are transmitters of sexual transmitted infection epidemics rather than on their own needs of health services and their potential to serve as strategic safe-sex education (UNAIDS 2011). According to the World Health Organization, (2012), little is known concerning the daily incidences of commercial sex workers in their quest to access health services in the wider sense and how often such access is being compromised. This information can be used to improve the strategy of services for commercial sex workers. Occupational health problems are among the health conditions experienced by commercial sex workers. It also includes exposure to sexual transmitted infections and the need for proper diagnosis, treatment and follow-ups. In Kampala, it is evident in a study which reported lower abdominal pain as a sign of untreated sexual transmitted infections or other sexual and reproductive health problems (Scorgie et al, 2013). Also, common to commercial sex workers are the experience of physical, sexual and verbal violence. However, violence has been regarded as normal in many studies involving commercial sex workers, but physical violence is seen as the greatest risk affecting commercial sex workers (Chang and Weng, 2015).



Current studies found high levels of violence among commercial sex workers. An example is a study by Holly et al, 2014 in the United Kingdom which reveals that, two-thirds of commercial sex workers in the sex industry experience violence. Also, police harassment and high levels of

violence was equally found in different studies to affect a good number of commercial sex workers (Chang and Weng, 2015). Commercial sex workers mostly experience trauma as a result of poor physical health from physical violence and deprived mental health (Exclusion, 2014). Violence against commercial sex workers at its peak, can result in death, even though, interest in human sexual behavior has been enhanced over the years and factors driving it has better tendency to reduce the risk of epidemics of sexual transmitted infections (Agius et al, 2010). Commercial sex workers according to a study by Dubois-Arber et al, 2010 are compelled to partake in preventive behaviors which have the potential of successfully telling clients to withdraw from conditions that do not favor preventive behaviors and proper use of contraceptive methods. In low and middle income countries like Ghana, socio-cultural reasons and fear of violence from clients can prevent commercial sex workers from negotiating for safe sex.

#### **2.4 Summary of Literature Review**

The exercise of reviewing the research topic in relation to what is known already or has been researched into and documented by authors is one that has been beneficial and gives room for a much broader view point of the topic under consideration. The review revealed that, commercial sex workers suffer from stigmatization and stereotype and which eventually leads to negative treatment by the society. Following the various literature reviewed, it is clear that, in order to appreciate commercial sex workers, there is the need to take into account both situational and cognitive process. In other words one must not seek explanation of commercial sex work only from the personality structure of the commercial sex worker but also the structure of the community or interpersonal processes which help define deviant role. It further revealed that most





of the young women engaged in commercial sex work lack education or dropped out of school early which marked a revolving point in their lives. The findings from the literature again show that most of the commercial sex workers have a high knowledge about HIV/AIDS and STI and how to avoid it. Also a commercial sex worker will ordinarily insist on condom use under normal circumstances and if not physically coerced on unprotected sex. Correlation was built between commercial sex work and drugs in order to master courage to approach clients and also help them to cope. For long term clients, there is always a high tendency to have sexual intercourse with them without a condom, thereby predisposing themselves Or their clients to health risk. Finally, violence was found to be widely spread and a common feature in commercial sex work. Following the findings of the reviewed literatures, the next line of action is to critically look at the area of study to determine the real situation on the ground in the light of what is Presently known from literature. This is important and necessary to find out whether the findings deviate from what pertains in other areas or concurred with happenings in other areas, so as the needed actions or recommendations will be made to inform decision or policy intervention regarding commercial sex workers within the Tamale metropolis where the study is carried out.



## CHAPTER THREE

### RESEARCH METHODOLOGY

#### 3.0 Introduction

This chapter discusses the methodology of the study in two thematic sections; section A and B. Section A of the chapter describes the study area while section B gives detailed description of the methodology employed in conducting the study. Specifically, it explains the study design, target population, sampling procedure, sampling size, source of data, data collection method and analysis.

#### 3.1 Study Area

Tamale Metropolitan Assembly was established by legislative instrument (L.I. 2068). At present, it is one of the six Metropolitan Assemblies in the country and the only Metropolis in the five regions in Northern Ghana, namely: Upper East, Upper West, North-East, Savannah and Northern regions (GSS, 2019). In the Northern Region, Tamale functions as the metropolitan capital and Regional capital.

##### 3.1.1 Location and Size

Tamale Metropolis is one of the 14 districts in the Northern Region. It is located in the central part of the Region and shares boundaries with the Sagnarigu District to the North-West, Mion District to the East, East Gonja to the South and Central Gonja to the South West. Tamale is strategically located in the Northern Region and by its location, the Metropolis has a market potential for local goods from the agricultural and commercial sectors from the other districts in the region and the



southern part of Ghana and stands to gain in trade from some neighboring West African countries such as Burkina Faso, Niger, Mali and Togo. The Metropolis has a total estimated land size of 646.9sqkm (PHC, 2010). Geographically, the Metropolis lies between latitude 9°16 and 9° 34 North and longitudes 0° 36 and 0° 57 west. There are a total of 116 communities in the Metropolis of which 41 (35%) are urban communities, 15 (13%) being peri-urban and 60 (52%) of them being rural in nature. The rural parts of Tamale are the areas where land for agricultural activities is available to a large extent and serve as the food basket for the Metropolis. However these communities still lack basic social and economic infrastructure such as good road network, school blocks, hospitals, market and recreational centers.

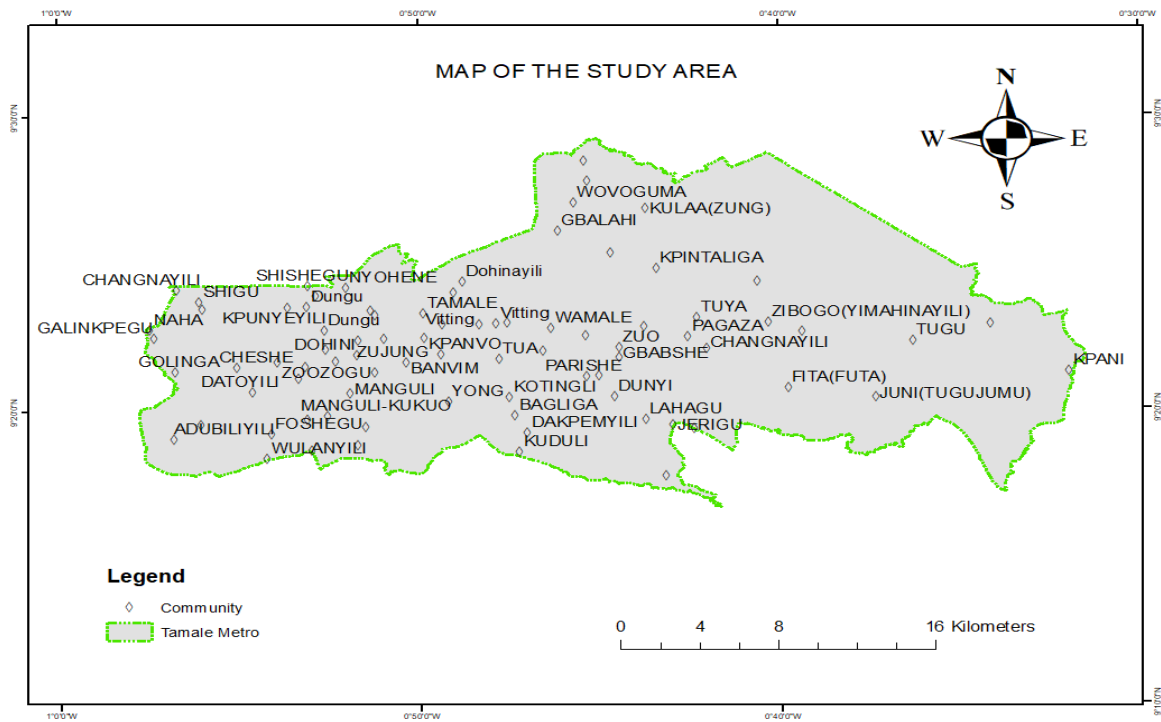
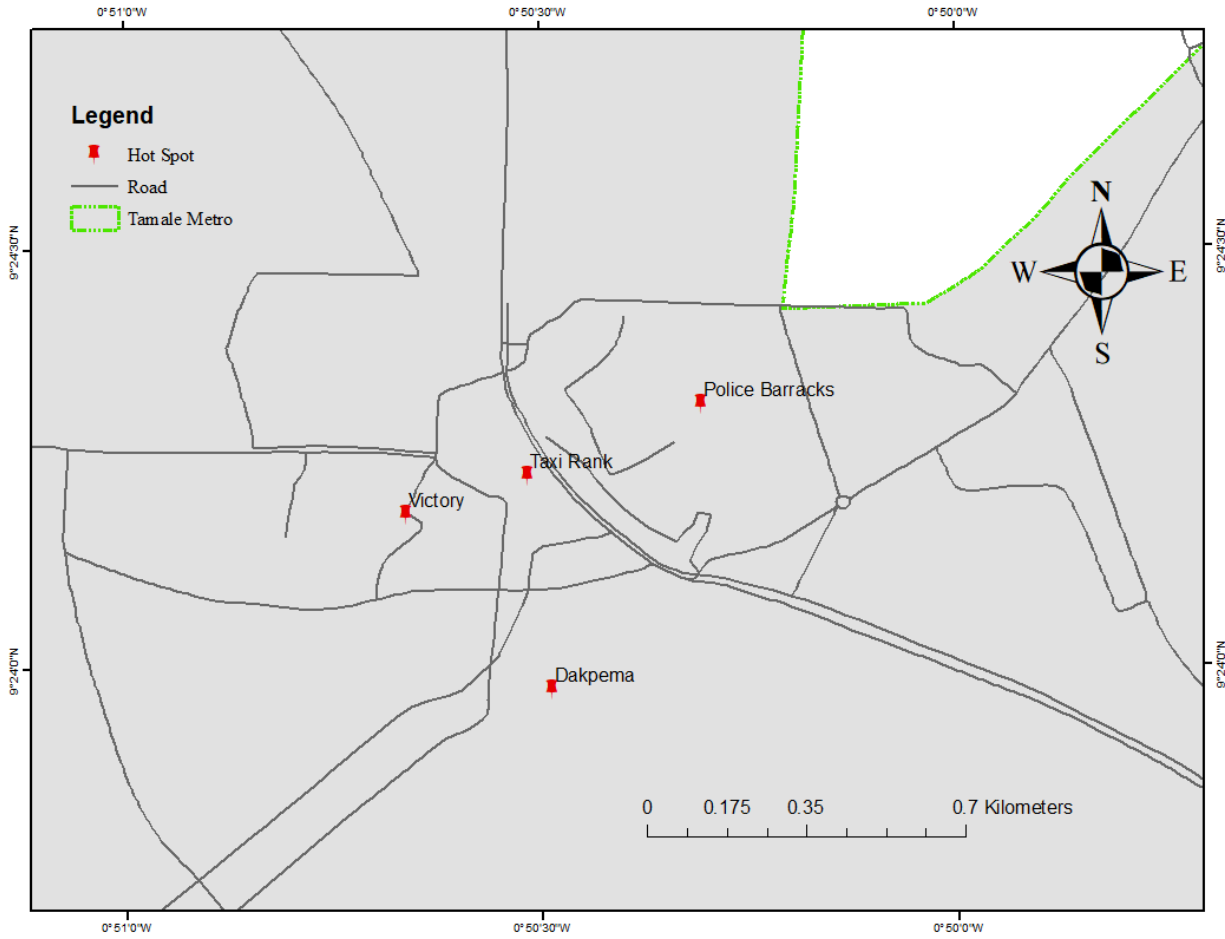


