Development of Children of Female Commercial Sex Workers in Vijayawada

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Children of female sex workers from ten areas were studied in the city of Vijayawada, the commercial nerve centre of Andhra Pradesh where the descriptive survey design was adopted. The research variable of development was assessed through physical, psychological and social development factors. Regression analysis shows that education, among other variables, contributes positively. Sex, as a variable, is conspicuously absent in the equation, thus, arousing uneasy questions. Growth centres are, therefore, recommended to strengthen specific areas of development.

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INTRODUCTION

The status of children the world over truly reflects their nation's progress. It is this fact that motivates right thinking citizens to invest in child development activities. Protecting the right of children to survive, to education and develop into realising their full potential, therefore, becomes a pivotal point in a nation's development.

The face of the children of India can be seen portrayed against the syndrome of poverty and deprivation. While several categories of children are in the grip of social and physical disadvantages, the children of commercial sex workers have not only been marginalised, but receive scant attention as well. Social institutions of education and marriage slam the doors on their face. Besides, they are caught up in an ever tightening grip of the vicious cycle of commercial sex. Men and women inside and outside of the criminal network, with vested interest uppermost in their minds, are ready to raise these children with the intention of returning them to the quagmire of the flesh trade.

While various factors contribute to the development of the child, the question must be addressed within the context of commercial sex

trade. In the state of Andhra Pradesh, over 10,000 women have been estimated to have taken to this trade.

Vijayawada is the second largest city in Andhra Pradesh. Located on the banks of the Krishna river, it forms apart of the district the same name and is spread over an area of 58 sq kms, with an estimated population of ninelakhs and an additional floating population of three lakhs.

Commercially, Vijayawada is the nerve centre of the state. The phenomenal growth of commerce has led to an unprecedented increase in support activities and also in the demand and supply. Perched strategically on the trade route, National Highway No. 5 runs through the heart of the city leading to heavy influx of lorries, trucks and other transport vehicles, a sure sign of rampant spread of HIV/AIDS and other sexually transmitted diseases.

This study focuses on the development of children of female sex workers (FSWs) in the city of Vijayawada.

REVIEW OF LITERATURE

Based on various sources, Kapur (1993) estimated that, approximately 20 per cent of the sex workers in the country are girl children. In the city of Vijayawada, out of 200 blood tests, 12 cases tested positive for HIV, which worked out to be between 50-60 per 1000. This is five times the national average of 16 positive cases per 1000. Among the sex workers, 50 per cent tested positive for HIV (Samaram, 1997). These figures show the moral and physical danger the children face.

Sonawat and Chopra (1996: 51), have pointed out that there is a growing concern in the government circles, academicians, researchers and voluntary organisations that children, specially girl children of sex workers, have been deprived of early childhood care. A deprived home environment, health facilities, food and clothing, poor physical, emotional and social development, are just a few among a host of factors. The various specific drawbacks and hardships endured by these children have been reported by Desai and Apte (1987) and Desai, Apte and Parwani (1986).

Apprehensions about and concerns for the children of commercial sex workers, have been expressed in various fora and strategies to tackle these have been spelled out as shown in several reports (Bhaskaran, 1990; Dasgupta, 1990; Das and Chopra, 1990; Katyal, 1994; Patkar, 1991; Pawar, 1991; Singh, 1990).

Discussing the plight of the girl child in red light areas of Mumbai, Patkar (1991: 71) traces the immense inhuman conditions they are

subjected to. These children are vulnerable to the ways of the trade from their birth and at every stage of their growing up. In fact, they are known as daughters of the street and are discriminated against and stigmatised at all levels.

It is a well-known fact that girl children face a life time of deprivation and discrimination (even without being the children of sex workers) (Ghosh, 1991). This fact is underscored by Anandalakshmi (1991), who points out the fact that in a tradition that over-indulges the male, the female child is surely at a disadvantage. In her study of child rearing practices and behaviour development of the girl child in Andhra Pradesh, Bhogle (1991) raised certain issues which showed that girls differed significantly from their male counterparts. Gender discrimination has, thus, been taken for granted, especially among the poorer classes.

The contribution of education to specific areas and overall adjustment and development have been noticed all along. This fact has been brought out in a study, in the slums of Hyderabad, where education, as a variable, contributes significantly towards adolescent adjustment (Anandraj, 1992).

