

UDC 316.4

O.B. Matiyash

M.Yu. Varban, PhD in Psychology,

International Charitable Foundation

«International HIV/AIDS Alliance in Ukraine»,

I.L. Demchenko, PhD in Economics,

Socioconsulting analytical center

TYPES AND SOURCES OF VIOLENCE AGAINST WOMEN INVOLVED IN SEX BUSINESS IN UKRAINE

This article presents the research results of various types of violence against females providing sexual services for a fee, highlights the main origin of this violence and vulnerability of women to HIV, and sexually transmitted infections.

Keywords: violence, female commercial sex workers, vulnerability to HIV infection, injection drug use, alcohol consumption.

Problem determination. Nowadays in Ukraine, according to the data of the Ukrainian AIDS Center of the MoH of Ukraine, the HIV epidemic situation is characterized by the intensification of sexual transmission of HIV and involvement of reproductive age women in this process [1, p. 4]. Intensity of HIV epidemiological process is largely determined by the adverse social and economic factors formed in Ukraine. The situation is further aggravated by the fact that the epidemic is unraveling on the backdrop of the spread of other socially dangerous diseases, for example, STI. However, nowadays the principal HIV transmission way in Ukraine is changed. Ukraine still remains in the category of countries with concentrated HIV epidemic aggregated among separate populations, in particular, injecting drug users. However, the principal transmission mode is now changing. Thus, from 1995 to 2007 the artificial parenteral way of transmission prevailed in Ukraine, that is the virus was transmitted mainly during the injecting drug use. Starting from 2008 and till 2011 the HIV transmission mode was gradually shifting, as the sexual transmission share began to prevail over the parenteral one. Thus female sex workers who do not use condoms became the group most vulnerable to HIV.

It is known that human rights violation is one of the driving forces of HIV spread. Thus, different forms of marginalization, stigma, discrimination and violence do not allow the people to receive access to the information, support and services which would protect them from HIV/AIDS. Due to this people find themselves in the situations increasing their vulnerability. Violence is one of the meaningful social aspects which can prevent effective solving of the problem of HIV and STI spread, especially among the most vulnerable groups, such as female sex workers.

Analysis of the latest achievements. Based on the World Health organization (WHO) research results [2] the prevalence of physical and/or sexual violence towards women from their partners fluctuates from 15% to 71%. Female

sex workers are the most vulnerable to different forms of violent actions. During the last years several specialized researches were held with regard to the relation between violence towards FSWs and their vulnerability to HIV and STI. Thus, in 2007 p. Sex Workers Advocacy Network (SWAN) carried out the research participated by sex workers in 10 countries (Bulgaria, Kyrgyzstan, Latvia, Lithuania, Macedonia, Poland, Russia, Serbia, Slovakia, Ukraine) [3, p. 6-8]. In total 238 female, male and transgender sex workers were surveyed. Based on the results of this survey almost all countries demonstrate quite high level of physical and sexual violence towards sex workers from law enforcement officers (table 1). Such violence, according to the affected sex workers, manifests in prosecution, threats, blackmailing, ungrounded arrests, beatings, rape. The practice of so-called “penalties”, or extortion of money from sex workers is also widespread, especially in the former USSR countries. These penalties are unofficial and never recorded, penalty amount is constantly changing. Often the penalty amount equals to all the money the sex workers carry with them at the moment of arrest, at times includes also jewelry and mobile phone. In most countries extortion comes along with excessive physical and sexual violence.

Table 1

Frequency of physical and sexual violence cases towards sex workers from law enforcement officers, %

Country	Physical violence	Sexual violence
Total	42	37
Bulgaria	70	20
Kyrgyzstan	64	90
Latvia	43	24
Lithuania	15	–
Macedonia	100	82
Poland	–	8
Russia	43	43
Serbia	63	75
Slovakia	5	30
Ukraine	85	45

Sex workers of Latvia, Kyrgyzstan and Ukraine, surveyed in this study, noted that after the detention by law enforcement bodies the latter tested them for HIV and STI without their consent. In their opinion, the testing results can further be used by law enforcement officers for money laundering through blackmailing.

The survey held among Indian sex workers [4] demonstrates that 76% of the surveyed FSWs working on the street experienced violence from their clients. 77% of the surveyed FSWs indicated that their sexual partners exercise verbal aggression and pressure on them, 87% experienced brute physical force towards them from their partners, and 73% were forced to provide sexual services by the clients.

