

When Street Sex Workers Are Mothers

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Many women who engage in street sex work experience pregnancies and become mothers. Unfortunately, little research has examined how their pregnancies and parenting impact themselves as street sex workers and their street sex work. In this qualitative research study, 16 mothers who were currently involved in street sex work in a Midwestern city of the United States participated in semistructured interviews. These mothers discussed how being pregnant or parenting while regularly working the street caused them to feel ashamed of themselves and their work and anxious for their own and their children's safety. Pregnancies and parenting responsibilities reportedly altered their working productivity and practices. Given how frequently they had been separated from their children, they also talked about ways in which these separations resulted in them having more free time and need for drugs, which led to them increasing the amount they worked the street. It is evident from these interviews that street sex workers who are mothers have unique needs and experiences that must be considered by researchers, policy makers, and service providers.

KEY WORDS: street sex work; prostitution; pregnancy; parenting; mother-child separations.

INTRODUCTION

Many people experience stress from their jobs. Women involved in the sex industry are no exception. Street sex work, which involves the trading of sexual services for money or drugs at the street level, appears to be a particularly hazardous and stressful occupation. Research has demonstrated that among female employees in the various facets of the sex industry, those engaged in street sex work tend to be the most marginalized, oppressed, and stigmatized (Shedlin & Oliver, 1993; Vanwesenbeeck, 1994). These women must contend daily with many stressors, including victimization, difficult clients, and incarcerations (Dalla, 2000; Farley & Barkan, 1998; Miller & Schwartz, 1994; Sloss, 2002; Valera, Sawyer, & Schiraldi, 2001). In addition, their living situations are characterized by high rates of housing instability and continued financial difficulties (Parriot, 1994; Weiner, 1996). These women also typically suffer from physical and mental health problems, some of which may result from their employment

conditions and lack of appropriate medical or psychological care (Alegría et al., 1994; El-Bassul et al., 1997; Green et al., 1993; Vanwesenbeeck, 1994; Weiner, 1996).

Within this stressful context, many women who work the street face another stressor, that of bearing and raising children (Dalla, 2000; Sloss, 2002). Parriott (1994) reported that of 69 current and former sex workers (some of whom had worked the street) in the Twin Cities of the United States, 75% had been pregnant since their introduction to the sex industry. Dalla (2002) reported that of 43 current and former female street sex workers in a mid-sized Midwestern U.S. city, 51% had become pregnant and had carried their pregnancies to term while working the street. Another study of 91 women currently involved in sex trading (primarily on the street) in Chicago found that at least 74% had experienced at least one pregnancy following their initiation to sex trading (Sloss, 2002).

Just as many women who trade sex become pregnant, most also carry these pregnancies to full term and have children (Green et al., 1993; Shedlin & Oliver, 1993). In a large sample of 1,963 street sex traders in New York, 69.4% had children, averaging 2.25 children each (Weiner, 1996). In Dalla's (2000) study, 88% of the street sex workers had children, averaging 2.4 children each, with some having as many as seven. In the Chicago study, 91% of

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the women involved in sex trading had children, averaging 3.4 children each (Sloss, 2002).

Research in other Western countries has also revealed a sizable number of female sex workers who have children, albeit lower numbers than have been found in studies conducted in the United States. Studies of 121 Australian, 29 New Zealand, and 187 Dutch sex workers respectively, all revealed that about half of the women had children (Perkins & Bennett, 1985; Romans, Potter, Martin, & Herbison, 2001; Vanwesenbeeck, 1994). These statistics may be disparate because, unlike the studies conducted in the United States, these samples consisted of only small percentages of women working the street. Although no research exists to support this hypothesis, it is possible that street sex workers are more likely to have children than are other female sex workers due to variations in their economic situation, access to services, victimization, or substance use. In addition, it is possible that there exist cross-national variations in the use of contraceptives by women involved in the sex industry, perhaps because of cross-national variations in societal responses to prostitution. Unlike the United States, sex work is legal (although with certain restrictions) in Australia, New Zealand, and Holland, countries in which the above mentioned studies were conducted.

Sparse research has been conducted on the effects of pregnancy on sex work, and what has been done suggests that women's pregnancies may have minimal impact on sex workers and their work. One study found that most of the 61 pregnant adolescents paid little attention to their pregnancies and continued trading sex until their delivery (Deisher, Farrow, Hope, & Litchfield, 1989). Likewise, Dalla (2002) reported that the 22 women she interviewed who had been pregnant while engaged in street sex work had not generally altered their lifestyles in response to the pregnancies. They continued working the streets and using drugs without interruption. Nevertheless, Dalla noted two women who had observed ways in which being pregnant had affected their work. One woman reported that her pregnancy resulted in her attracting more customers, and another that her pregnancy had limited the types of sexual activities in which she engaged.

There is similarly little research on the impact of parenting and children on women involved in the sex industry. Researchers in Mexico City led focus groups with 133 female commercial sex workers and found that many of these women had children and found managing their "double-lives" as mothers and sex workers difficult (Castañeda, Ortiz, Allen, García, & Hernández-Avila, 1996). They experienced considerable shame about being mothers and sex workers and often chose not to disclose their involvement in the sex industry to their children and

families. Despite this shame and their dislike of the profession, many of these women reported that they continued to work to provide for their children to prevent them from having a similar future.

Other researchers have not systematically explored the experience of women in managing their dual roles of being sex workers and mothers. Nevertheless, many investigators have examined how women in other professions experience and cope with multiple roles (Barnett & Marshall, 1992; Hemmelgarn & Laing, 1991). Although the degree to which women experience role strain, competing role expectations, or role overload varies depending on many factors, researchers acknowledge that balancing parenting and working can be stressful (Lepore & Evans, 1996). A qualitative study conducted in British Columbia revealed that working mothers, even when happy with their jobs, experienced stress from "trying to do it all," indicating that they had difficulty balancing their work and parenting demands, and worried that they were not doing an adequate job in either realm. They also noted difficulties in securing childcare (Canam, 1986).

Despite the stress of juggling parenting and working, research demonstrates that many women experience more positive mental health when engaged in dual or multiple roles. This positive association between multiple roles and well-being was found particularly when mothers wanted to work, were supported in working by family members, were pleased with childcare arrangements, were satisfied with their jobs, had good relationships with their children, experienced considerable social support, and were able to work part-time hours (e.g., Barnett & Marshall, 1992; Hemmelgarn & Laing, 1991; Pietromonaco, Manis, & Frohardt-Lane, 1986; Rudd & McKenry, 1986).