Familial variables reflecting the structure, function and quality of the environment have been associated with the quality of development of a child. Friction between parents gives rise to anxiety among children (Majumdar, 1985). A poor home environment results in significantly more frequent occurrence of emotional disturbance as compared to others (Dhoundial, 1984). Parental support was found to be a powerful correlate of school achievement (Singh, 1983). Specific relational variables such as mother's personality, the extent of her acceptance or rejection have all been reported to play a major role in the development of the child, be it normal or faulty. Relationship between mother's personality and behaviour disorder in children, have been pointed out by Broody (1969) and Britton (1962). Bowlby (1951) inferred that serious emotional deprivations in the mother's childhood lead to her children facing the same pathogenic experiences.

The concept of development of the child has been viewed as the emergence and expansion of the capacity to provide greater facility in function. This development is achieved through the process of growth, maturation and learning with quantitative and qualitative changes. Sharma and Gairola (1990), and Mussen, Conger, Kagan and Huston (1984) have focused on the person's physical and neurological structure, behaviour and traits that emerge in orderly ways, Liebert, Poulos

and Strauss (1974), refer to development as a process of change in growth and capacity over time as a function of both maturation and interaction with the environment. Broadly, the foundation of overall development can be traced to the areas of physical, psychological and social development.

Studies in physical development, repeatedly show the association between birth-weight and motor development. In a longitudinal study in and around Hyderabad district in Andhra Pradesh, a correlation between mothering and infant activities and infant birth weight were established (Arya, 1980). Rao, Shastry and Vijayaraghavan (1974) have shown the ill effects of malnutrition in the slum children of Hyderabad. Kadam, Salunke, Jhadhav and Bonsale (1983) pointed out that malnutrition does not occur in isolation, but is associated with socioeconomic and health factors. Significantly better mental development has been reported in an experimental research with supplementary nutrition in the villages of Andhra Pradesh (Bhogle, 1979).

Psychological development is directly associated with nutritional level and with increasing severity of malnutrition. There is a highly significant fall in the performance on the intelligence scale, especially among children in the crucial years of development namely, 1-6 years (Kalra, Mishra, Kumar, Prasad and Dayal, 1980). Lowering of mental function has been traded to specific nutritional deficiency diseases such as Kwashiorkar (Pareek, Udani, Naik and Shah, 1974).

The social development of the child is his/her essential link between self and the world around. Children from advantaged and disadvantaged social backgrounds had significantly different IQ levels (Sharma, 1984). Low social class of the children contributed to them being highly dependent. Besides, social factors such as caste and education of parents, were also significantly related (Bhogle, 1983). Majeed and Gosh (1983) have found the effect of social class to be significant on cognitive differentiation while the socioeconomic status may be predicted by knowing the subjects' mental development (Sen and Goel, 1982).

OBJECTIVES

1. To study the pattern of development of the children of female sex workers, Vijayawada.
2. To study certain select personal, familial and social independent variables of the subjects.
3. To analyse the relationship between the variable of development and the personal, familial and social variables.

METHODOLOGY

The descriptive survey design was selected. Conceptually, the study aims at analysing the physical, psychological, social and overall development of the target children as the dependent variable. Select personal, familial and social independent variables, were analysed to establish their association with and relation to the dependent variable, thus, determining the pattern of development.

Hypotheses

1. Boys and girls differ significantly in their development pattern.
2. Stronger the education variable, better the development.
3. Familial variables play a more significant role in the development of children.

Definition of the Concepts

1. Pattern of development: The term pattern of development is used to refer to the totality of physical, psychological and social skills and their different levels measured among the children in the study.
2. Female Sex Worker: is defined as a woman who has a biological child or is bringing up a child who fits the definition of child in the study, living in the poorer sections of Vijayawada, among others of the same line of work, that is, sexual activities for economic gains.
3. Child: any person
   - born to or raised by a female sex worker,
   - resides at the time of the study in the areas selected for the study, and
   - is within the age category of 0-45 years.

Sample Design

In order to avoid subjectivity and bias, probability sampling was used. Out of the slums and backward areas of Vijayawada, an in depth search was made, using various contacts, to locate pockets of organised sex work. Ten locations were selected using this design.

A complete and rapid survey in these localities provided a sampling frame consisting of 312 children who fit the definition of the study. All were included, that is, the entire universe was studied. The unit of analysis was the child.

Methods and Tools of Data Collection

The basic methods of interviewing, observation and case study were used for data collection. The tools used were interview schedule, consisting of questions pertaining to the major variable of development and the independent variables. The questions were to be asked and filled by the researcher. Information was sought, both from the mother and from the child. Standardised psycho-social scales such as Vineland Social Maturity Scale, Binet-Kamat Test of Intelligence and Gessel Development Schedules were used to measure the psycho-social development. Seguin Form Board (SFB) was used to measure the development quotient (DQ) and the scores were recorded on the observation chart. Physical development was based on the 'weight of age' criterion from the standardised chart.

