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On Exiting from Commercial Sexual Exploitation: Insights from Sex Trade Experienced Persons

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Abstract

As a woman who exited after seven years in licensed commercial sexual exploitation in Canada, I share my reflections on my experience, which led to the development of the Insights from Sex Trade Experienced Persons (InSTEP) Model. The model was constructed based on interviews with “service providers” in the sex trade. Twelve exited women share their experiences inclusively. InSTEP is geared toward a population of quasi-autonomous providers who have alternate economic options. Three levels are introduced in the InSTEP model to describe the continuum of agency among service providers; Level 1: trafficked/controlled; Level 2: quasi-autonomous; Level 3: autonomous. The InSTEP Model focuses on Level 2 providers and identifies optimal times when helping professionals or agencies could be most effective in offering exit support. Opportunities for change are contextualized within Maslow’s Hierarchy of Needs (1943) and the Prochaska and DiClemente’s (1983) Stages of Change.

Keywords

Canada, commercial sexual exploitation, sex trade, sex work, prostitution, exit strategies, human trafficking, massage parlor, body rub parlor, escort

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ON EXITING FROM COMMERCIAL SEXUAL EXPLOITATION: INSIGHTS FROM SEX TRADE EXPERIENCED PERSONS

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Updated: August 31, 2021

ABSTRACT

As a woman who exited after seven years in licensed commercial sexual exploitation in Canada, I share my reflections on my experience, which led to the development of the Insights from Sex Trade Experienced Persons (InSTEP) Model. The model was constructed based on interviews with “service providers” in the sex trade. Twelve exited women share their experiences. InSTEP is geared toward a population of quasi-autonomous providers who have alternate economic options. Three levels are introduced in the InSTEP Model to describe the continuum of agency among service providers; Level 1: trafficked/controlled; Level 2: quasi-autonomous; Level 3: autonomous. The InSTEP Model focuses on Level 2 providers and identifies optimal times when helping professionals or agencies could be most effective in offering exit support. Opportunities for change are contextualized within Maslow’s Hierarchy of Needs (1943) and the Prochaska and DiClemente’s (1983) Stages of Change.

KEYWORDS

Canada, commercial sexual exploitation, sex trade, sex work, prostitution, exit strategies, human trafficking, massage parlor, body rub center, escort

At age 29, I walked out of my Canadian massage parlor for good. I had built it ground-up after three years of working for others in the industry. During that initial time, I experienced ongoing victimization and violation from sex buyers and at times, owners of massage parlors (aka “body rub centers,” aka “studios”) where sex was sold in commercially-leased premises. Believing there could be a positive way to participate in the industry, I saw ownership as liberation from exploitative owners and from constrained “choice” regarding who I serviced.

I stepped into the business at age 22 because of extreme financial duress. I struggled to justify my situation for seven years while providing thousands of hours inside municipally-regulated studios as a licensed body rub practitioner, selling sex in hotels and private residences as an escort, offering BDSM and fetish play as a dominatrix, and accompanying men on business trips and vacations as their travel companion. Upon reaching a personal tipping point, I began a complicated process to divest myself of the material trappings that had validated my unsustainable lifestyle. My studio was purchased by another service provider in the industry and I began to pursue employment in the real world, living on real world wages.

The process was difficult at many levels, but each small step was liberating. After successful exit, I immediately turned my attention to advocacy in an attempt to help others understand the specific challenges of service providers and to offer support to those seeking to break free from their involvement in commercial sexual exploitation.

One aspect of my advocacy was the development of the InSTEP Model to identify optimal points where the offering of interventions can be most effective for those wishing to exit the sex trade. I offer this tool for counselors and other helping professionals who desire to know more about the mental and emotional journey of most sexual service providers. People who assume all service providers are either trafficked or “happy hookers” fail to understand how fluid categories of participation are, and how semi-autonomous women fit into the continuum. The polymorphous group “in-between” is the focus of my model.

For illustrative purposes in this paper, I describe three distinct levels; however, I echo Gerassi and Nichols (2017) that overall, “agency and victimization are more accurately reflected in a continuum rather than as a dichotomy” (p. 7). Commercial sexual exploitation is on a continuum with sex trafficking in that some previously trafficked women become quasi-autonomous/autonomous and vice versa. Varying degrees of agency and victimization within each category can create an overlap.

I hold the firm position that the exchange of sexual services for payment between parties of unequal social or financial status is a human rights violation, often endangering the bodily integrity, dignity, and health of the providers, affecting their psychological, financial, and social well-being (Post, 2011).

In this paper, I share the common journey of the quasi-autonomous service provider. Although every individual’s sex trade experience is unique, I observed a similar path being traveled by many of the women I interacted with over the last 14 years. The InSTEP Model serves to offer clarity for professionals seeking to understand better and assist service providers operating between trafficking and free agency. I identify optimal points at which to offer exit services and strategies and complement my personal reflections with the insights of twelve additional exited service providers.

Although women are the primary subjects of this discussion, it is acknowledged that males and gender-diverse persons are included in the population of service providers.

