

Violence and Post Traumatic Stress Disorder in a Sample of Inner City Street Prostitutes

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This article examines the experiences of violence and the prevalence of post traumatic stress syndrome among street prostitutes in Washington, D.C. The current research project looked at 100 female, male and transgender male street prostitutes.

The authors note that people who are prostituted* are at increased risk for a series of “serious health problems” related to being prostituted. Some of these health problems include physical and sexual assault, robbery, murder, physical and mental health problems and substance abuse. The authors also note that although all people who are prostituted are at risk, people who are prostituted on the street are at even greater risk due to the environments in which they work.

The authors further note, relying on earlier research, that physical and sexual assaults pose the most serious health risk. In previous research of prostituted women, assaults were common and were perpetrated by customers, pimps and others (Farley and Barkan, 1998, Silbert and Pines, 1983).

Given the relationship of experiencing violence, the presence of threats for experiencing such violence, and lack of supports places people who are prostituted at increased risk for psychological distress when they do experience violence and trauma. The current research project examines the experiences of violence by female, male and transgender males who are being prostituted on the streets of Washington, D.C. and the presence of PTSD symptomatology.

METHODOLOGY

The authors used the “PTSD Checklist” (Weathers, Litz, Herman, Huska, and Keane, 1993) to assess levels of post traumatic stress, and worked with a community based organization in Washington (Helping Individual Prostitutes Survive – HIPS) to gain access and trust of the people who are prostituted for the research project.

RESULTS

140 individuals were initially approached, and 100 agreed to participate in the survey. 42% were female, 32% were male and 26% self-identified as male transgender (biological males who dressed as females and were at varying stages of gender transition). 74% of the sample were

* The authors use the term “prostitutes” throughout their paper. Because this labels the person and minimizes the harm and violence that occurs to them, I refer to them as “people who are prostituted.”

African American, 12% European American, 3% Latina/o, and 11 described themselves as “other.” The participants ranged in age from 18 – 52 with a mean age of 30½. As the authors note, there is reason to believe that some of the respondents were under the age of 18 but gave 18 as their age due to fear of possible legal retribution. On the average, the age that these people entered prostitution was 18.8, but ranged in age from 7 to 35. When asked if they wanted to leave prostitution, 67% of the females, 91% of the males, and 73% of the transgender males responded “yes.”

Forms of Trauma

44% of the total reported childhood sexual abuse before entering prostitution.

66% reported current or past homelessness (66.7% of the females, 78.1% of the males, and 50% of the transgender males).

61% reported that they had been physically assaulted since entering prostitution – 75% by customers. 80% reported being threatened by someone with a weapon, and 50% reported being raped (44% since entering prostitution).

Post Traumatic Stress Disorder

42% met the DSM-IV criteria for PTSD. There were some interesting differences between the groups, and between the specific symptoms of PTSD. Although the only statistically significant differences were found between the men and the transgender males (with men reporting higher rates of PTSD), these differences may still be meaningful in other ways.

<u>Item</u>	<u>Female</u> N=42	<u>Male</u> N=32	<u>Trans</u> N=26	<u>Sample</u> N=100
PTSD Severity Score (Mean)	40.2%	47.9%	36%	41.6%
% meeting DSM-IV diagnosis	40.5%	59.4%	23.1%	42%
% Re-Experiencing Symptoms	76.2%	78.1%	50%	70%
% Avoidance Symptoms	52.4%	65.6%	34.6%	52%
% Hyperarousal Symptoms	59.5%	68.7%	53.8%	61%

The results suggest that there are two specific areas of abuse that were moderate predictors of PTSD – childhood physical or sexual abuse.

DISCUSSION

Within the results were other findings that are worth explicating. Women reported the highest incidence of physical assault and rape. The rates of violence (61%) and threats (80%) that the

people who are prostituted reported in this research is dramatically higher than the rates of the general public (9% and 19% for men, 7% women) as was the reports of rape – 50% compared to 0.7% males and 9.2% females in the general public).

Females and transgender males reported begin raped by customers, where as males reported “never” being raped by customers. While the authors suggest that this may be as a result of women being perceived as weaker and thus better able to take advantage of, why this apparent difference exists deserves further attention.

The violence that the people who are prostituted in the current research project was experienced by a wide variety of perpetrators: customers, pimps, strangers, as well as previous violence perpetrated by parents or caregivers. These findings are consistent with the findings of other research. It is worth noting that the males reported higher rates of childhood sexual and physical abuse than did either the females or the transgender males. This may explain some of the higher rates of PTSD among the males in this sample.

The rates of PTSD is similar to other research of people who are prostituted, as well as to those of battered women and other crime victims. These findings reinforce the need to understand people who are prostituted as a victims and deserving a full range of accessible support and advocacy services similar to any crime victims.

In addition, all three groups indicated a high degree of desire to leave prostitution, although the males reported a particularly high desire to leave. This finding has important implications for intervention services as they are developed for people who are prostituted.

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