Among the surveyed Indian FSWs more than a third use alcohol before sexual contact with clients, more than one fourth consider that their alcohol use is a trigger for the clients' violence.

Research in Russia [5] also indicates that 76% of the surveyed FSWs during 12 last months experienced physical violence from the clients, 8% – from pimps and “madams”, 37% of the surveyed were forced to participate in the so-called “volunteer parties” (unpaid provision of sexual services for law enforcement officers).

Thus, the review of special researches with respect to violence demonstrated the existing common features of forms and causes of violence towards FSWs. This article is aimed to analyze the specificity of violence manifestations towards Ukrainian FSWs and its relation with vulnerability to HIV.

Definition of the goal and tasks. Within the framework of the implementation of the program “Support for HIV and AIDS Prevention, Treatment and Care for Most Vulnerable Populations in Ukraine” supported by the Global Fund to Fight AIDS, Tuberculosis and Malaria, International Charitable Foundation “International HIV/AIDS Alliance in Ukraine” and Socioconsulting analytical center the analytical research was carried out “Study of the factors influencing the manifestations of violence towards FSWs as the increased HIV infection risk factor”. The purpose of this operational study was to research different types and sources of violence towards female sex workers (FSWs), as well as factors increasing their vulnerability to HIV.

The following tasks were solved by the researchers:

- Analysis of violence as one of the risk factors for female sex workers;
- Determination of principal types of violence and their relation to the main sources of violence towards female sex workers;
- Determination of factors increasing the risk for female sex workers to be affected;
- Consider behavioral risks of FSWs and the models of their prevention in the context of HIV.

The research was carried out in 2011 in 21 city of Ukraine. The research methods included semi-structured interviews with FSWs (in total 300 respondents were interviewed), in-depth interviews with FSWs “employers” (in total 42 persons) and with the specialists of NGOs servicing FSWs (in total 38 persons).

Summary of the study contents and obtained results. Data, received during the study, demonstrate that all forms of violence are a persistent component of FSWs lives, its dominant feature. Among different types of violence in the sex business sphere psychological violence takes first place by frequency and prevalence (97% of surveyed respondents indicated this). It is followed by sexual violence (86%), physical (84%) and economic (74%) violence (table 2).

The researchers paid principal attention to the forms and sources of sexual and physical violence, being the most discriminatory and dangerous from the point of view of potential HIV and STI infection. All positions in the rating of sources of violence towards FSWs are headed by the clients (table 2). Law enforcement

officers are mentioned at the second place. However, they are on top of FSWs physical offense and blackmailing rating.

Table 2

Types and sources of violence towards FSWs during the last 12 months*, %

Types of violent actions	Experienced themselves, total	Who applied violence to FSWs					
		Clients	Police	Other FSWs	Pimps/madams/intermediaries	Husband/sexual partner	Parents/relatives
Psychological violence							
Humiliation (including obscene words, criticism, verbal abuse)	91	70	43	26	12	20	14
Psychological pressure (plotting, inducing the sentiments of unworthiness, harassment etc.)	89	37	35	51	10	9	9
Blackmailing (including blackmailing which involves FSWs children), threats, extortion	43	14	22	5	7	8	6
Indicated at least one of these actions	97	72	53	56	19	24	20
Sexual violence							
Coercion for sexual contacts <u>without</u> condom	70	68	9	–	4	5	–
Forced sex in the form which a FSW would not do (including physical force, group sex)	67	64	8	–	5	2	1
Attempted rape	64	59	8	0,3	1	2	0,3
Coercion to have vaginal sex with clients during diseases, pregnancy, menstruation	48	39	2	1	9	6	–
Rape	42	40	4	–	2	2	1
Coercion to have sex with clients who are known to be mentally ill, cruel, aggressive	25	15	1	–	9	1	–
Coercion to have sex with clients who are known to be infected (HIV, STI, Hepatitis) etc.	7	4	0,3	–	3	0,3	–
Indicated at least one of these actions	86	85	17	1	18	12	1
Physical violence							
Physical injuries/physical pain (for example, beating, strangulation, slap in the face, kicks and other traumas)	74	59	23	6	6	14	2
Physical harassment (spying, control)	47	6	25	3	9	8	5
Forced detention in the places of sexual services provision (apartment, hotel room, sauna, country cottage etc.) during several days (they are locked in, not allowed to go out)	35	27	9	1	5	1	–