Researchers who have studied women's multiple roles have done so primarily on middle-class women engaged in "legal" and socially accepted professions, and have largely neglected research with women involved in lower class, marginalized, and/or criminalized professions. Given how different middle-class women's working and living conditions are likely from those of female street sex workers, it is questionable whether the results of these studies are generalizable to this population. In fact, women who are employed in the sex industry and who parent may face unique stressors in being both sex workers and mothers. This challenge may be even greater for female street sex workers, who appear to encounter high occupational stress, and whose working experience may be more difficult than women involved in other aspects of the sex industry (Shedlin, 1990; Weiner, 1996). Many of the factors noted above that are associated with positive well-being for working mothers may not be found among female street sex workers.

Despite the growing body of research on street sex workers, and data demonstrating the large number who have children, researchers have largely neglected to consider the role of parenting when studying various dimensions of sex workers' experiences (Shedlin & Oliver, 1993). Given the stressful nature of both street sex work and parenting (Deater-Deckard, 1998), efforts to manage both roles simultaneously might also be a source of stress. The current study, therefore, sought to examine the experiences of women who are involved in both parenting and street sex work to determine the interaction of these dual roles. Although women who work the street encounter occupational circumstances that affect their parenting, this paper will focus primarily on how these women perceive that their parenting affects their street sex work.

METHOD

Participants

Participants recruited for this study were women, over the age of 18, who had traded sex for money or drugs at the street level at least once in the two months prior to the interview. Given the focus on parenting, in order to be eligible for the study the women also had to be mothers who had regular monthly visits or lived with at least one biological child under the age of 18. They were recruited from an agency providing services to female sex workers in a large Midwestern city in the United States. Individual women were invited to participate if they met eligibility criteria, as determined by a screening measure (questions on recent involvement in street sex work, parenting history, and current contact with children). Of the 20 women asked, none declined participation, although three failed to show for their appointments. One participant was dropped from analysis because she had engaged primarily in escort services.

The final sample consisted of 14 African American women, one Latina woman, and one Caucasian woman. They ranged in age from 20 to 46 years with a mean age of 32. Most participants had experienced unstable housing in the past year, with a median of 4.5 different types of residences. All but three women reported that they were currently in a relationship (with a man). The women differed in their educational attainment from having completed only elementary school to having attended college.

Participants reported first working the street as adolescents or young adults and had worked from 7 months to 25 years, averaging 9.9 years. In general, they now worked the street 12 months a year, relying solely on sex work for their income, although they varied in how frequently they

Table I. Informants' Sex Work Involvement

| | <i>M</i> | <i>SD</i> | Range |
|-------------------------------------|----------|-----------|--------|
| Age of initiation to sex work | 19.7 | 5.3 | 13–29 |
| Years of sex work involvement | 9.9 | 6.7 | 0.5–25 |
| Hours of current sex work per day | 10.6 | 7.2 | 3–24 |
| Days of current sex work per week | 4.8 | 1.7 | 3–7 |
| Weeks of current sex work per month | 3.5 | 0.8 | 2–4 |

worked (see Table I). Although all but one reportedly did not work for a "pimp," seven said that they were currently supporting a man with their earnings, and a few noted that their boyfriends pressured them to trade sex commercially.

Procedure

Given the lack of existing empirical research on the parenting experiences of women in the street sex industry, a qualitative methodological approach was selected for this study. Qualitative research is also important in conducting research with understudied and marginalized groups of people, such as women involved in sex trading, because it allows for the phenomena of interest to be explored using the unique conceptualizations and words traditionally used by the study population as opposed to those imposed by the researcher (Creswell, 1998).

Data collection was conducted through interviews with female street sex workers. These interviews took place in the spring of 1999, at a drop-in center, and lasted between 2–3 hr. During each interview, the interviewer first asked structured questions about participants' backgrounds, current situation, parenting, and sex work. The interviewer then conducted an audiotaped semistructured interview about participants' experiences as mothers and street sex workers, including questions regarding how their pregnancies, parenting, and children have affected their work as street sex workers (e.g., Would your work on the street be different if you did not have children? If so, how? How did being pregnant affect your sex work?). The interviewer used a semistructured interview guide in interviewing participants, but probed for more detail when given responses. Upon completion of the interview, participants were debriefed and paid \$50.

To prepare for analysis, the taped interviews were transcribed, edited, and entered into QSR Nudist Software (1997). A coding system was developed inductively as outlined by Patton (1990), first through coding of the hard copies of the transcripts, and then by entering these into QSR Nudist Software to allow for further coding, searching, and conducting cross-case and comparative analyses. The final coding system consisted of 12 broad descriptive

categories (Children, Parenting, Background, Becoming Mothers, Childcare and Custody, Stress and Coping, Sex Work, Drugs, Future, Services, Relationships and Social Support, Advice) that were further divided into 78 specific categories. The unit of analysis consisted of a full response to a question and received one or more codes.

To assess the reliability of the coding system and of the coders, a check-coding procedure as described by Miles and Huberman (1994) was implemented. In this procedure, two coders each independently coded 20% of the total number of participant responses using the broad coding system. The reliability percentage was then calculated by dividing the number of coding agreements by the total number of agreements and disagreements, and then multiplying by 100. Reliability percentages of the interviews ranged from 80 to 92% and averaged 86%.

RESULTS

The results section is organized first to describe the pregnancy and parenting experiences of the women involved in this study, and then to present findings related to the impact of these on both the women who are working as sex workers, as well as the impact of these factors on the various aspects of these women's work on the streets. This differentiation was clear in the responses of the women who were interviewed, and serves to draw an important distinction between sex workers as individuals with their own set of interpersonal stressors and challenges, and what they do in their role as street sex workers. The final portion of this section briefly explores the participants' perceptions of their satisfaction with the dual role of being a mother and a street sex worker.

