



Children of Female Sex Workers: A Study of Situation and Vulnerability in Karnataka

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Abstract

The primary objective of this paper is to shed light on the plight of children of female sex workers in Karnataka, South India. These children are currently in a highly vulnerable situation, raising significant concerns for society. As a marginalised group, they face numerous challenges, including deprivation of their rights as children, a high risk of entering the sex industry in the future, and potential threats to social cohesion. This study was conducted in selected districts of Karnataka using a mixed-methods approach in collaboration with local NGOs. The findings indicate that children of female sex workers are at a 'high risk' of being subjected to various forms of maltreatment. They suffer from social exclusion, anxiety, depression, deprivation, unmet needs, dissatisfaction, unfulfilled aspirations, and a sense of abandonment. The study emphasises the urgent need to improve the availability and accessibility of essential and mandatory services for these children. It also highlights the importance of implementing geographically and culturally specific rehabilitation programs. In addition to HIV prevention efforts, the National Aids Control Organisation must also extend its focus to address the critical needs of these children.

Keywords: Sex workers, Women, HIV, Children, Violence, Policy

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Introduction

Sex work, or prostitution, is recognised as one of the oldest professions globally, with a history spanning several centuries and an intricate web of cultural and social significance. The term "sex worker" is now preferred over "prostitute" to reduce the societal stigma and humiliation associated with the latter. Despite its historical presence, sex work today is shaped by complex socio-economic factors, including poverty, livelihood insecurity, unemployment, early marriage, and widowhood (Adhikari, 2014). Additionally, some women choose this line of work as a form of sexual expression (Open Society Foundation, 2007).

Different global agencies estimate that around 4.3 million women have been involved in the sex trade in India (Agrwal, 2013). As per some Indian-based NGOs, there are around 800,000 sex workers in India. US-AID estimates around 657829 sex workers in India, of whom 43% are reported to be HIV-infected (Nanjunda, 2019). All India Network of Sex Workers (AINSW) claims around 5 million sex workers in India. The Ministry of Health and Family Welfare says there are around 68,851 sex workers in the country. The National Child Rights Protection Commission says there are over 30 lakh sex workers in India (2017). The Ministry of Home Affairs estimates that over five lakh women are in the sex trade. The highest numbers of sex workers are in Maharashtra, West Bengal, and Andhra Pradesh states. There are around 100,000 sex workers in Karnataka, as per the Karnataka Health Promotion Trust estimation. (Tanuja, 2014).

To better understand the plight of female sex workers and their children, the Social Exclusion Theory and the concept of Structural Violence provide a meaningful framework. Social Exclusion Theory explains how individuals or groups are systematically marginalised from participating in key social, economic, and political spheres, exacerbating their vulnerability and perpetuating poverty and inequality (Siddharth et al., 2019). In this context, female sex workers and their children are excluded from formal labour markets, education systems, healthcare, and community support networks. This exclusion intensifies their socioeconomic hardships and traps them in a cycle of generational marginalisation (Mishra, 2016; Adhikari, 2014).

Structural Violence, a concept developed by Johan Galtung, highlights the social structures and institutions that inflict harm by preventing people from meeting their basic needs. In the case of sex workers, structural violence manifests through inadequate legal protections, lack of access to healthcare, and exposure to abuse from clients, brothel owners, and law enforcement. Children growing up in brothels are victims of structural violence, as they are denied safe living conditions, education, and a stable family environment. This framework underscores the need to address the systemic barriers perpetuating their suffering (Sircar & Dutta, 2011; Yerpude & Jogdand, 2012). Indian mythology and historical narratives have sometimes portrayed sex workers with reverence, as seen in stories of high-class courtesans who played influential roles in ancient dynasties (Siddharth et al., 2019). However, contemporary society often views sex work through a moralistic and stigmatising lens. The Stigma Theory by Erving Goffman is helpful here, illustrating how stigma leads to the dehumanisation and social ostracisation of sex workers and their children. This stigmatisation perpetuates adverse outcomes, such as the denial of education and healthcare, and increases the risk of violence and exploitation. (Siddharth et al., 2019; Mishra, 2016).