Coercion to use drugs or alcohol	20	14	2	1	2	2	0,3
Refusal to provide medical assistance, if necessary, or making obstacles for a FSW to apply for such assistance on her own	16	3	4	1	2	4	2
Indicated at least one of these actions	84	70	38	9	18	21	8
Economic violence							
Coercion for unpaid sex (for example, with husband/partner's friends, participation in unpaid sex with police officers)	67	41	29	0,3	16	5	–
Someone robbed/did not give FSWs the money earned from them or took away the necessary things – food, clothes etc.	45	31	13	2	9	3	1
Indicated at least one of these actions	74	50	34	2	23	6	1

**The total of all lines exceeds 100%, as respondents could select several answers.*

The research data showed meaningful and strong interrelations between the violence towards FSWs in its different forms. Thus, the FSWs who experienced one type of violence are more likely to be affected by other types as well. (Table 3).

Table 3

Correlation between violence types¹

Number of cases of violence	Physical	Sexual	Economic
Psychological	0,635**	0,436**	0,507**
Physical		0,596**	0,55**
Sexual			0,504**

***Correlation of 0.01 is statistically meaningful*

More than 60% of the surveyed female sex workers are exposed to double or multiple risks with regard to violence. Thus, these women provide sexual services in the maximally dangerous conditions – in the car or on clients' territory (apartment, house), on highways, in a hotel room etc. Moreover, FSWs who ride out with a client often do not know to how many persons they will provide sexual services at the place of arrival, they often cannot take decisions to refuse servicing "suspicious" client or several clients at once, etc.

The study results indicated the differences in the violence manifestation levels depending on the places where FSWs provide sexual services. Thus, the girls working at baths, saunas, hotels, leisure venues, vacation hotels or their own or rented apartments are exposed to the lowest risk of violence. In these places household and hygienic conditions are more or less organized, there is a possibility of alarming guards or pimps about the possibility of violent actions.

¹ Pearson correlation coefficient was used to find out the relation.

Those FSWs who service the client on his territory (apartment, house, etc.) and those working in highway cafes and motels are exposed to medium level risk. It is difficult to ensure safety of women in these places.

The women providing sexual services at the street, in the client’s car, in the park, tree belt areas, that is so-called highway, or street FSWs.

Depending on the “working conditions”, the share of FSWs who have experienced the violence is varying – the more comfortable the conditions are, the less frequently violence occurs. (Figure 1). Indicators of physical, sexual and economic violence towards women working in the premises or providing sexual services on the streets meaningfully differs at $p=0,01$.



Fig. 1. Share of FSWs who suffered from different types of violence, depending on the place for sexual services provision, %

It should be specially noted that high level of violence, especially sexual one, in the sex business is a leading factor of FSWs and their clients vulnerability to HIV. These are, first of all, forced sexual intercourse without condom, traumatic sex, rape etc. Moreover, FSWs use of injecting drugs and alcohol also contributes to HIV exposure.

Thus, among all surveyed FSWs 36% have been using alcohol or injecting drugs more or less regularly during the last year (Table 4).

Table 4

Frequency of alcohol; and drugs use by FSWs during the last 12 months, %	Never	Few times per year	Several times per month	Several times per week	Difficult to answer
	Using drugs together with client/s	69	7	11	7
Using drugs before work	62	7	10	18	3
Using alcohol before work	17	17	33	30	3
Using alcohol together with client/s	15	21	36	27	1

The study results showed that among those FSWs who use injecting drugs (people who inject drugs – PWID), the violence indicator is higher that among those who do not use drugs (Fig. 2). It is considerably higher in cases of sexual ($p=0.01$) and economic violence ($p=0.05$).