Pregnancy and Parenting Experiences

Over half of the participants ($n = 9$; 56%) had first been pregnant by the age of 16. They had experienced a total of one to nine pregnancies, with a mean of four. Three women were pregnant at the time of the interviews. Almost half of the participants ($n = 7$; 44%) had suffered a miscarriage or stillborn, and three had an abortion. They had given birth to between one and seven children, with an average of three. As a group, they currently had a total of 47 children (see Table II).

Although many participants ($n = 14$; 88%) had given up or lost custody of a child, a quarter ($n = 4$; 25%) had never been involved with child welfare and almost half ($n = 7$; 44%) had retained custody of at least one child. Only 4 of the 47 children had been adopted, but many ($n = 34$; 72%) had been in the custody of, or living with, someone other than a parent, typically a relative.

Table II. Informants' Pregnancy and Parenting History

| | <i>M</i> | <i>SD</i> | Range |
|---|----------|-----------|--------|
| Age of first pregnancy (in years) | 17.94 | 4.11 | 13–27 |
| Number of pregnancies | 4.06 | 2.21 | 1–9 |
| Number of live births | 2.94 | 1.81 | 1–7 |
| Number of miscarriages or still births | 0.63 | 0.81 | 0–2 |
| Number of abortions | 0.50 | 1.15 | 0–4 |
| Number of children | 2.94 | 1.73 | 1–6 |
| Ages of children (in years) | 9.04 | 7.70 | 0.2–32 |
| Number of children (per mother) involved with child welfare | 1.75 | 1.34 | 0–4 |

At the time of the interviews, 7 (15%) children lived on their own, whereas 31 (66%) lived with a relative, 3 (6%) with a mother, 11 (23%) with a father, and 2 (5%) with a nonrelative. Only three (19%) mothers currently lived with at least one of their children. Women chose to give up their children ($n = 9$; 56%), family members or the children's fathers insisted on keeping them ($n = 2$; 13%), or child welfare intervened and removed them ($n = 5$; 31%).

Many women ($n = 14$; 88%) shared the experience of being separated from their children, although the nature and degree of the separation differed. Some women no longer saw at least one of their children ($n = 4$; 25%) because s/he was adopted by a nonrelative or cared for by a father who had moved, or because of the pain experienced following the visits. On the other hand, the remaining mothers ($n = 12$; 75%) maintained formal or informal involvement in all of their children's lives, and all mothers ($n = 16$; 100%) maintained at least regular monthly face-to-face contact with at least one of their children.

Only two women reported that they did not know who the fathers were of one or more of their children. Three women acknowledged that at least one of their children's father had been a "trick" (customer). About half of the children ($n = 24$; 51%) had fathers who had been or currently were in some way involved in their lives, from infrequent letter writing to primary parenting. As mentioned earlier, 11 children were living with their fathers at least some of the time. Several fathers had not been available to their children due to choice, whereas others were either unable to or not permitted to have contact with their children because of incarcerations ($n = 7$), death ($n = 3$) or their violent tendencies ($n = 5$; mothers' choice to protect children from their fathers).

Parenting and Street Sex Work

Participants spoke about many ways in which their pregnancies and parenting affected them as sex workers

and their work on the street. Some also talked about ways in which they prevented or tried to prevent these personal experiences from affecting their work. Given how many of the participants had been separated from at least one child, they also disclosed the repercussions of these mother-child separations on themselves and consequently their street sex work.

Perceived Impact of Pregnancy on Street Sex Workers

Although all of the women in this sample had been working the street since having children, three reported that they had not worked while pregnant with their children. Of those who had worked the street while pregnant, they disclosed ways that they had experienced emotional strain from being pregnant street sex workers. Two stated that they felt greater shame because they perceived societal stigmatization for having continued to work even when pregnant.

I was ashamed you know, to be standing on the street pregnant trying to turn a date . . . 'cause what would people be thinking or saying. You know, "She's pregnant and she out there tricking off." (Participant 2)

A few women expressed guilt and regret because of having worked the street while pregnant, believing their actions to have been wrong and believing that they were potentially harming their babies.

Oh, I was real bad, because, sometimes I would, have sex without condoms, and sometimes I would have sex rough, and I would be bleeding, and I was six months pregnant. (Participant 2)

I think it's been more stressful on the babies because I'm constantly walking around. I'm constantly jumping in the car with somebody or risking my life and the babies' lives and all that. (Participant 1)

Several participants revealed feeling anxious when they were working the street as pregnant women. In particular, they worried about the health of their unborn children and feared acquiring an infection, having a miscarriage, or delivering prematurely. They recognized that working the street prevented them from getting adequate rest, and placed them at risk of physical abuse and disease that could affect their babies.

You be worried about, are you gonna miscarry the baby. When someone is having sex with you, they don't care if you're pregnant or not. They do it any kind of way . . . you know they be having sex rough. They don't care, banging you know. Having you all kinda twisted all kinda ways. You can't be doin' all that while you're pregnant. (Participant 7)

These fears seemed rooted in reality. Most of the women who worked the street while pregnant indicated that their unborn children had been negatively affected by their work on the street. Four women shared experiencing severe violence while working and pregnant, three of whom lost their third-trimester babies as a result. One woman believed that her miscarriages or spontaneous abortions (one of which occurred at 7 months) were the result of her having continued to work the street and use drugs even when bleeding. Most also spoke about their prenatal children's exposure to drugs. Although many of these women worked the street in part to acquire drugs, they stated that they also needed to use drugs to help them tolerate their work.

Perceived Impact of Pregnancy on Street Sex Work

During the interviews, five participants indicated that under certain circumstances their pregnancies had not affected their sex work. Two participants explained that they remained under the influence of illegal substances ("high"), and focused on obtaining more drugs, such that they were generally oblivious to the reality of their pregnancy and did not therefore allow it to interfere with their cycle of "turning tricks" (i.e., engaging in sexual activity with a customer for money) and "getting high."

It [being pregnant] didn't bother me. The only thing I was thinking about was going to get me some rocks [crack cocaine]. (Participant 12)

A few others noted that they were able to minimize the effect of their pregnancy on their work by hiding their expanding figure, such that "dates" (i.e., customers) could not tell that they were pregnant.

No [my pregnancy did not affect my work], it was just the good way I hid it. I hid it 'cause there are a lotta people still shocked I just had a baby. They didn't know. People I was standin' around every day didn't know that I had that I was pregnant. (Participant 10)

On the other hand, one woman recognized that her pregnant state made no difference to some potential "dates" who were concerned only about engaging in sex, not with the shape of her body.