India's National Policy for Children (2013) says that 'every state in India should ensure the security of the rights and entitlements of children'. Children of sex workers are highly susceptible to exploitation, and their circumstances are often shaped by the same forces of social exclusion and structural violence that affect their mothers. Studies show that girls growing up in brothels are likely to be coerced into sex work soon after reaching puberty, sometimes as early as 9–10 years old (Mishra, 2016). Social Learning Theory, developed by Albert Bandura, offers insight into how these children, raised in environments rife with exploitation, violence, and instability, may internalise and replicate these patterns in their own lives. The exposure to violence, abuse, and criminal elements reinforces a cycle where children become predisposed to adopting maladaptive behaviours (Blanchard et al., 2018; Siddharth et al., 2019).

Some recent theories explain this context. Social stigma and labelling theory explain how societal labels lead to discrimination

and social exclusion, negatively affecting these children's self-identity and opportunities. Bronfenbrenner's ecological systems theory analyses the multiple layers of influence on their development, from family relationships to societal attitudes and cultural norms, showing how interconnected factors shape their lives. Intersectionality, developed by Kimberlé Crenshaw, highlights how overlapping systems of oppression, like gender, class, and caste, create compounded vulnerabilities for these children, emphasising the need for multifaceted approaches to support them, and this aspect has more relevance today. Maslow's hierarchy of needs illustrates how children's basic needs for safety, belonging, and esteem are often unmet due to economic instability and social stigma, hindering their ability to reach their full potential. Social capital theory reveals the importance of access to networks and resources for upward mobility, as some NGOs are trying in Karnataka. These children often lack such connections, making it vital to create community support systems to improve their prospects. Resilience theory offers a hopeful view, showing how some children overcome adversity through protective factors like supportive relationships and education. This perspective underscores the need for interventions that foster resilience (from various resources).

Intervention Strategies to break this intergenerational cycle of marginalisation, intervention efforts must adopt a Rights-Based Approach, prioritising the human rights of children and emphasising education, protection, and empowerment. The National Policy for Children (2013) mandates that every state in India secure children's rights, yet significant gaps remain in its implementation. Programs focusing on the "3 Rs"—raid, rescue, and rehabilitation—combined with resilience-building are critical. However, these strategies must also consider the broader systemic issues identified through the frameworks of social exclusion and structural violence. (Agrwal, 2013; Mishra, 2016). By embedding these concepts into the analysis, it becomes evident that addressing the plight of sex workers and their children requires systemic changes and culturally sensitive interventions that promote social inclusion, access to resources, and protective measures against violence and exploitation (Sagtani, 2013).

Literature Review

The literature regarding children of sex workers is notably limited. Tanuja (2014) has highlighted various vulnerabilities and issues affecting these children, including social stigma, separation from parents, abuse, early introduction to sex work, low school enrollment, psychosocial challenges, and social exclusion. She observes that children of traditional sex workers often face abuse and discrimination at school from peers and neighbours due to their mothers' profession. As a result, these children are frequently deprived of their educational and health rights. This deprivation leads to social isolation and an inability to integrate with other communities. Tanuja further argues that research should focus on the influence of mothers on their daughters, often encouraging them to pursue the same profession.

Devries et al. (2016) contend that children's attitudes toward education are influenced by family socio-economic status, family members' attitudes toward education, community behaviour, and the school environment. Children of sex workers, often coming from lower socio-economic backgrounds and facing intense stigma, are at a higher risk of dropping out at the primary level. These deprived children frequently face abuse, discrimination, and exclusion at school, leading to low aspirations and self-esteem. Early exposure to sexual abuse, humiliation, homelessness, violence, and social stigma fosters negative attitudes toward society, making them more likely to become juveniles at an early age. Next, Reed (2016) attributes the emergence of sex work to fundamental problems within social structures rooted in a male-dominated society that objectifies women. Despite societal advancements, women are still perceived as sexual objects. Reed notes that research often focuses on brothel-based and street prostitution while neglecting indoor prostitution. Moreover, findings seldom address the laws or governmental regulations surrounding prostitution. Policies often emphasise the rehabilitation of sex workers but neglect their children's future.