METHODS

Tragically, there are over 10 million individuals in commercial sexual exploitation around the world (United Nations, 2016), taken into the sex trade by means of extortion, trickery and/or threats from a third party (human traffickers and pimps) or trapped in the survival sex trade due to trauma, addictions, or illness. These children and adults comprise a large, generally unseen portion of victims. I refer to this group as ‘Level 1’ service providers.

The tip of the iceberg are those I have named ‘Level 2’ and ‘Level 3’ service providers who “voluntarily” enter the visible, sometimes licensed, sex trade. Their motivation is primarily economic, looking for high pay over short amounts of time.

For Level 2 providers, the money is vital to their survival, and they are often in need of financial relief due to personal debt. For some, the money enables a substance addiction (drugs/alcohol) and/or a process addiction (shopping/gambling). Level 2 providers are quasi-autonomous, either working in body rub centers and escort agencies or as independent operators via Internet sites or web pages. They pay a range of fees to an agency or studio owner, such as room rental, reception, advertising, and transportation. Some jurisdictions require licensing¹.

Level 3 providers have other viable economic options and sometimes use the sex trade as a complementary rather than primary source of income. They profess to find joy and fulfillment in providing sexual services. Some Level 3 providers become owners of body rub centers or escort agencies. They are what many would call the “happy hooker” and perpetuate the façade of universal empowerment often used in marketing.

After my exit from the sex trade, I wanted to examine how my experiences compared with other Level 2 women, the ones who are quasi-autonomous. Many women shared their stories with me while I was employed at the Centre to End All Sexual Exploitation (CEASE). In addition, I maintained contact with dozens of women who, like myself, had successfully exited the industry. Some I met online, many I knew from my active time in the sex trade.

For the purpose of this paper, I approached 15 former (Level 2) female providers through online digital communications in Canada and invited them to share comments about what helped them move forward and what hindered their process of exiting the industry. All participants were made aware of their right to decline participation, their protected anonymity, and their liberty to share or not share anything they wished. Participants responded in writing that they wanted to participate in this study. The participants were informed that their responses would only be seen by me and they were assured anonymity in any article that I wrote. The responses from the participants were delinked from my computer and telephone to maintain their confidentiality. One month after the interviews, I contacted the women to check on their emotional well-being. An offer of a counseling referral to CEASE was made if the participants became distressed.

Twelve women replied to my request, and their comments are included anonymously throughout this paper. All of the women had been exited for a minimum of one year at the time of my research.

The women, who remain anonymous, have the following experiences. They are identified in the following text by letter.

A: Body Rub Provider active one year

B: Body Rub Provider active seven years

C: Body Rub Provider active seven years

D: Escort, Body Rub Provider and Adult Film Performer active five years

E: Escort and Body Rub Provider active six years

¹ Even though the purchase of sexual services is illegal under the Protection of Communities and Exploited Persons Act (PCEPA) in Canada, many cities have deliberately enacted by-laws to circumvent the federal vision and legislation.

F: (Unlicensed) Escort active two years

G: Body Rub Provider active eight years

H: Escort and Body Rub Provider active five years

I: Escort and Body Rub Provider active twelve years

J: (Unlicensed) Escort active one year

K: Escort and Body Rub Provider active five years

L: Escort and Body Rub Provider active eleven years

Although my sample is small, I believe in the power and importance of anecdotal evidence. While in the sex trade, I routinely bore witness to Level 2 service providers traveling a similar emotional path, as corroborated in the examples provided. The InSTEP Model details our journey and identifies optimal points of exit strategy intervention for those interacting with and assisting sexual service providers.

INSTEP MODEL

The InSTEP Model identifies four phases of participation in forms of commercial sexual exploitation:

- Phase 1: Entry (compelled by financial stressors)
- Phase 2: Positive Active (economic needs are met, so stress is reduced)
- Phase 3: Negative Active (economic reward is negated by the accumulation of physical and emotional trauma)
- Phase 4: Exiting

A bell-shaped curve illustrates the expanding and waning satisfaction within the sex trade. Three points along the curve (labeled on the figures by green diamonds) identify the time providers are most likely to question their participation and, accordingly, where helping professionals and agencies can best offer support in considering alternatives.

The **Entry** phase describes a time when the monetary rewards are high enough that other economic options are less attractive. A newspaper ad, “Adult Entertainment – Make \$2000 per week,” caught my eye when I was 22 years old and approximately \$60,000 in debt. I instantly called the telephone number to inquire and quickly moved from feeling overwhelmed by my financial circumstances to considering a viable, albeit vague solution. I had no clue what “Adult Entertainment” even entailed. I assumed the ad was for webcamming or perhaps stripping in a nightclub. I was unaware that my city licensed body rub centers to facilitate the exchange of sexual intercourse for money. The secrecy and deception of the sex trade do not facilitate fully informed decision-making for new service providers.

My crushing debt paired with limited skills had me feeling like I had no other option but to call the number listed in that newspaper ad. Despite working multiple jobs at once, I was not earning enough money to pay down any of my debt after paying my monthly living expenses. Gerassi & Nichols (2017) declare that “many people involved in commercial sex have limited options, and constrained choices are distinct from fully autonomous choices” (p. 6).