No [pregnancy does not affect my work]. Them dates out there, they don't care about nothing but getting what they want [sex]. (Participant 9)

Although some women had identified ways that their pregnancy had exerted little or no impact on their sex work, 10 participants provided examples of ways that their pregnancy had affected their work. In each case, participants

recognized that their working productivity changed during a pregnancy. Three women shared that they actually worked more when they were pregnant because they had an easier time attracting “dates.” They asserted that men viewed pregnant women as sexually appealing.

But the guys was like, the pregnant stuff is the best stuff. Which was kind of like, and then I’m stupid for bein’ out there. But, it it wasn’t no problem. It seemed like I was gettin’ more action bein’ a pregnant, you know, really, it’s weird though, but it’s, that’s how it goes. (Participant 12)

Not unless you’re way out there [really big]. Other than that, then again, if you’re way out there, most guys like . . . Something I don’t know what it is, they always say, “Pregnancy is sexy” or something like that so, yeah. They stop the pregnant women real quick. (Participant 5)

Eight participants reported that they decreased their sex work during their pregnancy because of physical limitations, their noticeable pregnancy, or moral concerns. Four women talked about the effect of their fatigue and physical state when trying to engage in sex work while being pregnant.

Oh, it was hell cause I was big, you know . . . and it was stressful, really . . . Just ‘cause I was pregnant and you know, then tryin’ to do things that I normally do. Just everything is in the way, the stomach was just there, in the way. (Participant 12)

I’d be so tired. I was so sleepy . . . Oh, you can’t walk around the street if you’re tired. You can’t watch out for yourself as good when you’re sleepy. (Participant 1)

Two women noticed that when their pregnant state became visible, they were less able to attract “dates.”

Because the pregnancy, the belly coming out. It was hard . . . I couldn’t hide it. My belly was, it looked like I was carrying twins and she only came out five pounds . . . It affected it a lot ‘cause I couldn’t even get a date. Sometimes I would have to go to my sister’s house to go eat ‘cause I couldn’t get a date. (Participant 3)

Although some women continued to work until the end of their pregnancies, others stopped working partway through at least one of their pregnancies. There appeared to be a moral belief by some women that working while pregnant (particularly in the final few months) was wrong, a view based on the risk of harm to their unborn child.

I just felt like you know, it would be so nasty to be out there having sex with all different types of men and I’m carrying my babies, you know. My babies were like big at this time. You know, they were like really huge and it’s like I just can’t handle men. I mean, don’t get me wrong, there could be some men that will stop for a pregnant woman ‘cause there been women out there pregnant, big and showing. I just, I couldn’t. (Participant 6)

In two cases, boyfriends provided girlfriends with food and drugs during part of their pregnancy so that they could refrain from working the street at that time.

I haven’t really been working with this pregnancy, only once in awhile, because I have him [boyfriend] and he’s been feeding me and buying me my drugs for me . . . He say he’d rather buy it for me than for me to go out in the street and have, do something with a guy, or get an infection or something, you know. (Participant 3)

Even when women continued to work until their delivery, they typically took at least a short repose of a week to four weeks following their infant’s birth.

Perceived Impact of Parenting on Street Sex Workers

Just as some of the women reportedly had experienced emotional strain from having worked the street while pregnant, so too had many had emotional difficulties in their role as sex workers after becoming mothers. Two mothers did state, however, that they believed that their work on the street was more emotionally bearable and tolerable because they were mothers and their focus was on their children.

Three participants revealed feeling ashamed that they were mothers and were working the street. Others reported feeling guilt and sadness because of their belief that their children were being affected by their work.

He was suffering because he did not want to go out. You know, he always wanted to go with me and I had, sometimes I had to leave him go crying, and stuff. And it used to hurt me. (Participant 3)

Ten participants said that they experienced greater stress and anxiety in being sex workers after and/or because of having children. A few expressed their concerns about their children’s safety and well-being, particularly when they were working.

I mean sometimes it stressful because I have to go out there and make some money and I’ll have to go out for four hours, you know, and I’ll be wondering who that with my baby . . . Sometimes I’ll be wondering, okay, when I’m outside working, if he’s there, did he (father of the children) leave out, did he leave my babies with somebody. Did he go somewhere and it’s just like, it stresses me because it runs through my mind . . . I’m just real, real worried about things happening. You know. I just be, really try to be cautious when I do things. (Participant 6)

One participant worried that because of her sex work involvement, a customer might find out about her children and kidnap them.

Participants expressed concern about their own safety. All spoke in general about the risks they faced on the street,

but some noted their increased anxiety about safety issues because of its potential impact on their parenting. They feared being incarcerated, hospitalized, or killed, and thus being unable to fulfill their responsibilities as mothers. They talked about the tragic consequences for children whose mothers were killed on the street, and desired that their children not have such an experience.

I've seen so many kids now where, since I been out here, I mean I know a few girls who got killed, then I see the effect on the kids. (Participant 5)

One woman also discussed the risk while working of experiencing damage to her reproductive organs, and thus being unable to bear and parent more children in the future.

Finally, participants shared feeling greater anxiety when working because they feared that their children would observe, or find out about, them working the street through other sources. They worried that discovery by their children of their sex work involvement might result in their children being hurt, losing respect for them, or being influenced toward working the street (or engaging in other street activities) themselves.

She doesn't really know but when she finds out . . . she'll probably hate me . . . 'cause she'll feel that her mother is no good, has a pimp. She'll feel that I wasn't mother enough to go out and get a job and take care of her the right way. (Participant 4)

Yeah, because I don't want her to find out. You know, I don't want her to go that way [work the street]. (Participant 8)

Perceived Impact of Parenting on Street Sex Work

As with their pregnancies, some women contended that under certain conditions, their parenting and children had little impact on their sex work. Two women stated that their preoccupation with drugs prevented them from allowing their parenting to interfere with their work because they were focused on drugs and sex trading, not their children.