However, Adhikari (2014) found that children of sex workers suffer from inadequate parental care, relying solely on their mothers' earnings. He reports that only about 36 per cent of these children attend school, influenced by factors like the mother's education, financial status, and relationship with a male partner. Many children

who receive minimal education end up with low-paying, menial jobs. School dropout rates are rampant, with children frequently seen playing in the streets, running errands for local gangs, using drugs, engaging in criminal activities, or unknowingly assisting criminals.

A report by the Karnataka Health Promotion Trust (KHPT), a Bangalore-based NGO, found that sex workers often struggle to get their daughters married. In some cases, daughters have been abandoned by their in-laws upon learning about their mothers' profession (KHPT, 2017). Such incidents may push these daughters into sex work, perpetuating a vicious cycle. The National Commission for Protection of Child Rights (NCPCR) highlighted that the most significant risk for these children, especially girls, is being drawn into their mothers' profession, a common occurrence in brothel settings. The NCPCR (2012) also stressed the importance of regular psychological counselling and high-quality rehabilitation programs to prevent these children from entering the sex trade.

Bhargava (2019) reports the harsh realities faced by these children, such as teachers inquiring about their mothers' "rate," which leads to harassment, social ostracisation, and high dropout rates. Early exposure to sexual content often causes children to use their sexuality to gain attention, increasing their vulnerability to exploitation. Bhargava emphasises the need for culturally appropriate intervention strategies from both NGOs and the government to help these marginalised children cope with their challenges. Thng et al. (2018) add that it is crucial to explore the perspectives within various government schemes to improve the availability and accessibility of essential services for these children. In this regard, Beard et al. (2010) note that timely intervention can mitigate vulnerabilities related to health issues, including HIV, and prevent involvement in crime. A literature review indicates a need for further research on the socio-economic status of these children and the structural factors of a traditional social system that stigmatises sex work. There is also a research gap regarding stakeholder perspectives on the challenges in providing services to sex workers and their children. The primary aim of this study is to uncover the socio-economic status of female sex workers and their adult children while profiling the vulnerabilities and barriers to rights faced by these children.

Methods

This study was conducted across three districts in Karnataka: Bangalore, Belgaum, and Raichur. According to the Karnataka Health Promotion Trust and the Study Committee on Sex Workers in Karnataka (2017), there are approximately one lakh sex workers in the state. However, a comprehensive survey of the children of sex workers has not yet been conducted. The data for this study was collected using purposive and snowball sampling methods, with support from local NGOs. A mixed-method approach was employed, starting with outreach to sex workers who had at least one child, ensuring the confidentiality of participants while gathering socio-economic details. Following the sampling equation (infinity sampling), 385 children aged 15–25 were selected, including 186 girls and 199 boys. Data was gathered through surveys facilitated by NGOs, focus groups, and case studies. SPSS software was used for data analysis.

Sampling frame

Table 1

Name of the Districts	Boys	Girls
Bangalore	77	63
Belgaum	63	53
Raichur	59	70
Total	199	186

Result and Discussions

Table 2

Details of the Children of the Sex Workers

N= 384	Number and Percentage
Age (in years)	
Less than 5 years	-----

Just 15	36(9.3)
15-20	112(29.1)
20-25	98(25.5)
Above 25	138(36.0)
Level of Education	
Primary	112(29.1)
Upper Primary	45(11.7)
High school	26(6.7)
Dropouts	178(46.3)
Illiterate	23(6.8)
Reason for dropping out	
Not interested	76(19.7)
Poverty /no money for fee	78(20.3)
Need to go for a job	65(17.0)
Humiliation	98(25.5)
Household work	55(14.3)
Other	12(3.1)
Residing place	
Orphanage	56(14.5)
Childcare institutions	32(8.3)
With parents	186(48.4)
With grandparents	98(25.5)
Single	12(3.1)
Occupation	
Skilled	56(14.5)
Unskilled	236(61.4)

