

**A PAINFUL POWER: COMING OF AGE, SEXUALITY AND RELATIONSHIPS,
SOCIAL REFORM, AND HIV/AIDS AMONG *DEVADASI* SEX WORKERS IN
RURAL KARNATAKA, INDIA**

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**A thesis submitted to the Faculty of Graduate Studies in partial fulfillment of the
requirements for the degree of Doctor of Philosophy**

**Department of Anthropology
University of Manitoba**

THE UNIVERSITY OF MANITOBA
FACULTY OF GRADUATE STUDIES

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RURAL KARNATAKA, INDIA**

BY

Treena Orchard

**A Thesis/Practicum submitted to the Faculty of Graduate Studies of The University of
Manitoba in partial fulfillment of the requirement of the degree**

Of

DOCTOR OF PHILOSOPHY

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ABSTRACT

This dissertation examines coming of age, sexuality and relationships, social reform, and HIV/AIDS among a unique group of female sex workers, the *Devadasis*, in rural areas of the South Indian state of Karnataka. Former temple servants, religious functionaries, and courtesans in the medieval to early Colonial period (c. 10th-19th century), over time the *Devadasis* have lost their wealthy patrons and attendant socio-religious status. While often equated with commercial sex workers, many *Devadasis* continue to practice age-old ceremonies and customs. However, many aspects of these sex workers' lives are misunderstood. A combination of qualitative methods was used during this research; mainly participant-observation, interviews (individual, group, life-histories), and workshops with participants were coordinated to ensure their participation in the process and feedback on study results. Among the most important findings is the alternative model of child prostitution that emerged from the data. Contrary to standard portrayals of the young as victims of a degraded trade, *Devadasi* girls discussed some positive aspects of prostitution, such as their ability to support their families, providing income to participate in peer activities, and becoming an adult. The common assumption about sex workers as sexually detached and incapable of forming important unions was also challenged, as many *Devadasis* enjoy meaningful sex with their long-term lovers or partners, who are central to the women's socio-emotional and economic well-being. Their response to state-level social reform movements aimed at "rescuing" them from prostitution reveals a pragmatic understanding of these campaigns not often considered in the literature, with the women incorporating these programs into their sex work earnings to maximize their position in a demanding economic environment. Similarly, their

involvement in the formation of Collective organizations in order to develop a sense of empowerment in their fight against HIV/AIDS reveals the women's ability to mobilize and politicize their demands. The results of this dissertation are relevant to the emerging research on global sex work, especially in relation to the issues of childhood, sexuality, and relationships, and they present new data on the *Devadasis* about coming of age, changes in the system over time, social reform, and HIV/AIDS.

GLOSSARY OF TERMS

Agi- grandmother

Akka- older sister

Amma- mother

Artha-material wealth, one of the four goals of life

Ashramas- the classical Hindu life-cycle

Ayurveda-science of life, ancient Indian medical system

Babu- regular clients or lovers, more commonly found in North India

Basavi- a female bull, used to refer to women belonging to a regional variant of the *Devadasi* system who engage in traditional, religious-based prostitution

Beedi- home-made cigarette

Bhakti- devotion

Bharatnatyam- a special form of classical dance performed by *Devadasis*

Bhoomi- earth

Bhoga- enjoyment or sexual pleasure

Bili multi- white discharge

Bisi- hot

Brahmacharya- apprenticeship stage in classical Hindu model of the life-cycle

Chandranadi-clitoris

Chapattis- wheat-based flat bread

Chatta- small boils

Chini- small luxuries (e.g. powder, make-up, bindi)

Cholo- good

Dalit- term for those people belonging to the lowest socio-economic and caste groups, formerly known as 'Untouchable'.

Deva-rige bidu- to give to the God or Goddess

Dhabha- roadside truck stops and eateries

Dhandha-Hindi term for “business”, used throughout India to refer to sex work.

Dharma kartas- administrative heads of temples

Dhatu- semen

Doddaki- to attain puberty

Dosa- South Indian food item made of ground and fermented lentils, often with a potatoe filling

ECPAT- acronym for the Thailand-based NGO entitled ‘End Child Prostitution, Child Pornography and Trafficking of Children for Sexual Purposes’.

Ganikadkshya- Superintendent of Prostitutes

Garhasthya- householder stage in classical Hindu model of the life-cycle

Garmi- heat, often used to refer to sexually-transmitted diseases

Geneya- man on the side, boyfriend

Gharwalis- madam

Giraki-non-regular client

Goonda- hired thug, anti-social elements

Gowda-landlord or owner

Gupta khayile- hidden sexually-transmitted disease

Gupta langika roga- secret sexually-transmitted disease

Hare- youth, in between stage of life

Harijan- ‘children of God’, made popular by Gandhi to refer to ex-Untouchables

Harijan ker- area of a settlement or town where those from the *Harijan* castes live

Hastamaithuna- masturbation

Hengisara khayile- women's disease, sexually-transmitted disease
Hunnu- skin disease

Idangai- *Devadasi* or "dancing girl" tradition historically associated with left-hand (lower) castes

Inams- usufruct rights to land in return for temple service

Jati- matted hair, similar in appearance to dreadlocks

Jogappa- men who are transformed through the power of the Goddess into 'sacred women'

Jogamma- female ascetics who often dress like men and may take up spiritual devotion to the Goddess later in life

Jogatis- women who renounce the world in favour of a spiritual existence, sometimes becoming oracles and directors of certain religious functions

Kadata- troubles

Kai hidisuvudu- first night, first client ceremony

Kali yuga- the current time in which we live

Kannada- local language spoken within the state of Karnataka.

Kannadiga- A local term referring to those living in the state, especially those who speak *Kannada* and have lived in the region for generations.

Kanyadan- 'the giving of the virgin' rite, associated with marriage and rites of passage among certain groups

Kedasathana- 'spoiled', sexually

Kempu multi-red discharge

Khavu- heat or hot, also used to refer to sexually-transmitted diseases

Khiam- regular partner, lover

Kum kum- vermillion powder used in ceremonies and beautification

Kundi- hips or behind

Linga- male generative organ, phallus

Malak- Marati term for regular (means “keep”)

Mane devaru- home or family deity

Mangalasutra- marriage necklace common in South India

Moksha-rebirth from the cycle of successive lives

Molay- breast

Molay tottu- nipple on the breast

Mukuli- anus

Muttu- beaded necklace (often red and white) that serves as the marriage necklace at the time of *Devadasis*’ dedication to the deity.

Nada uohuchu- semen (lit. “waist discharge”)

Nandi- the bull that accompanies the God Shiva

Nautch- a corrupted version of the Hindi term for dance

Nirodh- condom

Panca-veysha- five celestial prostitutes mentioned in classical texts

Panchayat- local council at the village or town level

Pativratty-an ideal wife who is steadfastly devoted to her husband

Patra- a description for dancing, often used in relation to a dancing girl/prostitute

PITA- Immoral Traffic in Persons and Prevention Act

Prasada- offerings made sacred on account of being presented to, and having contact with, the Divine

Praudha awastai- youth

Pujari- priest

Rajas- emotion and passion, sometimes linked with female seed

Sadhu- Hindu saint or holyman

Sakti- generative female power, essential for human life

SAARC- South Asian Association for Regional Cooperation (includes the countries of India, Nepal, Bangladesh, Pakistan, Bhutan, Sri Lanka, and the Maldives)

Sanghas- Collectives, registered organizations

Sannyasa- renunciation stage in the classical Hindu model of the life-cycle

Sati- self-immolation of a wife on the funeral pyre of her husband

Shisna- testicles

Shuregu hedasudhu- first client ceremony

SITA-Suppression of Immoral Traffic Act

Stana- breast

Sule- prostitute

Sumangali- auspicious woman

Tali- circular golden amulets attached to the *mangalastra* or marriage necklace

Tawaif- Muslim girls who practiced singing, dancing, and sex work in Northern India

Telinu- headache

Tevaradiyal- Tamil term for *Devadasi*

Tullu- vagina

Tunni- penis

Tiffin- meal or snack

Trupti- orgasm, sexual satisfaction

Udach- tumours in pelvic area

Valangai- *Devadasi* or “dancing girl” tradition historically associated with right-hand (upper) castes

Vanaprashtha- stage of withdraw in the classical Hindu model of the life-cycle

Vdudhu- small boils

Veysa- Sanscrit term for prostitute

Visha- poison

Wanti- vomit

Yerakonda- a head bath

Yoni-female generative organ, vagina

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CHAPTER 1-INTRODUCTION

Girls grow up with a notion of their temporary membership within the natal home. Rituals provide one of the important means through which girls come to realise the inevitability of their transfer from the natal home to that of the husband (Dube 1988:168).

In India, Annapurna (Goddess of Sacred Prostitution) blessed the temples with an abundance of dedicated women. *Veyshyah sungum-sey poonyum-hey* (to have intercourse with a holy prostitute is a virtue which obliterates all sin) was the chanted advice of Brahminee priests (poojarees)...(Dubois 1897; cited in Edwardes 1959:151).

According to the 1982 *Devadasi* Prohibition Act any woman or child who is initiated as a *Devadasi* by tying the *mouttu* is illegal. It is a crime... Abolish the superstition. Stop the *Devadasi* tradition and uplift humanity (From a poster about Karnataka's *Devadasi* Rehabilitation Project).

No cure for AIDS; Condom OK Please¹ (Indian Truck and billboard advertisements).

This dissertation examines the issues of growing up, sexuality and relationships, social reform efforts to abolish the *Devadasi* system, and the impact of HIV/AIDS on the lives of *Devadasi* women and girls who practice sex work (*dhandha*) in rural parts of the South Indian state of Karnataka (see Maps 1-3, Chapter 2). Central to this task is explaining, unpacking, and sometimes contesting the meaning(s) inherent in the material cited above, which represent standard interpretations of the topics examined in this study. In doing so, one of the primary objectives of this research is to demystify some of the stereotypes

¹ A play on the slogan "horn OK please" that is painted on many forms of transport on Indian roads, referring to the necessity of honking to alert other drivers before passing or to get the attention of fellow vehicle operators.

surrounding sex workers, namely the naturalization of their role as disease vectors and the idea that as marginalized women they are powerless in situations with clients and the sex work environment (e.g. *gharwalis*², agents, *goondas*). Providing data on the complex socio-sexual relationships that women and girls form, both within and beyond their work, is another primary goal of this work. Recent research indicates that permanent partners or boyfriends may pose greater HIV risks to their sex working partners because their union is more formal, and not one in which condoms can be used without question or violence (Gysels, Pool, and Nndusiba 2002:183; MacPhail and Campbell 2001: 1620; Sterk 2000:106; Wojcicki and Malala 2001:109). Identifying the conditions, forces, and emotions that permeate women's relationships is essential to better understanding how HIV/AIDS prevention strategies will work. It is also important to contesting notions of sex workers as devoid of meaningful and sexually satisfying relationships. Although commonly overlooked or simplified by focusing on inter-client competition among women, the solidifying and powerful nature of female friendships-including those between family members- among sex workers is a secondary topic to be examined in this regard.

Writing against the homogenization of sex workers, either by infantilizing women through their inclusion with the category of 'children' (Montgomery 2001:17) or upholding a universal image of the 'third world female sex worker' is another main feature of this work (Kempadoo 1998:7). Delineating the sexual, socio-economic, and experiential differences between generations of women selling sex is central to comprehending the specific factors impacting sex workers at different times in their lives

² Madams or individuals who provide space for sex work. *Goondas* are hired thugs who are often connected with criminal elements and extort money from women for 'security' purposes.

and sex work careers. Young girls, in particular, require attention because of the way that they are labelled in NGO and many academic discourses as 'victims' or as being 'victimized' through their participation in sex work, assumptions which denote a universalized notion of what 'child' means and ignores the positive if difficult contributions young sex workers make to their families (see Montgomery 1998, 2001; Murray 1998).

