

A Prostitute's Lived Experiences of Stigma

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Abstract

This research used a semi-structured interview method and Smith and Osborn's (2003) interpretive phenomenological analysis to investigate a female prostitute's experiences of stigma associated with her work. To structure the interview schedule, Seidman's (2006) in-depth phenomenologically based interviewing method, which comprises three areas of focus, "focused life history," "details of the experience" under investigation, and "reflection of the meaning" of the experience, was used as a general guide. Ten broad psychological themes were identified: 1) awareness of engaging in what people think is bad; (2) negative labeling by people who discover she is a prostitute; 3) hiding and lying about her identity as a prostitute to avoid being labeled negatively; 4) hiding and lying about her prostitution identity result in stress, anxiety, and exhaustion; 5) wishing she did not have to hide and lie about being a prostitute; 6) questioning and objecting to the stigmatization of prostitution; 7) managing the sense of stigmatization by persons who know about her prostitution by shifting focus away from devaluing and toward valuable qualities of prostitution; 8) developing occupational esteem and self-esteem through reflection of values; 9) compassion towards other people who suffer from stigma; and 10) resiliency.

Keywords

prostitution, sex work, stigma, interpretive phenomenological analysis

Prostitution is often called the world's oldest profession, although whether or not it actually is the world's oldest profession seems beside the point. What is more striking is the existence of this adage itself. Various professions, such as performers, healers, and soldiers, are also ancient ones, but we do not attach a particular meaning to these professions in the way we do to prostitution. What is the meaning behind calling prostitution the "world's oldest profession"?

According to Ringdal (1997), prostitution is not observed in all societies and cultures, and thus prostitution is not a universal phenomenon. Nevertheless, countless artifacts and documents from various civilizations in diverse geographic areas suggest that prostitution existed since the early history of human civilization. Both in societies that have developed prostitution in the past and societies that have developed it more recently, the role and social status of prostitutes differ depending on the particular sociopolitical and legal systems, public health conditions, and gender and spiritual climate of each society. Although the perception, interpretation, and attitude toward prostitutes vary appreciably between cultures, societies that develop prostitution typically put prostitutes under surveillance in one way or another (Bullough & Bullough, 1987; Ringdal, 1997).

It should be noted that the word prostitute does not merely signify individuals who engage in sexual conduct in return for monetary compensation. According to the *Oxford English Dictionary*, a prostitute is defined as, “[a] woman who engages in sexual activity in return for payment, esp. as a means of livelihood; (formerly also) any promiscuous woman, a harlot,” “[a] person entirely or abjectly devoted to another; a ‘slave,’” and, “[a] person who acts in a debased or corrupt way for profit or advantage; a person who undertakes any demeaning or dishonorable act, office, or connection for personal gain” (<http://dictionary.oed.com.ezproxy.humanistic-psychology.org:2048/cgi/entry/50190603>).

These definitions exhibit unmistakably negative values attached to the word *prostitute* (i.e., “debased,” “corrupt,” “demeaning,” and “dishonorable”). Moreover, the term *slave* implies that prostitutes are people who serve others without a sense of autonomy and control or basic human rights. According to the *Oxford English Dictionary*, prostitutes are a group of people who engage in activities that are sexually, morally and socially inappropriate and who are not worthy of human dignity.

Prostitution is illegal in the United States except in several counties in the state of Nevada. Whether prostitution can be defined as an occupation is a subject of debate, but such a debate is beyond the scope of this paper. A large number of individuals actually make a living prostituting, as documented in research studies (e.g., Jackson, Bennett, & Sowinski, 2007; Kong, 2006; Thomson, Harred, & Burks, 2003), and the participants in these studies recognize prostitution as their work. Therefore, for the current research, it is reasonable to assume that prostitutes whose main source

of income is from sex work consider prostitution their occupation. For this reason, prostitution is recognized as an occupation in this study.

In his classic work on the psychology of stigma, Goffman (1963/1986) noted that occupation is an element that is closely related to a person's social identity. Individuals are stigmatized because they exhibit socially undesirable attributes that taint, spoil, or blemish their identities. The meanings attached to the stigmatized individual is that he or she is abnormal, imperfect, defective, or handicapped and therefore, inferior to the people who stigmatize the person. Moreover, the stigmatized individual is "dangerous" and "to be avoided" which leads to the disapproved person being rejected by society. Consequently, the stigmatized individual becomes marginalized and ostracized, which makes the person a social outcast.

Prostitutes have been underrepresented in psychological research, and their subjective psychological experience has been especially overlooked. Social psychologists who were inspired by Goffman have mainly investigated stigma and its effect on people's psychological well-being primarily by studying individuals with disabilities involving a visible physical deviancy such as obesity or a facial scar, sexual minorities, financially underprivileged persons, or ethnic minorities (Hebl & Dovidio, 2005) in spite of Goffman's (1963/1986) repeated use of prostitutes as examples of a stigmatized population in his analysis of stigma. Existing research suggests that prostitutes experience a great deal of social stigma (e.g., Bradley, 2007), but their experience is discussed as if it is a basic condition derived from their profession and as a confirmation of social mores. The current research study attempts to capture the fundamental nature of prostitutes' subjective, and often subtle, psychological experience of stigma.

The Problem

Existing research suggests that the presence of a deep-rooted social stigmatization of sex workers negatively affects their well-being (Bradley, 2007; Jackson, Bennett, & Sowinski, 2007; Kong, 2006; Thomson, Harred, & Burks, 2003; Vanwesenbeeck, 2005). Vanwesenbeeck (2005) found that negative social reactions, stigma, and stigma-related experiences were the most important factors in burnout among prostitutes. Freed (2003) found that the Cambodian prostitutes she studied suffered from a sense of shame

that was derived from their own internalized social stigmatization of prostitutes. Bradley (2007) revealed that topless dancers experience a substantial level of emotional stress in their romantic relationships because their partners fail to provide them with comfort and emotional support in response to their (partners') stigmatization of topless dancing. Thomson, Harred, and Burks (2003) found that a persistent social stigmatization of topless dancing exists despite the legality of the work, and that this stigma influences various areas of topless dancers' lives. For example, many dancers in their study chose to conceal their work from family members in order to maintain a social support system. They also suffered from feelings of confusion and resentment caused by their experience of overt and severe stigma.

Researchers have discussed how the social stigmatization of prostitutes is detrimental to their well-being, but prostitutes' actual subjective experience of stigma is relatively unknown. The present research study will investigate, in detail, one prostitute's actual experience of social stigma in her everyday life. What is her actual experience of the social stigma? What does it mean to her to be stigmatized? How does she encounter a stigma that is imposed by others and come to terms with it in her own sense of identity? How does she manage the presence of stigma in her interactions with others? How does she manage the sense of stigma when with those who know of her work, such as her friends, family, customers and other prostitutes? How does she manage her "spoiled" identity in Goffman's sense? Finally, does she in any positive way express acceptance or pride in her work?