When I'm out it's all to get the money for the drugs. I mean getting high, dating, getting high, dating, getting high. So it's not like I'm missing my kids anyway. You know my kids is at my mom's house. It's like I'm in a different world, different lifestyle. I'm living a different life period. You know what I'm saying? Then once I get back to another life when my family and kids is there, it's like, I totally change, like I'm living two different lives . . . [which is] no fun at all. (Participant 5)

As the above quote illustrates, some mothers consciously prevented their children from affecting their sex work by

separating their family and work life. Another woman explained that while on the street, she “blocks out” her feelings and personal/family life, such that when she finishes working, she removes the “block” and is the same non-working person.

In addition, the age of the women's children seemed to determine the degree to which the children affected the women's sex work. Two women explained that the presence of children did not alter what they did because their children were too young to be aware of their involvement in the sex industry. Another woman shared that being a mother did not hinder her work because the “dates” did not care if she had children; she was just as appealing and desirable to them as other working girls who were not mothers, simply because she was a woman. Finally, two participants revealed that when they had familial help with childcare, they were able to continue to work without interference from their parenting responsibilities.

On the other hand, many participants ($n = 11$) commented on ways that their children and parenting had altered their sex work practices. This was evident through increases or decreases in the amount they worked the street. Three participants asserted that having a child precipitated their initiation to street sex work, whereas almost a third of the women ($n = 5$) continued or increased their street sex work because of their responsibility to provide for the needs of their children.

Nope [I would not have worked had I not been a mom]. People think you be lying saying that you'll do anything for your child. I tell anybody, it's the truth. You'll do anything, anything not to see your child off on the street in the cold, in the rain, in the snow. (Participant 14)

[I started working] right after I had her [age 14] . . . 'cause there was things I wanted to have and that I wanted her to have . . . It all gave me the incentive to get up and do it [sex work] 'cause I knew what they [children] had to have. (Participant 11)

[After having a child] I kind of got more into my work. Like working more because I needed more money. (Participant 3)

Over half of the women ($n = 9$) explained that their work was necessary because they were mothers and their children had needs. They asserted that as mothers, they were willing to do a job they did not like, because they cared for their children and felt responsible for them.

'Well yeah, you momma did this,' but I did it because I had no other choice. I did it to put a meal on the table for you, baby. Or I did it to put a shirt on you back or shoes on your feet. There's a reason why I did the things I did. But not just out there you know, just to be out there. (Participant 12)

The six women who worked fewer hours when they became mothers said they had done so because they had wanted to be present with their children.

Before I had kids, I did more [sex working] . . . My babies need me. I'll tell you, you know, if I'm outside doing something [working the street], I'm losing some of the hours not seeing them. (Participant 13)

A few explained that after having children, working became more difficult because they could not come and go when they pleased, and had trouble "trying to do it all," juggling parenting and sex work. Several women spoke about the necessity and difficulty of securing childcare, a situation that sometimes prevented them from working. When they did leave their children, some women worried about their children's well-being because they did not feel comfortable with their children's caregivers.

In addition to changing the amount that they worked, almost half of the women reported being more discreet while working. They tended to be secretive about their work, and so would not tell family members of their whereabouts. They often worked in remote neighborhoods far away from where they or family members' lived.

Well, usually when I went out on a date it's like way far from, it's not an area period where my kids in. It's been hard sometimes when you may run into somebody, you know what I'm saying that knows somebody that knew somebody else, and telling my mom who said, "So and so saw you standing at Maple and Oak Grove," something like that. It's, you know, usually something like that. I usually try to stay out of the neighborhood. I try not to be around no relatives that nobody can associate with my family period. (Participant 5)

They also avoided busy streets and common strolls, choosing to work alone or in areas where very few other women worked, to reduce the likelihood of being spotted by people they knew or picked up by police. Some participants also prevented exposure by working around their children's schedules. They said that they would restrict their working to the hours that their children were asleep or in school.

Well she would be at school . . . You know so, when she come home from school I'm there . . . A lot of times I wouldn't be going on the streets. Okay now if I decided to go, she'd be in the bed . . . and I would run out and come back. Okay, so you know she wouldn't know. Because I am entitled to go outside, as long as I'm there when she come home from school, dinner's ready. (Participant 8)

Finally, four participants shared that being mothers caused them to be more cautious while on the job. They reported that they were more discriminatory in their selection of "dates." If they thought that a customer could

be dangerous or a disguised police officer, they were more likely to reject his offer.

Anything don't go anymore. I try to keep myself safe today. Because I do have some other . . . something else to live for. You know. I try to make decisions that won't affect them [her children] or will affect them on a positive level . . . A decision of just whether or not to jump in that car or not. You know. When a, when you're a loner, you just jump in. You know. When you have other people to think about, and when you're thinking about your safety also, you turn, you tend to second guess. (Participant 16)

First, you got to be very, very, very selective and very careful in what you do, and very discrete. I'm not gonna go with just any old body [now that I have children]. (Participant 15)

Perceived Impact of Mother–Child Separations

A few participants shared feeling relieved when their children were no longer in their care. They recognized their potential to harm their children and were grateful that their children were safe and no longer at risk of being abused or neglected. Two women also noted that following the separation, they could then focus on themselves and bettering their situation.

You know, just like, now, you know bein' basically you know by myself and not havin' anybody to really take care of, look after only, only me, I can focus on goin' to school, and you know what I'm sayin,' doin' things for me. (Participant 11)

Alternatively, all but two of the participants expressed that being separated from their children caused them to feel emotional pain and spoke of feeling depressed, lonely, sad, anxious, and angry.

Yeah, I was depressed. I was down. I was lonely. I would actually cry all the time . . . I started getting high even more. (Participant 8)

These emotional reactions to the separations were likely not unique to women who work the street. Nevertheless, participants perceived that their responses to the separation affected their work on the street. One woman responded to her loss with a desire to stop her sex work, and had therefore been trying to spend less time working the street. Another woman said that she had felt so depressed following her loss that she had temporarily decreased her sex work.

I kinda gave up on myself. I like felt what I'm living for? What's the use in trying? And my drug use became heavier to kind of mask the pain that I felt inside and I just hurt. I just try to make myself oblivious so I didn't have to feel anything . . . I didn't work anymore. I couldn't do anything. I just slept a lot and drank a lot. (Participant 15)

Unlike these two women, the remaining participants indicated that they worked the street more following their separation from their children for a few reasons. First, they no longer had the responsibility to care for their children, and so had increased freedom, time, and flexibility to work the street.