The challenges put to the 'colonial gaze' (Mohanty 2003, 1991) have succeeded, in theory if not always in practice, of refuting notions of the 'third world woman' as uneducated, traditional, domestic, and oppressed by her gender. However, less action has been taken to deconstruct the similarly harmful and mythical depictions of sex working women in the 'third world' as impoverished, bound by backwards practices, duped by scrupulous traders, and in need of representation by 'first world' feminists (Doezema 2000; Kempadoo and Doezema 1998). Complicating the sex work canon is needed to achieve greater participation and local representation in global sex work dialogues from women throughout the 'third world'. This process is also integral to formulating representative and culturally relevant HIV prevention programs. Helping the women develop social tools that enable them to more effectively deal with the conditions of everyday life that impact on their ability to negotiate safer sex, like gender, poverty, violence, access to health care, is another important outcome of contesting stereotypical and often harmful images of sex work and the women who participate in the trade.

While there have been many Indian studies of sex work in red-light and urban areas (Asthana and Oostvogels 1996; Asthana 1998; Bhattacharya and Senapati 1994; Bhende 1994; Evans and Lambert 1997; Joardar 1983; Kapur 1977; Punekar and Rao

1962; Rao *et al.* 1994; Shankar 1999) the anatomy of rural sex work systems are not, as yet, adequately understood. Yet, the rural areas, where 65% of the country's population live, are becoming increasingly important as the burden of disease shifts from predominantly urban populations to those living in smaller areas. Thus, describing the features, economy, migratory patterns, and different social networks involved in this setting are crucial to assessing the micro dynamics of, and larger structural forces affecting, HIV transmission.

Who are the *Devadasis*? Before turning to this, I will briefly outline the collaborative HIV/AIDS projects that form the context in which my research took place. This followed by a discussion of the *Devadasi* system historically and today, the main research "problem, a brief overview of the epidemiology of HIV in India, with special reference to female sex workers. An outline of the content of the chapters presented in the dissertation concludes the Introduction.

The WAF and ICHAP Projects

Recognizing the neglect of rural sex work projects in India and the rapid rise in HIV generally, and among sex workers in large cities, a group of researchers at the University of Manitoba devised an ethnographic study of female sex workers in rural India. The focus was in four northern districts (Bagalkote, Belgaum, Bijapur, and Dharwad) in the southern state of Karnataka, which has been designated a "high risk" state. Reasons for this include a prevalence rate of 2% among antenatal women (NACO 2003), high rates of poverty and illiteracy, its location at the juncture of state and national transportation routes, and large numbers of women in prostitution, including those in the traditional

Devadasi sex work system. Once funding was secured from the World AIDS Foundation (WAF), the Canadian researchers made contacts with the Anthropology Department at Karnatak University (located in the city of Dharwad, Dharwad district) and organizers of the Belgaum Integrated Rural Development Society (BIRDS), a non-government organization (NGO) that had worked with sex workers in northern Karnataka since 1997. In addition, they consulted local consultants and groups of sex workers who, with the support and guidance of BIRDS, had formed registered collective organizations (*sanghas*) throughout Karnataka (mainly in the North).

After several workshops with all the parties were held to discuss research objectives, methods, and projected outcomes (i.e. help support collectives, build local capacity, apply findings to HIV prevention programs), the local research team³, BIRDS representatives, and peer-educators from the *sanghas* proceeded with the project (February 2001-November 2002). Ninety interviews were conducted with *Devadasis* and forty-five with commercial sex workers in many villages and small towns. The participants felt most at ease with group discussions (3-10 individuals), which were carried out with women and girls aged 14-50 in the local *Kannada* language (then translated, often on the spot, into English). Several meetings were held during the research process, and a closing workshop took place in November of 2002.

The WAF project is linked with a collaborative effort by the governments of Canada and India to improve HIV/AIDS programming in the states of Karnataka and Rajasthan. The India-Canada Collaborative HIV/AIDS Project (ICHAP) is funded by the Canadian International Development Agency (CIDA). The results of the WAF study has

³ Which originally consisted of Dr. Kaveri Gurav, myself, one AIDS counselor affiliated with BIRDS, and sometimes 1-2 peer-educators from the *sanghas*. As we developed our rapport, myself and Dr. Gurav conducted the bulk of the interviews on our own.

been integrated into the design of ICHAP sponsored demonstration projects in both states (see Chapter 2 for more details).

Devadasis: A Brief Sketch

A compound word from the *Sanskrit* terms “deva” (“God”) and “dasi” (“female slave or servant”, the *Devadasi* system originated between the 3rd and 6th century A.D. throughout India, predominantly in the South (Parasher and Naik 1986:64; Shankar 1990:42). Locating the origins of the tradition is a slippery task because of the regional, temporal, and functionary differences among the women and the system they participated in. Generally speaking, *Devadasis* are women who are dedicated, usually before puberty, through a marriage ceremony to a deity or object (i.e. a sword). Their marriage to the deity ensured that they never attained the socially and morally stigmatized status of widowhood, and this was the primary reason for their auspiciousness within Indian society (Marglin 1985). The women serviced local temples and their citizenry in various ways, depending on their ritual status (Thurston and Rangachari 1909; Henriques 1962: 177-199). They sang, danced, and performed other significant religious functions (Kersenboom 1987; Marglin 1985a), begged and devoted their lives to the deity, or they may have been sex workers ordained by their union with God to ensure-through sexual intercourse- good fortune and spiritual harmony (Assayag 1989; Tarachand 1991). Corrupt temple administration and priestly conduct, the rise of androcentric forms of worship, and temple rivalry for tourists attracted by "dancing girls" during the prosperous Chola Period (850-1300 A.D.) began a process of marginalization among *Devadasis* that came to a head during colonial times (Orr 2000). During debates over Indian independence and cultural integrity, *Devadasis* were labeled either as tarnished remnants

of a "golden age" or "fallen women" of a barbaric tradition, the latter of which was a decisive marker of a nation unfit to rule itself (Kannabiran 1995; Srinivasan 1983).

The system of dedicating young girls to deities for the purpose of doing *dhandha* continues in northern Karnataka and the neighbouring states of Andhra Pradesh and Maharashtra, and it is estimated that between 1000-15,000⁴ girls (predominantly lower caste) are inducted into the system each year (Giri 1999:34; Jordan 1993:269; Power 2000). The reasons for dedication vary, and include: hereditary rules that one girl (usually the oldest) from a *Devadasi* household be dedicated; to appease the Goddess for a skin or health problem; an absence of male children within the family; to help with family economy; to appease the deity in times of widespread drought or sickness; because of the appearance of *jati* (matted hair locks) believed to be the embodiment of the Goddess; and in the hope that the deity will take parents' child(ren) as a sign of dedication and answer a specific prayer.

Upon attaining menarche, the *shuregu hedasudhu*⁵ ("first client ceremony") is held and the girl is deflowered by a client, typically someone from outside of their community but within the same caste, who is procured by older *Devadasis*. The man offers gifts to the girl's family (e.g. saree, gold, cash, bedsheets, jewelry) and 1 or 2 years after the ceremony, earlier if the family is in severe economic need, the girl begins conducting regular sex work. *Devadasis* in the rural areas typically live with their families and work in their home communities, sometimes alongside sisters or other

⁴ The wide numerical discrepancy regarding annual dedications is problematic when trying to formulate an accurate understanding of the *Devadasi* system, and it will be discussed in greater detail in Chapter 3.

⁵ *Shuregu* is the end of the saree that falls over a woman's shoulder/front/head and *hedasudhu* means to "hold" or "catch". During a marriage ceremony the *shuregu* is tied with a scarf worn by the groom, and this is how the term is used when referring to the first client ceremony. The "holding" or "catching" indicates the ability of the client to have sexual intercourse with the woman or girl.

female relatives. The starting amount for penetrative sex is Rs 50/- (Cdn. \$1.20) and their daily earnings range from Rs 0/- to Rs 500 (Cdn. \$ 0-\$15.00). Older women used to travel to large cities like Mumbai (Bombay) or Pune in the nearby state of Maharashtra, either by coercion or voluntarily to garner better income, but a number of younger and older women indicated that the fear of HIV and the higher costs of urban life have significantly curtailed this pattern of migration for younger *Devadasis*.

The majority of participants expressed a desire to stop the *Devadasi* system, which was closely linked with their growing awareness of HIV. One woman said "...my mother was a villager, for money sake she did like that (dedicated her). Now I have knowledge about this and I don't want my daughter to become like this. It should end with our generation." Another factor mentioned with respect to ending the system was the severe economic burden the women have to shoulder, which was often contrasted with idealized narratives of marriage and husbands who would help support them. However, the women's ability to support family members, pay for siblings' weddings, and send their children to school from their earnings also confers upon the system a positive value. This emerged during discussions about gender preference, where one young woman said she would not rather be a boy because "boys don't pay anything to the family. Girls are the main earners. If it wasn't for us, what would happen to our parents?" Another woman echoed this response, saying "no, because she leads the life and earns for everyone...it is up to the girls to earn. Boys don't earn enough and what the girls earn all can live off of and share."

Most research on *Devadasis* focuses on social reform movements against the system since the 19th century. Like the 19th century "white slavery" debates, in India the

reform argument is couched within dominant discourses regarding the status of women, "barbaric" cultural traditions, and the moral threat posed by *Devadasis*, who are often presented as stain on the fabric of a modern nation-state. Several *Devadasi* (Prohibition of dedication) Acts were passed in 1934, 1947, 1982, and 1987 (Jordan 1993: 272-274), as was the 1956 Suppression of Immoral Traffic Act (amended in 1986). Crusades against the system are carried out by NGOs, religious groups, and government development programs. Their activities include: (1) offering money (Rs 3000/- or \$ 95.00 Cdn.) to men who marry the women (Shankar 1990:135); (2) establishing residential schools for *Devadasi* children (Shankar *Ibid.*:149); (3) alternative economic training initiatives; and (4) cutting and labelling as a fungus the matted hair (*jati*) that *Devadasis* regard as an auspicious sign from the Goddess (Evans 1998:24). Denouncing their way of life as a product of superstitions and exploitation strips bare the socio-economic and religious underpinnings of the women's lives, while further entrenching the "victim" and "fallen women" dichotomy so prominent within trafficking and sex work discourses today.

Equally powerful in constructing local discourses on *Devadasis* and the nature of the system is the popular media, which often focuses on how the tradition perpetuates child prostitution by providing a source of young women and children for the sex trade. An example, "the devadasi system is only one of countless traditions of child sexual exploitation in rural India that seems to endure, driven by the economics of poverty, tyranny of caste and compulsions of culture and religion" (Stackhouse 2001). Several accounts also cite the traffic in women and girls between rural and urban networks as a

primary route for HIV transmission, and a perpetuation of their already degraded status as victims of a corrupted system. Take the following excerpt by Tim McGirk (1995:13):

Today, no devadasis can be found in India's temples-only in the AIDS-infested brothels of Bombay, Madras, and New Delhi. Soon after these young girls are consecrated in their village temples in the southern states as "servants of God", they are sold by crooked priests and powerful landowners into prostitution.

These stories are somewhat sensational, but they are also very powerful determinants in solidifying particular images of the women as helpless victims of an exploitative system.

However, *Devadasis* are not passive receptors of the medicalizing and moralistic reformist messages and popular media constructions. On the contrary, the women with whom our team worked were actively involved in establishing a state-wide network of collectives modeled on similar initiatives in Kolkata (Calcutta) by the Sonagachi sex worker Collective (Jana 1999; Nag 2001: 4029-30). In the small section below the organization, activities, and main outcomes of the collectives our project was involved with are discussed.

Collectivization: A Tool for Empowerment

Since the appearance of HIV/AIDS in India there has been more government and non-government concern for sex workers, including *Devadasis*. However, the social stigma associated with the disease and prostitution makes instituting prevention programs and developing long-term economic alternatives a formidable challenge (Asthana and Oostvogels 1996; Evans and Lambert 1997). Several determined NGOs have organized collectives throughout the country, mainly in large cities. Since 1997 BIRDS has been responsible for establishing collectives in rural northern Karnataka, training women as

peer-educators, offering an AIDS counseling program, and providing on-going refresher workshops for collective members and non-members alike. Ultimately, BIRDS coordinators and directors would like to see their position within the collectives dissolve and devolve to *Devadasis* as they learn to operate more independently, within a state-wide network of sex worker directed organizations.