Figure 3.1.2 Map of the study area

Source: GSS, 2010



**Figure3.1.3 Map of Tamale Metropolis showing the locations of study participants**

*Source:* Planning unit of the Tamale Metropolis, 2018



### 3.1.4 Relief and Climate

Generally, the Metropolis is located about 180 meters above sea level with some few isolated hills. This geographical land nature is suitable for the construction of roads, expansion of electricity and general building works. The Metropolis receives only one single rainfall in a year. This implies that for effective agricultural production the area should consider irrigational facilities that would enhance all year round activities. Daily temperature in the Metropolis varies from season to season. Whiles in the rainy season there is high humidity, slight sunshine with heavy thunder storms, the dry season is characterized by dry Harmattan winds from November-February and high sunshine from March-May. This climatic feature enables farmers in the area to preserve their cereals and limiting post-harvest lost. Another potential area that is left untapped is the artificial parks and gardens that could take the advantage of the high sun rays to build swimming pools, parks for both children and adults to relax during the excessive sunshine period. By this, most families would be able to enjoy good family reunion during the weekends and holiday periods while the Assembly would make the needed revenue for the development of the area.

### 3.1.5 Drainage

The Metropolis is poorly endowed with water bodies. This is attributed to the low underground water table. The only natural water systems are a few seasonal streams which have water during the rainy season and dries up during the dry season. All these streams have their headwaters from Tamale which is situated on a higher ground. Aside this, some artificial dams and dug-outs have been constructed either by the individual community members or by Non-Governmental




organizations in the Metropolis. Two of such dams are the Builpela and Lamashegu dams. These dug-outs serve as water sources for human beings and animals. Despite this poor drainage situation, the Metropolis still has the potential for irrigation schemes. For instance the Pagazaa stream has potential for agricultural production if it could be dammed for irrigation purposes.

### 3.1.6 Demographic Features

Historically, the Northern Regions of the country had vast land cover with smaller population sizes. This area begun experiencing high population growth after people migrated from other areas to settle such as the Mampurisi, Komkobas and other tribes. From the 2010 Population and housing censuses (PHC), the population of Tamale Metropolis is about 223,252 people, with males accounting for about 111,109 (49.7%) and females about 112,143 (50.2%). This implies that there are more females than males in the Metropolis. The age structure of the population of a high fertility country such as Ghana is basically shaped by the effect of mortality. As it is the case with the Metropolis the structure of the population indicates a broad base that gradually tapers off with increasing age due to death

### 3.1.7 Population Size



Years	2010	2011	2012	2013
Population size	223,252	293,881	371,357	414,584

Source: GSS, 2012

### 3.1.8 Type of Dwelling

The major type of dwellings in the Metropolis has not changed since the last census period. There are however four main types of dwelling units in the Metropolis. These are the separate isolated houses (Self Contained), the semi-detached houses, separate room (s) within a compound usually with common cooking and toilet facilities and several huts or buildings within a common compound. These dwellings are identical of certain communities in the Metropolis. The self-contained buildings are associated with the professional class of teachers, nurses and others in the banking and NGOs communities. Majority of population are also living in what is termed the compound house structures where toilet, bath and kitchen structures are shared by two or more families within the compound. These are privately constructed for rent by the general population. There is however low government affordable housing units in the Metropolis. The few are located at Choggu, Bagabaga and Kalpohini. The Metropolis currently has a deficit in the housing stock because of government inability to provide affordable houses for the formal sector. The individual private landlords therefore take this advantage to extort huge monies from tenants. There is a high market for real affordable housing for the high population in the formal sector. There is therefore the need for government and private intervention in the provision of housing units to meet the demand of the growing population in the Metropolis. The huts roofed with thatch buildings are commonly used in the rural communities in the Metropolis. The age dependency ratio for the Metropolis is about 70 dependents (children and the aged) for every 100 people working. This means that 100 persons in the active age group are being depended on by 70 persons in the dependent population group. The working population group is more than the combined child and



aged population of the Metropolis. The dependency ratio for male in the Metropolis is 70.2%, while that of female is 68.5% indicating that there are more male dependents than females in the Metropolis. In the rural area, the dependency ratio is 86.5% is higher than the urban area 65.7%, meaning that there is more dependent population in rural areas than the urban centers.

### **3.2 Research Design**

The study employed purely qualitative methods that involved the collection of data within the same time frame. The study design focused on the interpretation of phenomena in its natural setting to make sense in terms of the meanings people bring to the setting (Creswell, 2007). Creswell (2007) suggested in a case of phenomenology, the best design is qualitative survey. The study therefore adopted the qualitative survey since the issue in view is phenomenology and interested in exploring the motivation and challenges of commercial sex workers in the Tamale metropolis. In phenomenology, a description of the essence of the experience of the phenomenon becomes phenomenology. In this study, the phenomenon is the motivation as well as the challenges of this sub-population and therefore the essence of commercial sex workers experienced will become the phenomenology.

### **3.3 Origins of Phenomenology**

The Oxford English Dictionary notes the term phenomenology was mentioned in the early 1797 in the Encyclopedia Britannica entry on philosophy. Early twentieth century phenomenological research continued to have strong philosophical underpinnings, drawing from philosophy,





psychology and education, based on the writings of the German mathematician Edmund Husserl, 1859-1938 (Creswell, 2007). In 2015 the Oxford English Dictionary defines phenomenology as: A method or procedure originally developed by German mathematician Edmund Husserl (1859-1938), which involves the setting aside of presuppositions about a phenomenon as an empirical object and about the mental acts concerned with experiencing it, in order to achieve an intuition of its pure essence.

Strauss and Corbin (1998) define methodology as a way of thinking about and studying social reality, while method is a set of procedures and techniques for gathering and analyzing data.

A phenomenological inquiry “is an attempt to deal with inner experience approved in everyday life” (Merriam, 2002). This method was chosen to help examine the motivation and challenges of commercial sex workers as it relate to a phenomenon or notable collective occurrence (Creswell, 2009). The phenomenon of interest was to investigate the motivation and challenges of commercial sex workers in the Tamale metropolis .The modern phenomenological method is credited to German philosopher and mathematician, Edmund Husserl (1859-1938) whose work evolved during the ideological turmoil following World War I. Husserl advocated in his research that, objects exist dependently and that observations and experiences involving these objects are reliable suggesting individual’s perceptions are accurate representations of their consciousness(Fouche,

1993). The phenomenological foundation of this study “aims at attaining a profound understanding of the nature or meaning of our daily experiences (Crotty, 1998). Other researchers dedicated to furthering this method who appear in the literature include Martin Heidegger, Alfred Schultz, Jean-Paul Sartre, and Maurice Merleau-Ponty. Husserl’s work titled *Logical Investigations* was



republished in 1970 and is considered the primary doctrine for the movement (Crotty, 1998). Vandenberg (1997) suggests the effort of Sartre and Merleau-Ponty significantly popularized Husserl's earlier influence. Phenomenology is used extensively in research emanating from sociology, psychology, health sciences and education (Creswell, 1998). Through this, the method was interested in showing how complex meanings are built out of simple units of direct experience (Merriam, 2002), the researcher chose the method (phenomenology) to help lead a comprehensive account of experiences from which "general or universal meanings are derived" (Creswell, 1998). After, the researcher determined a phenomenological approach was appropriate for this study, the following suggestions as outlined by Creswell (2007) and derived from Moustakas (1994) were included in the design and served as a procedural map for the researcher's project which investigates the motivation and challenges of commercial sex workers in the Tamale metropolis

- ❖ A phenomenon of interest to study is identified
- ❖ The researcher recognizes and specifies the broad philosophical assumptions of phenomenology
- ❖ Data are collected from the individuals who have experienced the phenomenon
- ❖ The participants are asked two broad, general questions (Moustakas, 1994)
- ❖ What motivates you in terms of the phenomenon? What challenges are you facing in relation to the phenomenon?
- ❖ Data analysis occurs through organized "clusters of meaning" and from these clusters evolves both textural and structural descriptions of the motivation and challenges which



leads to a composite description that presents the “essence” of the phenomenon (Creswell 2007)

### 3.3 Philosophical Tenets and worldview

The constructivist epistemology enabled the researcher to navigate this research project with an open-minded approach to discovery. Broido and Manning (2002) suggest the interactive relationship between constructivist researcher and respondent is subjective and guiding where multiple realities may emerge creating complexity when not easily measured. Even further, the context specific interpretation is influenced by the values of all involved. To best investigate these interpretive worldviews one needs to actively engage respondents in the constructivist foundations of shared history, language and actions (Locke, 2001). My research sought to investigate the phenomenon surrounding what really motivate commercial sex workers to engage in the trade and the challenges they are confronted with in the trade in the Tamale metropolis.