Comments provided by my 12 peers included in this study exemplify how, like myself, financial desperation was a strong motivating factor for entering the sex trade, and fear of financial failure was a barrier to leaving. They said that financial security seemed unattainable due to exacerbating factors such as education fees, single parenthood, and low wages related to a lack of marketable skills, training, and/or work experience.

Precursors to the **Entry** phase are primarily financial. The participants in this study gave the following reflections on entering into the sex trade.

Participant A: “I’d never made so much working square jobs which I was accustomed to working two at a time.”

Participant D: “When I first got into the business, I had \$20 to my name.”

Participant F: “I hadn’t worked for a couple of years and couldn’t get income support to move my kid and myself out of my abusive partner’s place. I started using internet sites to get customers or by networking through the drug dealers I knew.”

Participant H: “There were a lot of short-term circumstances, but they all pointed to financial instability.”

Participant I: “I had acquired some overwhelming legal expenses and decided to find a second job. Because the municipal government provided licensing and legitimacy, I naively trusted that my second job would be harmless.”

Participant J: “I never thought I’d end up having to sell sex to survive. You have to get to a pretty scary place to go out and do that sh*t.”

Participant K: “I had significant debt and needed a job I could do part-time but still earn enough money to pay for school.”

Participant L: “I was a student and not skilled in any way. I needed a high paying job for the summer. I was young, skinny, and childlike, and that was appealing to the men.”

Interventions may prove impactful in this phase for women who are uncertain or unhappy about entering the sex trade. Since the need is for economic relief, offering adequate financial support and/or literacy prior to entry may be enough to divert the individual from engaging the industry altogether.

Moving into phase two, **Positive Active**, women begin to “reap the rewards.” I found that I could earn large sums of money in short periods of time compared to my previous economic pursuits. Over the years, several women said to me, in person, they felt satisfaction and relief that they were able to provide for themselves and their families, particularly those who were single mothers. I call this phase being “on the climb.” As financial status substantially improved for the women, their spirits lightened, and their stress levels appeared to dissipate. I know this was the case for me as I began to pay down my debts. This is generally not a time when women are open to intervention:

Participant C: “You become addicted to the large sums of money. It gives you a high.”

Participant F: “I was making between \$200 and \$600 for my time, which went a long way when I had kids to feed. I thought I was living my best life.”

Participant H: “Once I started to work, I had a lot of money...”

Participant I: “I was immediately enamored by the amount of money I was earning, and consciously chose to continue.”

Participant K: “It felt amazing to be able to go to the bank after a shift and put a large sum of money on my credit card and line of credit.”

Participant L: “To be honest, I started to enjoy it. I loved the thrill. I loved the money. It didn’t seem to wear on me. It was a huge sense of relief to be able to make that kind of money.”

Quasi-autonomous service providers enjoy the perks of being self-employed. I could set my own hours, operate around my schooling demands, pursue hobbies in my newly acquired leisure time, and had multiple opportunities to travel. Women with dependents often claimed that selling sex was the only job that would accommodate their children’s schedule (school and sport demands) while still providing a livable income as a single woman. Although I did hear some women acknowledge harm or turmoil during this phase, it didn’t happen often. When it

did, they would often follow their comment by weighing it against the reward(s) and deemed their distress worth the sacrifice.

Rationalizing is common among providers during the Positive Active phase. In staff room conversations, I often heard framing such as “many people dislike their jobs, but they do them to pay the bills” or “many people work harder for less money, so it’s worth it at the end of the day.” I have heard similar comments from countless active service providers over the years, with one woman stating she did not enjoy selling sex but would feel more exploited working in the fast food industry for minimum wage. I now recognize this mindset as an attempt at justification and self-preservation.

During this phase, I constantly saw service providers develop self-soothing techniques such as buying expensive clothing, purses, and shoes or taking luxury trips as rewards for what they had to do for money and to embody a feeling of success. Other women turned to drugs and alcohol as their way to cope with the repeated unwanted sexual contact. Even though everyone tried to project a state of happiness and satisfaction, I always felt a sad undertone in the energy of the studios. I don’t believe any of the women truly wanted to be there.

Although quasi-autonomous providers would typically declare their new circumstances to be an improvement over their previous financial struggles, the degree of difficulty in adjustment would vary greatly. Some didn’t appear to endure a tough learning curve, but looking back now, I think those women were just better skilled at effectively dissociating.

Very soon after entering the sex trade, I experienced a mental breakdown. When I called the studio owner to tell her I was quitting, her words to me were how “most people typically experience that around six months in.” She was surprised how soon the onset of my depression had arrived. The owner told me to take a week off, and I did, returning immediately after because of the money.

While in the Positive Active phase, I made enough to renovate and fully furnish a \$350,000 house I had mortgaged, buy two \$50,000 vehicles outright with cash, pay \$20,000 in post-secondary tuition fees, cover all my bills, take frequent vacations, and shop regularly. Although I was mildly aware of the harm that I was experiencing, I felt simultaneously elated by my financial gains and repressed any encroaching trauma. I became hyper-focused on money and the achievement of “success,” such as straight A’s in school, and “climbing the corporate ladder” so to speak. Soon thereafter, I began to establish my own body rub center.