The collectives undertake a variety of activities, including: condom distribution; HIV/AIDS education (i.e. models to demonstrate condom use and STD cards); local weekly and bi-monthly meetings are held with other district collectives; and assistance in legal matters. In addition, each collective has a self-help group made of contributions from the women that acts as a credit co-operative to assist with funeral costs, medical bills or family matters. Celebrations of local and international events (e.g. World AIDS and Women's Day), are other important activities the women participate in. Collective membership is currently low (approximately 10%), but these groups are viewed favourably when compared to the small, high interest loans for alternative income generating activities (i.e. sewing, vegetable growing, cattle-rearing) or ill-conceived training programs offered by reform sectors. A number of *Devadasis* do, however, accept such loans, pursue paid positions as peer-educators within the BIRDS organization, and continue sex work (which is prohibited by reformers if in any program), thereby maximizing their socio-economic potential in a demanding environment.

Among the most influential outcomes of the *Devadasis'* involvement in the collectivization process is the sense of shared identity they feel as members of their respective groups. This was made clear at several of the BIRDS workshops when

participants contrasted the isolation, shame, and inter-women competition for clients they experienced prior to collectivization with the more enabling environments they live and work in today. Learning how to protect themselves from HIV and taking better overall care of their health since the advent of the disease are other important outcomes of collective involvement. Spreading their knowledge of these diseases to other women who may not be aware of collectives is another important accomplishment, especially among women who are not literate and initially very shy to speak in front of others. Participating in the research also helped facilitate local capacity building by involving women in the research process and making opportunities for them to speak on their own behalf, to ensure we supported them in ways that supported their immediate and long-term objectives. The collectives have not developed programs surrounding issues like human rights and recognition of sex work as a valid occupation as they have in the Kolkatta Sonagachi project, but their grassroots and largely women-directed initiatives have allowed *Devadasis* to make significant health, socio-economic, and political changes in their lives.

The "Problem"

Studies on a range of issues about *Devadasis* generally have increased over the past two decades, but the socialization of girls and young women and their experiences of sexuality have not yet been adequately examined. Similarly, although often implicated in the spread or cause of HIV, there is a paucity of information regarding *Devadasi* women's understanding of the disease and how it has impacted their health status, familial organization, and personal lives. Particularly important to this investigation is an analysis

of socialization among young women, for four main reasons: (1) Their immature physiology places them at greater risk for disease transmission and bodily trauma from their older male clients; (2) They have more daily clients than the older women, thereby also increasing their chance of contracting STDs or HIV; (3) Their lower participation in collectives place them in a more vulnerable position compared to older sex workers regarding enforcement of condom use; and (4) There is no ethnographic documentation of these issues among this age group.

The main research "problem" to be examined centers around the following question: *"What is it like to come of age for a young Devadasi living in rural Karnataka, India?"* To answer this question two intersecting level of analyses come into play. First, the socio-emotional, familial, cultural, and sexual conditions which shape young girls' and womens' experiences of puberty, sexuality, family contributions, friendships, and participation in peer-related activities. Second, the external forces affecting how young women and girls grow up today, especially in relation to HIV/AIDS, poverty, the rural economy, social reform, collectivization, and 'Western' influences in the media. While the focus is on young girls and women (aged 14-early 20s), triangulation of data with older *Devadasis* (aged late 20s-40) was necessary for comparison and a deeper understanding of the changing factors affecting the different generations of women as they mature, form relationships, and deal with HIV. Also, the older women often gave more in-depth responses and due to their political involvement, they were more familiar with other educational and research activities undertaken by BIRDS and related NGOs.

Epidemiological Overview of HIV in India

Since South Asian countries were among the last to come in contact with HIV and AIDS they are placed in the Pattern III disease type, along with Northern Africa, the Middle East, and Eastern Europe (Trieckler 1999; Schoub 1999). In 2001, when the research began, 3.5 million out of an estimated 31 million people currently infected with HIV worldwide were in India, or roughly 9% of the total global number (CIDA Project Implementation Plan 2000:9). Within the burgeoning South and South East Asian epidemic, India has the largest burden of disease, and it is estimated that between 1994 and 1997 the prevalence of HIV infection among adults more than doubled (*Ibid*:9). From the first reported case in 1986 of a female sex worker in the city of Chennai when prevalence rates were 2.5, rates have risen dramatically, from 11.2 per 1000 in 1992 to 16.3 per 1000 by the end of 1996. By March of 1998 the total infections reached 22.73 per 1000, or around 2.2% (NACO 1997-1998:15). Later that year, in July, 78, 904 HIV infections and 6386 AIDS cases were reported from nearly all states of the country (Bharat 1999:3). Caution must be taken when interpreting these numbers because of the inability to access certain populations in more demanding geographic areas and bias in selecting target groups, which tend to be among the "high risk" groups (i.e. sex workers, truck drivers, migrant workers, students, blood donors, antenatal and STD clinic attendees).

The reaction to the first case detected was not widespread alarm because of the belief that this was a foreign disease linked with extravagant or homosexual lifestyles that could not spread "well" in India (Asthana 1998; Arnold 1997; Godwin 1998). Traditional socio-cultural norms of monogamy and universal marriage, mother goddess worship⁶, and societal proscriptions against any explicit focus on sexuality in public social

⁶ In this context, used as "proof" of heterosexuality.

interactions and discourse (Ramasubban 1998) provided additional false comforts during the early stages. However, the sense of self-assuredness was eroded when more cases of HIV and AIDS were detected in other cities, often among sex workers or those attending STD clinics. Sex workers were arrested under the Suppression of Immoral Traffic Act, kept in detention after serving their sentence, and some were rounded up and forcefully returned to their homes in different parts of rural India⁷. In 1990, 854 women doing sex work in Bombay were sent under police escort to remand homes in Chennai as part of a “rescue mission” (Nataraj 1990:16).

Particularly worrisome was the dramatic rise in HIV cases among female sex workers in the cities during the late 1980s-early 1990s. In Bombay the rates of infection went from less than 1% in 1986 to over 50% in 7-8 years (Nag 1996:52) and an alarming 60% in the same city by 1998 (Sinha 1999: 27). Rather different but equally problematic results are found in a survey that reported that 1% of all sex workers in Bombay (approximately 100,000) were infected in 1987, 18% in 1990, and 34% in 1992 (Bhave *et al.* 1992; cited in Bhave *et al.* 1995:S22). Female sex workers in large urban centers come from various parts of India, most notably young girls who are trafficked from rural Nepal and Bangladesh (Simkhada 2002; Sleightholme and Sinha 1996:40). A significant number also come from Karnataka and a theme that dominates sensational media stories and many academic studies is that the *Devadasi* system is to blame for the large number of sex workers in large cities, and, consequently, for the spread of HIV. The following quotation from Dr. I.S. Gilada, the Honorable Secretary for the privately funded Indian Health Organization (based in Bombay), reflects this position, “The horrendous Devadasi

⁷ This phenomenon is common throughout different parts of the world and has been a very “effective” way of bringing the epidemic to, or increasing its severity in, rural areas.

system has made an enormous contribution in the spread of prostitution and AIDS in India" (Sinha 1999:80). He provides estimates to support his statement, citing that *Devadasis* make up 15-20% of the total number of sex workers in Bombay, 10% in Nagpur, Delhi, and Hyderabad, 50% in Pune, and up to 80% in the urban centers bordering the northern Karnataka district of Belgaum (Gilada 1993:19).

The high rates of HIV among sex workers, including a questionable number of *Devadasis* in large cities, the rising numbers of infected people in Karnataka generally, and the absence of research on the contemporary organization of the *Devadasi* system in the rural areas necessitated an examination of these issues. The focus of my dissertation was shaped through my involvement with the project over two years, largely in response to findings from the first research trip (February 2001-April 2001) when the majority of the base-line data was gathered. The ensuing chapter describes the conditions surrounding that first research trip, the methods employed during the project, and profiles the research sites and women who participated in the research. The problems faced are also discussed, especially in light of the debates surrounding 'participatory' research.

Chapter Outline

This dissertation is comprised of eight chapters, beginning with the Introduction. It opened with a description of the issues and objectives of the study, followed by a brief overview of the WAF and ICHAP projects that provide the context for this research. The *Devadasi* system, then and now, was then covered, as was the main research "problem" to be investigated, "*what is like to come of age for a young Devadasi living in rural Karnataka?*". An outline of the epidemiology of HIV, with special reference to female

sex workers generally and *Devadasis* specifically, was then given. The last portion outlines the context of the ensuing dissertation chapters.

Chapter 2 describes the research setting and methods. I begin by presenting the geographic context in which this project took place, the South Indian state of Karnataka and the Bagalkote district. I then trace the development of the WAF and ICHAP projects, including preliminary understandings of the *Devadasi* system and our initial interactions with the women through BIRDS activities. The different methodological approaches are then detailed, including the evolution of our involvement with BIRDS representatives, the base-line gathering period, and the shaping of the project as it became more narrowly focused on young women during the final research trip. The rationale for selecting the three research sites are then discussed, as is the socio-demographic profile of the *Devadasi* women and girls with whom we worked. The nature of interviews, triangulation, and some of the instructive problems I encountered during the research are also presented here.

The third chapter focuses on sex work in the Indian setting, and starts with an overview of sex work literature, including greater detail on the *Devadasi* system and the theoretical positions of working women and activists within the global sex work field. Then, in Chapter Four, the basics of rural sex work are described, including age, caste, family structure, geography, location of sex work, types of sex work, social networks (*gharwalis*, agents, *goondas*, police, and *dhabha*⁸-owners), clients, *khams* (regular clients), money, condom use, and HIV knowledge. Health care and STD issues are next, followed by excerpts from life histories of *Devadasi* women, which are discussed in relation to those of commercial sex workers.

⁸ A road-side eatery and truck stops that often double as locales for sex work.

Chapter 5 looks at the process of growing up for young *Devadasis* and their socialization into *dhanda*. Descriptions of childhood, work, leisure, friends, and prior knowledge of menstruation and sex work are the first issues discussed. I then provide a comparison of the general pattern of maturation among *Devadasis* with those of non sex-working rural girls, with a special reference to the differences between types and the unique complications that accompany both processes. A description of their dedication, puberty, and first client ceremonies follows. The participants' feelings, reactions, and examples of resistance to these events are also described.

Chapter Six examines sexuality and relationships, beginning with a review of the Indian models of sexuality, women, fertility, and virginity. The social context of sex and sexuality among the women and girls, and the importance of sexual modesty, is then presented. The complexities involved in negotiating with clients and *khams* is discussed, focusing on not only the difference between these groups of men, but also on the depth and meaning of the more serious relationships to the women, their children, and other family members.

The Seventh chapter begins with an exploration of the social reform efforts that have been launched to eradicate the *Devadasi* tradition, from colonial times to the present. It then moves to a discussion of the impact of HIV/AIDS on the *Devadasi* system and the collectivization movement. I start by discussing the five main effects the epidemic has had on the women and their way of life: (1) the overall system itself (dedications are down and becoming more covert, rehabilitation); (2) their lives and economic status (fear, stigma, reduced income); (3) family structure (daughters are being educated and married, leaving parent(s) without support); (4) fertility (young women are

avoiding pregnancy because of fears of HIV transmission through unprotected sex); and (5) disease rates (death, sickness, unknown reach of the epidemic). The final sections examine the contemporary rehabilitation movement, the influential role played by BIRDS and other collectives in advocating for HIV awareness among the women and increasing their politicization, and the women and girls' personal experiences with and reactions to the disease.

The dissertation concludes with a summation of the major arguments raised in the previous chapters and a reiteration of the importance of this research with regard to the intertwined issues of the *Devadasi* system, coming of age and sexuality and relationships among sex workers, along with an understanding of the impact of social reform and HIV/AIDS in rural India.