I had all that free time. You know I didn't have no responsibilities. And then like I say, I didn't know no one in the projects, so I had to learn to, you know, I had to accept that apartment, and I wasn't ready for that. So I got high to stay out . . . So then I would basically sleep once a week and up the rest of the time getting high and working the streets. Now then I worked all the time. (Participant 8)

Second, they felt the emotional pain of their loss, and therefore needed money from working the street to buy drugs to self-medicate. Third, the women felt lonely at home and no longer needed to be at home, which caused them to spend more time on the streets, a condition that also increased their sex work.

Well it hurted a lot . . . And once they took her away it's like it just messed with my head to the point where I just really, for me it made it worser, because she wasn't there. Again I started getting high. It's like just the fact that they, you know somebody came and took a child away from me . . . So I just stay high all the time. For a long time, just constantly stay high just to hide the thought that she wasn't there. Then I stop hanging in the house, there wasn't no reason to be there. I mean my old man was there. But he's . . . I mean warn't no reason to be there, she wasn't there and I wasn't. I'm getting high . . . So I just go working. (Participant 5)

Satisfaction with Dual Roles

Although participants were not specifically asked about their satisfaction with their dual roles, many did comment on what they believed was the incompatibility of parenting and street sex work. These statements were made when speaking not about how their parenting affected their street sex work, but about how their street sex work affecting their parenting, an area not covered in this paper. Most believed that their street sex work had negative repercussions on, and was incompatible with, their parenting.

It's affecting me as a mom cause I'm not with my children . . . It [sex work] makes it [harder] cause how can I be on the street 12 hours and still be a mom? That's impossible. How you gonna raise your family and you never home? (Participant 15)

You can't do both at the same time. There's no such thing. There's no such thing as being a mother and a prostitute at the same time. I mean you can do it, but in some kind of way, it's gonna affect the kids. (Participant 5)

Some of the women attributed losing their children, and thus being unable to parent them, to their drug use and work on the street.

If I wasn't on the street, you know, I'd probably have a job and have a place and he'd [her son who was removed from her custody] be with me. (Participant 12)

They also commented on the difficulty and stress they experienced in trying to manage both responsibilities.

It follows therefore, that many of these mothers when asked later in the interview about their goals, explicitly expressed the desire to discontinue street sex work ($n = 8$), or indirectly implied this intention ($n = 7$) by indicating their intention to become clean from drugs and obtain an alternative job. Twelve women also spoke about their desire to become better parents and spend more time with their children (in many cases being reunified with their children).

Well, I would like to have a job [legal job] and not be working the streets. I'd be off drugs and be raising my children. (Participant 1)

Yeah. I would like to get all, all my kids back together you know, take care of them. But I have to get myself cleaned up first before I do that. I would get myself a job [legal job]. Show 'em, show them that I'm doing myself, you know, getting myself up too, you know. (Participant 3)

DISCUSSION

Many women who trade sex at the street level have been pregnant and have children (Sloss, 2002; Weiner, 1996). Like other working mothers, they must manage their occupational responsibilities while dealing with parenting demands. It is clear from this study that participants' pregnancies and parenting did affect them as sex workers, and their work on the street, despite their efforts to separate these two often conflicting roles. Although this study was conducted with a somewhat homogeneous sample of women in only one city in the United States, it illustrates the complexity of interactions between street sex work and parenting, and provides multiple avenues for future exploration related to the dual roles of being a sex worker and a mother.

Impact of Pregnancies, Parenting, and Children

A few of the participants mentioned positive effects of being pregnant or mothers on themselves as street sex workers, but most disclosed feeling shame, guilt, and anxiety. These negative emotions did not seem to reflect how

they felt generally about parenting, but how they perceived the interaction of their parenting and street sex work. Assertions by this study's participants, as well as those from other research, demonstrate that many sex workers do care for their children and value their parenting role (Castañeda et al., 1996; Dalla, 2001; Hardman, 1997; Perkins & Bennett, 1985; Sloss, Harper, & Budd, 2004).

Pregnant or parenting street sex workers face the regular stressors involved with engaging in this occupation, as well as the stressors involved in having and raising children. In addition, they must concern themselves with many difficulties related to their dual roles. Although this study did not compare these participants with those of other working mothers, it is apparent that their experiences are similar, yet perhaps more challenging and stressful. Some of the stressors the participants encountered appear unique to them and include the potential that they would become separated and/or unavailable to their children, the possibility that their unborn or living children would be emotionally or physically harmed because of their work, the need to provide for their children despite the financial instability of their job and its nonexistent benefits, the need to find adequate childcare to accommodate their unusual and sometimes inconsistent working hours, and the potential loss of their children should they be deemed "unfit mothers." In addition, many of the factors mentioned in the introduction to be associated with positive well-being in working mothers seemed to be absent in this sample's situation. In general, the women in this study did not want to be working the street, were not satisfied with their jobs, were not receiving support from family members or society, were not pleased with childcare arrangements, and may not have had positive relationships with their children (as evidenced by the many children out of their custody).

Another unique stressor experienced by mothers who work the street is being stigmatized because of their engagement in sex work particularly as mothers (Hardman, 1997). In the present study, women spoke indirectly of this perceived stigmatization by discussing their effort to hide their sex work and their fear of the consequences of being discovered. Their need for secrecy seemed to increase their risk of physical harm because they would work in isolated areas far from their own home, without other working women, without informing others of their whereabouts, and during hours when their children were either occupied or asleep. Other researchers have observed that female sex workers' fears of being discovered as mothers who work the street also prevents them from accessing needed services or legal protection (Perkins & Bennett, 1985; Shedlin & Oliver, 1993; Sloss, 2002; Weiner, 1996), thus perhaps increasing their vulnerability to victimization, as well as to parenting problems.

In talking about the impact of their pregnancies, parenting and mother-child separations on their street sex work productivity, participants provided divergent responses. In general, more women reported having decreased or stopped than having increased or continued street sex work while pregnant, primarily because of physical limitations and moral or safety concerns. Nevertheless, some women did continue working the street regularly until their babies were born, a finding also reported by Dalla (2002). A few of the women in the current study who were able to stop working while pregnant did so in part because they had other means of support. Unfortunately, most of the women in this sample relied exclusively on their sex work earnings, and likely could not have afforded the time off work during or after their pregnancies. Additionally, because of being in an illegal, unregulated, and unsalaried profession, these women would not have had the option of taking a medical or maternity leave.