The space I leased for my studio was an empty unit in the basement of a tri-level commercial building in a heavily populated residential neighborhood. Despite the five schools and five churches within a 10 block radius, I saw no harm in the location or in what I was doing - I was licensed by the city as a legitimate business, hired only city-licensed providers, posted no signage, and had the studio windows blacked out with tint. A fellow tenant cussed me out and called me a “pimp,” but that wasn’t enough to make me stop and consider my actions. Having built the studio simply to be my own “boss,” I never had the intent or desire to make large sums of money from women. My studio only had two rooms in addition to the staff room and a small waiting room for clients. I spent over \$100,000 building what became the city’s most “high-end” body rub center, charging the women a \$50 “room fee” for each customer they serviced.

The **Tipping Point** is essentially a time characterized by a marked change in outlook by the quasi-autonomous provider regarding her continued participation in the sex trade. It is not necessarily an “ah-ha moment,” nor is it brief. Rather, the tipping point is an internal shift that moves the provider into Phase Three, when the rewards of sex trade participation begin to no longer justify the costs. This change can happen gradually over weeks, months, or years until it is fully conscious.

My personal tipping point was when I realized I could no longer effectively dissociate in sessions with the men, nor could I fully return into my body in the moments when I was not selling sex. It felt as though I was existing in some alternative world outside of my life and my reality. I had not owned my new studio for long when I began to recognize that not only was I harming myself by selling sex, but I was also enabling harm to other women who rented rooms from me.

At this point in the InSTEP Model, an external catalyst often precipitates a change in feelings and perceptions. As early as 2007, Mayhew & Mossman identified what they call the “turning point” (p. 36) for service providers, similar to the InSTEP model’s “tipping point.” Turning point catalysts can be of a positive nature, such as a career opportunity, pregnancy, or birth of a child, or of a negative nature, such as accumulated violence and fear that leads to a “reassessment of options.” (Mayhew & Mossman, 2007). Since then, others (Cimino, 2013; Cobbina & Oselin, 2011; Monheit, 2010) have also identified how catalysts can prompt providers to exit the sex trade.

My observation was that some women didn’t appear to reach a tipping point and would seemingly “numb out” instead, able to endure the harm with detached resignation. It seemed for these particular women that drug usage and/or alcoholism were key to maintaining their limited functioning. In “duos” with them (where two women service one buyer), I would witness their eyes glaze over and deaden when sexual acts commenced. Watching the buyers perform sex acts on the women in this state felt like witnessing sexual assaults in progress.

Once quasi-autonomous providers pass the **Tipping Point**, they never revert to Phase Two (Positive Active):

Participant B: “When I finally made that decision to quit, it was when I found out I was pregnant. I knew that I couldn’t keep working. Honestly, I didn’t want to...”

Participant C: “The thing that helped me move forward was meeting my current boyfriend. At that point, you’re accountable to someone else, and you realize if you want it to work, things have to change...”

Participant F: “One of my neighbors heard some stuff, I guess. He entered my home one day when he knew no one was around, and he raped me. That was my final cue to leave without hesitation.”

Participant G: “Having to work at eight months pregnant, I made the choice... I couldn’t do it anymore...”

Participant I: “My decision to leave at all costs was solidified by a loss in my immediate family. I found myself unable to work without using drugs

and alcohol, which affected my ability to show up for the people I love when they needed me the most.”

Participant J: “I think the thing that f*cked me up the most was having to pretend you’re having a good time and act like you’re enjoying it.”

Participant K: “The constant dehumanizing, repressing my feelings, and having to separate from my body became too much to bear.”

Participant L: “While on a tour with my friend, I heard her crying the entire night long. Around the same time, an old client sent my father pictures from my online escort ad. That was my lowest point.”

Phase Three of the InSTEP Model is the **Negative Active** phase and consists of two stages. The first is characterized by increasingly negative feelings about selling sexual services. During this stage, providers are no longer able to maintain the level of denial or dissociation required to negate the harm they experience. Nevertheless, they continue to justify their participation as a form of self-preservation. By Stage Two, providers can no longer see the “benefits” of making money this way and become more receptive to interventions.

Once I entered the Negative Active phase, I became hyper-aware that I was not a willing participant. Every session thereafter took an incredible toll on me emotionally, mentally, and spiritually. I felt as though I was being molested each time the men would touch me. Nearly every experience left me feeling a damaging combination of anger, disgust, depression, and numbness - repeated at least four or five times daily.

However, even with the strong onset of those feelings, parts of me were still in denial. I continued to subscribe to the myth that body rub centers were somehow safer for women than outdoor locations or Internet websites like Backpage.com. I would tell myself that at least I was a kind and caring owner who did the “job” alongside the women I hired. I told myself that they could be worse off elsewhere and face increased risks of exploitation. I also clung to self-affirming delusions that I was doing men a favor by meeting their sexual needs, which in turn spared women from being sexually assaulted, and marriages from dissolving due to lack of intimacy. I was desperate to avoid the full realization of my incongruity because I was so deeply entrenched. Leaving was inconceivable.