As previously suggested, the research related philosophical persuasions and helped the researcher construct the framework in which the study is designed (Broid and Manning, 2002; Crotty, 1998).

This investigation is founded on pragmatic undertones with belief that meaning is created through action and interaction. As the study is aligned to pragmatism, the research assumed social knowledge is an accumulation of experiences that combine to form a foundation for the continued evolution of thought and societal trajectory (Corbin and Strauss, 2008). The researcher believed truth is what individuals recognize as a current worldview and new knowledge becomes useful in



changing and further developing what was previously recognized as reality. The goal of the researcher was to get to the essence of what motivating factors push women into the sex trade in Tamale Metropolis as well as their challenges. The voice of the respondents helped to navigate this truth.

Creswell (2007) indicated, scholars' paradigms or worldviews are part of the discussion of their research. This study was guided by a constructivist paradigm because it relied as much as possible on the participants' unique views of their motivation as well as challenges (Creswell, 2007; Hatch 2002). In a constructivist worldview the researcher acknowledges the background and how it shapes the interpretation of the study as the study progressed. Personal knowledge and self-awareness is continuously developed as suggested by (Moustak, 1994).

### 3.4 Participants

Careful attention to selecting participants for this study was important. Creswell(1994), states the idea of qualitative research is to purposefully select informant that will best answer the research question, The study used purposive sampling. It was not necessary to narrow the sample through maximum variation sampling as the number of respondents was not too large. For this study, fifty (50) participants were obtained through an individual who provides security for the participants; these individuals were the gate keepers of the respondents of the study. The study engaged willing participants from the streets of the central business district (CBD) of the metropolis who were directly engaged in the commercial sex trade referred to as the "hotpots".



### 3.5 Sampling Method

In conducting this study, purposive and snow-balling sampling techniques were adopted. In stage one a cluster sampling technique was used to cluster the operational areas of the respondents in various zones in the metropolis based on where they work at night. Stage two was the selection of their sleeping and resting environment through purposive sampling. Their sleeping environment made it possible to have access to them and to have ample time for the interviews since most of them were not willing to talk to the researcher at night due to time constrain. This third stage was the selection of individual respondents using purposive sampling. In all a total of fifty (50) commercial sex workers were purposefully selected at their operational areas from the population of commercial sex workers in Tamale Metropolis. This number was arrived at, from the point of saturation. The researcher through the assistance of a guard to these commercial sex workers who serves as gate keeper visited them in the night to request for their individual participation in an interview and explain to them the nature and essence of the study. The main criterion for the selection was the identification of their status as sex workers. In this case commercial sex workers who operate on the streets of Tamale Metropolis. The respondents were further selected using the snow-balling sampling method. This was done by asking a respondent if she know another person who at the time of the study was into commercial sex work.



According to Creswell (2002), Fraenkel and Wallen (2000) and Koul (2003), population is the complete set of individuals (subjects and or events) which have similar observable characteristics which are of interest to the researcher. Hummerl Brunner (1991), also stated a population to be the

collection of specified group of human or non-human entities in which the researcher is interested. Participants in this study were drawn mainly from commercial sex workers who operate in the Tamale Metropolis.

Patton (2002) suggests that the logic of qualitative sampling is to obtain thick rich accounts of a phenomenon, rather than to seek to include a large representative sample. Mason (1996) cautioned researchers to work with small samples of people nested in their context and studied in-depth. The qualitative samples tend to be purposive rather than random. However, in the opinion of Creswell (2002), Fraenkel and Wallen (2000) and Koul (2003), the yardstick for the inclusion of a unit into a study must be based on the characteristics of participants who are eligible to partake in the study. According to Creswell (2003), the idea behind qualitative research is to purposefully select participants or sites that will best help the researcher understand the problem and the research question. This does not necessarily suggest random sampling or selection of a large number of participants and sites. Purposeful sampling allows the researcher to seek out those participants with the most direct experience with the phenomenon under investigation in order to elicit the most pertinent and information-rich data (Creswell, 2007; Hatch, 2002; Padgett, 2004). The purposive sampling, according to Creswell (2002), is a qualitative sampling procedure in which researchers consciously select participants or sites to learn about or understand the central phenomenon. The aim of purposive sampling is not necessarily to get the average opinion that would correspond with the average opinion of the population of interest, but the aim is to tap the special experience and competence of the people or events selected; their categories, properties and dimensions.



The areas were in two sections, namely their operational areas thus where they work at night and the second aspect deals with their places of residency, where they sleep during the day after working at night. The following areas were the operational areas of the commercial sex workers in the Metropolis: Central taxi rank, Dakpema palace round about, Victory cinema and Police barracks junction. All these areas are located in the Central Business District (CBD) of the metropolis. The under listed communities were within the sub-urban area of the Metropolis were the commercial sex workers were noted to have rented rooms for residential purposes. These includes; Lamashagu ,Sawalni, Bilpella, Bamvim and Lamakaraa. Contacting them at their place of resident was vital because it was there the researcher could have ample time to discuss relevant issues with the respondents.

### **3.6 Instrument for Data Collection**

The data collection instrument used in this study was mainly the interview guide and a tape recorder. The interview guide is a data collection instrument that enables the researcher to have a face-face encounter with respondents in order to find answers to a research problem. One of the conditions for the use of interviews is that the respondents must be prepared to talk. It is important



to note however that, during the interview some questions arose from the field discussion, especially when the questions are open ended and are semi-structured (Judd, Smith & Kidder, 1991). Again, Yin (1994) posited that one of the best sources of information in research is through the interview guide due to its flexibility. He further stated that in studies about human affairs,

interviews must constitute an essential source of data collection. It is therefore important to consider interviews in research because through interviews that human affairs can be “reported and interpreted through the eyes of specific interviewees” who are well –informed and therefore can provide important insights into situations (Akplu, 1998).

### **3.6.1 Data Sources**

The study used both primary and secondary sources of data.

### **3.6.2 Primary source of data**

The primary source of data was obtained from the field with the help of interview guide made up of open-ended and closed-ended questions and administered through face –to- face interaction with respondents. Interview allows the researcher to access various stories and narratives through which people describe their world (Creswell 2009). The participants were allowed to freely recount what motivates them to enter into sex trade as well as the challenges they face in their daily operations.



The benefit of using interviews was to enable the researcher gather rich data in words of respondents. It was also adopted for flexibility purposes. It however comes with various challenges such as time consuming, it also relied solely on verbal statement but with audio version, the researcher is covered since it can be listened to severally for transcription purposes. That notwithstanding, people may lie or exaggerate and they may be discrepancies between what they say and what they actually do.



### 3.6.3 Secondary source of data

The secondary source of data was obtained from the existing literature on the research topic. This was obtained from journals, textbooks as well as annual reports. But the study did not analyze secondary data.

### 3.7 Data Analysis

Data was organized and prepared for transcription. The audio recording and transcripts were stored on the personal laptop of the researcher with a back-up on the researcher's home workstation, both password protected.

I analyze transcripts by hand and coded manually.

For the second step, the researcher developed a list of significant statements, treating each as having equal worth and then in the third step grouped the statements into larger themes or 'meaning units'. The researcher used "in vivo" codes, using participants' actual words, when possible.

In the third step, interview transcripts were each initially analyzed individually, then sorted into one file and analyzed again, for the purpose of surfacing additional themes or "meaning units".

For the fourth step, the researcher wrote a description of what the participants experienced with the phenomenon, the textual descriptions, including verbatim examples.

In the fifth step, the researcher wrote the description of how the experience happened and finally, wrote the composite description, which became the "essence" of the experience. A discussion of the findings is found in chapter five.



### 3.8 Credibility and Reliability

Credibility is imperative to qualitative research ensuring participant representation is accurately identified and depicted (Marshall & Rossman, 1995). Creswell (2007) suggests numerous paths can lead to effective validation for researchers who seek parallel approaches. This study embodied four strategies designed to promote credibility and enable future verification. Peer review of the methods and analysis occurred simultaneously throughout the research process and provided the researcher with balanced considerations as the researcher strove for accurate interpretation of the data (Guba and Lincoln, 1994). Discussions and resulting commentary from the researcher's supervisor, co-supervisor, dissertation committee members, fellow master students and colleagues in higher education were noted and compiled for further reflection. Member checking occurred to allow participants to check transcripts for inconsistencies and to serve as a platform for further clarification. This process helps investigators check their own subjectivity and ensure the trustworthiness of their findings" (Jones, 2002, p. 469). Lastly, findings were communicated through thick-rich descriptions. The unique voice of the participants was at the core of the research process and allows future researchers to determine applicable transferability of findings to other settings (Creswell, 1998). The hope of the study was to provide an accurate portrayal of

what really is the motivation of commercial sex workers in the Tamale metropolis and their challenges.



Creswell (2013) recommends engaging in at least two validation procedures when conducting qualitative research. This study used two validation procedures including member checking and thick rich descriptions.