In response to mother-child separations, the women stated that they increased rather than decreased their street sex work. They attributed this change to their reduced parenting responsibilities, which enabled them to have more time for using drugs and working, and to their emotional pain, which increased their need for using drugs and working.

Finally, about equal numbers of mothers increased or began street sex work when becoming mothers, as did those who decreased their sex work. When participants had children, they experienced greater financial need and therefore greater incentive for working. This motivation was reported by other female sex workers in several countries who also felt obligated to engage in sex work for the sake of their children (Castañeda et al., 1996; Dalla, 2001; Hardman, 1997; Perkins & Bennett, 1985; Weeks, Grier, Romero-Daza, Puglisi-Vasquez, & Singer, 1998). On the other hand, women with children sometimes worked fewer hours because of childcare issues.

Given the inclusion criteria that mothers be currently working the street, it was not possible to determine from this study if becoming mothers leads some women to stop street sex work permanently. As expressed by some women in this study, individuals may experience the dual roles of parenting and street sex work as incompatible, and thus choose parenting over their involvement in this facet of the sex industry.

In general, the women in this sample agreed with each other on how their children influenced their working behavior. Because of their parenting responsibilities, many of the participants reported being more cautious and discrete while working and more selective about their working hours and locations. Similarly, researchers have reported increased discretion for mothers who engage in

sex work (Castañeda et al., 1996) and increased selectivity of hours of working to avoid dangerous times and to be available to children when they were home (Shedlin & Oliver, 1993). These changes may have both a positive and negative impact on their personal safety. Working more cautiously may decrease their risk of harm, whereas working more discreetly may increase this risk, if it means working in more isolated conditions.

Limitations

Although this study presents one of the first specific examinations of women who are involved in the sex industry and their dual roles as sex workers and as mothers, and offers many avenues for exploration in future research with these women, it has a few limitations. The interviews were structured in that various questions were asked and themes covered, but the interviewer asked many open-ended questions and often followed the lead of the participants. It is important, therefore, not to overinterpret how many participants shared certain views, experiences, or feelings. In addition, the interviews were conducted by one researcher who did not share the racial, economic, and/or experiential background of the clients. In part because of this difference, the interviewer spent a year prior to the study volunteering with the organization and developing relationships with and obtaining the trust of staff (including former sex workers) and clients. The comfort of the participants was often apparent in their spontaneous sharing and the appreciation and affection they showed the interviewer following the interviews.

Implications and Future Directions

It is evident from the interviews that women who work the street and deal with pregnancies, parenting, and mother-child separations, encounter challenges in their dual role as sex workers and mothers. In fact, many do not believe that it is possible both to work the street and be mothers simultaneously. Various approaches could be used to address some of the difficulties faced by female street sex workers.

Almost all of the women in this study disclosed their desire to stop sex trading, and find alternative employment. One form of intervention would be to provide services to help sex workers permanently or temporarily discontinue working the street once they are pregnant or parenting, should that be their desire. Such programs could help them access structural, financial, and employment resources. In a study by Sloss (2002), 73% of 91 women involved

in sex trading at the street level indicated needing such practical services, yet only 15% had actually received such assistance in the past year.

Another approach to addressing the needs of mothers who work the street might be to help them manage their dual roles and meet the needs of each. In addition to the usual harm reduction services available to street sex workers, these women could benefit from comprehensive services that take into account that they are pregnant or parenting mothers. For example, they should be offered nonstigmatizing services that provide parenting services, including pre- and postnatal care, parent training and support, and family or parent counseling.

Just as with other working mothers, female street sex workers who have children may also need help in securing childcare that is good, affordable, and accommodating of their working hours. A study of 130 sex workers in San Francisco also found that many female sex workers had a need for childcare (Farley & Barkan, 1998). If female street sex workers were to have good childcare options, they might experience less stress in their dual role, and be more able to provide adequately for their children's needs.

Mothers who have been separated from their children may be at the most risk for emotional or drug problems. These women could benefit from counseling to deal with their loss, as well as assistance in attaining reunification if possible. They would also benefit from drug treatment, with a focus on improving coping methods, such that they would not need to resort to increased drug use as a way to manage their painful emotions.

Mothers who are street sex workers may not seek services and protection for themselves and their children because of their fear that they will be deemed unfit mothers and separated from their children. Service providers may require training in challenging their own assumptions regarding the parenting abilities of these women, and in creating a nonthreatening environment for them. Compassionate and appropriate service provision may help these women to engage in better self-care, and prevent them from practicing abusive and/or neglectful parenting and possibly losing custody of their children.

Finally, policy changes might be implemented to alter street sex workers' working conditions, making street sex work less stressful and perhaps less incompatible with their parenting. Participants in this study spoke of physical and emotional risks to themselves and their children of engaging in street sex work. One way to reduce these risks would be to change society's response to prostitution. These women would likely be able to work more openly, safely, and collectively, if prostitution was decriminalized and destigmatized, and greater measures were taken to prevent victimization and prosecute perpetrators. Such a

change might also enable street sex workers to experience more support from their families and society in being mothers involved in the sex industry.

In addition to these applied recommendations, future research is needed. Given how little is known about the impact of pregnancies and parenting on women in the sex industry, many questions remain unanswered. Researchers must examine systematically the effect of pregnancies and parenting on female street sex workers' mental and physical health, parenting, service seeking, stigmatization, sex work, risk of harm, feelings about their work and future aspirations. This same research should be conducted with women who work in other areas of the sex industry, such as in the escort or exotic dancing businesses. These studies should include large-scale quantitative investigations of women involved in the various facets of the sex industry, and expand their focus to the children and families of these women as well. In addition, research that has been conducted with mothers who are involved in legal professions should be replicated with women in the sex industry to examine its applicability to this population.

In summary, women engaged in street sex work are not sex workers alone. Like all women, they hold multiple roles, each of which may interact with and affect their sex work. One of the roles on which these women place considerable importance is that of being a mother, a role that this study has demonstrated affects them as sex workers and their street sex work. To develop a greater understanding of women involved in the street sex industry and develop more appropriate and effective services, one must understand the challenges that these women face when they are pregnant, parenting, or separated from their children. Researchers and service providers must therefore depart from a traditional compartmentalized approach of these women as simply sex workers to a more holistic, contextual view, which takes into consideration the many roles that these women play within relationships, families, communities, and society.