Definition of Terms

The word *prostitution* can be defined in many ways depending on how narrowly or broadly one interprets the trading of sexual services. Bullough & Bullough (1987) report various traditions of temporary sexual relationships between men and women observed in indigenous societies in America, Asia, and Africa. These practices are not called prostitution in these societies, but according to the contemporary Western idea of monogamy, some may argue that these practices can be considered prostitution (Bullough & Bullough, 1987).

The legal definition of prostitution in the United States typically refers to an individual's physical contact with another person or other persons that is sexual in nature conducted in exchange for monetary compensation or other things of value. For example, the state of Washington prohibits

prostitution in Revised Code of Washington (RCW) 9A.88.030, which states, “[P]rostitution (1) A person is guilty of prostitution if such person engages or agrees or offers to engage in sexual conduct with another person in return for a fee” (<http://apps.leg.wa.gov/RCW/default.aspx?cite=9A.88.030>). Sexual conduct is defined here as, “any touching of the sexual or other intimate parts of a person done for the purpose of gratifying the sexual desire of either party or a third party” (<http://apps.leg.wa.gov/RCW/default.aspx?cite=9A.44.010>). In the current study, a prostitute will be defined as an individual who engages in sexual conduct in exchange for monetary compensation or other things of value, because this is generally the most widely used definition in our culture.

Because the word *prostitute* already evokes negative stereotypes, calling an individual a “prostitute” can be offensive at times, even if the person’s profession matches the legal definition of prostitution. Therefore, when soliciting prospective participants, the term “sexual service provider” was used instead of “prostitute.” Moreover, “prostitute,” “escort,” and “sexual service provider” are used interchangeably in this research report. Since the focus of the current study is about the experiences of stigma that on the part of an individual who earns money by providing sexual labor, using “prostitute,” “escort,” and “sexual service provider” interchangeably does not influence the validity, as long as the participant identifies herself as earning a living as a sex worker.

Stigma has to do with a person’s attributes that are socially undesirable and that taint the person’s social identity (Goffman, 1963/1986). Based on Goffman’s analysis, Crocker, Major, and Steele (1998) defined stigma as “a devaluing social identity” (p. 505) that results from negatively valued social attributes. This definition is frequently used by contemporary stigma researchers (e.g., Hebl & Dovidio, 2005; Link & Phelan, 2001; Major & O’Brien, 2005), and thus the current study used this definition.

Method

Recruitment and Participant

The purposeful sampling method was used to recruit one volunteer participant through sexual health professionals in the area where the participant lives. The criteria were that she be an adult (over 18 years of age) who

provides sexual services for monetary compensation, is available to meet me in person for an interview, and is capable of providing a full description of the experience of stigma attached to her occupation. There were no restrictions regarding the participant's gender identity, sexual orientation, or her customer's gender identities and sexual orientation, because the focus of this study was to investigate her experience of the stigma attached to her sex work (i.e., offering sexual services to satisfy customers' sexual appetites and desires).

In 2008, I was invited to a social gathering for female escorts and their current and potential clients. I recruited prostitutes who could participate in my research there. A few days after the gathering, I emailed a formal recruitment letter to the sexual service provider who expressed interest in participating at the gathering and made an appointment for an interview with her. To ensure the participant's understanding of the research purpose, procedure, potential risks and benefits, rights to withdraw from the study at any time before its dissemination, conditions of confidentiality, and her consent to voluntary participation, I discussed the content of the informed consent before our first meeting (Appendix A).¹ The participant is an European American in her late 40s. She is in a stable and committed long-term relationship with her boyfriend, and has an adult son from her previous marriage.

Semi-Structured Interview

The purpose of this research was to understand a sexual service provider's experience of stigma attached to her occupation. The experience of stigma is personal and often subtle. To uncover a sexual service provider's experiences of stigma, an in-depth semi-structured interview method was selected

¹ I did not ask the participant to sign the consent form for the following reasons. Prostitution is illegal in the state this research was conducted, and signing the informed consent proves that the participant is a criminal. My possession of the signed consent form puts the confidentiality of the participant at risk, particularly if I am, in the future, called to be a witness in court for any reason. This would threaten the participant's sense of safety about being in the study, compromising rapport and trust between the interviewer and participant, which influences the validity of the study. Instead of signing, she was asked to check off the sentence that indicates she understood her rights and conditions. The informed consent was read out loud during the interview, tape-recorded, and fully transcribed for record keeping purposes.

because its exploratory nature allows interviewees to provide detailed descriptions of the subject matter and to reconstruct and integrate the meaning of the experience (Kvale, 1996; Patton, 1990; Seidman, 2006; Smith & Osborn, 2003). The interview was conducted at the participant's workplace, and lasted for two hours.

Interview Technique

The strength of a semi-structured interview is its natural spontaneity, in that it allows the interviewee to explore his or her experience in depth within a flexible framework. However, if the interviewer relies too heavily on the flexibility, she will not be able to effectively collect data. During interviews it is especially tempting to pursue irrelevant but interesting topics raised by the interviewee. In order to avoid this possibility, the interview was structured using the methods proposed by Seidman (2006) and Kvale (1996). The detailed interview guide developed for this study is provided in Appendix B.

Seidman's (2006) three-interview method technique is phenomenologically and linguistically grounded, and it provides simple yet structured guidance for constructing interview questions. This technique consists of three distinct 90-minute interview sessions, each session with a different focus. The first interview focuses on the interviewee's detailed life history up to the present time, the second interview elicits details about the experience of the research participant relevant to the topic under investigation, and the third interview invites the interviewee to reflect on the meaning of the topic in the interviewee's life context.

Although Seidman's three-interview method allows the interviewer to collect data in a thorough and extensive manner, recruiting a participant who is available for a series of three separate interviews taking up to 4.5 hours of time without monetary compensation is difficult, if not impossible, due to sexual service providers' self-employment status and reliance on illegal activities as a main source of income. Therefore, instead of adhering to the three-interview method, I adopted Seidman's three areas of interview inquiry to one interview session. In other words, rather than conducting three separate interviews with the participant, I arranged one interview session in which I asked her about: 1) life history; 2) experience of the stigma attached to her occupation; and 3) the meaning of this stigma in her life context. This structure allowed the participant to review her life

story both past and present, which further permitted her to reframe her experience of stigma in life context in one meeting.

In order to clarify the purpose of the interview and interview process, including a reminder about the use of a tape recorder during the session, and to establish rapport with the interviewee, short introductory conversations, termed “briefing” by Kvale (1996), were conducted at the beginning of the interview. In a similar manner, a short closing conversation, or debriefing, was conducted at the end of the interview to follow up on the participant’s feelings. For the current study, debriefing is considered of particular importance because of the sensitive nature of the topic and the possibility of strong emotions being evoked as the participant spoke about her experience of stigma. To provide support to protect the participant from potential harm, the author informed the participant that she would refer her to local psychotherapists if she needed psychological support in the future. These precautions were taken to minimize any feelings the participant might have of being exploited or damaged.