**Member Checking:** Member checks were done after post-interview and analysis for verification and to establish credibility. Follow-up questions were asked for clarification purposes and used in the member checks to confirm content of information in transcripts from the study participants (Neuman,2006)

**Thick, Rich Description:** participants' own words were used in the findings section, to enable the inclusion of much details, context, emotion and to enable the reader to fully understand the experiences of the participants with the phenomenon (Creswell, 2007).

### 3.9 Ontology

As the researcher, my own knowledge development paradigm lead the exploratory effort and provided further rationale for strategic decisions regarding selection of methodology, data collection, subject sampling and data analysis. According to Creswell (2003), ontology is the claim researchers makes regarding knowledge while epistemology is how individuals have arrived at

that knowledge and methodology is the process of studying it. To this end, the research was designed with an ontological view that assumes the phenomenon being studied is complex where contingencies are inevitable (Guba and Lincoln, 1994). The researcher agreed with Crotty's (1998) assertion that all knowledge and therefore all meaningful reality as such, is contingent up on human



practices being constructed in and out of interaction between human beings and their world, developed and transmitted within an essentially social context. The researcher believe the manner in which humans respond to the social environment is based on their own perceptions and significantly affects future actions and interactions (Guba and Lincoln, 1994). These ontological assumptions helped to emphasize the motivation as well as challenges as being the experiences of commercial sex workers and world view of the commercial sex trade and further aligned the researcher's epistemological leanings with this study.

### 3.9.1 Epistemology

A fundamental belief motivating this project evolved from the researcher's affiliation with a disposition. Where as an objectivist view espouses knowledge exists in objects independent from consciousness and experience, the constructivist epistemology asserts knowledge is a product of the social context where meaning evolves from interactions with others (Crotty, 1998). Further support for constructivism is evident in the aim of this project to investigate factors that motivate women to engage in commercial sex trade and the challenges they face and this will established the way in which sex worker participants create and understand meaning through their own social constructions (Charmaz, 2006;Guba and Lincoln, 1994). According to Guba and Lincoln (1989) a study steeped in constructivism asserts:

- ❖ The researcher-respondent relationship is subjective, interactive, and interdependent
- ❖ Reality is multiple, complex, and not easily quantifiable



- ❖ The values of the researcher, respondents, research site, and underlying theory undergird all aspects of the research
- ❖ The research product is context specific

A constructivist approach aspires to both discover and describe the unique nature of those being investigated (Briodo and Manninig, 2002). This epistemological leaning fitted for this study and structurally placed the commercial sex workers' voice at the center of the discovery. The rich description of the participant responses guided the analysis of the data. To prepare for the researcher's constructivist disposition as the investigator, the researcher reflected on how he personally make meaning (Crotty, 1998) and acknowledged that the commercial sex worker ( participants) would likely convey multiple meanings surrounding the same issue (Creswell, 2009). The design was intentional and to help guide this interactive experience with an emphasis placed on the evolving story told by the participants. The study strive to accurately shed light on what motivates and what challenges commercial sex workers face in the study area.

### **3.9.2 Qualitative Discovery**



With a determined constructivist epistemology, the next step to developing the research framework was subscribing to a qualitative approach. This directed the study research to focus on the emotional responses and perceptions of the participants rather than more quantifiable variables. Whereas quantitative research evolved from earlier post-positive thinking and seeks to define knowledge through cause and effect perspectives, qualitative research has emerged

more recently with links to a constructivist view (Creswell, 2003). This assertion claims meaning is developed both socially and historically with individual experience holding a capacity for multiple subjective interpretations. Unlike a more objectivist view where quantitative meaning is independent from consciousness and experience (Crotty,1998), the interpretive data emerged and was collected through open ended inquiry and then analyzed in an evolving manner that required the researcher to actively participate in the explanation of social meaning (Creswell, 2007). This investigative process of discovery was designed to develop a rich detailed analysis that embodied commercial sex workers' own understanding of their motivation and challenges in the industry. While quantitative methodologies seek precise measurement to support the broad generalization of results and study replication (Glass & Hopkins, 1996), the qualitative research more applicably explored the depth of the phenomena to provide the reader with a thorough understanding of the idiosyncrasies involved with thisphenomenon (Creswell, 2007). The flexibility associated with this effort enabled the researcher, as the primary data collection instrument, to probe for deeper meaning through continued dialogue with the respondents (Creswell, 2003).



### 3.9.3 Summary

The chapter described every aspect of the research design. The ontological, epistemological and philosophical beliefs were described to reveal prevailing association, in order to suggest meaning through social contexts, experience and a current world view. The research is aligned with constructivist and pragmatic leanings. It justified the decision to embrace qualitative discovery navigated by a phenomenological method which provides for research focused on the motivation and challenges of commercial sex workers in the Tamale metropolis. The choice of conducting interviews was discussed as an appropriate course for collecting data with several important considerations outlined as steps to ensure accuracy and validity. A spread sheet was used to assist tracking of information relating to research participation.

Again, at the approval stage of the project, a total of up to 6 locations of Commercial sex workers were identified within the Tamale township. Study participants were chosen from these locations purposively and interviewed at locations of their convenience, the study interviewed fifty (50) respondents in total. The purposeful decisions surrounding the selected sample, subjects, access and setting were outlined to demonstrate a focus for the project which aligned with the professional interests and also aspires to contribute to the empirical knowledge base. The

wellbeing of the participants and integrity of process guided this dissertation effort. The process and procedures utilized to analyze the data were presented in detail for later review and possible research duplication. Lastly, this Chapter discussed the strategies used to promote both credibility and reliability as the study investigate the motivation and challenges of commercial sex workers in the Tamale metropolis.



## CHAPTER FOUR

### PRESENTATION AND ANALYSIS OF RESULTS

#### 4.0 Introduction

This chapter presents the analysis, of data in line with the study objectives which was aimed at ascertaining and investigating the motivational factors influencing entry into commercial sex work and challenges face during the trade in the Tamale metropolis of the northern region of Ghana. A sample of fifty (50) respondents were interviewed within the central business district of Tamale, metropolis. The analysis of the results was in line with the following thematic areas: the socio-demographic characteristics of the respondents, factors that induce or influence the young girls and women into commercial sex trade, the challenges that they face while undertaking their businesses as commercial sex workers and the coping strategies adopted to mitigate these challenges. Thematic analysis was used to analyze data and converting them into themes. It minimally organizes and describes the data set in details. The steps of engaging in a thematic analysis include familiarizing oneself with data, coding themes, reviewing them, defining them and using themes to transcribe a story. This analytical method was used because the study employed a phenomenological study design and interview guide as its tool for collecting data and thus data obtained from the interviews was analyzed into themes. Also, because the study aimed at investigating the motivation and challenges of commercial sex workers through an in-depth interview, theme-coding was needed to explain these reasons as well as coping strategies adopted to deal with the challenges among others. In this study, the research assured and, maintained, the, respondent's anonymity and





confidentiality. No names or telephone numbers were used in the interview schedule. A number of measures were put in place by the researcher to protect the anonymity of research participants such as use of pseudonyms and paying careful attention to data storage. Codes were given to individual respondents by the researcher. The researcher also respected the respondents' rights to self-determination, privacy, confidentiality and anonymity, fair treatment and protection from discomfort and harm and importantly obtained their informed consent.

#### **4.1 Socio-demographic Status of Respondents**

The analysis began by examining the socio-demographic status of the respondents. This will help give a clear understanding of the variable or the participants the study is dealing with. The socio-demographic variables such as age, level of education, marital status and religious background as well as country of origin of respondents were analyzed. The table reveals that out of the 50 respondents, majority (52%) are within the age bracket of 20-24, (60%), have Senior High School education (Certificates),(59.1%) were within the age bracket of 20 – 24 years. It therefore suggest that, the youth especially those who were supposed to be in Senior High School and within the age bracket of 20-24 have a higher tendency of indulging in commercial sex work as a result of being drop out from school. It further revealed that (76%) were single as against 24% who were reported to have ever married and (95%) were reported to have Christian faith. The study also revealed that majority (88%) of the commercial sex workers operating in the metropolis were migrants from Nigeria. Furthermore, (24%) of the respondents said they had ever married. This is presented in table 4.1 below;



**Table 4.1.1 Percentage presentation of Socio-demographic Characteristics of Respondents**

(N=50)

<b>Age</b>	<b>Frequency</b>	<b>Percentage (%)</b>
15-19	11	22
20-24	26	52
25-29	10	20
30+	3	6
<b>Total</b>	<b>50</b>	<b>100</b>

<b>Educational Level</b>	<b>Freq</b>	<b>Percentage</b>
No formal	6	12
BECE	12	24
SSSCE/WACE	30	60
Degree/Diploma	2	4
<b>Total</b>	<b>50</b>	<b>100</b>

<b>Marital Status</b>	<b>Freq</b>	<b>Percentage</b>
Married	0	0
Single	38	76
Ever married	12	24
<b>Total</b>	<b>50</b>	<b>100</b>



<b>Religion</b>	<b>Freq</b>	<b>Percentage (%)</b>
Islam	2	4
Christianity	48	96
<b>Total</b>	<b>50</b>	<b>100</b>

<b>Ever given birth</b>	<b>Freq</b>	<b>Percentage (%)</b>
Yes	48	96
No	2	4
<b>Total</b>	<b>50</b>	<b>100</b>

<b>Place of birth</b>	<b>Freq</b>	<b>Percentage (%)</b>
Nigeria	44	88
Ghana	5	10
Benin	1	2
<b>Total</b>	<b>50</b>	<b>100</b>

**Source: Field work 2018**



In an individual interview with one of the respondents, she narrated her experience as follows. “

*“My age is my strength; I must make good use of it. I dropped out from school at age 18 and came to Ghana at age 20 thinking I could get a job but there is nothing apart from sex work. My age has given me an advantage to indulge in the sex trade. Opportunity comes but once, this is my time and I must use it to get what I want”*IDI-21 From Nigeria

This illustrates the reason why majority of the sex workers are within the age group of 20 to 24 years.