The independent variables were measured using both standardised scales and questions. To measure the variable of Behaviour Problems among the children, Child Behaviour Rating was used. To analyse the independent variable of peer influence, an analysis chart was used. The other variables were measured at ordinal level and scores were given to questions, culling out the necessary information. Few other variables were also measured at the nominal level. The independent variables were: age, sex, education, religion, work, vocational aspiration, behaviour problems, size of family, educated members in the family, mother's awareness of sexually transmitted diseases, mother's aspirations for the child, services preferred by the mother, caste, peer influence and influence of media (TV/Movies).

Data Processing and Statistical Analysis

The data were processed and statistical analysis was earned out. The tests applied were gamma, X^2 and Multiple Regression Analysis. The regression equation explains the pattern of development among the target children.

Measurement

The development of each child has no single direct or simple empirical refferant. Therefore, the aspects of development namely physical, psychological and social development of the respondents, were measured and a unified, overall measure was taken to denote development in its totality.

Physical   Development

The weight of each respondent was measured. Based on 'weight for age' standard table, each respondent was gauged (Rao and Vijayaraghavan, 1996).

Psychological   Development

The Gessel Developmental Schedule was used for children of 1-72 months and a total score of development age (DA) was computed. From this, DQ was computed by dividing DA and chronological age (CA) and multiplying it by 100.

Binet-Kamat Test of Intelligence (Kamat, 1958) was used and basal age was calculated as the age wherein all items were passed. Ceiling age, at which no item was passed is then recorded. For every test passed beyond the basal level, credits were given and IQ was computed using the standard formula

$$\frac{MA}{CA}X100$$

The SFB was used to measure the motor coordination and perception of form among the subjects of 3.5-10 years. The time taken for performance completion was recorded thrice on the record sheet and the shortest time taken of the three trials was taken as the record time. These time scores were then converted into equivalent mental age (MA) by referring to SFB norms based on which IQ was calculated.

Social   Development

In order to measure and quantify social development, Vineland Social Maturity Scale was used (Doll, 1958). This scale is designed to estimate the social age (SA) and social quotient (SQ) of each respondent. The scale measures social maturity in eight social areas and is used for the age group of 0-15 years.

Overall   Development

The entire effort of measuring and analysing the respondents' physical, psychological and social development needed to be synthesised to make meaning and the inference comprehensive. Since the scores for the three sub areas are not additive and can not be treated cumulatively, to bring these scores into equal footing, absolute scores of each sub area were calculated by dividing the scores received by each respondent by the maximum score and multiplying it by 100. Thus, all the

three sets of scores for the sub were computed to give absolute overall scores for 300. The quartile values (Q 1 = 124.4, Q3 = 178.5) divided the respondents into three groups — those with low, moderate and high levels of overall development.

RESULTS AND DISCUSSION

To analyse the association and relationship between the research variable, development and other independent variables, X^2 and coefficient of contingency were applied. The results are provided in Table 1.

TABLE 1: Development of Respondents

Sl. No.	Variable	X2 Value	Degree of Freedom	Level of Significance	$\overline{C}$
Personal					
1	Age	152	4	.001	57
2.	Sex	1.76	2	NS	NS
3.	Education	30.23	4	.001	30
4.	Religion	4.9	4	NS	NS
5.	Work	31.2	2	.001	30
6.	Vocational Aspirations	20.78	2	.001	25
7.	Behaviour Problems	38.9	4	.0001	33
Familial					
8.	Size of Family	3.3	4	NS	NS
9.	Educated Members in Family	4.67	2	NS	NS
10.	Family Income	18.9	4	-.001	23
11.	Type of Family	11.3	4	NS	NS
12.	Closeness to Mother	16.7	4	.002	18
13.	Mother's Awareness of Sexually Transmitted Diseases	7.5	2	NS	NS
14.	Mother's Aspirations for the Child	5.97	4	NS	NS
15.	Services Preferred by Mother	15.25	4	.001	19
Social					
16.	Caste	2.9	4	*NS	NS
17.	Peer Influence	23.17	4	.001	26
18.	Media	18.17	4	.001	23

Table 1 brings out the personal, familial and social variables that are associated with development of the respondents. They emerge as age, education, work, vocational aspiration, behaviour problems, family income, closeness to mother, mother's preferences for services, peer influence and media watching. It can be noticed that, among the different groups of respondents based on these independent variables,

there is a significant difference with respect to their development. These findings show that among the different groups of respondents, under each of these independent variables, there is a tremendous need for action, so as to strengthen their development.