Transcription

After the data was collected, I transcribed the tape-recorded interview as fully and accurately to verbatim as possible.

Data Analysis

For the data analysis of the transcript, I used the interpretive phenomenological analysis (IPA) method (Smith & Osborn, 2003). The IPA aims to explore participants’ psychological experiences in depth and the way they make sense of their world in detail from their own point of view. The IPA method consists of careful readings of the transcript while documenting comments and insights corresponding to the text. Smith and Osborn instruct the analyst to write comments in the left margin of the transcript. The comments are likely to consist of the analyst’s attempts at summarizing, paraphrasing, making associations or connections, or interpreting. Similarities, differences, echoes, amplifications and contradictions are also likely to be noticed and commented on. The analyst goes through the whole transcript in this manner, and then returns to the beginning of the transcript and documents emerging themes in the right margin. The themes should capture commonalities in the data, as well as more essential qualities of it, using psychological terminology. The process of documenting

themes transforms the initial comments from crude analysis to a higher level of conceptualization. The analyst continues thematizing throughout the entire transcript. Each theme is listed in chronological order at this point.

In the next stage, the analyst connects the themes that seem related or associated and clusters them, putting related themes together. At this point, the themes are no longer listed in chronological order but instead organized in a coherent manner. Smith and Osborn suggest that during this process, the analyst compare the themes with the actual words used by the participants in the transcript, and consider whether their interpretation is truthful to what the participant actually said.

The next task for the analyst is to make a table of the themes. To make the table, the analyst identifies the characteristics of the clustered themes and composes categorical titles for them. Themes that are not rich in evidence or do not fit well with the emerging structure are eliminated at this point. In order to facilitate organization and find the source of description in the transcript that will become the basis for the themes developed during the analysis, identifier word(s) and phrases from the original transcript are documented with page and line numbers in the right margin.

If there are more than two participants, each case is analyzed in the same manner, and the extracted data from each case are compared with the other cases to develop subordinate themes. This process does not apply to the current study given its focus on one participant.

In Kvale's (1996) data analysis method, the participant is re-interviewed after the transcript analysis. This re-interview process allows participants to give feedback on the researcher's analysis and to elaborate on their original statements. In order to increase the credibility of the data in this study, I asked the participant for her input on the content of my data analysis. She agreed to meet for two post-analysis interviews in order to provide that input.

Ethical Issues

The current study concerned a prostitute in a state that prohibits prostitution, and thus protecting the participant's anonymity and confidentiality while striving to obtain valid research data was of major concern.² To protect

² I am not required to report the criminal activities of my research participants, although I am required to report suspected child and vulnerable adult abuse and concrete future plans of gravely harmful and dangerous behavior to self, identified others, or others' property. This point was made explicit in the informed consent.

her anonymity, I minimized recording identifiable information during the recording and reporting processes. The audiotape was destroyed promptly after the transcription was completed.

Caring for the participant's well-being throughout the research process was taken seriously. The safety protocol described in the second footnote (i.e., briefing and debriefing) was followed thoroughly. Finally, in order to collect valid data and to maximize the purpose of open-ended questions, the interview schedule was carefully constructed to avoid leading questions (see Kvale, 1996; and Patton, 1990, for the issue of leading questions).

Findings and Discussion

After reading the full transcript numerous times, using the IPA method, ten umbrella themes were revealed. They are:

1. Awareness of engaging in what people think is bad;
2. Negative labeling by people who discover that the participant is a prostitute;
3. Hiding and lying about her identity as a prostitute to avoid being labeled negatively;
4. Hiding and lying about her prostitution identity result in stress, anxiety, and exhaustion;
5. Wishing she did not have to hide and lie about being a prostitute;
6. Questioning and objecting the stigmatization of prostitution;
7. Managing the sense of stigma from persons who know about her prostitution by shifting focus away from the devaluing and toward valuable qualities of prostitution;
8. Developing occupational esteem and self-esteem through reflection of values;
9. Compassion towards other people who suffer from stigma; and
10. Resiliency.

Awareness of Engaging in What People Think is Bad

There is a fundamental sense of "I am engaging in what people think is bad," which is pervasive in the participant's life. This is related to at least three constituents: the participant's parents' negative and anxious attitudes

towards her expressions of sexual desire and activities in her childhood; negative reactions from others when she first engaged in prostitution activity in her mid-teens; and the stigmatization of prostitution to which she has been exposed in the present and past.

The participant did not indicate victimization by sexual violence as a child. She started exploring her body actively when she was between eight and ten years old. She was aware of her own sexual desire and physical response to sexual stimulation. It was during those years that she masturbated to orgasm for the first time. She enjoyed individual sexual activities, but did not tell her parents that she was engaging in them.

The participant had her first sexual partner at age fifteen, and has been sexually active since that time. Her active participation in sexual activities with men as a teenager was apparent in the interview. When still a teenager, the participant disclosed her sexual activities with men to her parents. Her parents reacted negatively to the disclosure. Her father in particular expressed his dissatisfaction with her active sex life, although he did not prohibit it. He had frequent quarrels with the participant about her relationships with her boyfriends. He once called her “an animal” in order to condemn her desire to be alone with her boyfriend.

The participant’s natural curiosity about her own sexuality, her desire for sexual and emotional intimacy, and actual experiences of sexual activity with partners were never acknowledged by her parents in a positive manner; instead she felt they shamed her for her open expression of sexuality. Being shamed by her parents about her sexual activity during this time of her life seems to be closely connected to her internalization of the stigma and shame that others express to her when they discover that she is a prostitute.

The sense of shame and internalized stigma were observed in Freed’s (2003) study of trafficked and captive girls and women in brothels in Cambodia. The women in Freed’s study suffered from a sense of shame for having been in the sex industry, which was “generated from internalized social attitudes” (p. 139) that Cambodian society bred. Cambodian society stigmatized prostitutes and former prostitutes whether or not their participation in prostitution was consensual. These women’s “internalized stigma” was manifested in their acute awareness of being a target of stigma once their history of prostitution was disclosed, and this fear contributed to their decision not to disclose their history of prostitution, even to their families. The participant in the current study differs greatly from the Cambodian

women because she actively chose to engage in prostitution, but the sense of shame and awareness of social stigmatization of prostitutes are common factors between them.

When the participant in the present study was sixteen, she had sex with a stranger she met in a park. The man, who was in his mid-thirties, invited her to his apartment, and they engaged in sexual activity. During this time, he expressed the desire to have intercourse with her and told her he would pay for it, as she narrated:

I was in the park, smoking cigarettes, and this guy came up to me and asked, “You want to go for a drink?” So I go, “Yeah” (laugh) but, then he goes like, “Okay, well, but let’s just stop by my apartment.” And I knew that he was going to try to fuck me, but I wasn’t even worried about it. I thought, “You can try (smile),” so I went. Then he said “Let’s fuck” or something and said, “I will pay you fifty bucks.” And I said, “Oh, okay.”