No job	92(24.0)
Facing humiliation in society	
Yes	198(51.5)
No	95(24.7)
Often	91(23.6)
HIV Status of the Children	
Positive	57(14.8)
Negative	327(85.1)
Opinion about mother's occupation	
Not liking	78(20.3)
Angry and Frustrated	63(16.4)
No big issue	86(22.3)
No idea what she is doing	100(26.0)
Do not Know	57(14.8)
Societal treatment	
Sympathy	68(17.7)
Not friendly	78(20.3)
Excluded	46(12.0)
No idea	192(50.0)
Police cases	
Yes	83(21.6)
No	301(78.3)

Table 2 *primary data

The study provides crucial insights into the socio-economic realities faced by children of female sex workers. Most children fall within the age range of 15-20 years, and there is a significant school dropout rate of 46.3%, attributed to poverty, the need to work, a lack of interest in education, and domestic responsibilities. This lack of

education not only perpetuates the cycle of poverty but also limits these children's potential for socio-economic mobility. Furthermore, 61.4% of the children are engaged in unskilled labour, indicating limited opportunities for advancement and the risk of exploitation. Social stigma is another major challenge, with 51.5% of children experiencing societal humiliation, which exacerbates feelings of rejection and negatively affects their mental health and integration. Health risks are pronounced, as 14.8% of the children are HIV positive, reflecting the dangerous conditions in which they live and possible exposure to high-risk activities. Limited access to healthcare and support services compounds these health challenges. Family dynamics are strained, with many children expressing frustration or discomfort regarding their mothers' profession, highlighting a need for better family communication and interventions to address trauma and psychological distress.

Legal vulnerability is also a concern, as 21.6% of children have been involved in police cases, underscoring the necessity for legal protection and services to prevent exploitation and abuse. The overall data emphasise the multifaceted vulnerabilities these children face, including threats of violence, lack of awareness about their rights, and restricted access to essential services. The study also profiles the sex workers themselves, most of whom are aged between 25 and 30, with many having entered the profession as teenagers (15-16 years old), reflecting their early exposure to exploitation. Education levels are low: 43% have only basic schooling, and 15% are illiterate. This lack of education severely limits their opportunities for alternative employment, trapping them in a cycle of marginalisation.

Income levels are meagre, with 46% earning between Rs. 5000 and Rs. 7000 monthly. These earnings are often depleted by intermediaries, leaving little for daily sustenance. Many sex workers belong to marginalised communities, such as Other Backward Castes (OBC) and Scheduled Castes (SC), highlighting how intersecting social and economic disadvantages make them more susceptible to exploitation. Family and economic pressures often compel these women into sex work. Around 20% are married but conceal their marital status to shield their families from societal judgment. Financial responsibilities and economic hardships are

primary motivators, with 37% citing poverty and 22% seeking higher income as reasons for entering the profession. Unemployment is another significant factor, pointing to a lack of viable economic alternatives. Work settings vary, with 46% operating from home and 31% from brothels. Notably, the profession includes a substantial proportion of single women (34%) and widows (22%), underscoring their precarious social and economic positions.

This analysis calls for a holistic approach to address the vulnerabilities of both sex workers and their children, including educational support, healthcare access, stigma reduction, and economic empowerment initiatives.

The current study aims to find out the situation and vulnerability of the children of female sex workers in Karnataka state. The sex work profession has a long lineage in India. Today, the urban market, including sex work, has become a significant channel for attaining self-sufficiency or financial independence for a few women (Beattie, 2016). Children of sex workers' socioeconomic position frequently overlap with their vulnerabilities, as they are more likely to originate from low-income families (Table 2). Poverty might limit access to essential resources and services such as proper nourishment, shelter, and a good education. Economic uncertainty can also compel children into exploitative labour or make them more vulnerable to trafficking and other forms of exploitation, continuing cycles of poverty and marginalisation (Thng et al., 2018).

Next, trafficking and coercion theory examines the role of human trafficking and coercion in the sex industry, with a special emphasis on sex workers and their innocent children who are forced or deceived into sex work. Children of sex workers are victimised in different ways, including social neglect, rejected felt needs, unfulfilled wants, failed aspirations, exclusion, deprivation, abandonment, risk of entering the sex trade, indulging in criminal activities, malnutrition, etc. This is why these children will not be interested in interacting or mingling with other community members (Fisk, 2013). Also, if the child is dropped out, she or he will soon be aware of the mother's occupation. This study has shown that children of sex workers have undesirable environments surrounding their homes, marked by attacks, abuse, un-parliamentary words, violence, etc (Leal et al., 2017). Also, some of them dream of rescuing

their mothers from prostitution and leading a decent life with modern facilitation. Our study has also shown that there are continuous fights and violence from their intimate partners, clients, and husbands. Keeping children in a safe and fear-free environment is challenging for mothers. This current study corroborates all these similar findings.