Harm comes to service providers in many ways. There are incidents of “stealth” when purchasers remove the condom during intercourse without the provider’s knowledge or consent. Several men attempted this with me. Another common scam is to “dine and dash” when the buyer leaves without paying; others try to short-change after the session. These tactics, coupled with the intricate folding of paper bills, defrauded me on multiple occasions. Unauthorized video recordings and photos compromise provider anonymity. Deceptive men would secretly film us with cameras hidden in everyday objects such as eyeglasses, watches, and pocket pens and share the footage online. Other men would hide cell phones in the rooms and record the session in order to have explicit material for later masturbation.

Many buyers are verbally abusive. They make derogatory statements toward service providers. I have been called names, including “slut,” “bitch,” and “whore”

by both men and women, sex buyers or not. I have also been insulted by buyers as they paid for my services. Over time, verbal assaults can have a compounding effect that wears away self-worth and self-esteem. Some studies have noted difficulties for service provider populations in experiencing positive self-esteem (Benoit et al., 2017; Dodsworth, 2012; Gorry et al., 2010, Sallmann, 2010; Rosen & Venkatesh, 2008). I survived these attacks by telling myself I was sexually liberated. I recited the “pro-sex work” conviction that those who disagree with the sex trade are prudes who want to control women’s bodily autonomy. Sometimes we would affectionately call one another “ho” or “whore” in attempts to reclaim the words and dull their cutting effects.

Obsessive and predatory men engage in stalking behavior, endless messaging, and sometimes track their providers from the studios to their homes. I vividly recall lying frozen in my bed, home alone at 2 a.m., while a man stood outside loudly, shouting my alias name after I didn’t answer the door. While employed at CEASE, I would often field calls from providers asking for assistance to thwart creepy and dangerous men. This happened so often that CEASE implemented a “Bad Date” database to capture data about the men offending against providers. CEASE would share that information among the women.

In my seven years of experience selling sex, and seven subsequent years as an advocate and activist, I have concluded that the major sources of stress for sexual service providers include:

- Physical, mental, and emotional exhaustion caused by servicing multiple men a day, leading of a secret/double life, pretending to enjoy the sexual acts, and being a sounding board for emotionally draining buyers.
- Fear of victimization from unstable or aggressive buyers.
- Worry of STIs and/or pregnancy from the growing push from buyers to offer “extras” such as “girl-friend” experiences (GFE) or “porn-star” experiences (PSE) without condoms.
- Issues with exploitative owners/operators such as fines, extortion, and unsafe operating conditions.
- Stress stemming from jealousy, gossip, comparisons affecting self-confidence and esteem, and reputation-tarnishing by other service providers.
- Risk or occurrence of being exposed or “outed” publicly via internet websites, or to friends and family.
- Challenges with disclosure and honesty, sexual functioning/dysfunction, judgment, and guilt complicating personal and romantic relationships.
- Stress of bureaucratic visibility through municipal licensing regulations and requirements.
- Worry about financial audits.

Stage Two of the **Negative Active** phase is the point where quasi-autonomous providers reach their roof limit for denial, suppression, and calculated optimism. It becomes impossible to see the benefit(s) of continued participation in the sex trade aside from the high earning potential. Other rewards, such as being self-employed and setting one’s own schedule, pale when the emotional output and toll are considered.

Oselin (2014) speaks of “Derica” (a street-involved service provider) in her book *Leaving Prostitution: Getting out and staying out of sex work*, saying “over time...her earnings were unable to assuage the flood of negative feelings about her sense of self” (p. 106). Harm and trauma experienced by providers within the industry have been well documented (Farley, 2018, 2013, 2004; Norma & Tankard Reist, 2016; Rotenberg, 2016; Matthews, 2015; Raymond, 2013; Moran, 2013; Coy, 2013). It has been found that “high rates of mental health consequences, unfortunately, are expected in this population” (Gerassi, 2015, p. 596).

Throughout Stage Two of the **Negative Active** phase, providers begin to feel trapped if they are not in a position to alter their circumstances. Even when the desire to exit becomes explicit and conscious, there are often a great many challenges before a successful exit is possible. While in the Negative Active stage, I was trapped in a commercial lease agreement. Selling sex was my only viable “option” to pay my overhead costs and maintain my financial commitments. A guilty conscience led me to stop renting rooms out to women after the first 18 months. It felt wrong taking their money knowing firsthand the sacrifices required to earn it. I decided to use the studio solely as my personal incall instead, unlocking the door for each client while I operated alone on site. I would sometimes fantasize about the ways I could kill myself to escape it all during the remaining two- and- a- half years that followed.

I was not alone in my struggles. I have known women in this stage who could only “function” by maintaining a severe drug/alcohol addiction, others who ended up institutionalized in mental health facilities, some who took their own lives, and some who were murdered by their romantic partners. Others, unable to go through with the sex acts, would turn to robbing or extorting sex buyers instead. Interventions offered during the second stage of the **Negative Active** phase can be crucial to providers anxious to exit the sex trade, but unsure of their options.

The **Negative Active** phase is a lonely downward descent – emotionally, mentally, or physically, through injury, self-harm, or suicide.

Participant C: “It is very easy to get sucked into a downward spiral...”