The observed significant difference between those with high or low educational achievement, indicate the need for consolidating efforts to educate these children. In turn, education would distance them from the dreaded child labour. To bring out vocational aspiration, work must be focused, because within the present context of poverty and sex work, the career aspiration is heavily over-shadowed. Planning and choosing a career, in addition to having an aspiration, other than continuing in sex work as seen here, contributes to development.

There is a need to tackle the behaviour problem of these children, since development is impeded under the burden of behaviour problems. Since peer influence is associated with development, the need to help the children to establish meaningful and satisfying peer relationship has been identified. The contribution of mass media in development, underline the fact that tapping this resource could go a long way in building the future of these children.

Further analysis was carried out to see the pattern of development among the respondents. Step-wise multiple regression analysis was carried out and the results are presented in Table 2.

TABLE 2 : Patterns of Development

Sl. No.	Variable	B	SEB	95% Confidence	Beta	T	T-Signific
1.	Age	−7.25	.45	−8.13	−.75	−16.06	.001
2.	Education	1.64	.65	.36	.11	2.52	.01
3.	Religion	6.60	2.82	1.04	.09	2.33	.02
4.	Services Preferred by Mother	4.97	1.00	1.22	.10	2.61	.009
5.	Media	.54	.19	.16	.12	7.83	.004

Note: Constant =172.69

The equation that emerges out of this analysis using the regression coefficient of correlation is as follows:

Development of the Children of Female Sex Workers = 172.69 K
+ -7.25 Age + 1.64 Education + 6.60 Religion + 4.97 Services + 54 Media
(-16.06)   (2.52)   • (2.33)   (2.61)   (2.83)

It can be seen, on analysing these factors, that age is an important correlate of development and its contribution is inversely related to development. During 'babyhood', the community and the mother-figure rally around and provide for the child. The innate dependence of the child wins its way towards better care and, therefore, better development is possible. Gradually, the picture changes and the child is left to fend for himself/herself as was often encountered in the scene of the study, thus, diminishing development.

Education, religion, services preferred by the mother and influence of media are the variables that contribute positively to development. Education is featured as an important correlate of development. Despite the flaws in the educational system that one finds in the schools, in and around the poorer sections of the city, education still spells enlightenment for the child. Thus, the direct contribution of education can be observed.

While religion and religious values are important for development, mothers' preference of educational services and their wanting to provide better opportunities for the child has found a place among the contributors to development.

Media watching (TV/Movies), despite its controversies, proved to be a significant contributor to development. The powerful media provide a relief from the otherwise unstimulated mind of the child, providing opportunities and psycho-social outlets, thereby, contributing to development.

The conspicuous absence of sex as a variable, contributing to development, must be pointed out. This implies that both boys and girls develop on equal footing; thus, the original hypothesis is rejected. While reports from far and near, show the opposite in all conditions of deprivation, this seeming equality experienced by the girl child in the red light areas, is clearly a disquieting feature.

INFERENCES AND RECOMMENDATIONS

The contribution of education to development has emerged with unequivocal importance. Together with the mothers' desire to have educational opportunities for their children, the variable of education paves the foundation for drawing up meaningful action.

In the light of these findings, growth centres are recommended for bolstering the development of the target children, providing institutional and non-institutional services. These growth centres should aim to provide

1.   education and enlightenment;
2.   training for new and better vocational skills and pursuits, so as to kindle the spark of vocational aspiration, and restoring and preserving the human dignity in their vocations;
3.   counselling and social work to build up the security and self-esteem of these children and also tackling of behaviour problems;
4.   , counselling and sex education with emphasis on practice of safest sex so as to shield them from the terror of HIV/AIDS;
5.   counselling for legal aid of awareness of rights which would also be available to the mothers and significant others;
6.   social skills that would make them assertive and ward off sharks and exploiters;
7.   networking like-minded governmental and non-governmental agencies at local, national and international levels;
8.   inbuilt monitoring - evaluation system, so that a longitudinal survey can be continued;
9.   the use of creative and innovative educational methods, helping the children discover the joy of learning through the use of audio-visual and mass media;
10. nutrition, medical and health facilities.

The organisational framework should be flexible and well-equipped, focussing on an optimum number of children receiving day-care, initially. Functionaries, who are in charge of the programmes, should be trained, skilled and committed to the cause of children, keeping the objectives in mind. The core functionaries such as teachers, counsellors, health workers and attendants should be exclusive to each centre, while the supervisor, administrator and clinician would share their time and services among all centres. The physical set up of the centres should be clean, healthy and conducive to development.

The growth centres should establish rapport and visibility in the community and society, thus translating the dream of development of these children into reality.

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