CHAPTER 2- SETTING AND METHODOLOGY

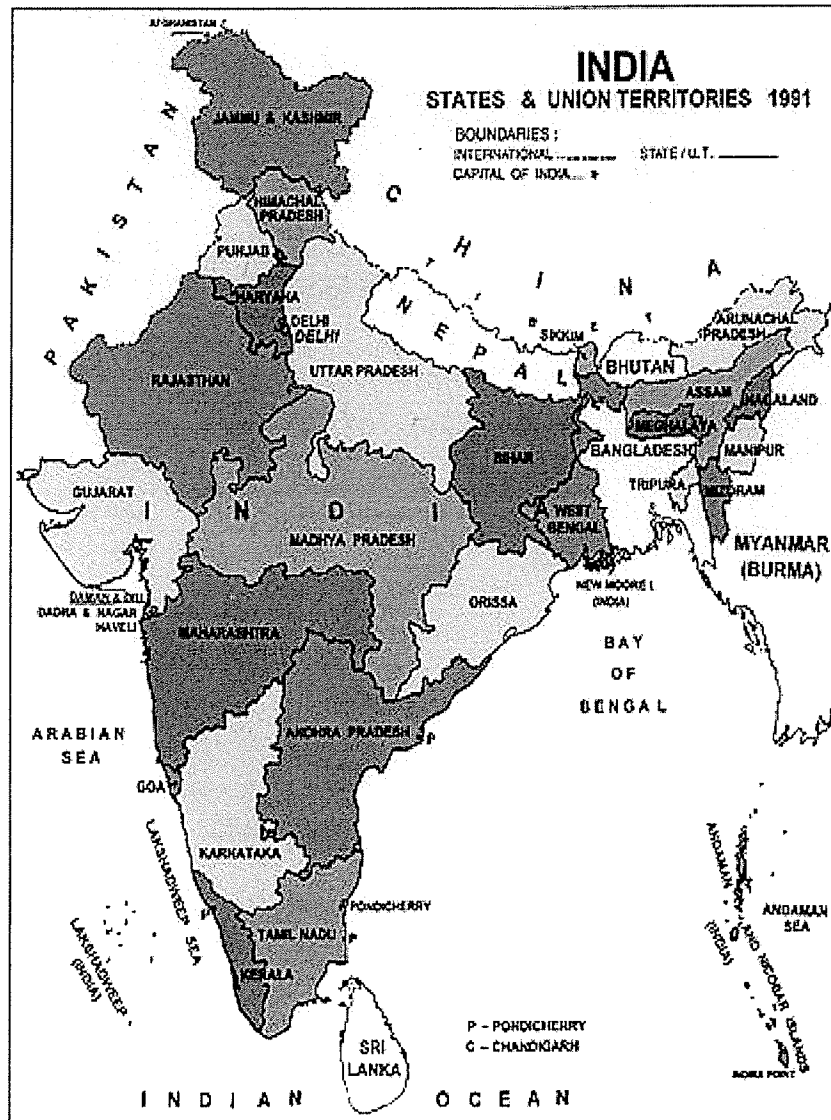
The district derives its name from its headquarters town, Bijapur as do many other districts in the state. Bijapur is also called in Kannada as Vijapur which is the shortened term 'Vijayapura', meaning 'city of victory' (Sathayan 1966:1).

But it is no less important to see that, as in other branches of science, mistakes can be creative: they produce crises, fruitful enmities, and embarrassments, and make personal relations more dramatic than if one were always the smooth and poised observer (Reisman 1963:xii).

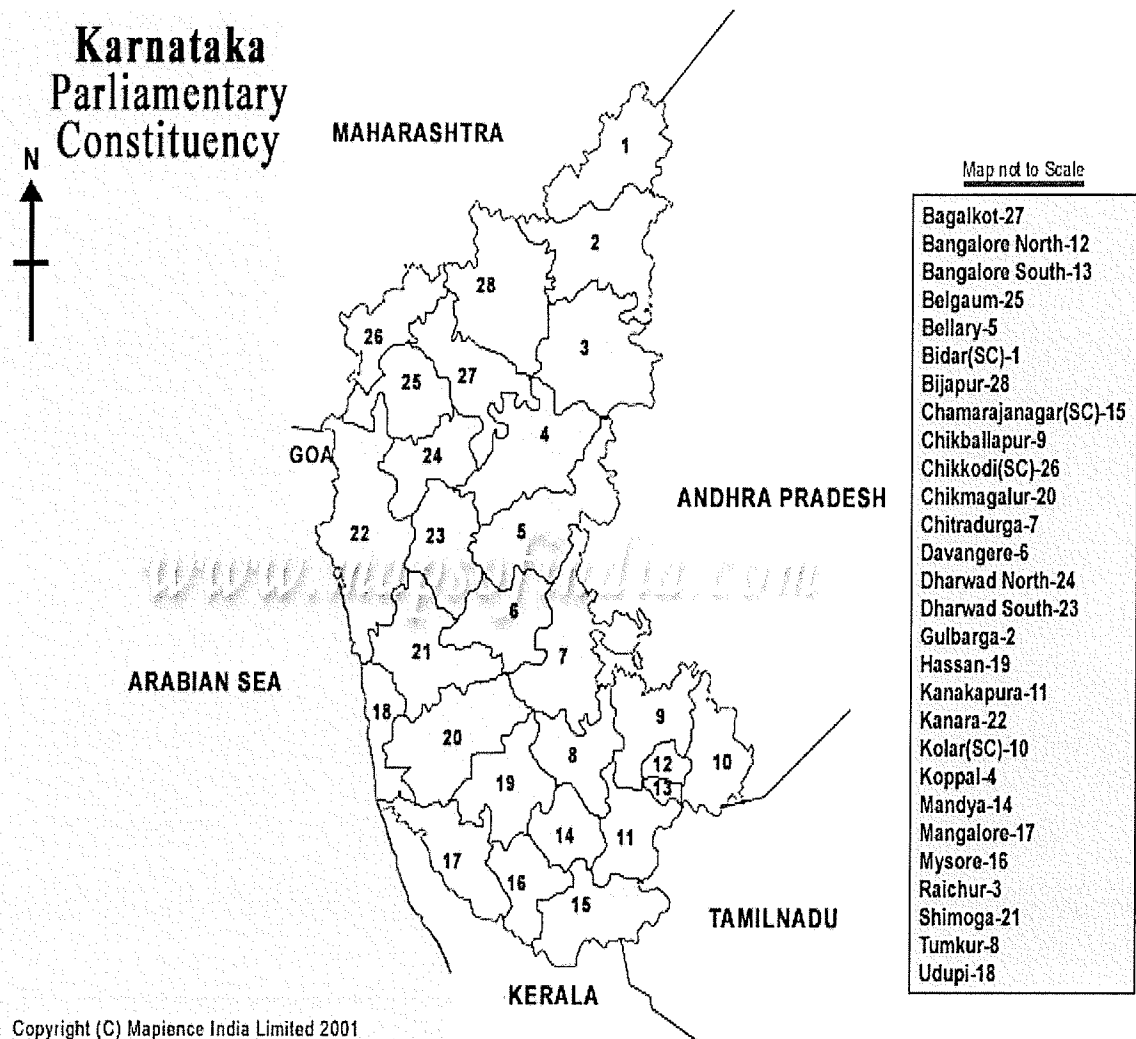
Introduction

This study examines the issues of growing up, sexuality and relationships, social reform, and the impact of HIV/AIDS on the *Devadasi* system. In doing so, I discuss how these intertwined topics are shaped by local conditions of social organization, religion, and cultural tradition, and impacted by larger forces of socio-economic and gender inequality, disease, and nationalism. Following an overview of the setting in which my research was based, the methodologies used during fieldwork are presented, beginning with a brief tracing of the processes through which our initial contacts and communications with BIRDS organizers, *sangha* members, and local researchers were made, and the development of my research objectives. This helps establish the methodological processes and field experiences that shaped and further refined the goals of the WAF project. It also provides insight into my rationale for the research sites selected and ethnographic methodologies employed in the field. Once this formative stage of the research project is described, I discuss the field methodologies, and how some of the problems encountered during research contribute to current debates regarding 'participatory' research.

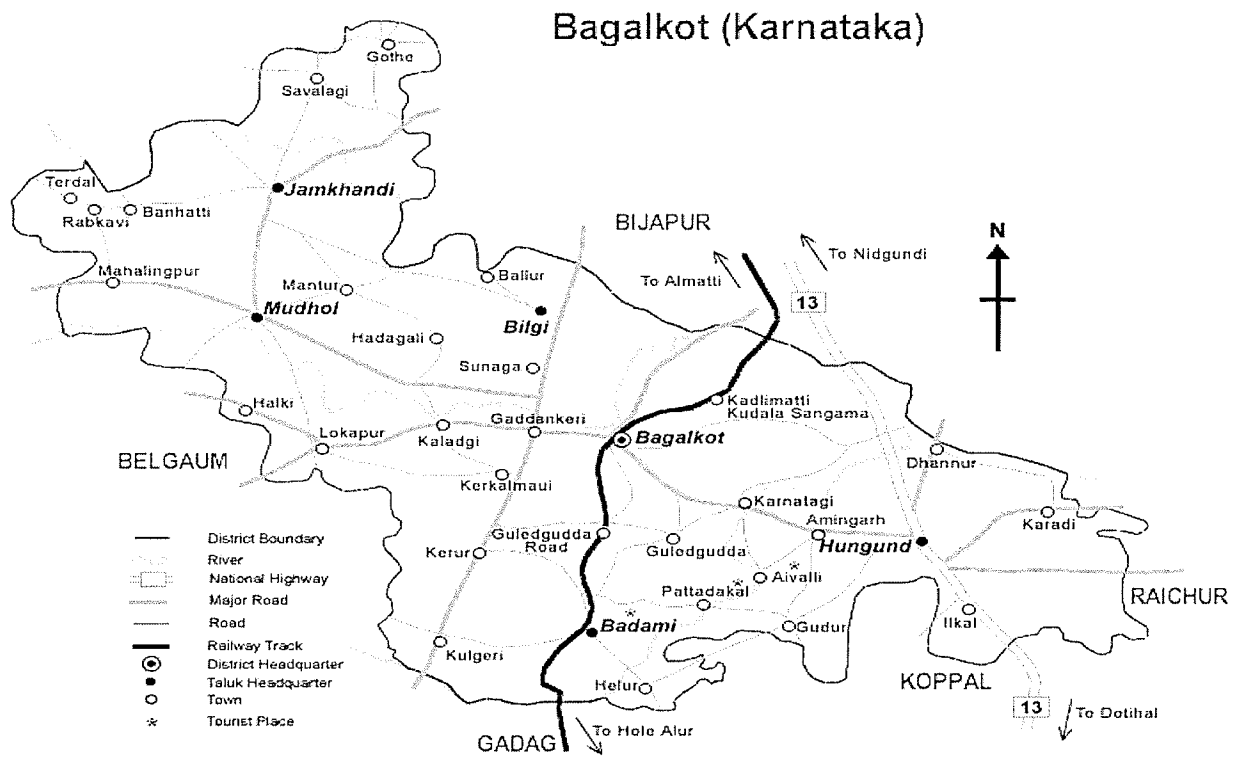
Map 1- India



Map 2- Karnataka State



Map 3- Bagalkote District



The Setting: Karnataka State, Bagalkote District

Situated between latitudes 11.5 degrees and 18.5 degrees North and longitudes 74 degrees and 78.5 degrees East, Karnataka is India's sixth largest state. It covers an area of 191, 791 square kilometers and is bordered by Maharashtra and Goa to the northwest, Kerala and Tamil Nadu to the south, and Andhra Pradesh to the east. It is home to approximately 52 million people, most of whom speak the distinct Dravidian-based *Kannada* language (2001 Census:48). Following independence in 1947, the Indian map underwent significant revisions, as many of the areas lost under the British were re-integrated into their original territories and new state lines were drawn largely according to linguistic tradition. The state of Karnataka was formed on November 1, 1956 by merging the districts of Belgaum, Bijapur, Dharwad, and Uttara Kannada of the Bombay Presidency; Bidar, Gulbarga, and Raichur of Hyderabad state; and Bellary and Dakshina Kannada of the Madras Presidency with the former princely state of Mysore (Desai 1970: 437; NCAER 2001:92; Rao 1976:20; Sathyan 1966:94). Originally named Mysore, it became Karnataka in 1973 (Grover and Arora 1998:4). Although the origin of the ancient term "Karnataka" is not well-known, Moraes (1970) argues that it is a *Kannada* word meaning "the region of black cotton soil", referring to the cotton and silk crops that have been cultivated in the region for centuries.