Another respondent reported the following:

*“My friend was in it and she invited me to Tamale when I came, I realized at my age (24), men were rushing for me because of my beauty”* IDI 24, from Nigeria

The above was a response by IDI-24 which suggest that youthful age with other factors are likely to lead young ladies to engage in commercial sex trade because they feel they are young and beautiful .

*“Since I could not continue my education after SSCE, I needed to work because a lot of my friends are working after secondary school”* IDI-38, from Saboba

*“I have two children in my first marriage ...I don’t have any problem with the job, since all men are not correct, the man I married was always beating me”* IDI-38 from Saboba

The response from IDI-38 indicates that leaving school early without any form of employable skills as well as abuse in marriage has an influence and can serve as a pull factor for young girls to indulge in commercial sex work, it is not surprising therefore that a greater number of the study

participants have had education up to the secondary level. It further reveals that majority are not married because of experience of abuse shared by peers. Another participant responded by saying this:



“ *Ahsawoo business is better than going into marriage....you will make money and give birth if you want just like marriage.....you have more freedom when you are in it*” IDI-23 from Nigeria

Again, analysis of the socio-demographic characteristics reveals that 88% of the respondents in this current study are mainly from Nigeria, 10% of the respondents are Ghanaian and only 2% are from the republic of Benin.

#### 4.2 Factors Motivating the Entry into Commercial Sex Work

The current study identified parental neglect, peer group influence as well as poverty and money as the reasons for engaging in commercial sex work in the Tamale metropolis. This is analysed and presented in a multiple response table 4.2.1 below:

**Table 4.2.1 Percentage Distribution of Multiple Response on Factors motivating the entry into commercial sex work**

<b>Factors</b>	<b>Freq</b>	<b>Percentage (%)</b>
Parental neglect	4	8
Peer group influence	18	36
Money/Financial	28	56
<b>Total</b>	<b>50</b>	<b>100</b>

**Source: Field work, 2018**



Table 4.2, shows that greater number of respondents (56%) was motivated to indulge in commercial sex due to monetary gain and poverty (36%) of the respondents stated their involvement to be due to peer group influence with the remaining (8%) indicating parental neglect as a factor that push them into the trade.

As one of the respondent indicated when she was asked of the reasons she got engaged in the commercial sex trade, her response was that;

*“Guys of today will not help you without taken something from you and for someone like me who needs money to take care of my needs as a lady, I had to go into commercial sex to be able to cater for my needs rather than asking people for help. Though she stated she makes less or not much money as I was made to believe by my friend who has been in this business before me”* (IDI-10 from Enugu state of Nigeria).

The above response by IDI-10 represents a multiple response in support of lady friend introduction, poverty and other monetary reasons.

Again, IDI-7 from Enugu state of Nigeria indicated that *“I lost my mother when i finished my secondary education, there was no one to help me but I needed money to further my education so I had no option. One day a friend came from Ghana and sold the idea of “Asha<sup>1</sup>woo” business to me then I bought into it since I was not getting any help from anybody”*(IDI-7 Enugu State, Nigeria)



This response suggest that IDI-7 was motivated or pushed into the commercial sex trade because of money/poverty, a lady friend introduced her as well as parental neglect, even though she lost her mother but her father could have supported her.

With the researcher encounter with IDI-1 on her reason for getting into commercial sex trade she narrated the following;

*I had a good friend who was a kayaaye<sup>2</sup>. This friend of mine knew everything about my family. I met her in Accra and things were better for her. Each time I meet with her, I try to know how she manage to make money with kayaaye because for me it wasn't favorable to me at all. One day, she told me that look, you have gone through a lot and you are still going through the same things all because your parents are poor, so let me help you find a boyfriend so that at least aside what you are getting from the kayaaye, he will be supporting you.*

*But I told her getting a boyfriend wasn't a business, and then I ask her "is that what you are doing?". She said no. So I told her I wanted her to introduce me to what she is doing and life is better for her like that. My friend then took me out to buy me "short" "short" dresses and told me we are going out to work in the night. The first day we went out, she introduced me to a man and told me to follow him, then I ask for what, then she said I should just go and come. The man took me to a hotel and there he ask me to name my price. I didn't know what to say but the man gave me GHC 300 and he ask me to spend the night with him.....I looked at the money and said okay I will. Hmm, my first experience was that I got collapsed after having sex with this man.....I was*

*admitted at the hospital for three days but my friend couldn't tell the doctors what happen to me.*

*When I was discharged, I started fearing men, my friend then introduced me to alcohol and told me to always drink before meeting a man and that with alcohol I won't fear anymore.*



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<sup>2</sup>Kayaaye as use in the text represents (head porter)

Also, IDI-11 from Benin had this to say *“my father is no more and there is nobody to help me and my sisters because my mother sells things like bed spreads and the money she makes is not enough to take care of us, so I had to engage myself in commercial sex work to support myself and my siblings”* (IDI-11 from Benin)

But when asked whether the mother and her siblings were aware she does commercial sex work in Ghana her response was *“No”*

Another respondent IDI-8 stated the following;

*“My decision to become a commercial sex worker was because my family is poor and I cannot also sit and wait for my parents to provide all my needs when I know God has given me an asset which is my beauty”.*

Some of the commercial sex workers interviewed in the study were reported to have indulged in the sex trade as a result of agent deceit. As reported by one of the respondents during an in-depth interview at her residency at Sawalni a suburb of Tamale.

*“An agent came to my mother and told her that she needed a girl to be employed in Ghana as a shop keeper. Since my mother was a single parent she has no option than to allow me to join the woman. When we got to Accra the woman introduce me to commercial sex trade. I was made to work and pay her fifty Ghana cedis (GHC 50) a day. Since I could not continue paying the daily wage I moved to Tamale to join my colleagues here. Now I am on my own. Now I can remit some monies to my mother and siblings back home”.* (IDI-8 from Aqua State, Nigeria)





Another respondent narrated her ordeal in an individual interview when asked the circumstances that led her to engage in commercial sex work. *“Hmmm! Broda<sup>3</sup>. I came here purposively to make money. There is no job for me in my area and I cannot do ashawoo business in my place because they know me. But here I can do whatever I want within my means to make money so that I can return to my country where I can use the income from here as capital to do business”*

When the researcher asked her whether she has made the money she was expected, her answer was:

*“I have not made anything yet and that I have regretted for engaging in the trade because i have never pray to use my body to make money. I have never send money home since I came, any small money I get, I use to buy cloths because I don’t have enough cloths but I am trying to send money home”.*(IDI-8 from Aqua, Nigeria)

When IDI-4 from Delta State Nigeria was asked on her motivation of engaging in commercial sex work, she stated the following:

*“I was brought to Tamale through an invitation of a lady friend who indicated that there were jobs here in Tamale but when I got here, She initiated me into commercial sex work because she was able to show that she has made it through commercial sex work and I also needed the money”*(IDI-

4 from Delta State, Nigeria).

When she was asked whether with commercial sex work she has achieve what she set out to achieve, she said

*“I haven’t been able to make the amount of money I was expecting to make but I have made some money, it is because of financial exigencies that pushed me into it and I would not be a commercial*

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<sup>3</sup>Broda as use in the text refers to brother.



*worker if I am able to make enough money and I will then go back to my hometown. But for now, I am very cool with the work so long as it meets my needs” (IDI-4 from Delta State Nigeria)*

With IDI-22, was interviewed, she has this to say *“so one day my lady friend told me one Tuesday, you must prepare yourself we are going to work tonight we are going to leave my baby to his grandmother ; we walked up to Nagasaki road , we walk, we walk . On our way walking, we see there are sex workers. Then I asked her about that; what’s happening? Is this place for sex workers? Then she told me “yes” and we coming to do this work?You go to a car and you tell them you are young”. Then I was like nooo..... Then she started shouting at me that “I can’t stay with you, you can’t make money and I am the only one who’s putting food on the table.I have a family to look after and I can’t put another....another like another work on my shoulders. You must work on your own sister” (IDI-22 from Bulsa)*

The above response by IDI-22 is a clear indication of a push factor of a lady friend into commercial sex work even though poverty is part of her motivation but it isn’t eminent.

With IDI-18, she has this to say *“When i dropped out of school, my mother chased me because i dropped out. So she said i can't stay here if i am dropping out of school i must go and work to support my brothers and sisters” so I came to Tamale to stay with a guy and because he know that i was having the problem, he was always treating me bad until I met a friend who introduced me into ashawoo” (IDI-18 from Daboya<sup>4</sup>).*

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<sup>4</sup>Daboya is a rural community in the north Gonja district of the Savannah region of Ghana.



### 4.3 Challenges of Commercial Sex Workers

The study also discover police disturbance, sex without pay, rape, stress, theft by clients, stigmatization, violent attacks, gang rape and constant body pain as challenges commercial sex workers operating in the Tamale metro are confronted with, in their daily operations. Table 4.3.1, a multiple response table below presents the percentage distribution of these challenges.

**Table 4.3.1 Percentage Distribution of Multiple Response on challenges of commercial sex workers**

<i>Challenges</i>	<i>Freq</i>	<i>Percentage (%)</i>
Police Disturbance	9	18.0
Sex without pay	6	12.0
Rape	2	4.00
Stress	5	10.0
Theft by clients	4	8.00
Stigmatization	11	22.0
Violent attacks	5	10.0
Gang rape	2	4.00
Constant bodily and stomach pain	6	12.0
<b>Total</b>	<b>50</b>	<b>100</b>

Source: Field work, 2018



The multiple response on challenges of commercial sex workers in table 4.3, shows that most respondents (22%) indicated stigmatization as their major challenge in the industry, (18%) reported that Ghana police service disturbs them from doing their work as expected, (17%) reports constant bodily and stomach pain associated with sex work, another (12%) reports sex without pay, (10%) identifies stress as a challenge associated with commercial sex work, another (10%) reports violent attacks as their challenge. The study further reveals theft, rape and gang rape with (8%), and (4%) respectively as challenges associated with the commercial sex trade in Tamale.