She felt good about receiving money for sex,³ but people around her reacted to it differently:

I was bragging, like, “I made fifty bucks.” I was happy, but my boyfriend said, “You are a slut. You are a whore!” I felt bad. I guess I just felt bad, but I was like, “Well I made fifty bucks. That’s good (laugh).” . . . Then I told my parents, too. [Because] I wanted to go to therapy. I thought I was fucking too much, and I thought everything was going bad. I thought I was going crazy, maybe I shouldn’t do this stuff [having sex]. I told my parents, “I think I need therapy,” and they go, “Why? You are fine.” So I said, “No I’m not. I fucked a guy for money,” then they said, “Okay, you can go to therapy” (Laugh).

This account reflects the conflict between the participant’s positive feelings about earning money from prostitution and people’s disapproval of this way of earning money. She has experienced this conflict throughout her life as a prostitute. Her idea of “prostitution is bad” originated from her first exposure to the disapproval and condemnation she received for engaging in prostitution, and the idea has been reactivated repeatedly ever since through continuous exposure to society’s stigmatization of prostitutes.

³ The participant was from a middle-class family, and poverty was not an issue at the time. Poverty became an issue when she became a single mother in her mid 20s, the time that she willfully chose to be a prostitute to support herself and her young child.

This continuous exposure keeps regenerating her idea of her socially stigmatized identity as a prostitute.

Negative Labeling by People Who Discover That The Participant is a Prostitute

The psychological experience of being negatively labeled by people who discover she is a prostitute usually takes place in ordinary social interactions. This experience is reactivated each time negative labeling occurs in actual social settings as well as through media exposure (e.g., media coverage of former New York Governor Spitzer's incident).

During our interview, the participant recalled an incident that had occurred several years ago in a local grocery store, in which a young woman publicly condemned her for her sex work. The incident started when she overheard this young woman chatting with a cashier, complaining about her difficult financial situation at the time. The participant spoke to the woman and told her she earned a good living working at a massage parlor. The participant expected a somewhat mild response from the woman, either with or without a positive interest in actually working in the sex industry. Despite this expectation, the woman's response was extremely negative, which resulted in public humiliation of the participant. She narrated the incident:

One time, I overheard this girl, who was talking to a cashier at the store. She was like, "Oh my God, I need a job, I need money, my kids . . .," this and that. She was a cute girl, and I said, "You know what? I will tell you what I do to make money. I do hand jobs." And she goes, "That's disgusting!" and like, she, I don't remember any more than that, but I [thought I] will never [go back to the store] . . . I couldn't go back to the store for two weeks . . . [The woman was] loud, really like, "That's disgusting!" [the participant imitating the woman's voice, shouting] like, very judgmental, really like, she declared me disgusting . . . It was bad . . . "[I thought] Oh, I am telling [her psychotherapist] . . . I [thought], I have to talk about it in therapy."

When the participant heard the phrase, "That's disgusting!" she felt "shocked," and then "ashamed" about being in the sex industry. After feeling "ashamed" in the store, the participant felt that she was responsible for making the woman feel disgusted. She also felt she was a disgusting person for engaging in sex work. It became clear during the interview that when others express negative perceptions against prostitution to her, she feels judged, rejected, disappointed, angry, pained, and frustrated.

People may express stigmatization of prostitutes without condemning them directly. The participant experienced a situation in which a person expressed surprise at the participant's ethically responsible behavior, which did not match the person's belief that prostitutes do not act ethically. When the participant worked in a massage parlor, one of the male clients told her that he had molested his daughter. The participant was aware that the state she lived in required any adult who suspected child abuse to report the case to Child Protective Services. She called CPS and reported the case. When she described how she had found out about the suspected case of child abuse and the operator thus discovered that she was a prostitute, the operator exclaimed in a surprised tone, "You are so ethical!" The participant interpreted this to mean that the operator did not think prostitutes acted ethically. She described this incident in the interview:

I had a client who was a pedophile. In the course of our session, he told me he had sex with his daughter. I knew I should report this [to CPS]. I called them, I told them, and they asked me the way I found out the information, I told them that I gave him a hand job. And they are like, "Oh! [in a tone that the person was shocked and embarrassed simultaneously]" But what I heard at the end [of the report] was, "Oh, you are very ethical," like, [a prostitute fulfilling a civil duty was] shocking! You know, "You are a good person [even though you are a prostitute]," like, that shocked the shit out of them. Why wouldn't I be a fucking good person? Just because I gave him a hand job? [It is as if] [T]he hooker and low life scum are synonymous... I don't understand. Why am I automatically a piece of shit?"

When people are quick to associate prostitutes with devalued qualities, the participant feels angry and frustrated. She also experiences an identity conflict in which her own positive self-image (e.g., I am a decent and responsible individual) and others' negative image (e.g., you must be a bad person because you are a prostitute) contradict each other. The incongruity between the two images evokes two different reactions in her. On the one hand, she counters the negative image on the part of others by thinking, "I am a whore, but I am a better person than what people think I would be." On the other hand, she appropriates in the negative image from others, feeling that she is what people say, as seen in the first example described above (i.e., feeling she was "disgusting"). Thus, negative labeling from others makes it difficult for her to form an integrated self-concept which prevents her from accepting herself and maintaining a positive self-image.

From the participant's description, it is evident that people's general reaction to her prostitute identity is immediate negative labeling. A consequence of negative labeling is a disconnection between the person who labels and the person who is labeled, creating the "I-It" relationship, in Buber's (1970) terms, in which the labeled is viewed as an object rather than an intrinsically valuable human. This disconnection limits her opportunities to establish and maintain meaningful relationships with others. In order to minimize the possible loss of her social support system and to maximize chances to establish and maintain social support from others, the participant minimizes disclosure of her prostitute identity.

Hiding and Lying About Her Identity as a Prostitute to Avoid Being Labeled Negatively

In order to avoid being labeled negatively, the participant minimizes disclosure of her prostitute identity, mainly by hiding it or by lying about it. She stated:

Anytime I am at a party, if someone starts, or if I overhear, someone saying, "What do you do for living?," I get anxious. All the time, any time. You know how people often ask what you do? [When they ask] I say, "I don't feel like telling you."

The participant is open about her prostitution to her immediate family (i.e., parents, sibling, and child) and other persons who are important to her. However, this openness does not go beyond this close social circle. Her family members do not disclose that she is a sex worker to people in their social circle. This may be partly because they want to protect her from being arrested for her illegal activity, but the participant did not mention this possibility in the interview. She stated, "If I meet my parents' friends, I can't be out [about being a prostitute]. I can't be out to my son's friends."

Hiding and Lying About Her Prostitution Identity Result in Stress, Anxiety, and Exhaustion

Having to hide her identity engenders unwanted psychological stress. In addition, having to constantly assess the social situations the participant is in requires her to be vigilant about whom she can interact with and what she can say. Continual vigilance, with its concern about the possibility of

being condemned, generates anxiety and fear of exposure, which greatly limits her social activities. As a result, she experiences significant stress and exhaustion.