Female children are in greater danger of sexual exploitation and abuse, both at home and in society. According to the study, they are also subjected to societal stigma and discrimination as a result of their moms' work, limiting their access to school, healthcare, and possibilities for social and economic progress and involvement. Male children, while as vulnerable to exploitation and violence, face different societal expectations and pressures, which influence their experiences and trajectories (Javalkar et al., 2019). Furthermore, caste dynamics exacerbate the risks of sex workers' children, especially in locations where caste discrimination is common. Children from lower castes or marginalised communities face multiple forms of stigma and exclusion, which perpetuates cycles of poverty and social marginalisation. Caste discrimination can have an impact on children's access to education, healthcare, and career opportunities, compounding their struggles and perpetuating intergenerational inequality (Beattie, 2016; Javalkar P, Platt L, Prakash R, et al. 2019).

It is found that the majority of these children are facing different mental traumas, including depression, anxiety, etc. Some children are addicted to drugs and need immediate attention and treatment. Local NGOs have found that some of these children are already suffering from sexually transmitted diseases. Some of the children are already in 'conflict with the law' for various crimes like theft, eve-teasing, and robbery, including some heinous crimes. Sometimes, local police officers target these children without capturing the real culprits in connection with the crime that happened in their jurisdictions (Reed, 2016). It was also noticed that some children, especially girls, were begging on the road and at traffic signals. There is no significant difference regarding the opinions of both boys and girls. However, it seems girls are facing more vulnerability to sexual exploitation, while boys are vulnerable to physical abuse both indoors and outdoors. It is also found that girls are being threatened or eve-teasing by strangers' passersby and neighbours. Girl children

believe they are deprived of safety and dignity in life (Javalkar et al., 2019).

Some economists see sex work as a rational decision made by people in response to economic incentives and restrictions. According to this viewpoint, women may enter the sex business out of financial necessity or the prospect of higher wages than other alternative work possibilities. However, this perspective frequently ignores the structural issues that limit women's options and chances. According to some studies, poverty is a major driving force behind the growth of India's sex industry. Within Indian society, women often experience higher economic challenges than men, prompting many to turn to the sex trade out of necessity (Thng et al., 2019; Sircar & Dutta, 2011). This systematic inequity fosters a cycle of structural violence, forcing women to enter the workforce to provide for themselves and their children. As a result, these women are frequently labelled as either victims or criminals, putting them at a higher risk of catching contagious diseases and experiencing widespread social stigma (Patterson & Zhuo, 2018).

Further, structural inequality theory emphasises the structural causes that drive women into sex work, such as poverty, a lack of education and career possibilities, discrimination, and social marginalisation. Feminist theories also emphasise the gendered dimension of sex labour, claiming that it is a form of exploitation and oppression rooted in patriarchal systems. Feminist researchers claim that economic and social disparities disproportionately harm women, making them vulnerable to exploitation in the sex business.

It is observed that female sex workers left their previous occupations, and the reason for choosing sex work over other jobs because of flexibility, high earnings, non-rigidity, etc. Hence, there is an imperative requirement for a watertight compartment among concepts like trafficking, voluntary sex work, and forced work. Studies done in various parts of the country have found some vital findings like that significant numbers of sex workers are in the sex trade to support their grown children and their family. Next, sex workers who lose the safekeeping of their children, therefore, often report becoming involved in anti-social activities like drug supply, pornography, pimping, stripping, molestation, rape and kidnapping, theft, etc. (Javalkar et al., 2019).