From Table 4.3 above, even though participants reported that the job offered them stability and flexibility, they also reported that it poses various challenges such as stigmatization and therefore they suffered discrimination from the society. As already mentioned in the introduction, sex work is currently criminalized or illegal in Ghana and therefore very stigmatizing. It is viewed as immoral, degrading and understood as a source of spreading sexual transmitted diseases in Ghana. It is therefore stigmatized and gives room for many sex workers to be ignored, treated with disrespect by the society. Below are some responses of sex workers on how the society treat them if realized they are or were ever engaged in sex trade.

*For the stigmatization, the least we talk about it the better. As people see us on the road always marketing ourselves, they know us and for the fact that we are from Nigeria they call us Ashawoo. Now to us we don't have a problem with that. Our only problem is the harassment by the city guards and police occasionally". (IDI-15 from Oyo state)*



IDI-6 from River state in Nigeria narrated that *“most of the clients will take you to the bush sleep with you and refuse to pay you and invite friends to also have sex with you. They will take your phone from you and tell you, you are not ashamed you came to their country to do ‘Ashawoo’ i.e commercial sex work”* again some of them because they know they are paying for the sex, they will fuck you like you are not a human being and this makes your lower abdomen painful. (IDI-6 from River State, Nigeria)

The researcher interaction with IDI-3 reveals that *“sometimes you will develop stomach pain and headache after sex, some will fuck you but they cannot pay and will rather beat you, collect your phone and ask you to go just like that”*

With IDI-1, she indicated that *“The police do not allow us to work, my friend has ever been raped by three men without paying her, there was a day some boys attacked us at Nagasaki beat us and collected our phones. This work stresses me up and affects me psychologically and so I only pray I get money and go back home”*

When IDI-5 from River state was asked of the challenges she faced, she started by saying that *“commercial sex work is like spiritual work, the way you get the money is the same way the money goes away, some will tell you they are taking you home but they will end up sleeping with you in the bush and collect your phone so because of that I don’t use any smart phone anymore, they can even beat you up”*



*“When I started this work, my womb got shifted and our madam pushed it back”, my phone has ever been stolen and I have been beaten before” if you dey pass by them, they will be calling us ashawoo, ashawoo amaneirigae<sup>5</sup> when you talk then they will beat you (this was a narration by IDI-13 from Lagos state Nigeria)*

*“Sometimes they break the condom, sometimes while they are still busy fucking you, they will open the knife and want to stab you, and want to take the money. A lot of things happen”. “Someone come from the street and say let’s go in, when you say the money they say I will give when we finish. Then you just do and they say I don’t have money. So you find different people and different behaviors.” (IDI-20 from Sabonjida).*

*“In my first day i was not lucky, because i got raped by a man with a knife who said if I make any loud noise to draw the attention of people he will kill me with the sharp knife. I was waiting on the street for my clients all of a sudden the guy came from nowhere took me into a nearby bush pretending to need my service. He finally succeeded in raping me and took all my belongings and money. I said huh, Hmm! My brother, these are some of the agony we are going through in this trade.” (Narrated by IDI-19, from Enugu state, Nigeria).*



They also reported police and city guards brutalities at night. They reported how the city guards beat them up and at times the policy too brutalized them when they are out to undertake their operation.

*“They beat us on the street and collect our money and the police won’t allow us to do the job*

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<sup>5</sup>Amaneiriga is an insult in Ddagbani refers to your mother anus.

*Sometimes the police officers will take us to a room sleep with us with the promise of protecting us but when they finished having you that is all. A police officer had sex with me and promised to assist me when I am in difficulty but failed to pick up my calls any time I call him.” (IDI-7 from Enugu state, Nigeria)*

*“We have been having challenges about the market, the people who normally take us to their homes. They will do whatever they want to do with you and after that, they won’t pay the agreed price. And also we have challenges with the police they don’t allow us to do our job. And we normally go hungry for that. If you don’t work and get money how do you eat” (IDI-4 from Delta State, Nigeria)*

When asked about the challenges she face whiles undertaking her work as a commercial sex worker she responded as follows:

*“The challenges are numerous; sometimes my stomach hurt a lot after having sex. And also you can meet some guys who will fuck you and beat you in addition or collect your phones” IDI-7 Enugu state, Nigeria”*

The current study reveals a number of challenges associated with the commercial sex trade in

Tamale and some participants have indicated their readiness to quit their current profession should they get better employment opportunity as stated below;

*“I always insult women who engage in commercial sex work.....i didn’t know I will use my body for money one day.....i only pray to God to give me a job so I can leave this work...the work is a devil work but I also need money too....” IDI-39, from Nigeria*



Another respondent has this to say “*when you come back home, you can’t sleep because your body will always pain you unless you take a painkiller .....i am still doing this work because I do not have a work to do.....so if you have any work for me please help me to leave this work because is not good*”*IDI-28, from Nigeria*

“*I have no friend anymore because of the work I do, they call me names but I can’t stop too....is God I pray to give me good work.....i will stop this if I get a filling station work to do*” *IDI-43, from Nyohini.*

**IDI-1** in her response to the challenges she encounters during her daily operations as a commercial sex worker, she narrated that;

*The work is a trial from God because my brother, I can hardly sleep after working at night.....the stress level in our work is too much, you get tired, body pains, headache, sometimes if I get home, I have to open my legs, take off my panty, then increase the speed of my fan to cool my private part because it always hurts...*

#### **4.4 Perceive Exposure of Commercial Sex Workers to Sexual Transmitted Diseases**

The study sought to appreciate the understanding of commercial sex workers in respect to their exposure to STDs and their advice to clients on condom use. The study employed variables such as exposed, fairly exposed and not exposed to test their level of understanding of how they perceive their exposure to STDs as presented in table 4.4.1 below;





Table 4.4.1 reveals that majority of the respondents ( 81%) advised their clients to use condoms to protect them from STDs. In particular, out of the 50 respondents, (50%) felt exposed to STDs, (27.3%) felt fairly exposed and (22.7%) did not feel exposed to STDs. Out of the total number of respondents who felt exposed to STDs, (90.9%) usually advised their clients to use condoms, while only (9%) did not advise their clients to use condoms. For the number of respondents who feel fairly exposed, (83.3%) advised their clients to use condoms while (16.7%) did not advise their clients to use condoms. Furthermore, all respondents who did not feel exposed to STDs still advised their clients to use condoms. It is thus observed that majority of the respondents who practiced sex trade observe safer sex practices by advising their clients to use condom to protect themselves and their clients/costumers.

**Table 4.4.1 Perceived Exposure to STDs by commercial sex workers and advice on condom use**

<i>Degree of exposure to STDs</i>	<i>Advise to clients to use condom</i>		
	Yes	No	Total
Exposed	20	2	22
Fairly exposed	10	2	12
Not exposed	10	6	16
Total	40	10	50

**Source: Field work, 2018**

*“I know I am exposed to sexual transmitted disease as a result of the work I am currently doing. My brother! I don’t know my clients let alone to know about their health status. I sometimes have sexual intercourse with some of them without using condom because that comes with a high cost.*



*The higher the risk the higher the cost price, Hmmm. Ashawooworkno be easy”*

This was reported by one of the respondents during an individual interview with her at her place in Banvim in the Tamale south constituency.

Some of them reported that they will not allow sexual intercourse with a man without condom. As reported by one of the participant.

*“I know this work is risky and what I get from it cannot be use to treat me when infected with any sexual transmitted disease. I always insist on the use of condom, hence my slogan is no condom no sex”*. This was reported by a local commercial sex worker based in Tamale. From her narration it was clear that the indigenous people from the Tamale metropolis has the right to insist on what they want because they have people to call on when their clients fail to pay the agreed price or to do what is expected per the agreement unlike their Nigerian counterparts who has nobody to depend on in difficult times.

#### **4.5 Coping Strategies**

Considering the risky nature of their work, the commercial sex workers have adopted some kind of measures that they use to guide themselves when in trouble.

Table 4.5 presents percentage distribution of coping strategies adopted by commercial sex workers in Tamale in response of the challenges they face. 30% of the respondents reported carrying condoms as a coping strategy to protect themselves against gang rape and other clients who will patronize their services without condom, 25% reported going out without valuables in response to



theft by clients and attacks, 14% reported payment first in response to clients who patronize their service without paying. The study also found that sex workers engaged in drug use as a way to cope with the challenges as reported by 11%. As much as respondents reported that sex work granted them stability and flexibility, they also stated that it was dangerous working on the road and therefore used drugs as a coping strategy to. The drug use was also in response to constant bodily and stomach pains as well as stress management.

The study further reveals that 11% calling a member to inform her where she is, another 6% and 3% of the respondents respectively indicated moving in groups and gate keepers as a way of coping with the challenges. These coping strategies were in response to violent attacks, rape cases and gang rape as illustrated in table 4.5.1.

#### 4.5.1 Percentage Distribution of coping strategies of Commercial Sex Workers in Tamale

<i>Variables</i>	<i>Percentage</i>
Going out without valuables	25
Payment first	14
Moving in groups	11
Calling a member to inform her where one is	6
Gate keepers	3
Carrying condoms	30
Drug use	11
<b>Total</b>	<b>100</b>

Source: field survey, 2018



The researcher wanted to know from IDI-1 how she copes with the challenges on her job and she narrated that;

*For me, I have been using alcohol because at the beginning I didn't know how to withstand a man and a friend of mine introduced me to the use of alcohol and since then I have been drinking....I also use pain killers such as tramadol for the constant body pains. I equally carry condoms with me just in case a man may pick you out and would be reluctant to use condom and for this our work, I know I can easily get infections and so I have to always carry it with me.....again my brother, I try to collenect my money before so I can keep it safe before I follow a man to have sex.*

Below are some responses on experiences during the sex business by respondents.