Living in deception, or what Goffman (1963/1986) called “modes of double living” (p. 76) not only affects her emotionally, but also becomes an obstacle for establishing a non-stigmatized career path. Because prostitution is heavily stigmatized due to its illegality and counter-cultural nature, disclosing a history of prostitution is likely to put individuals with a history of prostitution in a gravely disadvantaged position, which leads former prostitutes to hide their prostitution history and thus to lie about their career history. The participant in this study believes that most organizations will not hire her if they find out she has prostituted. However, prostitution has been her main source of income for almost three decades, and in order to successfully conceal it, she finds it necessary to lie about many other things in her past and present, which creates a tremendous amount of psychological stress.

Over the past several years, the participant has completed an advanced degree and professional training in order to establish a new career path. During this time, she used prostitution as her main source of income. Although she currently still prostitutes, she works at an office as a new professional to the field. At the time of our interview, her coworkers did not know that she prostituted. The participant hopes to eventually earn enough money to support herself with her new profession, but as a brand new professional, she is struggling to make enough money to support her current lifestyle. Because her current job in her new profession has given her opportunities to gain experience and training, it is important for her to keep the position. This means that she must carefully conceal her identity as a prostitute.

I have to lie to my boss, because, I want a job, right? Let me think. Did I ever tell that I am a whore and get a job? No, I doubt it. I even have trouble writing my resume. Because there is a blank spot [in her career history], I lie. I say I have been a house cleaner, and this is how I got my job. But I haven't done it [house cleaning] for years, you know... So I lie, and I hate [lying]. I get anxious from lying... I am just like, I just get scared, like, “Oh my God,” I just get terrified. It's too much fucking hassles with all this lying. I just can't navigate all these lies.

Wishing She Did Not Have to Hide and Lie About Being a Prostitute

Having to hide or lie, and the resultant psychological stress, leads the participant to wish that she did not have to spend time and energy concealing her identity as a prostitute. The participant's desire not to have to lie about and hide prostitution extends to situations in which other prostitutes hide and lie about their work. She stated:

Girls don't tell their future boyfriend. I asked them, "Are you going to tell your future boyfriend that you do this?" and they say, "No, I will lie." I mean, people are married and lie to their husband about this. How can they live? What kind of relationship is that? I think it is painful to have to guard.

Patronizing a prostitute is a misdemeanor in the state in which the participant prostitutes.⁴ Because the participant has not found a reason that is logical or convincing to her regarding why prostitution is bad and should be illegal, she is frustrated that patrons are pressured to be secretive about their sexual activities, especially to their intimate partner or wife, who is supposed to be the person closest to them. She narrated:

Why should our clients be stigmatized? I know when they are married, they lie, but the single ones, I ask these single ones, "Will you tell your future girlfriend that you did this?" They say, "Oh, no. She would not like me." I feel bad for them, I hate to live a lie, and I hate that they should live a lie.

Her sympathy towards her clients' situation is related to her sense of connection to the members of other stigmatized groups, which will be discussed in detail later.

⁴ The issue of anti-prostitution and anti-patronizing laws gave the participant diverse ideas. She thought the anti-patronizing law was "stupid," although she also thought that patrons would still be stigmatized even without an anti-patronizing law. She viewed the anti-prostitution law as contributing to the escorts' high service fees and appreciated it for this reason. As she said, "If prostitution wasn't illegal, I wonder if the price would go down, and that would worry me. I don't want to do it for less." The participant charged \$220.00 US dollars per hour, which was in the average range for escort services in the area.

Questioning and Objecting The Stigmatization of Prostitution

The participant's wish that she did not have to hide and lie about being a prostitute leads her to question why, in the first place, prostitutes are pressured to hide and lie at all. In addition, she often experiences situations where either she is stigmatized or other prostitutes are stigmatized, which confirms the severe social stigmatization of prostitution. This re-realization, now in the context of the wish that the situation were otherwise and a concern about its justification, was immediately followed by the question: Why are prostitutes stigmatized?

During our interview, I asked the participant what elements are related to the stigmatization of prostitutes. She initially answered, "Prostitution is illegal, basically," which was followed by the statement, "In Holland, it's not illegal, but it is still stigmatized," recognizing that it is not only the illegality of this work that leads to severe stigma, although the illegality plays a great role in stigmatization of prostitution in the United States.

The participant explored her experiences related to this question during the interview. While thinking aloud and describing her ideas about the stigmatization of prostitutes, her tone of voice became uneven, and the speed at which she talked also varied. Her tone of voice changed in various ways, suggesting confusion, frustration, and anger:

I just think whores are maligned in the society . . . They have a bad name. Like, "Oh God, she's such a whore," and that is always an insult. They [people who express stigma] are saying, "They [prostitutes] will do anything for money," and that's the underlying [theme] . . . And, who cares! Like, who isn't doing stuff for money? Who isn't traveling half their life in fucking airplanes, to earn their living? Who isn't suffering? I mean, we [both prostitutes and non-prostitutes] are tired. We don't want to get up to make money, right? But, [people say] "Oh, whores! Oh, they let people fuck for money, oh how horrible!" Why? It's horrible to you [those who stigmatize]. It's not horrible to the whore. But [people say] "Oh, no, the poor whores, it's degrading, she's doing drugs. She's stupid!" People don't have good opinions of whores.

People express strong negative reactions to prostitutes, dishonoring them both overtly and subtly, depending on the situation. However, in the participant's experience, those who devalue prostitution do not explain why they believe prostitutes deserve dishonor and why prostitution is illegal in

most places in the United States, and this both confuses and frustrates the participant. She claims that people are unable to provide convincing or logical explanations for stigmatizing prostitutes, and yet they continue to stigmatize prostitutes. She has encountered situations in which people have expressed prejudice, made incorrect presumptions about her simply because she was a prostitute. Consequently, she feels misunderstood, unrecognized, unappreciated, condemned, and dishonored.

In general, many consider public condemnation and dishonoring of an individual to be unjust or inhuman. However, the stigmatization of prostitutes is widely shared and remains largely unquestioned. As a result, the unjust or inhuman treatment of prostitutes is, to a large extent, condoned. In the face of condoned oppression against prostitutes, the participant wants to battle against the stigma and change the social status quo. However, she also thinks that the nature of the stigmatization of prostitutes is deep-rooted and cannot really be changed, which leaves her feeling hopeless and helpless. However, she has not come across any convincing reasons to stop prostituting, and thus continues to earn her living from prostitution and remains opposed to its stigmatization.

Managing the Sense of Stigma from Persons Who Know About Her Prostitution by Shifting Focus Away From the Devaluing and Toward Valuable Qualities of Prostitution

The participant faces stigma not only from strangers, but also from people who are close to her. Because hiding and lying do not serve her need to counter stigma in her daily interactions within her social circle, which consists of people who know about her prostitution, she has used different methods to manage stigma.