It must be remembered that sex workers are also mothers too. It has been found that these women go beyond their capacity to complete the role of motherhood. However, these mothers are not getting good social or family support. They face the toughest challenges in providing social needs for their siblings, fulfilling their dreams, and hoping for a better future. Also, they are not getting good support to improve prospects for themselves or their children. It is observed that the home atmosphere, family, social life, peers, and aspirations also played a vital role in determining the vulnerability of these children. During the focus group study, the unique socio-economic background and stigma are huge hurdles in getting good social status, dignity, self-concept, esteem, and attitude-building processes in their lives. Hence, some of these young children are choosing the sex work profession (Nanjunda, 2019).

These children face various issues at the individual and family levels, which need further study. Understanding micro- and mesosystems to look at the immediate lives and plight of female sex workers and how it affects their mothering is the need of the hour. The micro studies will help us look at the motherhood experience of female sex workers and its effects on their day-to-day lives and the lives of their children. Fresh data to get a societal perception of these children and the role of civil society in their rehabilitation process is also vital here. There is a need to understand profoundly the impact of exclusion from child rights resulting from mothers' occupation on the future lives and well-being of the children (Putnis & Burr, 2020). The stigmatisation and social exclusion theory focuses on the social stigma and prejudice that sex workers encounter, which can lead to marginalisation, isolation, and limited access to important services like healthcare and legal protection. Sex work is associated with high levels of social stigma, which is said to arise from the attribution of shame, particularly to women and their children (Reed, 2016).

From this viewpoint, the mother's occupation is indirectly responsible for the violation of children's rights, which undermines the social ecology. Stigmatisation occurs in all aspects of children's lives, from the general public to healthcare officials, clients, police, and other service providers in their day-to-day lives, and it has been found this can result in isolation, social exclusion, agony, mental

stress, etc. among these children (Javalkar et al., 2019). It is found that opine that the culture of fear associated with their mother's work, popular belief, and deprived resources and opportunities also make life more vulnerable for these children. Studies have proved that sex work background is the real causative factor for the differential utilisation of the health and educational facilities provided as a part of child rights. In a focus group study, it has been found that the absence of a regular income is the biggest hurdle to providing a good childhood, education, etc., for children (Beattie, 2016; Putnis & Burr, 2020).

It is widely believed that documentation and good evidence regarding the plight of the children of sex workers are very limited in academic settings. Moreover, extended family members and the neighbourhood community are not sensitive to these children. Furthermore, different stakeholders in this issue are not adequately responding to the needs of these children. The media's role is also needed in exposing the problems of these disadvantaged children. The social worker's role in understanding their immediate needs and barriers to getting their childhood rights and returning them to mainstream society is grossly absent (Scotia, 2021). Some NGOs are providing some types of services to the children of sex workers. These programmes included quality education, health care, HIV testing, vocational training, short-term shelter, and housing so that children had a safe place to stay when their mothers worked. These NGOs need more professionalism, commitment, and funding. Because of stigma, uniqueness, and the drifting nature of work, children are not accessing any government benefit. We found that the voices of the children who are living in slums and rural areas are going unheard and being the soft target for abuse and exploitation. Children dream of a fear-free and secure future and desire to live like other regular members of society (Howard, 2020).

The geographical context in which children of sex workers reside can also influence their vulnerabilities. Urban areas may offer greater access to certain services and opportunities but can also be characterised by higher levels of stigma, exploitation, and violence. Rural areas, while potentially offering a closer-knit community and social support networks, may lack adequate infrastructure and resources, further limiting opportunities for these children.

Additionally, the legal and policy environment in different regions can impact the availability of support services and protection mechanisms for children of sex workers. Framing the discussion within a human rights framework, highlighting every child's inherent dignity and rights, regardless of their background or circumstances, is also vital today. Upholding the rights of children of sex workers is not only a moral imperative but also essential for building a more equitable and just society (Beattie et al., 2016).

Experts opine that analysing the vulnerabilities of sex workers' children using the social-ecological model would entail looking at elements at every level, such as family dynamics, community attitudes, social stigma, and government laws, better to understand the complex interplay of effects on their well-being. Further, applying a trauma-informed theory to children of sex workers would require recognising the signs and symptoms of trauma, understanding its underlying causes, and implementing interventions that prioritise safety, empowerment, and healing. However, recent intersectionality theory acknowledges that disadvantaged children face overlapping and intersecting oppressive systems based on race, gender, class, and sexual orientation. Applying this approach would allow for a more in-depth investigation of how factors such as poverty, caste, gender, and occupation interact to generate distinct vulnerabilities for these children (Beattie, 2016; Patterson & Zhuo, 2018).