A predominantly rural and agrarian state, approximately 76% of *Kannadigas*⁹ are rural-based and 71% of the working force is employed in the agricultural sector (Grover and Arora 1988:4). The major food crops are rice, ragi, jowar, bajra, maize and pulses, and Karnataka accounts for almost 50% of the country's ragi production (*Ibid.*:5). The

⁹ A local term referring to those living in the state, especially those who speak *Kannada* and have lived in the region for generations.

dominant cash crop is coffee and the state produces 59% of the national production and stands first in the yield per hectare. Other important crops include cardamom, pepper, arecanut, ginger, rape and mustard seed, sunflower, coconut, cashew nuts, cotton, groundnut (peanut), chillies, castorseed, sugarcane, and tobacco (Grover and Arora *Ibid.*:5; Rao 1970:25). Karnataka is the second highest producer of forest products in the country, with sandalwood, teak, rosewood, rubber, eucalyptus, softwoods (for lavender oil) and bamboo being the dominant resources (Rao 1970:23-24). It is also one of the leading industrialized states, with significant production of such diverse products as electronic and communication equipment, electric motors, glass, and textiles. In fact, the capital city of Bangalore is one of the fastest growing cities in South Asia and has been dubbed the “Silicon Valley of India”, thanks in large part to its thriving computer, electronic, and biotechnology sectors. Karnataka is also rich in mineral deposits, namely gold, high grade iron ore, copper, manganese, china clay, granite, and limestone (Grover and Arora 1998:6). Located on major national and international trade routes, the Mangalore Port is another important commercial center that attracts a large population of migratory workers and visitors who flock to the nearby beaches.

The state also boasts a significant number and array of other tourist destinations, including: the gardens of Bangalore, the former capital of Mysore; Shravanabelagola where the famous 57 foot high monolith Jain statue of Gomateshwara stands; the famous Hoysala temples at Belur and Halebid¹⁰; Badami, Aihole, and Pattadakal for the 1, 300 year old rock-cut and structural temples; the former capital of the Vijayanagar empire in Hampi; Jog Falls in Shimoga; Gulbarga, Bidar and Bijapur for their renowned Indo-Sarasic monuments, including the Gol Gumbuz, the second largest free-standing dome

¹⁰ Which feature hundreds of beautiful statues and relief carvings of “dancing girls” and *Devadasis*.

in the world; and the many famous pilgrimage centers in such places as Udupi, Dharmasthala, Melkote, Gangapura, and Saundatti (*Ibid.*: 7; Rao 1970: 104-111).

Karnataka's performance in terms of the selected indicators that make-up the Human Development Index (HDI) reveal an HDI of .0475, which is slightly above the national average of 0.439 (NCAER 2001:92). The state's sex ratio was 964 in 2001, which is slightly greater than the 1991 number of 960 (2001 Census: 49-50). The literacy rate is 67.04 in general, 76.29 for men and 57.45 for women (*Ibid.*:279)¹¹. Karnataka rated 5th in terms of per capita income, but only 11th in terms of per capita consumption, which suggests that although the state is industrially more developed than others the standard of living of its people have not kept pace with this development (NCAER 2001:92). The incidence of poverty is somewhat higher than the national average, 39.5 compared to 38, respectively (*Ibid.*:92). However, when only rural regions are taken into consideration, this dynamic is reversed, with 34.4% in the state versus 37.6 at the all-India level (*Ibid.*:92). With a crude birth rate of 28.7 per 1,000, Karnataka's rate falls below the national average of 32.1, which is similar to the demographic trend in terms of death rates, which sit at 8.7 per 1,000 in the state and 10.7 at the national level (*Ibid.*:92).

One distinctive feature of Karnataka is the high range of these HDI factors within the state, which reflects significant intra-state disparity (Vyasulu and Vani 1997:2974), especially between the more industrialized South and the less developed regions of the North-East; including the Bagalkote¹² district. This is evident in enrolment rates, which are 81% in Bijapur and 88% at the national level, and drop-out rates, which are 50% in

¹¹ These numbers are a bit questionable though, when compared to those of only a decade earlier: 56.3 for men and 37.4 for women (NCAER 2001:92).

¹² This district was formerly part of Bijapur and only came into existence in 1997. The majority of sources do not distinguish between the two, and because the general characteristics are very similar I will only do so where the reference material makes this possible.

the former and 43% for the latter (NCAER 2001:93). A similar situation is evident in literacy rates, which are also below the state level in Bijapur (around 50%), and this region has an especially wide gap between genders in the rural areas compared to the Karnataka average (*Ibid.*:96). The district also suffers in the area of health, and has fewer health sub-centers (e.g. Primary Health Units, Primary Health Centers, and Community Health Centers) than the all-India norm of one per 5,000 population, along with a lower doctor-population ration than almost any other district in the state (*Ibid.*: 99-100). This region of the state also has poor transportation and communication facilities, which have a direct influence on the local people's ability to access and receive adequate health and social services. The total dependency ration also reveals its increased economic and social burden per household, as Bijapur has among the highest rates in the state. Another area it exceeds the state average in is child marriage, as the district topped the list with nearly 12% of girls between 10-14 being married (*Ibid.*:104).

The data below pertain to the Bagalkote district and the communities of Jamkhandi, Rabkavi, and Mudhol, the three research sites for the present project. They come from the following Internet site: <http://www.bagalkot.nic.in/DISTPRO.HTML>, and are among the only contemporary sources I was able to locate on the new district. With re-organization of Bijapur district in 1997, the new Bagalkote district was formed. For administrative purposes, the district has been divided into the two divisions of Bagalkote and Jamakhandi. Both Bagalkot and Jamkhandi contain division 3 talukas, Bagalkote, Badami, and Hungund in the former and Jamakhandi, Mudhol and Bilagi in the latter. The district has 605 Revenue villages, 244 habitations, and 270 wards as per the recent house to house survey of January 2001. The rivers Malaprabha, Ghatprabha and Krishna

flow through the district, and the prominent language spoken is *Kannada*. Other languages like *Marathi*, *Urdu*, *Telugu* and *Gujarati* are also spoken by small portion of population. The major community follows the religious ethics of Hindusm, while Islam, Jainism and Christianity are the minority religions.

Jamkhandi is an important town, located about 80 Km from Bagalkote. Jamkhandi was the capital of the former Maratha Principality of the Patavardhans, cousins of the Miraj family in Maharashtra. The place is known as Jambukandi in records, probably derived from the Jambukeshwara temple located in the town. The temple of Kadapatti Basaveshvara is another widely respected temple, which contains shrines of Sangameshvara and Neelamma. Every year a *jatra* (fair) of Basaveshvara and a cattle fair is conducted at this place. Another ancient temple here is Jambukeshvara, which is a Chalukyan monument. To the west of the town on a hillock called Ramatirtha stands a grand edifice, 'Ramachandra Prasad', once the royal residence of the Jamkhandi rulers, and the Tripura Sundari Temple. Shurpali, 10 Km from Jamkhandi is on the banks of Krishna, and has a Lakshminarayana temple and the Sadananda Matha.

Rabkavi-Banhatti is a place about 19Km to west of Jamkhandi. This town area comprises the four locales of Rabkavi, Banhatti, Hosur and Tampur. In 1952 the municipalities of Rabkavi and Banhatti were merged into one Municipality. The area is very famous for its powerloom and handloom *sarees* (silk and cotton).

Mudhol is situated about 50 kms. from Bagalkote city, on the left bank of the Ghataprabha river and is administered by a municipality. In the bygone days it was called Muduvolal, which means 'Lovely Town'. It is believed to be the birth place of the great *Kannada* poet Ranna. Mudhol served as a capital of the erstwhile princely State of

the Ghorpades, the descendents of Baji Ghorpade, who was an army officer in the Bijapur Court and they ruled till 1947. There is an old under ground Shiva Temple in the town, which is a fine monument. The Swetamabar Jaina temple here has fine images like Munishvaraji and Mahaviraswami. The Brahmagaddi Matha ("big one") and Mahalingeshvara math are two matha (small monasteries) in the town. The town is noted for its grinding stones and basil stands. Mahalingapura is a town about 19Km to the North west of Mudhol. Its earlier name Naragatti subsequently renamed as Mahalingapura in honour of Saint Mahalingeshwvara. Large number of handlooms are working in the town and handloom *sarees* manufactured here find ready markets

The major factor behind selecting the Bagalkote district is that it has historically had the largest numbers of *Devadasis*¹³, approximately 8,000 today. Another reason for choosing these sites is that many *Devadasi* women in these communities participated in the first stage of research we conducted, and were familiar with myself, our team members, and the research process. Along with this, Mudhol has a manageable size of the *Devadasi* population (55) and our initial interview experience with younger girls yielded an excellent amount and quality of data. With a *Devadasi* population of 250-300, Rabkavi is the biggest such community in Bagalkot and these women are the wealthiest of those interviewed. Also, unlike other groups they are influenced in dress and travel experience by neighbouring Maharashtra, making for a useful comparison across communities regarding issues like migration to nearby centers like Mumbai or Pune. Jamkhandi is a center of the weaving industry and employs men who are likely to be

¹³ Which was due to several factors, including the fertility of the land in the area and the region's subsequent role in the establishment of feudal kingdoms and the development of the rural economy around the 10th century A.D.. During this prosperous period, many temples and monasteries were constructed, and there were large numbers of wealthy patrons for the *Devadasis* (Parasher and Naik 1986: 71-75A.K. Singh 1990:30-46).

away from family and friends for long periods of time, making them more prone to spend their substantial earnings on sex work. Like Rabkavi, it is also located within a half-hour bus ride from Mudhol, making it logistically viable.

The majority of the women we interviewed lived in slum areas that were usually located near bus stands and major thoroughfares, and situated within the *Harijan* or ex-Untouchable locales within small villages or towns. The following caption from my first trip's fieldnotes captures the basic layout of these sex work areas, client selection of girls, and the conditions of the rooms.

Following their personal stories, K, L, and a couple of other women took us around the sex work area. The houses were located quite close to the *sangha* office and were part of little neighbourhoods, with vendors, narrow stone paths and water/sewage channels running through them. People of all ages were in their houses, walking around, or just gathered outside sitting or standing together. We went into one house that had three very young girls and an older woman waiting outside of it. Apparently these girls were waiting for customers, who line them up inside and choose which one they will sleep with. The women showed us at least 7-8 houses, taking us inside to show us where the sex work takes place and often introducing us to the *gharwallis* who own the house. The rooms vary in size, location in the house, and cleanliness. Some of them are dark spaces tucked at the back or second floor of the house with only a mat on the floor and two or three incomplete walls partitioning them off. Others are relatively well swept with a window and a thin mattress on the floor. In most of them used condoms were strewn next to the "bed" or in a plastic waste basket and the area referred to as the bathroom (i.e. where the water for washing and relieving oneself) was usually close by (February 13-21, 2001:24).

Also important to establishing the local setting are the *sangha* offices, the sites of many interviews and down-time during fieldwork. While they are all unique in terms of interior décor and layout, the following quotation (also from my first trip) gives an idea of what many of the collective offices look like.

We arrived at the X *sangha* around mid-morning. Their space is located just off the "main" road and has two rooms and a small balcony, which looks out over the largely *Devadasi* sex work area. Like the other collectives visited thus far, the one room contains various types of posters warning against multiple partners, the

dangers of blood transfusions, and the usual blend of public health-type literature and pamphlets about HIV. There was also a large map of the X area which outlined the different sub-districts in the region. In the other room were stacks of empty condom boxes, a washing area, cooking materials (in various plastic and metal containers), and some personal items (i.e. toothbrushes and soap) (February 13-21, 2001:20).

Project Beginnings: "Temple Dancers", Rural Sex Work, and HIV/AIDS

In preliminary meetings regarding the WAF project, the focus was an ethnographic assessment of female sex workers, a pivotal group with many sexual and social connections that put them at high risk for contracting HIV and STDs and, given the conditions of their work, of potentially spreading disease. *Devadasis* emerged as an enigmatic and seemingly unknown group of sex working women, in terms of their numbers, current organization and links with the HIV epidemic. They were described as "temple dancers", "sacred prostitutes", and commercial sex workers whose ritual position and auspicious status had been deprived of them through the combined forces of political-economy, declining royal patronage, and colonialism. The ambivalence surrounding *Devadasis* pervaded our discussions of how to gain access to their communities, create 'culturally appropriate' intervention strategies, and ensure conditions that would be conducive to the peer-educator method we hoped to adopt as part of our collaborative approach. Did they live in temples as some of the historical literature implied? How to approach HIV prevention ways that don't offend the women's cultural and religious practices and beliefs, yet still function to promote education and research into their way of life? What do or can we offer in return for their time they spend assisting with the project?