The participant longs for her parents to approve of her sex work, but has never received this approval. Her parents avoid engaging in conversation related to her sex work which she interprets as their tacit and yet immovable disapproval of it. She narrated:

My dad used to talk about his business with me... I think he should be impressed by my earnings... I tell them [parents] about this [prostitution], but they don't talk about it. One time in Florida [in a place where there were many elderly men], I told him, "Oh my God, dad, I can make so much

money here,” but he doesn’t say anything. He doesn’t answer. I am not trying to bother him [by talking about her prostitution]. I am just trying to be real with him, but he can’t engage [in conversation].

In this quotation, the participant is telling her father about the income she earns from prostitution, emphasizing that it is good income, but this does not justify her prostitution to him.

The participant told her son about her sex work for the first time when he was fifteen years old. She chose to tell to him in order to explain why she sometimes had to go work late in the evening. The participant experienced her teenage son as having a dilemma involving both the social stigmatization of prostitution and his need to depend on her income from prostitution. He had overtly expressed negative feelings about her work. She narrated the conversations she and her son had about her work:

He basically accepts it [her prostitution]. He knows my friends accept it. [But] he does not tell his friends... He doesn’t feel like it’s acceptable to his friends. But he did tell his girlfriend, and he told me that sometimes his girlfriend, when she gets mad at him, she says, “Your mother is a whore” to hurt him. I don’t like her (laughs). I don’t trust her... [When he was a teenager] he was like, “I don’t want to think about you with other guys,” and I said, “Sorry” (laughs gently and quietly)... He would say I had “penis breath,” but there is no such thing as penis breath. When he tries to insult me, he says, “You’re a whore,” and I say, “Yeah... but it’s feeding you (gentle but unenthusiastic smile)...” Sometimes he says it’s hard to accept, but he’s glad that I made him a good life. He’s grateful to my income and how I provided for him.

The participant attempts to shift her son’s focus from a devaluing appraisal of her work to a positive value of the work by drawing his attention to its contribution to him personally, of good income. Her effort is somewhat successful in that her son makes this shift and acknowledges the benefit of her work to him even though he also views it as a target of stigmatization.

As a child, her son depended on her financial support, which for her forms a basis of the value of her prostitution work and a basis of her to demand for acceptance and positive valuation. In addition to her good income, the social approval of sex work within her social circle helped him gain this acceptance. Now he is an adult and makes his own living independently from his mother, but his mother’s sex work continues to influ-

ence his life. It has a particular influence on the power dynamics between him and his girlfriend. His girlfriend uses the participant's sex work to put him down, as a power ploy. This is a context of the participant's negative feelings towards her. When her son tells her about instances in which his girlfriend has put him down, the participant's focus shifts from her stigmatized profession to the girlfriend's unfair treatment of her son.

When the son complained about the illegality of her work, the participant countered his accusation by shifting his focus of argument to the quality of the service she provides that satisfies her clients as another basis of the positive value of her work. She said:

He says, "See mom, you are doing illegal business" ... One time he said I wasn't making an honest living, and I said, "Yes I am." ... My clients come, they know what they are going to get, they leave happy, and they come back for more. That's honest ... It's consensual adult, there is no forcing, I mean, there is nothing wrong.

This statement shows that the participant's moral reasoning is not based on the legal status of prostitution. For her, making an honest living means service to consenting clients, meeting clients' expectations, and their consequent satisfaction. The participant counters her son's negative moral judgment with evidence that the service she performs, based on her customer's experience, is valuable and good.

Developing Occupational Esteem and Self-Esteem through Reflection on Values

During the interview, the participant actively described her sex work in positive terms, praising its flexible work hours as well as its educational and therapeutic outcomes for clients. She also said that it was *harmless* entertainment for them. Active construction of a positive meaning of her work by focusing on its impact on and relations to the well being of clients boosts her occupational esteem, which helps the participant maintain a positive occupational identity.

When I asked if there are any pitfalls in her work, the participant said, "I know my resistance to talking about pitfalls comes from society saying, 'You are bad,' so I have to say, 'No, I'm not.'" She then mentioned two aspects of her work that she perceived as challenging: the loss of sexual desire and the emotional labor required to perform sex work. The loss of

sexual desire results from engaging in frequent sexual activity with multiple partners at set times reserved in advance that are completely unrelated to her own spontaneous sexual desires. This problem appears to be largely physical in nature, and according to her, can be resolved by having a respite from requirements of sexual activity for a certain period of time. The problem of emotional labor in prostitution is more complex and can be more costly.⁵

As the participant reasons, in an escort service the goal is to provide clients with sexual, physical, and emotional satisfaction. Emotional labor is a crucial element in satisfying customers. Patrons do not visit escorts and pay more than \$200 per hour simply to ejaculate; they expect their escort to play a temporary lover role. In this temporary lover role, the participant responds to customers' expectations that she actively and fully participates in sex, that she provides love and care, and that she herself experiences sexual pleasure, ideally an orgasm. What patrons gain from this service is an increased sense of self-esteem from feeling sexually desirable, feeling like a lovable person who deserves care. Her sexual service boosts their image of themselves as competent lovers who are able to give a woman orgasms. The participant described this:

They want to kiss me, but I don't kiss them [clients]. They want to lick my finger, do this fucking love thing that I am not into. I can't fake that much. Imagine, having sex five times a day with different people, right? Not everyone will be good at it, but what are you going to do? They want it. We have to put some effort into it... You can't tell them the truth like "That annoys me." I fake orgasm, because they love me to come. I have sex with three guys a day, I am not going to come for three guys a day, but they all want me to. I hate faking orgasms, I hate the whole bullshit, but making me come helps them feel valid. I feel like it's a service to them... I don't like faking orgasms. I just want to tell them, "You know what? I am not in the mood to have an orgasm now." But since they get to spend two hundred only once a month for one sexual experience, they want it to be everything.

⁵ The participant did not mention the possibility of infection with sexually transmitted disease as a pitfall. This is because she always practices safe sex (e.g., condom and glove use for penetration) with customers. She also did not mention sexual violence. Whether or not she has ever been victimized by sexual violence during prostitution is unknown.

Prostitutes, in particular those who work as escorts, must be physically, sexually, and emotionally attuned to their clients' physical, sexual, and emotional needs. This requires sensitivity, responsiveness, and interpersonal skills. Just as clients in any other industry, some patrons are needy, rude, or awkward, and serving their needs is emotionally and physically draining. Clients want to get their money's worth and are demanding. The participant stated, "It is a lot of emotional giving. It's very exhausting to be attuned to them and to be there for them. Making it good for them is taxing."

Playing a sexually desirable and desiring woman is a crucial part of escort service. Ironically, being competent in playing a sexually desirable and desiring woman comes with a price of being labeled as "nymphomaniac." The participant encountered numerous occasions where people who discovered that she was a prostitute automatically assumed that she had insatiable sex drive. She stated:

They think that I have a huge sex drive. [But] I don't want to even fuck these guys [customers], I don't want to fuck just anybody. I am fucking them for money! I mean, they [people] think I am nymphomaniac.