Participant D: “I worked in a studio where all eight of us women were paraded in front of the potential buyer for him to choose one of us. I never felt like less of a human than I did then...”

Participant E: “For years I hated the business but I couldn’t make money like that elsewhere. It took everything inside to go have a session towards the end. I fought tears and a sick feeling in my stomach. I summed it up in my head almost like consensual rape...”

Participant F: “It seemed so easy to get lost in it when you are partying and doing drugs and taking home large sums of money.”

Participant H: “Leaving was an easy emotional choice for me. I was ready...”

Participant I: “Looking back, it was my decision to enter the sex trade, but in my opinion, I was preyed upon and victimized by both the massage parlour owner and the City of Edmonton.”

Participant K: “I was having an identity crisis. The woman I was when I was with clients was not the real me, but I no longer knew who the real me was.”

Participant L: “I didn’t have the same [positive] feeling as before, but it helped with the bills so I continued...”

Phase Four of the InSTEP Model is the **Exit Phase**, the point at which service providers begin to transition out of the sex trade. Oselin (2014) mentions the “limited understanding of the social-psychological stages of change that occur for individuals who move through this process and how contextual factors influence it” (p. 6). This is a complex phase which “cannot be understood in terms of merely a few pointers” (Menezes, et. al., 2019, p. 77).

Multiple attempts to leave may occur before providers remain successfully disengaged from the industry; relapse should not be viewed as a failure, but an inevitable “part of the process” (Menezes, et. al., 2019, p. 77). Although I was a rarity and able to successfully exit on my first attempt, I have seen many women get stuck in the “revolving door” of the studios, repeatedly leaving only to reluctantly return a month or two later.

In an earlier study, Mayhew & Mossman (2007) found a “general consensus that it is difficult to exit... many things that lead people in... also act as barriers to exiting” (p. 18). Most frequently the barriers are financial as service providers become accustomed to living with and relying upon an inflated income. Bindel, Brown, Easton, Matthews & Reynolds (2012) found that 52% of their service provider sample stated that incurred debts were a factor in whether they were able to exit.

For the women I knew, the money was always the strongest determining factor for them to stay in the sex trade, or to return soon after exiting. Nowhere else can someone earn an average of \$5 per minute for unskilled labour requiring zero education or qualifications. Inflated wages in the sex trade are the “golden handcuffs” that ensure a supply of marginalized women remain available for sexual exploitation.

Regardless of motivation to exit, many providers find their relationship with money remains distorted when they move from making \$300 per hour to \$30 per hour or less. Women would tell me they had to return because they couldn’t make it without the large amount of money coming in. Most who returned stated that they didn’t know how to manage on a normal wage in order to remain out of debt. Conscious and continuous effort is required to be financially aware and responsible:

Participant A: [The money] “... was something that I feared could hold me there. Ultimately that’s the reason I got out...”

Participant B: “I’d be lying if I said I wasn’t stressed or worried about how we would make it...”

Participant C: “The most difficult part of leaving my old lifestyle was plain and simple, the money...”

Participant D: “The plan was to do it for a week, just long enough to get an apartment. Well that week turned into 5 years...”

Participant F: “It felt difficult to leave because I didn’t have many options. Emotionally it was hard to get out too. I definitely wasn’t thinking straight.”

Participant H: “While I sold sex I had a lot of money, but lacked the financial literacy to turn it into any stability...”

Participant I: “I tried to quit several times, but always felt trapped by overwhelming debt and a lack of viable options.”

Participant J: “Since exiting, I can’t afford the things I need, so the thought to return to selling sex is always in the back of my mind.”

Participant K: “I was fortunate to have been able to start a small business after leaving the industry with the money I had saved. But every time the business had money issues, the thought of returning crept into my mind.”

Participant L: “I could make \$10K-\$40K in a week! It became hard to make ends meet after [exiting].”

Aside from the obvious pull of high economic rewards keeping unwilling providers engaged, there is an emotional challenge to exiting. The longer one partakes in an activity, the more it becomes engrained and embedded in their sense of self and identity (Oselin, 2014; Prochaska et. al, 1993). This creates challenges for service providers in leaving behind old roles and lifestyles (Benoit & Millar, 2001).

I felt extremely nervous about leaving a “sure thing” to venture into the unknown as my time spent selling sex services gave me great financial success. I was terrified about what the future entailed. I sold my studio to an active Level 3 provider for approximately half the cost of construction, leaving me a financial loss of nearly \$50,000 on my “investment”. Fortunately, I had managed to save \$10,000 before exiting - an amount that saw me through my first few months until I became employed at CEASE.

Once I began work as an advocate helping women still involved in the sex trade and trying to transition out, I saw they had many needs in addition to financial literacy, coaching, and assistance. Counseling and career/life goal-planning are also necessary to ensure a viable chance at success. “Establishing aspirations and plans encourages women to retain focus on the future and enriches their dedication to conventional lifestyles” (Oselin, 2014, p. 158).

The **Exit Phase** marks the last point of interception on the InSTEP Model and requires long term, committed strategies. If interventions are unavailable or ineffective, service providers can become caught in a perpetual cycle in and out of the industry, leading to increased difficulties as they become further entrenched for longer periods of time. Women in this study said:

Participant A: “There were aspects of the life I knew I’d miss, and others I was afraid could take me over if I let down my guard...”