A combination of poverty, lack of health insurance, and discrimination frequently hinders healthcare access for these children. Public health initiatives often fail to reach marginalised communities, and healthcare providers may harbour biases against children of sex workers, further perpetuating their exclusion. Moreover, these children are at higher risk for contracting infectious diseases, including HIV, hepatitis, and tuberculosis, due to exposure to unsafe environments or neglect. For instance, children who live in households where their mothers engage in sex work may be exposed to unsafe hygiene conditions, malnutrition, and inadequate sanitation, increasing their susceptibility to infections. Additionally, while the mother may be at risk for HIV and other sexually transmitted infections (STIs), the children's health needs, particularly concerning immunisation, mental health, and

preventive care, are often neglected. The lack of adequate healthcare resources in their communities or the financial strain on families further limits their ability to access necessary treatment, including regular check-ups, vaccinations, and specialised medical care.

Children of female sex workers are at an increased risk of developing mental health issues due to the compounded stressors they face in their daily lives. The stigma attached to their mothers' occupation can lead to severe emotional and psychological distress, including feelings of shame, guilt, and social isolation. These children often experience bullying, rejection, and exclusion from peers, which can have long-lasting effects on their self-esteem and overall mental well-being. Moreover, the uncertainty and instability of their living conditions, coupled with the potential exposure to abuse, violence, and neglect, can result in trauma and emotional disorders such as anxiety, depression, and post-traumatic stress disorder (PTSD). Children living in such environments may also have a heightened risk of developing behavioural issues, such as aggression, withdrawal, or difficulties in forming healthy relationships. These mental health challenges often go unaddressed due to the lack of support systems and mental health resources in marginalised communities (Yerpude & Jogdand, 2012; Mishra, 2016).

Long-Term Impact on the Children

Children growing up in the environment of sex work, marked by poverty, social stigma, and lack of educational opportunities, often face developmental challenges that can influence their trajectory well into adulthood. A longitudinal approach reveals that the compounded disadvantages experienced in their formative years – such as inadequate healthcare, low-quality education, and exposure to trauma – can have enduring effects on various facets of their lives. Studies tracking children over time have shown that high dropout rates and low educational attainment restrict their future employment options. Many end up in low-wage, unskilled labour or follow in their mother's footsteps, perpetuating cycles of poverty and marginalisation. The lack of access to quality education from an early age severely limits their potential for upward social and economic mobility, which can shape their adult life outcomes, such

as economic stability and occupational opportunities. (Beattie et al., 2016).

The health risks associated with childhood exposure to the environment of sex work do not dissipate over time. Individuals may carry the consequences of early health challenges, such as untreated illnesses or HIV exposure, into adulthood, affecting their quality of life and longevity. Mental health struggles stemming from stigma and trauma can manifest as chronic anxiety, depression, or post-traumatic stress disorder (PTSD) in later years. The psychological scars from childhood discrimination and abuse can impede the ability to form stable relationships or pursue fulfilling careers. Mobile health units should offer check-ups, screenings, and counselling. Mental health services, including trauma-informed therapy, should be integrated into community health programs with the help of local mental health professionals (Patterson & Zhuo, 2018).

The social exclusion faced in childhood often translates into difficulties forming and maintaining healthy social connections as adults. Individuals who grew up facing severe judgment and ostracisation may struggle with trust and social integration. Moreover, the internalised stigma and shame can lead to a sense of social isolation, which impacts family dynamics and community relationships later in life. Next, the longitudinal view also highlights the risk of intergenerational transmission of poverty and marginalisation. Without significant intervention, children of female sex workers may face barriers like their parents, making it difficult to break free from the structural constraints that confine them. Research indicates that early childhood adversity can ripple effect, influencing the next generation's parenting practices and economic choices (Howard, 2020).