REFERENCES

- Alegria, M., Vera, M., Freeman, D. H., Robles, R., Santos, M. del C., & Rivera, C. L. (1994). HIV infection, risk behaviors, and depressive symptoms among Puerto Rican Sex Workers. *American Journal of Public Health, 84*, 2000–2002.
- Barnett, R. C., & Marshall, N. L. (1992). Worker and mother roles, spillover effects, and psychological distress. *Women and Health, 18*, 9–40.
- Canam, C. J. (1986). Perceived stressors and coping responses of employed and non-employed career women with preschool children. *Canadian Journal of Community Mental Health, 5*, 49–59.
- Castañeda, X., Ortíz, V., Allen, B., García, C., & Hernández-Avila, M. (1996). Sex masks: The double life of female commercial sex workers in Mexico City. *Culture, Medicine, and Psychiatry, 20*, 229–247.
- Creswell, J. W. (1998). *Qualitative inquiry and research design: Choosing among five traditions*. Thousand Oaks, CA: Sage.
- Dalla, R. L. (2000). Exposing the “Pretty Woman” myth: A qualitative examination of the lives of female streetwalking prostitutes. *Journal of Sex Research, 37*, 344–353.
- Dalla, R. L. (2001). Et tú Brutè? A qualitative analysis of streetwalking prostitutes' interpersonal support networks. *Journal of Family Issues, 22*, 1066–1085.
- Dalla, R. L. (2002). Night moves: A qualitative investigation of street-level sex work. *Psychology of Women Quarterly, 26*, 63–73.
- Deater-Deckard, K. (1998). Parenting stress and child adjustment: Some old hypotheses and new questions. *Clinical Psychology: Science and Practice, 5*, 314–332.
- Deisher, R. W., Farrow, J. A., Hope, K., & Litchfield, C. (1989). The pregnant adolescent prostitute. *American Journal of Diseases of Children, 143*, 1162–1165.
- El-Bassel, N., Schilling, R. F., Irwin, K. L., Faruqye, S., Gilbert, L., Von Bargen, J., et al. (1997). Sex trading and psychological distress among women recruited from the streets of Harlem. *American Journal of Public Health, 87*, 66–70.
- Farley, M., & Barkan, H. (1998). Prostitution, violence, and posttraumatic stress disorder. *Women and Health, 27*, 37–49.
- Green, S. T., Goldberg, D. J., Christie, P. R., Frischer, M., Thomson, A., Carr, S. V., et al. (1993). Female streetworker-prostitutes in Glasgow: A descriptive study of their lifestyle. *AIDS Care, 5*, 321–335.
- Hardman, K. L. J. (1997). A social work group for prostituted women with children. *Social Work With Groups, 20*, 19–31.
- Hemmelgarn, G., & Laing, G. (1991). The relationship between situational factors and perceived role strain in employed mothers. *Family and Community Health, 14*, 8–15.
- Lepore, S. J., & Evans, G. W. (1996). Coping with multiple stressors in the environment. In M. Zeidner & N. S. Endler (Eds.), *Handbook of coping: Theory, research, applications* (pp. 350–377). New York: Wiley.
- Miles, M. B., & A. M. Huberman (1994). *Qualitative data analysis: An expanded sourcebook*. Thousand Oaks, CA: Sage.
- Miller, J., & Schwartz, M. D. (1995). Rape myths and violence against street prostitutes. *Deviant Behavior, 16*, 1–23.
- Parriott, R. (1994). The health of women in prostitution. *CURA Reporter, 24*, 10–15.
- Patton, M. Q. (1990). *Qualitative evaluation and research methods*. Thousand Oaks, CA: Sage.
- Perkins, R., & Bennett, G. (1985). *Being a prostitute: Prostitute women and prostitute men*. Sydney, Australia: George Allen & Unwin.
- Pietromonaco, P. R., Manis, J., & Frohardt-Lane, K. (1986). Psychological consequences of multiple social roles. *Psychology of Women Quarterly, 10*, 373–382.
- Romans, S. E., Potter, K., Martin, J., & Herbison, P. (2001). The mental and physical health of female sex workers: A comparative study. *Australian and New Zealand Journal of Psychiatry, 35*, 75–80.
- Rudd, N. M., & McKenry, P. C. (1986). Family influences on the job satisfaction of employed mothers. *Psychology of Women Quarterly, 10*, 363–372.
- Shedlin, M. G. (1990). An ethnographic approach to understanding HIV high-risk behaviours: Prostitution and drug abuse. In C. G. Leukefeld, R. J. Battjes, & Z. Amsel (Eds.), *AIDS and intravenous drug use: Future directions for community-based prevention research* (NIDA Research Monograph 93, pp. 134–149). Rockville, MD: National Institute on Drug Abuse.
- Shedlin, M. G., & Oliver, D. (1993). Prostitution and HIV risk behavior. *Advances in Population, 1*, 157–172.
- Sloss, C. M. (1999). *The experiences of female street sex workers in parenting their children*. Unpublished masters thesis, DePaul University, Chicago, IL.

- Sloss, C. M. (2002). *The mental health needs and service utilization of women who trade sex*. Unpublished doctoral dissertation, DePaul University, Chicago, IL.
- Sloss, C. M., Harper, G. W., & Budd, K. S. (2004). *Mothers engaged in street sex work: Their parenting perceptions*. Manuscript submitted for publication.
- Valera, R. J., Sawyer, R. G., & Schiraldi, G. R. (2001). Perceived health needs of inner-city street prostitutes: A preliminary study. *American Journal of Health Behavior* 25, 50–59.
- Vanwesenbeeck, I. (1994). *Prostitutes well-being and risk*. Amsterdam: VU University Press.
- Weeks, M. R., Grier, M., Romero-Daza, N., Puglisi-Vasquez, M. J., & Singer, M. (1998). Streets, drugs, and the economy of sex in the age of AIDS. *Women and Health*, 27, 205–229.
- Weiner, A. (1996). Understanding the social needs of streetwalking prostitutes. *Social Work*, 4, 97–105.