Women who are perceived as "nymphomania" are highly stigmatized in the contemporary United States, where women's chastity is valued. Moreover, once a woman is labeled as a 'nymphomaniac,' her general morals and ethics also become questionable. The participant said that she herself has behaved ethically in her daily life and has developed her ethicality by obtaining higher education and professional training that included ethics education. Nevertheless, she experiences others people as tending to associate prostitutes with hypersexuality and low moral value. She stated, "If you fuck for money, then everything about you is questionable. Your morals and ethics, and everything are questionable. Everyone thinks that."

In light of the stigmatization of prostitutes, outsiders are reluctant to acknowledge a positive value in prostitutes' efforts to accommodate clients' needs. As a result, the participant has limited resources for gaining support for coping with and enduring her work-related problems and stress. Instead of sharing her work-related stress with outsiders, she shares it with other prostitutes. This in-group social network with other prostitutes, who understand her goals and the stress she suffers personally in performing sex work, gives her a sense of connection and social enjoyment without fear of being stigmatized.

When questioned about whether or not she stigmatized other prostitutes, she replied, “Whores have this thing, ‘You are more of a whore.’” By this she means that prostitutes compare themselves with other prostitutes and look down on those who provide services that they view negatively. The participant acknowledged that she stigmatizes certain prostitutes, specifically streetwalkers and prostitutes who offer more risky or “disgusting” services, such as allowing anal penetration during intercourse, licking the anus of customers, or swallowing customers’ semen. The in-group social comparison that she described helps differentiate her from more stigmatized prostitutes, contributing the construction of a positive work identity.

Compassion Toward Other Stigmatized Populations

In the interview process, the participant came to realize that her experiences of being severely stigmatized also had a positive meaning in that they have helped her to recognize other stigmatized groups and to develop compassion towards them. As a person who lives on the margins of society, at least professionally, the participant identifies with other groups of people who are also on the margins, including racially or sexually oppressed individuals as well as the male clients she regularly encounters. She expressed a great deal of sympathy and compassion toward those male clients of female prostitutes who are themselves stigmatized when their deeds become public knowledge.

I think this job has helped me to see people, love these people . . . They are just humans [when they are] with me. They are, like me, not freaks. They are not monsters. They are just people who want love. I think I start seeing the oneness in people, doing this, and I keep seeing it . . . I fell into it [prostitution] and liked it, and stayed. It has felt like, it has benefited me for personal growth in a lot of things . . . They [her customers] are not sex maniacs, they just need touch. Who doesn’t? They are starving for human touch and connection.

From her experience of being stigmatized, the participant has developed the ability to see the humanity in other stigmatized groups, a sense of community and connection with those others, and sympathy for their needs, desires and suffering. Being marginalized has opened her eyes to a wide spectrum of human conditions.

Resiliency

Finally, it is worthwhile to examine the participant's overall psychological resiliency despite the challenges and difficulties she faces as a prostitute. When I asked her about the meaning of the stigma that she experienced as a prostitute, she replied:

Are you familiar with the theory of margin and center? The center is the mainstream, and the margins are me [minority]. We are sometimes center and sometimes margin, depending on lifestyles. As a Caucasian, I am in the center. Margins know more about the center than the center knows about the margins, because the center thinks, "Here we are. This is life" [and thus do not pay attention to the people in the margins]. I do like margins, but I like the center too. But I am glad to be in the margins, because I like people in the margins. I identify myself with them... We are original, unique, and special... There is a good part to oppression. You get stronger, you can see things more clearly, and you develop strategies.

A prostitute can conceal her identity. This allows the participant to belong to the mainstream and marginalized groups simultaneously, accessing the lifestyles and perspectives of both sides.

Finally, although the participant acknowledges and takes in the stigmatization of her profession to some degree, she continues to critically ask why prostitutes are stigmatized. She is not able to find a convincing answer to this question, and she therefore rejects the stigma and the negative evaluations of outsiders. Furthermore, she wants to understand the issues associated with prostitution including the discrimination against prostitutes and to ask questions about those issues as well as to share her positive views and valuations of prostitution to outsiders. Questioning other's views on prostitution and offering alternative views give her life meaning and help maintain a positive image of herself.

Follow Up with the Participant

After the data were analyzed, the participant and I met for a second time to correct or gain perspective on the content of my data analysis. I modified the original result section according to this feedback and re-analyzed the data. After the second analysis, I sent the participant the revised paper

for verification and met her for a third time. At this meeting, the participant gave me her overall impression about the revised analysis, pointed out an incorrect wording in a direct quote from her narrative, and added information relating to the interview questions. At the end of our meeting, we agreed the analysis was thorough.

Limitations

One of the most important limitations of the study is that the interview schedule did not include questions that specifically asked about the illegality of prostitution. Historically, sex workers have always been stigmatized regardless of their legal status. During the data analysis, however, it became apparent that the participant's experience of stigma was closely related to the illegality of the work. Asking structured questions regarding the issue of illegality would have helped to deepen understanding in this area.

Another limitation is the lack of information regarding the participant's experience of stigma when she was actually with her clients. Her comments about her clients included both positives and negatives, but she did not provide specific information on her experience of stigma in the context of her face-to-face encounters with clients. Therefore, whether or not she has experienced stigma from her clients remains unknown at this point. Structured questions regarding this issue will be meaningful in future research. Moreover, it would have been beneficial to collect information on whether or not she has experienced physical or psychological trauma from interactions with customers. Systematic questioning in this area might have helped to obtain a concrete portrait of any interaction or transaction she has had with customers that involve the experience of stigma.

Thirdly, this study did not systematically investigate the issue of her choice to continue prostitution. According to Goffman (1963/1986), prostitutes' stigma is often considered to be associated with "blemishes of individual character" (p. 4). Alcoholic, mentally ill, unemployed, and suicidal individuals are also in this category. Unlike physically disfigured persons or ethnic minorities, which Goffman called "abominations of the body" category and "tribal" stigma, respectively, stigmatized individuals in the "blemishes of individual character" category are considered to be *personally responsible* for their own tainted identity, because stigmatizing attributions of this type seem, and often are, within their willful behavioral control.

Individuals in this category can choose to continue or cease to be targets of these socially devalued attributions, and therefore they often become a target of added stigma for being “weak willed” or “morally deviant.” Focusing on the issue of controllability and the participant’s choice to continue working in the prostitution business in the interview would have enriched understanding of her experience of stigma and remains a promising direction for further investigation.

Finally, this research investigated only a single case. Depth interviews with a larger number of participants and comparison of the data and findings with the experiences of other prostitutes will be a fruitful direction for future investigation.

Conclusion

This study has examined a female prostitute’s experience of stigma associated with her work and has shown that severe stigmatization of prostitutes is a real phenomenon. It was shown that the interview structure applying Seidman’s interview method and Smith and Osborn’s Interpretive Phenomenological Analysis method is suitable for this topic of study.