The first fieldtrip to Karnataka undertaken by the lead investigators of the WAF project clarified some of these initial queries and led to better developed strategies for operationalizing the research objectives and methods. Most important were the introductions to the BIRDS organizers, their AIDS counselors, and the *Devadasi* women who were establishing *sanghas* throughout the state. Their guidance and cooperation helped ensure that the local research team would be able to work with women in the various communities, who were already familiar with the peer-educator process. Put simply, without them our project would not have gotten off the ground. That being said, the contentious position of *Devadasis* within Indian society and complicated role of foreign-led research programs in local academic and political environments produced considerable tensions during our research, some of which reared their heads in frustrating but ultimately productive ways. An early example of this is the response of the BIRDS' founders to a summary presentation based on the first field trip my advisor made¹⁴. The following excerpt of this meeting is taken from my fieldnotes:

During this presentation some interesting discussion ensued regarding the topics of our research and the methodological factors that ought to be kept in mind. Mr. X thinks that too much focus is being placed on the Devadasi. He rightly commented that much has been taken out of context with regard to this tradition and care must be taken to remember both the significant religious roots of the phenomenon and the way in which the image of Devadasis have been corrupted by small numbers of individuals. He added that the Devadasi are not "the problem" and that their numbers change according to region. He said that they only constitute around 10-15% of sex workers, which seems to contradict our preliminary findings. There was some discussion of recruitment of Devadasis from the "lower strata...and economically backward" groups. Mr. A added that great sensitivity must also be taken when talking with the women, due to the pain and problematic lives many of them have led (February 6-12:8).

¹⁴ Which was made during my advisor's second and my first research trip.

During the second main research trip (my first), our original ideas of *Devadasis* as silenced victims of a corrupted system and as a 'high risk' group for HIV shifted significantly. Understanding the *Devadasis* and their links with disease transmission was not to be achieved by assuming them to be exploited women with little AIDS knowledge, agency, or strategies to make meaningful and positive decisions in their demanding lives. It was to be gained by examining the various cultural, religious, socio-economic, political, gender, administrative, and developmental factors influencing their organization in rural Karnataka. Later, towards the end of this trip when much of the baseline data was gathered, the focus for my study narrowed further as the unique physiological, political, and economic factors influencing younger women and girls were identified as significantly increasing their HIV risk.

Methodology

A combination of qualitative methods were used in this research, mainly participant-observation, interviews (individual and group), mapping, and attending state-level and local *sangha* meetings and BIRDS workshops. In addition, some drawings (of what AIDS might look like) were collected and a number of puberty songs were translated and analyzed. Extensive review of secondary sources, both in India and Canada, was undertaken as well. This project was also impacted by the peer-led and community-based research techniques developed with BIRDS organizers and *sangha* members. This method proved very useful in establishing rapport with community women and girls, however, the complications encountered while attempting to carry out 'participatory' research shed much light on the difficulties of translating certain research principles and

activities to local settings. This sub-section begins with a description of how the research unfolded over my three trips to India, with the relevant information regarding sampling, interview settings and content, translation, and ethical considerations. The chapter concludes with a critical discussion of the difficulties encountered in the field and their relevance for 'participatory' research with marginalized populations.

The first trip

The first research trip was from February to April of 2001, during which time the local WAF research team (myself and Dr. Gurav), in conjunction with BIRDS and *sangha* members, collected base-line data on female sex work in northern Karnataka. The objectives of the WAF project were to gain insight into the nature of female sex work in northern rural Karnataka from a structural as well as personal (i.e. the sex workers') perspective. Within these basic objectives there was also an effort to examine the socio-cultural dynamics of behaviour(s) related to sex work, the distribution of such behaviours, and the impact of HIV/AIDS on the women's lives and health status.

The methods used were qualitative, predominantly group and individual interviews, participant-observation, recording fieldnotes, mapping, life histories, and where possible collecting local materials on issues like HIV/AIDS, the *Devadasi* tradition, and collectivization. Working in collaboration with various academic and non-government organizations was central to the research process. Among these groups BIRDS was instrumental in assisting with the fieldwork among *Devadasis* and other sex workers in different parts of the state. During the initial stages of the first trip, the AIDS counselors assigned to particular districts took part in the project, introducing us to

women and sex work areas we were not familiar with. They were also essential in helping develop rapport and suggesting women who they knew to be especially well trained as peers to assist with the research process. A total of 19 field trips were made in the northern districts of Belgaum, Bagalkote, Bijapur, and Dharwad, these included visits to small villages, larger rural centers, road-side truck stops (*dhabhas*), and urban areas.

Prior to conducting our interviews or taking field notes the project objectives, the voluntary nature of the women's participation, and the issue of data confidentiality were explained verbally. We also took written consent forms (in English) to each field site and although some women signed them, many were unfamiliar with or suspicious about them. That most of the women and girls are not literate and many associate such forms with police surveillance techniques (i.e. raids, arrests) makes the usefulness of written consent in this context questionable. In addition, informed consent and ethical reviews are not part of current anthropological practices in India, which may have made these practices may appear even more questionable to the women. Thus oral descriptions of the project were the chosen form of communication prior to beginning our work. All interviews were conducted in *Kannada* and then translated verbally, on the spot, into English by Dr. Kaveri Gurav (an anthropologist and co-coordinator of the WAF project). Dr. Gurav clarified gaps in my knowledge of particular data at three stages of the recording of information: following and sometimes during the interviews, once my first draft of fieldnotes was completed (which combined data she recorded during and after interviews), and she reviewed the final copy of notes to ensure they were in accordance with her understanding of the research data.

During our interviews, five to 10 women gathered and they were generally informed of our arrival in advance by the AIDS counselors working in the study area in question. These discussions lasted from 10-15 minutes to well over an hour, and took place in diverse settings like *sangha* offices, a peer-educators home, rooms in *dhabhas* and small brothels, often spilling over into conversations on government or private buses, while walking to and from an area, and over *tiffins* (meals). The women included collective members, peer-educators, some non-collective members, and most were between the ages of 18-40. The bulk of our interviews took the form of focus groups, which is a useful qualitative method to illicit shared and normative responses on the set of issues under investigation (Parker *et al.* 1999:427). While the tendency for participants to not divulge information that deviates from the group consensus is a criticism of this method (Price and Hawkins 2002:1327), focus groups were very effective modes of gathering a great deal of data on a host of issues during this phase of research. Since many communities were visited more than once, the women's responses could be tested for consistency and comparative differences.

We also attempted to gather life histories, which were intended to be individual interviews. However, because most participants felt more at ease talking with their friends and family members present they were conducted in the context of a group (which often changed over the course of the discussion, beginning with around 10 women, then 5-7 women, and ending with 2-3). Detailed question guides were used for the focus groups, but for the life-histories the women were asked to 'tell their story' (i.e. family background, sex work entry, and feelings about sex work and/or the *Devadasi* system), and they received little probing from myself or Dr. Gurav. The presence of other women

proved very helpful at times, as they often elicited certain details and offered support to one another during interviews. It was more difficult to obtain the same amount and quality of data with younger *Devadasis*, either through group or in-depth interviews, compared to the older interviewees. This was because the young women were busier with clients, are less involved in the collective activities, and they were very shy and hesitant to speak independently. However, in certain areas (e.g. Mudhol) we were able to gather exceptional information from the young women.

A number of interviews were conducted with the BIRDS' AIDS counselors, physicians at district hospitals, employees of NGOs, and government agencies like the Karnataka State Women's Development Corporation (KSWDC) who operate the *Devadasi* Rehabilitation Program. The nature and content of these interviews varied but the focus was on HIV/AIDS, STDs, social perceptions of sex workers, rural health care, and *Devadasi* "rehabilitation" (referring to providing economic alternatives so that the women can "leave the life"). Discerning the different official discourses regarding HIV/AIDS, *Devadasi* tradition, and "rehabilitation" were helpful in shaping an overall picture of how these women are regarded and treated by different social and government agencies.

The recruitment process for interviewees was guided by our objective to reach as wide a section of the women and communities as possible, in terms of age, work status (e.g. *gharwalis*, new sex worker, migrant sex worker), interactions with the different groups of women (e.g. commercial sex workers, *Devadasis*), and *sangha* involvement (Table 2 provides an outline of the number and type of women and girls interviewed over the course of the project). The method used falls under the purposive snowball sampling

technique (Carpenter 2001:130), referring to our initial reliance on recommendations from BIRDS organizers and counselors and subsequent help from the peer-educators in selecting women. Relying on BIRDS' and *sangha* members' social networks for sampling was somewhat problematic because of their tendency to select older, active collective participants to the exclusion of non-members and younger women. This likely resulted in normative responses to the topics focused on in the group interviews. However, we were reliant on the immensely helpful and kind guidance of our local 'guides', and pressing for a more representative sample seemed disrespectful and potentially disruptive to the research process. We attempted to redress this problem by double-checking data in the same communities and by focusing more on young women in later research trips. There are advantages to this method though, as it may have reinforced our recognition of the counselors and peers as competent and valued research participants. Having them select from their social circles might have also been beneficial because of the sensitive nature of our inquiries, where having a trusted friend or colleague can make talking about these things easier.

The second trip

My second field stay began at the end of October, 2001 and was supposed to be for one year, but escalating violence between India and Pakistan and prospect of nuclear warfare forced me to leave the country in early June, 2002. This trip was marked by a number of different activities, including preparation of my research and ethics proposal¹⁵, attending the Third International Conference on AIDS in India, assisting with a sex worker

¹⁵ The WAF project had already received ethical approval, but my doctoral project still needed recognition from the University of Manitoba's Joint-Faculty Research Ethics Board.

workshop, presenting papers at two different Rotary Club meetings, and taking three weeks of *Kannada* lessons. Once approved by my thesis committee members and the University of Manitoba (late February 2002), I began planning my fieldwork agenda and made visits to the three research sites I selected to discuss the prospect of doing work with the women and young girls in their communities.

After the women agreed to the research plan, I relocated from the city of Dharwad to the rural center of Mudhol, to live with a family who was well-known to a senior WAF project investigator. The difficult task of locating a translator from the area took over two weeks, during which time I went armed to the local sex work area, and spent time with the women and their families, conducting mapping, drawings¹⁶, and a few interviews¹⁷. This was a formative period because it allowed me to spend time with them "off stage", in a non-structured, familiar way that was conducive to hours of detailed ethnographic observations. Along with providing invaluable data on aspects of the women, children, and other family members' daily routines, this time allowed the women opportunities for closer questioning and inspections of me, an important dimension of situating oneself in the field setting. Their unending queries (and laments) about my marital status (single), family, food habits, age (29), jewellery, hair, clothes gave great insight into what they think is important, different, or confusing about both women and children as I was a curious mixture of the two groups. I was getting old to marry and have children, but I looked and acted young, dressing in skirts and tops or pants, laughing openly, and asking many questions.

¹⁶ Of what they think AIDS looks like or what they think of when this disease is mentioned. While Downe (1997) was able to gather some fascinating pictures when she asked this question, due to my ineffectual communication skills the women and girls usually ended up drawing flowers or geometrical designs.

¹⁷ Which I had written down in *Kannada* with the help of my tutor.