Participant B: "I've never looked back since, and I've never been happier..."

Participant C: "Transitioning to normal living so to speak is tough at the beginning, but as time goes on, you adapt like anything else, and you feel as though you've already lived two lives in one..."

Participant D: "When I finally got out of the industry, I felt lost and extremely depressed. I didn't know who I was. I tried a few square jobs but I never felt like I quite fit in. I actually ended up going back after a year but that was my turning point. After that I left and never looked back."

Participant E: "It has taken years to begin to feel like a 'normal woman' through church, mom groups and school functions for my daughter. I always felt different, like people saw me for what I did, although no one knew..."

Participant F: "Sex was never the same again."

Participant G: "It took me some time to separate the two [lifestyles]. I do think of it once in a while, but can't bring myself to do it again..."

Participant H: [The exiting process] "It wasn't quick and it was frustrating more times than not. It took me about two years to get to a point of stability..."

Participant I: "Each day is still a challenge, but the motivation and self-respect I'm rebuilding make the battle worthwhile."

Participant J: "I am forever changed, and I can't go back and undo it."

Participant K: "I don't think I have fully recovered. I am still having to work through self-esteem issues that developed from my time as an Escort."

Participant L: "It was too exhausting and the payoff didn't make up for it. Eventually I decided to stop going back."

I found that exiting required a personal redefinition of myself, coupled with new ways of establishing financial stability. Fear of relapse and the challenges providers face with "adapting to a new way of living" (Benoit & Millar, 2001, p. 22) created a difficult path for me to walk, especially in the first five years post-exit. Although it was cathartic to almost immediately begin assisting women still caught up in the sex trade, I often wonder how I was able to offer any real support at all, given my own emotional and mental struggles. For years I navigated my exit journey alongside other women doing the same, each one of us inevitably supporting the other at times.

Although now happily married with children and continuing my academic studies, I still carry residual effects from my seven years in the sex trade. The hardest part is seeing the people I love witness my continued struggle with trauma and anger. They feel helpless to offer me any relief aside from their love and emotional support. The experiences I endured changed much of who I am today. I trust the weight of them will continue to lessen over time.

When I consider the hundreds of women I met while active in the sex trade and the dozens of women I later supported at CEASE, those who operated as quasi-autonomous providers all appeared to travel the path detailed in my InSTEP Model. I believe the application of the InSTEP Model can equip helping professionals to better assist providers in understanding their own journey and lead them to their exit from the sex trade onto a new path toward recovery.

Application of Maslow's Theory

Abraham Maslow's 'A Theory of Human Motivation' (1943) describes a hierarchy of six stages of needs:

- Stage 1: Physiological needs (air, water, food, sleep, clothing, shelter)
- Stage 2: Safety needs (personal security, financial security, health & well-being)
- Stage 3: Social belonging (friendships, intimacy, family)
- Stage 4: Esteem (ego and/or status needs) – lower (respect from others), higher (need for self-respect)
- Stage 5: Self-actualization (desire to accomplish and become everything that one can be)
- Stage 6: Self-transcendence (desire to reach the infinite – the highest levels of human consciousness)

The InSTEP Model demonstrates a correlation between the process of quasi-autonomous service providers and Maslow's detailed course. Prior to the **Tipping Point** of the InSTEP Model, providers often appeared to function within the lower four stages of Maslow's hierarchy.

As selling sex is foremost an economic activity, it meets survival and sometimes safety needs. Social belonging needs were typically achieved for me through the subculture within the industry where a sense of commonality and camaraderie is present among service providers. My ego/esteem needs were met through the accolades and affirmations of purchasers as well as positive endorsements or referrals through online review board forums.

Some quasi-autonomous service providers appeared to become “locked” at lower levels of the hierarchy and unable to move forward. They seemed to strive only for acceptance and value from others. This may be the result of verbal harassment and abuse during their active time in the industry. These providers would state their belief that they could never, and would never, exit the industry nor achieve success outside of it. They were resigned.

After the **Tipping Point**, quasi-autonomous providers appeared to naturally aspire to higher levels of self-esteem and moved forward through Maslow’s remaining stages more easily if they attained financial stability. They became “different” which really just meant confident. They began to explore who they were outside of their previous singular identity as a service provider. Providers who went beyond the **Tipping Point** would prioritize financial rewards less as they came to value their self-discovery and sense of personal accomplishment.

Some successfully exited providers embody Maslow’s highest levels and find additional meaning in “reaching a hand back” to assist those still caught in the industry (Moran, 2015). Their courage in speaking out influences social and political change.