By analyzing the participant’s description of her experience of stigma, the author identified ten broad psychological themes and subtle experiences related to each theme. The most notable psychological experiences include: stress and exhaustion from controlling her prostitute identity; vigilance, anxiety, and fear of exposure of the prostitute identity; confusion, frustration, and anger from being stigmatized as a prostitute, and feelings of being misunderstood, unrecognized, unappreciated, condemned, and dishonored. The participant managed her experience of stigma by critically questioning the legitimacy of the stigmatization of prostitution and by focusing on positive attributes and valuable qualities of her work. Finally, it was found that despite experiencing the negative psychological effects of stigma, the participant was able to use experience of stigma for personal growth, including developing personal resiliency and a compassionate connection with other stigmatized individuals.

The findings of the current study explore the experience of stigma from the subjective perspective of a prostitute who is currently in active service. This stigma reflects the values of the society in which the participant lives and is related to various dimensions of her life. Stigma is not only a source

of her vulnerability and suffering but is an occasional for her resiliency as well. It should be noted that reactions to stigma vary greatly from one individual to another (Major & O'Brien, 2005). Further interviews with other types of prostitutes might help to deepen understanding of the experiences among prostitutes living in our society, which stigmatizes people who engage in “dirty work,” as well as to shed new light on the related issues of gender and sexuality.

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Appendix A

Informed Consent Form

Purpose

You are invited to participate in a qualitative research study. The purpose of this research is to study your experience of stigma attached to your work as a female sexual service provider. The findings of this current research will be reported in a written form for a research course at the Saybrook Graduate School. The findings may also be reported in my future dissertation along with the cases of other sexual service providers and in publications.

Procedures

In this study, you will be interviewed individually. The interview will last about 60 to 120 minutes, and will be conducted in a private setting. The interview will be audiotaped, and I will transcribe it. During the transcription process, identifying information such as personal names, organizations and locations will be disguised to assure anonymity. The tape belongs to both you and me, which means that you are giving me permission to use your words in the ways you used them in the tape. There might be additional interviews, either in person or via phone, if I need to clarify information or need to gather more data to understand your stories better. The tape will be destroyed after data analysis.

After gathering data, I will analyze the nature of your experience of stigma. I will offer you to a chance to meet with me a second time so that you can review the data you shared with me in the interview to verify the accuracy of my understanding of your experiences before complete analysis is finalized. As such, this research process is a collaborative effort between you and me.

Participation

Your participation in this research is strictly voluntary. You may refuse to participate at all, or choose to stop your participation at any point in the research, without fear of penalty or negative consequences of any kind. Moreover, you are not required to answer all of the questions asked during the interview. You may refuse to answer any questions you do not want to answer.

Risks

The research procedure will involve asking you about personal experiences that might be potentially uncomfortable. I will make every effort to minimize your psychological distress. However, if you experience a significant level of psychological distress associated with the interview process and feel the need to obtain professional help to debrief your experience, please contact me at [researcher's email address provided]. I would be happy to provide several names of psychotherapists in the area. If you decide to see a psychotherapist to discuss psychological distress caused by our interview, you can meet the therapist at no cost to you for up to 3 sessions.

Benefits

There will be possible personal benefits from your participation in this research. The interview procedure may help you gain a new perspective about your experience of stigma and about other human experiences. You may also obtain a deeper understanding of your personal experiences, and discover their meanings to you and to the people you interact with. Furthermore, the results of the research may contribute to the field of psychology and other social science fields.

Confidentiality and Limits to Confidentiality

The information/data you provide for this research will be treated confidentially, and I will keep all raw data in a secured file. The results of the research will be reported as aggregate summary data, and no individually identifiable information will be presented. The followings are legal exceptions to your rights to confidentiality:

1. If you report suspected child abuse or vulnerable adult abuse, I must report this to the relevant agency for investigation.
2. If you report that you are at imminent risk of harm to yourself, others, or property, or if you appear unable to care for yourself, I must contact the County Designated Mental Health Professional for an assessment of your safety.
3. If you pose a credible threat to the safety of (a) another identified person(s), I must contact that(those) person(s) and the police.

Consent

Your checkmark on this form indicates that you have read and understood the foregoing information explaining the purpose of this research and your rights and responsibilities as a participant. Your checkmark below designates your consent to participate in this research, according to the terms and conditions outlined above.

Please check here _____ to indicate that you have read the above information, received a copy of this form, and agree to participate in this research.

Date: _____

Appendix B

Interview Guide

Briefing

“Thank you for participating in this research interview. I am interested in your experience of stigma as a sexual service provider and the meaning of stigma to you. In order to understand your experience, I will be asking you questions that focus on three areas. They are 1) your life history, 2) your experience of stigma, and 3) the meaning of this stigma to you. Our conversation will be tape recorded, so please speak clearly. The tape will be destroyed once I complete transcription.”

The First Phase: Focused Life History

The purpose of this interview is to review the participants’ life history up to the time she became a sexual service provider. My task is to allow the participants to reconstruct their early experiences in families, in school, with friends, in their neighborhood, and work, as completely as possible, in order to put their experience of stigma into their life context. How did the participant come to be a sexual service provider?

Interview questions include:

- Would you please describe your past life, up until the time you became a sexual service provider, going as far back as possible?
- What is your education and previous work?
- What was your relationship like with your parents (siblings, teachers, friends, etc.)?
- Could you tell me about your history of sexual development?
- When and how did you come to be a sexual service provider?
- What is life like for you as a sexual service provider?
- What is your view about selling sexual services?
- What is it like for you to be a sexual service provider?

The Second Phase: Details about the Experience

The purpose of this interview is to focus on the concrete details of the participants’ present lived experience of their work and of the social stigma attached to it. My task is to gather a detailed description of their experience of stigma. Interview questions include:

- Please describe your work. What does your typical workday look like?
- What service do you provide, and what types of clients do you see? How many clients do you see? How much do you charge? Where do you practice?
- Please describe your experience of stigma as a sexual service provider in detail.
- What is it like to be stigmatized because of your occupation? What is the hardest part?
- How does this stigma impact your life?
- What do you do to avoid being stigmatized?
- Do you find that you stigmatize yourself or others in the same profession? Please describe.
- How do you feel when you face situations in which you feel stigmatized?
- What is your opinion about the stigma attached to sexual service providers?
- What would you like to see happen regarding the stigmatization of sexual service providers?

The Third Phase: Reflection on the Meaning

The purpose of this interview is to allow the participants to reflect on the meaning of their experience of social stigma. The participants will be given a chance to make sense of their experience of stigma by looking at their present experience in detail.

- What does it mean to be stigmatized as a sexual service provider?
- How do you make sense of your life as a sexual service provider (what meanings do you give to your life, to your work)?
- What does it mean to you to be a member of a stigmatized group?
- What do you think of your present life?
- How do you feel about your present life in the context of your life experience as a sexual service provider?

Debriefing

- Thank you for sharing your stories with me.
- How was it for you to talk with me about your experience?