This long excerpt from my fieldnotes during this period illustrates the nature of our interactions during this phase of my second trip:

...Then we left S to eat and R and I went to her place for about 20-30 minutes. We went to the house at the end of the 1st street, the one with the t.v. and fan. We sat there with R's kids, a couple of other women, and a number of kids. Other women and kids kept poking their heads into the house or were milling around the door while we were there. R's sister brought us some very sweet tea and R asked her to bring some hallu (milk) to add to it, which she did. Her daughter is getting bolder in her interactions with me and she was touching my feet, legs, running her finger along my leg tattoos, and leaning on my bent knee while looking at me and around the room. She moved to her mom's lap and I think R asked her to say some things in English, which she did. She can say most of the days of the week and count from 1-20 fairly well. Then her son did the same thing and R told me that they learn this in school. I congratulated them and then asked if this house is where her husband stays too, she said yes. Then she asked if I eat mutton, fish, or chicken and asked why when I said I am a vegetarian. I didn't know how to explain that I didn't like the idea of killing animals and so I pretended to put food to my mouth and made a scrunched up face, I don't like the taste. This didn't seem to work and I said the word animal and made a cutting motion to my own neck, which also wasn't accurately explaining my point! As we walked to get S we passed a few people sitting on their front steps, just past R's house. The two women looked with that kind of 'curious disinterest' that I've been at the receiving end of lots of times but the man looked kind of suspicious or not impressed with me being there. We also walked by a house where a little girl who had been in R's house minutes before was crying and peeing on the floor just inside the door. We also passed the woman we met in HK (a neighbouring sex work street) and she asked if I wanted some food. Some of the younger sex workers were walking around at the top of the first street and a few had their hair down. We exchanged smiles and while we waited for S R told a couple of young women dressed in nighties getting water at the pump asked who I was and what we were doing (March 1-10, 2001:14).

the importance of failures: problems in the field

Two days after attending a local *sangha* meeting, we conducted a pilot interview with the peer educator (Rani) with whom I was the most familiar. After asking for her verbal consent we discussed the following topics: family, sex work entry and ceremonies, menstruation. We spoke with her for about an hour in her home, and some other women

were present, as were a few children who wandered in and out of the house. It seemed to go very well, as the following section from my fieldnotes indicate:

After the interview we sat inside Rani's house for a while and Renuka, another young sex worker, and some kids came around too. I held someone's baby for quite a while and half-heartedly tried to get my hair wrap out of his reach...Rani and the others were saying that I should have a bunch of kids...Rani was very touchy today, slapping my arm kind of hard like the women among themselves, touching my hair, and feeling my arms and forehead for a fever (after they found out I have a mild cold)...They were all puzzled when I didn't want to get an injection for my cold. I showed them the tablets I'd bought this morning, they nodded. Rani said I need to be careful because a man was following me once. She also told Meena how bold I am for coming to their places by myself (April 2002:21).

However, when we arrived at Rani's place the following day she looked angry as she forcefully pounded *chapatis* by the fire, and I was told that no one was answering any of my questions. "Why? I've been coming here for two weeks alone, what has changed?" I asked, exasperated. They responded by saying it was fine when I was just coming to say "hi", but then I started asking all those disrespectful questions yesterday. Their focus on the nature of my investigation was problematic, but I was more worried that the rapport and trust between us had been severed. When I began to cry they started laughing in disbelief, put their hands on me, and said things to reassure me ("have I eaten?", "do I want tea?"). I asked Meena to tell them that I did not ask those questions out of disrespect, it was to learn things that people did not know and about which many have negative ideas¹⁸. Probably out of pity, they agreed to help with three more pilot interviews, after which they expressed gratitude for the questions I asked them.

When I asked for Kamala's opinion on the questions she said that she didn't mind telling this information. In fact, Kamala said she feels happy because it's a sense of relief to share her life story...Strangely (because of the problems that the day started with), this kind of perspective was shared by several of the women,

¹⁸ I am not sure if she relayed this and my feelings of fear and shock were compounded by my frustration with her because Meena didn't seem to be saying any of what I wanted to express to the women.

including Rani, who began the pilot by saying that I never asked these kinds of questions before. Yes we did!!, but I did NOT want to say anything the least bit confrontational at the moment. After that Rani went on to say that 'not even our parents ask us these kinds of questions and you are sharing our sorrows.' The woman we interviewed second agreed and repeated a few times how much work I am doing. They all commended me on coming from so far away to do my studies. Hmmm (April 2002: 25-26).

The next day we ran into more serious problems, as the women refused to participate, at all. They gave three main reasons for their objections. One, they said each woman's life is the same, why do I need to ask so many people? Two, why did I have to come every day? It didn't look good. Three, Rani and other peers' cooperation with my project were leading to conflicts between the women. On our way to a nearby hotel (restaurant) to gather our thoughts, Meena said she had some "secret information" that they did not want me to know. She told me that at a recent meeting in Pune the main director of BIRDS told the women not to talk to any foreigners. I was utterly confused and wondered if the women were disregarding or forgetting what we asked them during the first trip (i.e. demand for anal and oral sex, sex work entry, earnings) which, to me (and to them too, as these very subjects were raised as problematic in subsequent meetings by the women themselves) seemed more sensitive? Were they equating the issue of menstruation with anal and oral sex, or are they using the topic of menstruation as a tool to channel cumulative frustrations and feelings about what I was doing?

Some answers about my field problems came later that night, after I spoke with my supervisor in Canada and Dr. Gurav in Dharwad. They explained that BIRDS' founders had raised several contentious issues at a recent meeting with ICHAP coordinators, one of them being my project. They were not clear how my inquiries into menstruation, reproductive health, and growing up were relevant to the HIV prevention

programs, and some of the *Devadasis* at this meeting said that my questions were upsetting the women. In an attempt to clarify things, one of the senior investigators on both the WAF and ICHAP projects said that although I was not a formally appointed member, my findings are important for future ICHAP programs. In particular, to discerning HIV risk for younger women and in identifying the different socio-economic, cultural, physiological, and power-related factors impacting women of varying ages; a fundamental goal of ICHAP. Apparently, this caused an uproar and *Devadasis* and AIDS counselors who I knew and had worked with were furious because I was not an official member of ICHAP and had, from their perspective, no right to be conducting research. I was floored, but strangely calm because I knew that for the moment there was nothing that I could do personally, given the complex personal issues and political players affecting these difficulties.

While sorting through these problems was largely a matter for the lead WAF and ICHAP investigators and BIRDS coordinators, I could not sit idle and so I tried to make contact with the women to get their perspectives on what was going on, or wrong. I asked Dr Gurav, who the women especially liked and respected, to come and discuss the problems and prospect of doing further work with the women and young girls. The outcome of these meetings was crucial in re-directing my inquiries and how I conducted fieldwork for the duration of this and the next trip.

Three main issues arose as problematic with my work thus far. First, the women did not understand why I was asking questions relating to menstruation and growing up because they did not see the connections with HIV or collectivization. I thought that by ensuring (or trying to ensure) that Meena asked, *not told*, the women what we wanted to

talk about was sufficient, as it seemed to be for all previous research with them; clearly it was not. Their difficulty with the menstrual cycle questions was that they thought I was asking them because I assumed that something abnormal or strange happens to them during menstruation. Second, I visited their houses, which they did not like (despite their hospitable treatment throughout the interviews) because it impeded their daily activities and caused undue attention to them. Third, coming everyday was not welcomed either, for similar reasons as the point above. During these meetings with the women, Dr. Gurav and I explained the value of inquiring into adolescence, sex work entry, and reproductive in relation to HIV prevention, which they seemed to see the validity of. I also promised not to visit their homes, to only meet in the *sangha* office, and to only come a couple of times a week, when it suited them.

My reserved sense of relief after talking with the women was soon abated when I realized I had a long and difficult wait ahead of me before I would be permitted to continue with my work. It was an agonizing two months before I got approval to return to the field, during which time I kept in contact with project supervisors and BIRDS, and submitted a special research programme to BIRDS and the *sanghas* that met their demands. I also traveled to the Tata Institute and the International Institute for Population Studies (IIPS) in Bombay to conduct extensive literature searches and photocopying, and scoured the local library in Dharwad for any useful historical materials relating to *Devadasis*. On the day BIRDS selected to sign the revised research programme, I was boarding a plane back to Canada following the national government's advisory that all foreigners leave India. Frustrated beyond belief, my saving grace was that I left knowing my project would be salvaged and could resume shortly upon my return.

The third trip

The final phase of my fieldwork took place from mid-August until mid-November, 2002. I lived in Mudhol with the same family I stayed with during my second trip, and returned to Dharwad for a few days every 2 weeks to check e-mail, collect additional supplies, and take refuge in the solitude of my room in the university Guest House. This period of research was marked by an intense interview schedule that was organized largely around the availability of my translator. Since Meena was free only 2-3 days per week, we usually conducted 4-5 interviews per field day, which lasted from 30 minutes to over an hour each. Most of our discussions were with young *Devadasi* girls and women (28/45) who, from previous trips, emerged as more difficult to access and not well represented in the project to date. A primary concern in these interviews was to examine the *sexual culture* (Dowsett *et al.* 1998:294) within which different kinds of sexual contacts occur (i.e. first client ceremony, relationships with *khians*). This is intended to better comprehend how people understand their social and physical worlds, and the socio-cultural processes that help them make sense of their sexual desires, feelings, and interests (*Ibid.*:295).

Operationalizing the notion of sexual culture involves designing questions that capture the different meanings, contexts, behaviours, and activities involved. During interviews with young *Devadasis*, this was achieved by asking about the issues of: household information; growing up; menstruation; and socialization into *dhandha*. Along with exploring the sexual culture structuring their experiences, gathering data on these issues is essential to demonstrate the complexity of young women and girl's social lives, a facet of adolescent sexuality literature in general, adolescent sex worker in particular, that

is under-problematized (Aggelton 1991; MacPhail and Campbell 2001:1614; Moore *et al.* 1996). Interviews with older women were also organized around four themes: household information; growing up and menstruation; the *Devadasi* system; and collectivization. These inquiries helped contextualize those given by the younger women and girls, but more than that, they provided insight into some of the larger socio-economic, cultural, and gender relation changes that have occurred during their lives. Thus, shedding light on some of the connections between local conditions and the macro forces affecting their transition, especially the impact of HIV/AIDS on the *Devadasi* system and the economic structure of rural sex work (i.e. income, migration)

My aim was to interview 15 younger and 10 older *Devadasis* in each research site, but owing to limited fieldwork days available with Meena, police presence in one community, and weariness with the research process in general, this was not achieved. In Mudhol we conducted 13 interviews (9 younger and 4 older), in Jamkhandi 22 interviews took place (13 younger, 7 older, 2 younger CSWs), and in Rabkavi just 10 interviews were carried out (5 older and 5 younger). As with the previous research trips, our interviews took place during the day, usually from 11 a.m. to 4 or 5 p.m., which was the time specified by the women as preferable. Purposive snowball sampling was relied upon again for recruiting interviewees, and the peers in each community selected suitable participants based on basic age criteria; young (early teens-20) or old (mid 20s-40 and up). However, there were times when the desired interviewees could not be found (i.e. young girls not interested or available, older women busy with other tasks), and we ended up either not talking with anyone or conducting discussions with individuals willing to take part, regardless of their age.

While the difficulties encountered during this trip were not as devastating as the previous ones, the issues of boredom with the research process and tape-recording had a detrimental impact on the kind of data I was able to obtain. The ICHAP team was conducting a base-line survey in the same communities we were working in and the difference between, or role of, the two projects was not readily apparent to the women. Towards the end of this trip, peers were often not able to find interviewees because most were fed up with the surveys or had left town to avoid police¹⁹. With respect to tape-recording, the research programme I created for BIRDS and the *sanghas* specified my desire to record a number of interviews, provided it was cleared with the participant(s) in question. However, because one of the leading peer educators did not want me to conduct taped interviews, I was only able to collect 4 during this trip²⁰ (which I obtained in prior interviews in another community). The customary reliance of anthropologists on taped and transcribed data led to considerable concern about the 'scientific' validity of my project, especially as I was not fluent in the local language. In the face of fieldwork relations with BIRDS and the *sanghas* that were, at some level, quite tenuous, I was not in a position to press this topic.

In addition to these factors, the hot weather and local events in the different communities also took their toll on their willingness to take part in interviews and my desire to continue in the face of these difficulties. The following section from my fieldnotes demonstrate some of the impact of these conditions, on the women and myself:

We finally arrived in X and met with the usual friendly crowd who provided us with 2 good interviews as no one else was willing to talk with us (too hot, sick of

¹⁹ In one of the research sites a local newspaper had run story about *Devadasis* who were harassing clients on the streets. This made the women fearful of arrest and many, especially the younger ones, fled for relatives' homes for the final 2-3 weeks of my research.