*“The only contraceptive I know and use is condom...I carry it every day to protect myself...clients may tell you they don't have or they cannot go and buy”* IDI-32 from Sabonjida

*“Condom.....some Muslim men who are married will tell you they feel shy to go and buy it and I cannot do it raw....so I buy it all the time...if they want to rape you, you can give them to protect*

*yourself”* IDI-27 from Nigeria

*“I know Aids and I don't want it but if I get pregnant, I will born the child....i have two children.....i will add”* IDI-35-from Nigeria



*“Some of them will send you to their home but after getting to the house they will tell you he wants it on credit, master, na sex be credit? So in such situation I give condom out so that if you want roll them you must pay but no money yes to condom”.*

This she further explained that if you agree to have sexual intercourse with such a person he will not beat you up hence will be free from beating but get your money another day from him. It serves as a coping strategy because they exists some kind of trust between you and the client.

*“I always go with my friends ....yes in a group because of the violent attacks on the street....moving in group, they won't attack you, they will not rape you and they will not also steal your money but some of our clients are also friendly”* IDI-29, from Nigeria

The study further reveals that some of the commercial sex workers picked the town young boys as their friends and they pay in cash and in kind so that in the event that they are in difficulties they resort to such people for help those are the people they describe as gate keepers.

*“I have one boy I pay twenty Ghana cedis (GHC 20) a week so that when I am in trouble he come to my aid. Most of the times I may not be able to get him the money but I exchange sex with protection so he is always happy with me. I sometimes benefit a lot from him because there was a time our land lord evicted us from the room he was the one who accommodated me for two weeks”.*

Her report illustrate the advantage the indigenous boys in the metropolis have on the commercial sex workers especially those from Nigeria.

*“I did not feel anything because i was smoking and drinking the first time. So i don't think...I don't feel anything. Because when you smoke...”* ..... *“Because i don't have my own mind to think what*



*is going to happen, what is not going to happen, what i am going to do, what i am not going to do.”.....“When am going out, I just go and take alcohol or smoke. But if I don’t smoke then, I would see reasons why I don’t want to go. Because I will say I am tired it’s Sunday, its Monday people are at work. I will come up with excuses” (IDI-3 Enugu, State Nigeria)*

*“I only take alcohol because if I don’t take it, I can’t stand before a man to do the work but if I take it, I become normal” (IDI-5 River state, Nigeria).*

#### **4.6 Summary**

The chapter presented the analysis of results in thematic forms. The analysis in the chapter began with assessing the socio-demographic status of the respondents. Socio-demographic variables such as age, level of education, marital status religious background and country of origin of respondents were analyzed. The result suggested that, the youth especially those in Senior High School and within the age bracket of 20-24 have a higher tendency of indulging in commercial sex work as a result of being drop out from school. It further revealed that (76%) of the respondents were single as against 24% who were reported to have ever married with (95%) were reported to have the

Christian faith. The study also revealed that majority (88%) of the commercial sex workers operating in the metropolis were migrants from Nigeria.

The results also revealed that greater number of respondents (56%) were motivated to enter into commercial sex trade, due to its monetary gain, (36%) indicated peer group influence as a



determinant with the remaining (8%) stating parental neglect as the cause.

It further shows that, police brutalities, stigmatization, violent attacks, bodily pains, rape, theft and sex without pay were some of the challenges commercial sex workers operating in the metropolis face. Based on the challenges, the results further reveal some coping strategies to remedy the challenges.



## CHAPTER FIVE

### DISCUSSION OF RESULTS

#### 5.0 Introductions

This chapter presents a comprehensive analysis of the themes that emerged in relation to the motivational factors, challenges and coping strategies of commercial sex workers who participated in the study. The key findings were integrated with the literature in order to create contextualized picture, the background and to enhance a deeper understanding of the issues. The discussed themes were organized under four broad concepts: Socio-demographic characteristics of commercial sex workers, factors motivating the entry of young girls and women into commercial sex trade, challenges of commercial sex workers and coping strategies to mitigate the effects of the challenges face by commercial sex workers.

#### 5.1 Socio-demographic characteristics of commercial sex workers

The responses captured under the socio-demographic characteristics were useful in the overall appreciation of the demographic data of the participants and their general life history as well as their pathway into commercial sex work; the ages of the women interviewed ranged from 15 to 30 years. About 88% of the respondents were Nigerians, 10% of them were Ghanaians and only 2%

came from the Republic of Benin. Low level of education was evident in the socio-demographic data of commercial sex workers interviewed. 60% of the respondents dropped out of school at the secondary school level, 24% at the basic level, 4% at the tertiary level and 12% had no formal education at all. The educational level of respondents on the average was the secondary level.

This findings is in line with the study conducted by Boston University's center for Global, Health





and Development at the Kwame Nkrumah University of Science and Technology and confirms the position that most of the young women engaged in commercial sex work lacked education and income earning opportunities and many perceived leaving school early as a significant turning point in their lives.

Another intriguing finding on their socio-demographic characteristics was the fact that, a significant percentage (88%) of the respondents revealed that they had migrated from Nigeria to Tamale under the influence of a facilitator for the purpose of commercial sex trade. This revelation concords with UNAIDS (2009) report, which stated that, commercial sex workers migrate from rural areas or small towns to urban setting, either because they were procured by middle men or pimps or as job seekers. In addition to this, voluntary economically-driven migration to urban center, young girls and women are increasingly trafficked for commercial sexual exploitation.

None of these sex workers interviewed however revealed that their family or relations in their hometown from where they migrated are aware of their deeds in Tamale or supports them in their work and this tells how sex work is frowned on in the society such that those engaged in it actually do everything possible to keep it a secret. The findings revealed that they all have managed to keep their activities secret from their people. These migrant female commercial sex workers were

mostly concerned about their friends and family members knowing about their work and the shame this would bring.



## 5.2 Factors motivating the entry into commercial sex work

The findings of the study also agrees with the study by Bucardo (2004) in which commercial sex workers reported that financial gain was a primary motivating factor for their entry into sex trade, majority of the respondents (56%) got involved because of financial reasons. Commercial sex workers are seen as ground-breaking people who turn to illegitimate means like commercial vice in order to earn money when legitimate means are insufficient or blocked (Merton 1957). Again 95% of the respondent indicated they have ever given birth, thus bringing additional responsibility on them in terms of catering for their children and themselves, and thereby confirming UNAIDS (2009) report which indicated majority of these commercial sex workers are expected to contribute to family income or are commonly the sole supporters of their families.

## 5.3 Challenges

From the results of a multiple response on challenges of commercial sex workers in the Metropolis, most respondents (22%) reported stigmatization as their major challenge in the industry, (18%) reported that Ghana police service disturbs them from doing their work as expected, (17%) stated constant bodily and stomach pain associated with sex work, another (12%) indicated sex without pay (10%) identifies stress as a challenge associated with commercial sex work with the remaining (10%) reporting violent attacks as their challenge. The study further revealed theft (8%), rape (4%) and gang rape (4%) as challenges associated with the commercial sex trade in Tamale. This results is in line with Gould, (2008) who indicated Criminalization of commercial sex work prevents commercial sex workers from reporting violence to the police or seeking legal resources after rape or sexual assault. Indeed, violence is a persistent theme in the lives of commercial sex workers



across African region with long term consequences, including stress, depression and low self-esteem (Wojcicki & Malala, 2001). In a survey of commercial sex work in urban and rural Kenya, a significant portion reported being raped (35%), physically assaulted by client (17%)(Elmore-Meegan, et al, 2004).A study by a Namibian found that 72% of commercial sex workers had experienced abuses, for client abuse (18%), intimate partners (46%) and the police (9%). There is increasing documentation of police harassment and brutality against commercial sex workers across Africa, which involves assault, unlawful arrest, rape, extortion and demands for sex or money as bribes (Agha & Nachima, 2004)

### **5.3.1 Stigmatization and discrimination against commercial sex workers**

In this study, it emerged that stigmatization (22%) is one of the major challenge commercial sex workers has to grapple within their daily operation. This revelation is confirmed by the Gap report (2014),” discrimination and stigmatization towards sex workers are nearly universal. The criminalization of commercial sex work and entrenched social stigma means that commercial sex workers often avoid accessing health services and conceal their occupation from health-care providers” Gap report (2014). Also social and cultural isolation combined with stigma and discrimination further reduces commercial sex workers access to health care services.



### **5.3.2 Police against commercial sex workers.**

Again, the study identify disturbance by the Ghana police service (18%) as another challenge commercial sex workers had to deal with in their daily operations. This is again supported by the Gap report (2014) which revealed that, police and other law enforcement officials often violate the human rights of commercial sex workers rather than promote and protect them.

### **5.3.3 Violent attacks on commercial sex workers**

In a multiple response table of the study, 10% of respondents reported violent attacks on them as a challenge they face in their operations. This also confirms with Gap report 2014, which indicated the illegal status of commercial sex work is a critical factor defining the extent and patterns of human rights violations. Where commercial sex work is criminalized, violence against commercial sex workers is often not reported or monitored and legal protection is seldom offered to victims of such violence.

## **5.4 Coping strategies**

### **5.4.1 Use of drugs as a coping mechanism for commercial sex workers**



The results of the study identify drug use by commercial sex workers as one of the coping mechanism in dealing with the challenges they face in the course of their operation as sex workers.

This is supported by the study of Young et al (2000), who found that drugs were used to cope with

the psychological and emotional distress of sex work and might increase sex workers dependency on drugs. The use of knife and other weapons as a coping strategy resonate well in the study by S.O Kwankye and J.K. Anarfi, (2008) on coping strategy adopted by female migrants porters in the city of Accra and Kumasi, where knives, blades and other sharp materials were used by the female porters (Kayayei) to protect themselves against thieves and rapists.