Application of Prochaska and DiClemente’s Model

James O. Prochaska & Carlo Di Clemente’s ‘Transtheoretical Model’ (1998) describes what is commonly referred to as the six ‘Stages of Change’:

- Stage 1: Pre-contemplation (not ready – unaware their behavior is problematic)
- Stage 2: Contemplation (getting ready – recognizing their behavior is problematic)
- Stage 3: Preparation (ready – intending to take action and may begin taking small steps toward change)
- Stage 4: Action (specific overt modifications are made)
- Stage 5: Maintenance (able to sustain action for at least six months and working to prevent relapse)
- Stage 6: Termination (zero temptation to return to the old unhealthy behavior)
- Relapse: Recycling (not a stage but rather a return from ‘Action’ or ‘Maintenance’ to an earlier stage)

A correlation can also be found between the Stages of Change and the InSTEP Model. While some contemplation and second thoughts may accompany the **Entry** phase, once the decision was made, most quasi-autonomous providers appeared to quickly settle into pre-contemplative acceptance in the **Positive Active** phase. The stages of change would become more evident after the **Tipping Point**, as providers began to contemplate leaving, preparing for exit, and developing strategies to prevent relapse.

Once in **Phase 2: Positive Active**, service providers were not receptive to altering what “works.” “Resistance to recognizing or modifying a problem is the hallmark of pre-contemplation” (Prochaska et. al, 1993, p. 1103). After the **Tipping Point** and having reached **Phase 3: Negative Active**, service providers were visibly in contemplation. At this point, one becomes “aware that a problem exists” (Prochaska et. al, 1993, p. 1103). In the first stage, providers internalized their experience of harm and would verbalize the pros and cons of their continued participation. This could make them suitable candidates for “conscious-raising techniques” (Prochaska et. al, 1993, p. 1109). There is the potential for people to stay stuck in the contemplation stage for long durations (Prochaska et. al, 1993). By the second stage of **Negative Active**, providers appeared ready to begin preparations. Here, “action-oriented therapies can be quite effective” (Prochaska et. al, 1993, p. 1106). Becoming active in their search for resources and assistance, they expressed readiness to attempt exit strategies.

Phase 4: Exit is the action and maintenance stage for providers as they strive to achieve consistency with applied strategies and to remain disengaged from the sex trade. Considerable support for a lengthy duration is required during this time since “for some, behaviour maintenance can be considered to last a lifetime” (Prochaska et al, 1993, pp. 1104-1105). Those who appeared fully committed to the long-term process of exiting the sex trade were those who inevitably were able to quit permanently. It is important to note that the maintenance stage is a continuum of change rather than an absence of it (Prochaska et al, 1993) and that “successful

maintenance builds on each of the processes that came before....perhaps most important was the sense that one was becoming the kind of person one wanted to be” (Prochaska et al, 1993, p. 1109).

CONCLUSION

The InSTEP Model provides insight into the challenges of quasi-autonomous service providers who, although initially motivated by financial relief, experience considerable distress and many challenges while attempting to exit from commercial sexual exploitation. Helping professionals often feel lost when trying to assist those who do not clearly identify as victims. Recognition and understanding of the inherent shifts for quasi-autonomous providers is a necessary prerequisite for developing appropriate interventions along their journey. It is important that interventions be developed that can be accessed at the identified optimal times.

Because quasi-autonomous service providers are primarily focused on financial relief, offers of immediate income support would certainly be of assistance. Further supports such as financial literacy (debt and money management), bursaries and career planning, as well as employment training and job opportunities could provide longer term alternatives. In addition, trauma therapy to address the harm incurred during the provider’s active time would seem to be beneficial, if not essential in helping them move from being objectified and victimized to becoming introspective and empowered.

Part of effective intervention requires a personal understanding of each individual’s unique circumstances, and a relationship rooted in trust and safety. In saying that, I strongly align with Menezes et al. (2019) in the belief that “women’s exploration of work must be treated as central to the exiting process” (p. 78) given the sex trade’s economic stronghold on providers. Regardless of autonomy, providers at any level may have service needs (Gerassi and Nichols, 2017), and access to support should be equally obtainable for all sexually exploited persons, not just those in survival sex or identifiable as trafficked.

A major systemic factor is that commercial sexual exploitation occurs within the continuum of violence against women. As mentioned earlier, I believe the sex trade is an objectifying gender-based practice rooted in the social and economic marginalization of women and girls - one that leads to their increased risk of vulnerability and their potential to become victims of violence. Being a high-risk activity cloaked in “discretion” and buyer anonymity, many service providers must tolerate abuse and accept it as an inevitable part of their participation.

The experiences of the many must not be muted by the vocal and rare Level 3 providers who seem unable to acknowledge their privilege and separate their individual gratification from the Level 2 providers seeking economic alternatives to the sex trade. As a final note, I would also like to emphasize that offering realistic alternatives to semi-autonomous providers, while a valuable service, in no way absolves society of the need to take action to end global sex trafficking and child exploitation. Unless we seriously address the consumer demand that fuels the market for all forms of sexual exploitation, countless children, youth, and adults in vulnerable circumstances will continue to suffer, in Canada and around the world.

Recommendations for Future Research

The InSTEP Model, based on personal reflection and observation, is an illustration of lived experience. Further research will hopefully shed light on the most helpful interventions at the identified optimal points of interception. I hope to collaborate in the future with professionals who employ the InSTEP Model in their practice in order to examine the effective application of the tool, and how specific resources impact the exiting process for various individuals. Others may wish to do the same. From these research findings best practices can be formulated for multi-disciplinary intervention, which best serves providers wanting to exit and begin a new life.

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