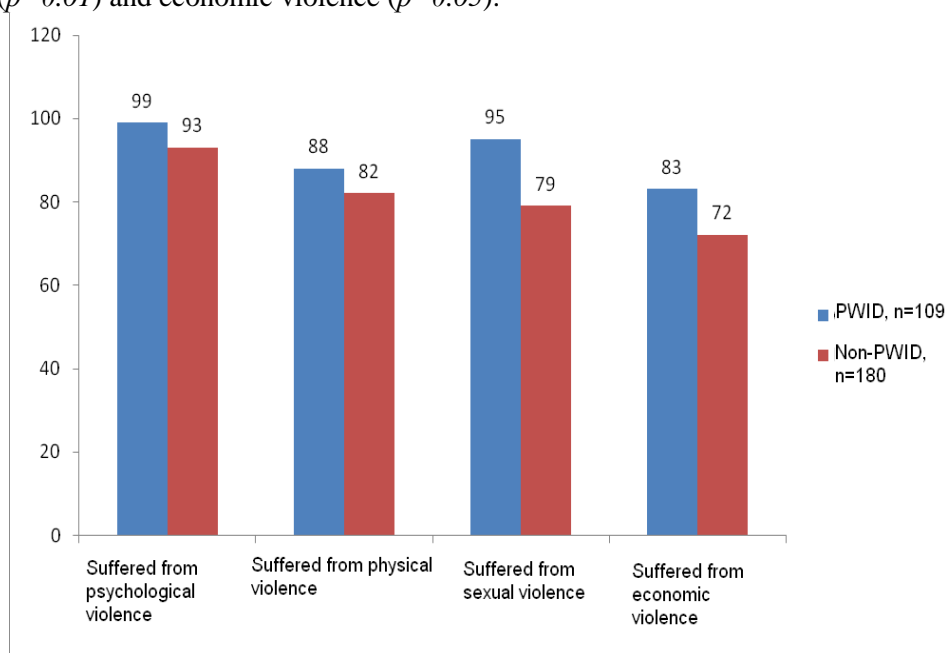


Fig. 2. FSWs who suffered from different types of violence, % by groups depending on drugs use/non-use.

Use of alcohol and drugs directly before or in the process of work also negatively affects the FSWs observance of protected sexual behavior rules. Thus, the girls who use alcohol tend to engage in unprotected sex more frequently (77% compared 64% at $p=0,05$).

These data support the statement that injecting drugs use is a factor significantly increasing the likelihood of violence towards FSWs due to their

inappropriate, or even aggressive behavior, as well as allows unprotected sex practice.

Conclusions and outlook of further development on this activity line.

High level of violence, especially sexual, in the sex business sphere, which includes, inter alia, coercion for unprotected sexual intercourse, traumatic sex, including group sex, are the leading factors of FSWs vulnerability to HIV and STI. The principal reasons behind high vulnerability of FSWs to violence and HIV infection, along with illegal nature of sex business, are also the conditions of sex services provision by FSWs and their experience of drugs and alcohol use before “work”. Thus, there are much more sexual and economic violence incidents towards those female sex workers who use drugs than among the girls who do not use drugs.

To effectively carry out violence and HIV prevention among FSWs it is necessary to perform deeper and more comprehensive study of the principal behavioral strategies used by FSWs to avoid violence or resolve such situations. Implementation of psychological methodologies, in particular, those of projective nature, could be helpful. Moreover, more attention should be paid to scrutinize the mutual influence of different forms of physical and sexual violence on FSWs infecting with HIV and STI. It would be necessary to hold special cohort biosocial study comprising FSWs testing for HIV and STI as its integral part.

1. HIV in Ukraine. Information bulletin No. 36. Kyiv, Ministry of Health of Ukraine, State Service of Ukraine on HIV/AIDS and other Socially Dangerous Diseases, Ukrainian AIDS Center of MOZ of Ukraine, SE «L.V. Gromashevsky Institute of Epidemiology and Infectious Diseases of Academy of medical Sciences of Ukraine», Central Sanitary and Epidemiological Station of MOZ of Ukraine, 2011, 27 p. [in Ukrainian]

2. World Health Organization. WHO multi-country study on women’s health and domestic violence against women: initial results on prevalence, health outcomes, and women’s responses (summary report). Geneva: World Health Organization, 2005, 38 p.

3. *Crago A.L., Rakhmetova A., Shields A.* 2010. The police beat you up, demand money, and will detain you until you pay. Sex work research, Issue No. 12, p. 6–8, available at: <http://www.nswp.org/research-for-sex-work>.

4. *S. Panchanadeswaran, S.C. Johnson, S. Sivaram, A.K. Srikrishnan, C. Zelaya, S. Solomon, V.F. Go, D. Celentano.* A Descriptive profile of abused female sex workers in India. Journal of Health population, 2010, June 28 (3), p. 211–220.

5. *M.R. Decker, A.L. Wirtz, S.D. Baral, A. Peryshkina, V. Mogilnyi, R.A. Weber, J. Stachowiak, V. Go, C. Beyrer.* Injection drug use, sexual risk, violence and STI/HIV among Moscow female sex workers. Sex Transmission Infections, 2012, January 28.