## 5.6 Limitations

The study has some limitations which needs to be considered when the results was been interpreted.

The first limitation has to do with the fact that, the results of this current study could not be used for purposes of generalization for the entire commercial sex worker population, because, it included only mobile or street commercial sex workers. The study did not include commercial sex workers, who work in the brothels, internet etc. The motivation and challenges of these commercial sex workers could differ from those on the street.

Secondly, the self reported data obtained in the form of short-life representation and in-depth life could suffer from exaggerations, minimized or alter the truth of their actual motivation and challenges. The study used repeated interview methodology to check for inconsistencies in the data.

The third limitation of the study was that, male commercial sex workers have been identified in other studies but this study did not include them. This was so because the female commercial sex workers were reluctant to share any information concerning the male commercial sex workers.



## CHAPTER SIX

### SUMMARY, CONCLUSION AND RECOMMENDATION

This chapter presents summary of the findings, conclusions, policy recommendations drawn from the research and suggestions for future research.

#### 6.1 overview of the research method

The main purpose of this study was to examine the motivational factors and challenges of commercial sex workers in the Tamale metropolis. That is, the study sought to assess the factors motivating the entry of young girls and women into commercial sex trade, the challenges they faced during their operations as well as identify coping mechanisms to those challenges. A multi-stage sampling technique was used to select the respondents who participated in the study. The main tool of data collection was interview guide and a tape recorder, which was later transcribed and analyzed for presentation.

#### 6.2 Summary of Key Findings

The young girls and women in the study had reasons for engaging in commercial sex work, among the reasons given were, peer pressure, parental neglect and financial reasons. In other words, economic exigencies and desperation were attributed and cited as reasons for their entry into commercial sex work. The study found out that the reason for resorting to commercial sex work



included the desire to be self-independent given the fact that, they needed to survive on their own since according to them; they lacked support from their families.

On their educational background, the study found that majority of the respondents did not have the needed educational qualification to earn them the employable jobs they may require and about 12% of them have never school or been educated. The predicament of commercial sex workers was compounded by the fact that they had neither acquired any skills in any form. As a result, commercial sex work became the only viable option to help them meet their needs and also sometimes meet the needs of their families.

The peculiar and difficult circumstance in terms of their life chances at becoming successful economically as given in the above mentioned reasons, made commercial sex workers become vulnerable to exploitation by third parties or traffickers, as it were. About 88% of the respondents were young ladies from Nigeria who were brought to Ghana courtesy some unnamed women to actually engage in commercial sex work. They were actually expected to pay off their transportation and more. They all considered being in commercial sex as transient or a temporal measure for them to accumulate enough capital to set up their own businesses and quite the commercial sex trade.



From the study, it became evident that the commercial sex workers are being stigmatized by the community they find themselves. This makes their movement in and around their communities a difficult one, especially during the day. They also alluded to the fact that, commercial sex work was a very humiliating and dehumanizing trade. This was attributed to the issues of stigmatization.

Apparently, most of the respondents in the study are migrates from various states of Nigeria who were either came into the country by themselves or by a third party for the purpose of commercial sex work with a few others being migrants from Benin and some marginal number of indigenes.

It was also revealed in the study that, using condom was non-negotiable option for the commercial sex workers as far as clients' demand were concerned. In fact, they indicated no amount of inducement could compromise their determination to avoid contracting diseases through non-use of condom since they were able to show high knowledge in condom use.

### **6.3 Conclusion**

The main objective of the study which was to examine the motivation and challenges of commercial sex workers in the Tamale Metropolis was duly achieved despite the fact that the study had its own limitations as indicated in the last part of the previous chapter.

- ❖ To conclude, commercial sex work is inherently risky given the widespread reported incidence of violent attacks, stigmatization, rape in the course of providing services to their clients. This implies that, if nothing is done about the activities of commercial sex work in Tamale, many young girls and women are likely to engage in this trade which eventually will consume all the future leaders of the Metropolis.
- ❖ The women involved in this business are largely victims of circumstance as the finding revealed that all of them have indeed gone through challenging moments in their upbringing and thus resorted to the provisions of services as commercial sex workers as means to escape from dire life situation. By implication, some of these young women did





not join commercial sex trade by will but rather through coercion and hence requires a collaborative effort among stakeholders to nip this trade in the bud.

- ❖ Poverty and lack of higher education do really conspire in creating commercial sex workers. If efforts are not made to keep these young girls in school, then the Metropolis should be prepare to record more numbers as far this trade is concern.

#### **6.4 Recommendation**

From the study, parental neglect, peer group influence and financial reasons were identified as the major finding as far as factors influencing women into commercial sex work is concerned. Therefore, there is the need for a broad collaboration among parents, teachers, and faith based organizations as well as opinion leaders in the Metropolis to develop interventions to curtail the growing trend of women engaging in commercial sex trade in the metropolis. Again challenges such as rape stigmatization and others were identified which requires agent attention since these have the tendency of spreading infections across the metropolis

From the study, the researcher recommends the following based on the conclusions:

- ❖ There is the need for strenuous effort by the Regional Directorate of Education, Ministry of Gender and Social protection, Ministry of Local government and rural Development as well as Non-Governmental Organization (NGOs) working within the Tamale metropolis to fashion out and implement targeted educational policies for the deprived communities as well as designed and package scholarships for needy young girls especially in the Tamale metropolis.





- ❖ The government through metropolitan assembly and regional directorate of education must intensify actions on free compulsory basic school, the free senior high education and if possible, free vocational level of education to keep the vulnerable young girls in school in order to equip them with the knowledge and vocational skills so as to enhance their employability.
- ❖ Social welfare interventions such as livelihood empowerment accelerated programs (LEAP) must be expanded and made accessible to deserving economically disadvantaged persons like these young girls in deprived communities in Ghana.
- ❖ Also, government of the day should institute agencies to regulate the activities of these commercial sex workers with the aim of improving the safety, health and well-being of these vulnerable young girls and women. These agencies including the Ghana Aids Commission must reach-out to the commercial sex workers with education on how to stay healthy and proper way of using condoms to prevent cases of sexually transmitted infections.
- ❖ The government through the metropolitan assembly and its stakeholders must embark on a rescue campaign to facilitate the exit of many of the commercial sex workers who wish to stop the work and to especially assist the many Nigerians who were deceived by third parties to go back to their country. This is necessary because most of the participants' indicated that commercial sex work was a temporal means to accumulate capital to start up legitimate businesses. There is the need also for government to help these individuals to resettle and integrated into the society by meeting their need for jobs and income and livelihood as opposed to working as commercial sex workers.

- ❖ Finally, the Ministry of health together with Ghana Health Service should open up their doors for the provisions of the needed health screening services to this vulnerable group.



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## APPENDICE

### Introduction

I am a student from the School of Medicine and Health Sciences, University for Development Studies, Tamale, conducting a study on the Motivation and Challenges of Commercial Sex workers in the Tamale Metropolis, Ghana. This study is part of my Master of Public Health Degree hence I would be most grateful if you could assist me by answering the following questions. All information given would be confidentially treated.

### INDIVIDUAL INTERVIEW GUIDE FOR COMMERCIAL SEX WORKERS

#### *Interview Guide*

#### *Socio demographic profile of participant*

1. Participant (anonymous)
2. Age
3. Place of birth
4. Home town
5. Current place of residence
6. Occupation
7. Years in sex work
8. Family background (probe and discuss)
6. Highest level of educational attainment
9. Skills acquisition
8. Nationality
10. Marital status



11. Religious affiliation

12. No. of children

***Section B: Factors Influencing Women to Engage In Commercial Sex Trade***

13. Explore

**Economic**

13. Please can you tell me some of the reasons that motivated you to go into sex trade?

1. Who assisted you to get here – did you first stop somewhere to engage in this sex trade or you came directly to Tamale?
2. What motivated you to engage in commercial sex work? (please explore more into it)
3. How far have you achieved what you set out to?
4. What are some of the challenges you face in achieving these aspirations
5. What strategies do you put in place to deal with some of these challenges
6. Who are those who assist you when you have problems and who do you help in turn?  
Friends, relations etc.
7. Do you work as a group? If yes can you please tell me the nature of your group?
8. Do you have an association? If yes what is the purpose of the association?
9. Can you describe your working environment?





10. What challenges does the working environment pose to you? (Enquire about non-payment if not mentioned) And how do these challenges affect you psychologically, financially and your health
11. Please describe the nature of your work – tell me about your typical day. (enquire more on raining nights heat season and hammattan season)
12. Have you ever been cheated or robbed by your clients and other miscreants?
13. Are you often stressed up as a result of your work?
14. Can you describe the nature of clients you often deal with? Are some of them dangerous or friendly? How does this business affect your health or other wise?
15. Have you ever encounter any attack on the street whiles doing your work us a commercial sex worker?
16. Do you take some stimulants or drugs or special foods that improve your stamina in working as a sex worker?
17. What contraceptives are you aware of and which ones do you use and why?
18. Where and how did you learn about the contraceptives?
19. What is the first thing you do when you feel sick?
20. Do you often buy your own drugs?
21. Do you go for medical checks if yes how often and if no why?



22. Do you visit the hospital when sick, at what point of your illness do you go to the hospital
23. Do you feel discriminated against by some people in the town because of your work as a sex worker? If yes what has been your response or strategy? Eg avoidance of such people or changing the route for my activities
24. Do you have coin men or agents that help you into this trade and if yes do you pay them for their services?
25. Do you share your money or income with other people and if yes who and why?
26. Could you tell us more about the kind of illnesses linked to your work and living conditions?
27. Do you help each other when sick, and do you get help from other friends and family, other sources such as organisations?
28. Please can you tell me anything about your motivation or that pushed you to undertake this trade and the challenges you are facing that are not part of my questions posed to you?