Considering these long-term implications, the study underscores the need for sustainable, life-course interventions that address immediate needs and create pathways for a more stable and prosperous future. Programs focused on education, skill development, healthcare, and psychological resilience are crucial for mitigating the lasting impact of early disadvantage and fostering more positive outcomes for these children as they grow into adulthood.

The study's primary limitation is that it had only a small number of samples, and the results cannot be generalised. The hidden nature of the job was also a challenge while framing study samples. The study covered children in the age group 10–25 only, and the study was done mainly in urban and semi-urban areas and only three districts of the state. Also, the study is based on NGO interventions and has no direct access to the researchers in most cases. Relying on NGO data in research on children of sex workers may introduce biases such as selection bias, where only those already engaged with the NGO are included, potentially skewing the sample. Social desirability bias could lead participants to alter responses to meet perceived expectations. Data accuracy may suffer, as NGO data might not be as rigorous or consistent as research requires. NGOs may also unintentionally reinforce confirmation bias, emphasising specific outcomes to support their agendas. Additionally, access issues could mean that children not involved with NGOs are underrepresented, and ethical concerns might arise if the NGO's role influences informed consent. These biases highlight the need for researchers to critically assess NGO data and triangulate findings with other sources. A future study needs to be done on the socio-psychological status of children of sex workers. Moreover, new studies must explore effective interventions, and assessing existing rehabilitation programs' scalability and sustainability is essential. Future studies should also aim to capture these children's diverse perspectives and experiences across different contexts and populations. This understanding will help us develop and determine geographically and culturally specific needy interventions.

Policy Recommendations

1. Collaborate with NGOs and community organisations to create supportive educational environments by sensitising schools to reduce stigma, implementing anti-bullying policies, offering counselling services, and providing scholarships to cover tuition, uniforms, and educational expenses. Region-specific vocational training programs

should also be introduced to equip children with practical skills like tailoring, carpentry, or digital literacy.

2. Establish health programs that address physical and mental health needs, especially for children affected by HIV and other diseases. Mobile health units should offer check-ups, screenings, and counselling. Mental health services, including trauma-informed therapy, should be integrated into community health programs with the help of local mental health professionals.
3. Strengthen laws protecting children of sex workers from exploitation, trafficking, and abuse, ensuring access to justice and safeguarding their rights.
4. Create community-based support networks to provide emotional support and reduce isolation. Collaboration between the state, local authorities, and NGOs is essential to deliver comprehensive services, including education, healthcare, legal aid, and counselling.
5. Launch campaigns to reduce stigma, fostering empathy and understanding within local communities. These should target schools, healthcare workers, and law enforcement and raise awareness about the rights and entitlements of these children.
6. Offer parenting workshops to mothers, focusing on child development and trauma-informed care. Additionally, it provides microloans, financial literacy programs, and support for sex workers to transition to safer, dignified work, enhancing their ability to support their children.

Conclusion

In conclusion, an examination of the socioeconomic status and vulnerabilities facing the children of female sex workers in selected districts of Karnataka reveals a range of challenges, including educational barriers, economic deprivation, social stigma, health risks, legal vulnerability, and psychological distress. These children are often trapped in a cycle of poverty and marginalisation, with limited access to essential services and opportunities for social and

economic advancement. The findings highlight the complex interplay of factors that contribute to the vulnerability of these children, such as their mothers' work, socioeconomic status, caste dynamics, and societal attitudes. Female children, in particular, are more likely to experience sexual exploitation and abuse, although male children also face violence and discrimination. Caste-based prejudice further exacerbates their marginalisation, reinforcing intergenerational inequality. The lack of adequate support structures for sex workers and their children calls for greater attention. The stigma and clandestine nature of sex work make it difficult to provide targeted interventions. Policy changes should focus on holistic rehabilitation, education, healthcare, livelihood opportunities, and social reintegration for sex workers and their children. Early childhood interventions, life skills training, and vocational education are essential.

Declaration

The original article has not been published or submitted elsewhere for publication.

(DC Nanjunda and Jyothi Lakshmi S)

Author contribution statement: Equal Contribution

- Conflict of interest: Nil
- Ethical consent: Taken
- Funding: Nil

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