²⁰ Plus 7 from the first trip, when they gave their consent willingly, or so it seemed.

interviews, police presence). There was a big fight about something where they wash their clothes in the canal, specifically around the stones that serve as the surface for doing the washing. The fight was between 2 different castes that live in this community, but I am not sure if *Devadasis* were involved. From the emphasis they placed on the incident, one that was disputed with insults, stones, and sticks, it seems to be a pretty big concern for them. The fact that there is at least one police van parked seconds away in case anything gets out of hand likely adds to their feelings of concern. Regarding the tape-recording of interviews, Geeta flatly refused. I was aghast, upset, but not too worked up because I am slowly distancing myself from the work...At this point, there is not much I can do and it is another in a series of anti-climatic events of my fieldwork as it comes to a close. I am glad that it is coming to a close too because as the women chatted, joked about food and lovers, and languished in the heat I felt fed up, hot, and wanted to be finished (October 2002:6).

Despite this somewhat frustrating period of fieldwork, the workshop summarizing my project held in Bangalore on November 11, 2002 was well attended by women and AIDS counselors, and it provoked many lively and informative discussions about the data presented. Given my reliance on translators, a main concern was to check the validity of the information I had gathered. The participants supported my interpretation of the data, often adding alternative phrases to capture an idea presented or data not revealed during the project²¹. Another aim was to get the women and counselors' opinions on how best to apply the findings. One suggestion was that instead of designing programs geared toward a certain sector of their sex work communities, they should be broad-based to reach as many women as possible. This would be more successful than trying to contact only young women, for example, because it can cause suspicion from other community members, which is what happened during the final phase of my third trip. Young girls who are not yet doing sex work may also be difficult to reach because of their lack of awareness doing *dhandha* and all that it entails, something their families usually wish to protect them from as long as possible. In addition, some parents do not publicly celebrate

²¹ For instance, arranging multiple "first client ceremonies" to garner better economic return on the event.

the "first client ceremony", and the girls in these families could potentially fall through the cracks in terms of AIDS education and condom distribution, especially at the beginning of their career; i.e. when they are particularly vulnerable. Thus, although HIV intervention programs are especially relevant for pre-pubescent populations who are likely to enter sex work, doing so without major community contributions and approval could cause considerable disruption to girls' socialization process and their relationships with their family, especially around the taboo topic of sexuality.

Other issues brought up by the workshop participants were the need to develop skills to negotiate condom use and to design interventions and training that reflect the diversity of rural and urban sex workers. Greater attention on collectivization among non-*Devadasi* sex workers was also mentioned as an area that requires attention. Linking prevention with care was cited as a particularly difficult process because HIV positive women are not becoming involved in collective activities, which was associated with the current lack of scope within the collectives to engender programs in this area. Finally, the importance of confidentiality was brought up, mainly in relation to their personal information being kept safe from the media.

ethical considerations

During the first trip to India, I was working as an employee of the WAF project, which had received ethical approval from the University of Manitoba's Ethical Review Board. My doctoral research project was designed and carried out with the participation and approval of the *Devadasi* women in Mudhol, Jamkhandi, and Rabkavi. The research

outline was discussed at a workshop involving *Devadasi* and other sex workers from different areas in Karnataka in December of 2001. Once a consensus was reached regarding the research design and time-frame, follow-up telephone calls and visits were made to the women in each research community to ensure feasibility of my project. Before any work was conducted a full explanation of the project objectives, the voluntary nature of their participation, confidentiality and anonymity of data, and potential uses of their information was provided to the women. This was done in each field location, initially by Dr. Gurav and then by my other translator, Meena.

The research was conducted in with due respect to the anonymity and privacy of participants. All efforts were made to ensure that no unique identifies, such as the participant's name, were disclosed during the dissemination of information. As a project dealing with sensitive issues like sexuality, the body, and disease, and the illegal status of the *Devadasi* system, communicating with the women and girls on a first-name basis was not always possible or desired, and thus in my notes each interviewee was entered as a number. To help build confidence in the research process I visited the communities with my translator at least once prior to any interviews, photos were taken and copies distributed, and small gifts were also given to the participants to show my gratitude at the end of the project. In addition, a workshop with *Devadasis* from all over Karnataka, BIRDS representatives, and other project researchers, was held on November 11, 2002 to present my findings and obtain feedback from the women regarding both the accuracy of my conclusions and how best to apply the data. Finally, a copy of a manuscript now in print (O'Neil *et al.* 2004) dealing with findings of the project has been distributed to the BIRDS directors, and it was discussed at the workshop in November 2002.

During the writing of my dissertation anonymity has been protected by: (1) using pseudonyms for the names of the participants, including those individuals who are observed at the research setting but not interviewed, in all forms of recorded information (i.e. fieldnotes, interview transcripts, and the final dissertation); (2) no identifying characteristics of the individuals are mentioned in any of the data that is recorded; and (3) where necessary, the social background, community, caste, and familial situation of some interviewees has been altered to protect their identity. All of the research information (i.e. cassette tapes, hard copies of fieldnotes, computer disc copies of fieldnotes, and interview transcripts) were stored in my rooms in India (Dharwad and Mudhol) and my home in Canada, places to which only I have access. The taped interviews were translated and transcribed by an independent researcher appointed by the WAF project. A copy of my fieldnotes was also sent to my advisor to ensure their safety. Although most of the women are unable to read they may want a copy of my dissertation or related articles for their records or to assist in creating HIV/AIDS intervention materials, which will be translated into *Kannada* if they wish.

With regard to compensation for interviews, after consulting BIRDS leaders it was decided that to avoid in-fighting or potential misrepresentation stemming from economic motivations, research participants would not be paid for their interviews. Instead, the peers who assisted with arranging interviews received the same amount provided by BIRDS for their daily work (Rs 100/-), and their daily expenses were covered (i.e. food, transportation). In addition, the WAF project contributed to the construction of the building that was to be the state's *sangha* headquarters.

Table 1- A Breakdown of Interviews Conducted During Research

Interviewee	First India Trip	Second India Trip	Third India Trip	Total
Older <i>Devadasi</i> -group	12	2		14
Older <i>Devadasi</i>	9	5	15	29
Younger <i>Devadasi</i> -group	8	1		9
Younger <i>Devadasi</i>	1	3	28	32
Mixed <i>Devadasis</i>	6			6
Older CSWs	12	2		14
Younger CSWs	1		2	3
Mixed CSWs	1	8		9
Other	16	3		19

limitations of the study

There are several limitations of this research, beginning with the issue of language competency. Relying on translators throughout the project was problematic in terms of understanding the material gathered and in terms of being unable to explain my research objectives to the *Devadasi* women, girls, and sometimes translators, as the 'problems' section of this chapter illustrated. The three weeks of *Kannada* lessons I took helped immensely as I could, albeit it at an elementary level, speak with them about a limited range of topics in their own language. The wide grins, slaps on the back, and playful mimicking of my linguistic attempts indicated that they were pleased with my efforts, which is a recognition of what I hope they saw as my dedication to the project and learning about their lives. Perhaps as a way to compensate for my limited *Kannada* skills, I depended heavily on body language, smiling a great deal, never appearing to be in a

hurry to conduct interviews, and spending as much time as possible "off stage", eating, talking, or just sitting with the women, girls, and their families.

There are a number of reasons why I did not devote more time to learning *Kannada*. My fieldwork was defined by WAF project timelines and activities, by unforeseen difficulties, and international developments in the second trip that were largely beyond my control. Put simply, I did not have time to devote to strictly learning *Kannada*. Also, unlike 'traditional' anthropological field conditions where few participants spoke English and the field language was important for publishing with colleagues in the second language, this is not the case in Karnataka. Many people speak intelligible English and there is not a flourishing body of work on the *Devadasis* in the local language. To check the validity of my data, I conducted extensive reviews of the material with the translators and certain AIDS counselors, discussed my findings with others doing similar research, and found many correlations between my work and secondary literature.

The second limitation of my study revolves around the nature of my fieldwork, which was conducted only during the day, did not include clients' perspectives, and did not involve me living with the women and girls. All of these dimensions of the project are linked with the issues of gender, personal safety, and respect for the women's work and personal lives. It would not have been safe for me to visit the sex work locales at night or to talk with clients because many men come to the women after drinking alcohol, which would affect their behaviour and the quality of information they may have divulged. Also, it would have been difficult to convince someone to accompany me in the evenings because of the social prohibitions against respectable women, and, by extension,

respectable families, 'roaming around' after dark, especially among a stigmatized group like sex workers. Living near the women and girls would also have been dangerous because my extreme visibility in Mudhol made me vulnerable to unwanted and distressing male attention, a situation that would have been amplified and likely more serious had I been on my own. My daily visits to the field also disrupted the women's routines with clients, daily activities and inter-community relations, which is why living with or near them was not an option.

Sampling techniques and lack of tape-recorded interviews are two other limitations of the study. Using the social networks of the peers and AIDS counselors as the predominant means of selecting informants may have led to an exclusion of women and young girls not involved in *sangha* activities, as well as normative responses. We tried wherever possible to request interviews with the more marginal populations, and were successful on several occasions. Also, as Table 2 indicates, over the course of the project we were able to interview a cross section of *Devadasis* of different ages: 43 among older, 41 with younger, and 6 with mixed groups. These women and girls come from an array of communities in northern Karnataka, mainly in the *Devadasi* stronghold of the Bagalkote district, making the data representative of the experiences of the women and girls in this populous region. Recording only a few (n=11) taped interviews presents problems during analysis and verification of the interpretation of data. However, consistency of the interviews and double and sometimes triple-checking them with translators were ways to help ensure my comprehension of the material.

Discussion: Lessons From the Project for Participatory Research

This chapter presented the state and district setting in which the project took place, along with the methodologies used in the field. The conditions of each field trip were then described, along with ethical considerations and the problems encountered during my second trip. The main limitations of the study were then outlined. This final sub-section looks at how the difficulties involved in carrying out research may be used to critically examine the nature of doing participatory research, including its limitations, operationalization, and areas for development.

Participatory research developed out of applied anthropologist and other social scientists' frustration with the dominant behaviour modification models in use during the first phase of HIV research. Instead of 'top down' approaches that measure individuals' deviation from Western socio-sexual norms, participatory research involves collaborative efforts from the population group, researchers, NGOs, and other participants to devise proactive educational and intervention programs. Participatory action-research (PAR) takes this one step further, generating strategies that come from shared community needs to help support enabling environments, empowerment, and social change in people's fight against HIV/AIDS (O'Neill 2001:2; Schoepf 2001:349). PAR stems from an acknowledgement that the study group in question already knows a great deal about their situation (Schoepf 1995:250), including the most effective channels for communication, mobilization, and problematic elements. One main tenet of this method is community participation (CP), which is essential in the planning, application, and evaluation of the different programs. Another is training local participants, whether they be peer-educators, coordinators, co-researchers, or NGO members, in the action and group-oriented

activities and objectives of the project. Peer education is a third tool employed to bring about community-directed social change through PAR, working as it does to transfer responsibility and control of the research from outside 'experts' into the hands of community members (Campbell 2000:480).

The WAF project was designed as a participatory action research effort that involved sex workers, NGO organizers, and other participants directly in the development of HIV intervention strategies. The training structure and community and empowerment-oriented objectives of the BIRDS NGO and the *sanghas* seemed to lend themselves very well to this approach. However, as the project unfolded several issues arose that pointed to the incongruity between what PAR was supposed to 'look like' and what actually took place in the field. These problems were, in part, a result of difficulties that routinely come with doing fieldwork (i.e. unfamiliarity with cultural dynamics and inexperience in the particular setting). They also stemmed from the unforeseen impact of the highly structured relations of gender and organizational leadership between BIRDS and *sangha* members, which did not become readily apparent until late in the project.

The three main problems encountered during research were the women and girls' refusal to participate in the project during the second trip, sampling bias and difficulties recruiting the desired number of older and younger women in the last trip, and the lack of tape-recorded interviews. I will summarize these problems, focusing on the intervening factors that had a play in the emergence of each, which will then be followed by a brief discussion of how these issues lend themselves to lessons learned during conducting participatory research.

problems

The predicament I found myself in towards the end of my second trip was due to several factors, beginning with my insensitivity to the taboo and private nature of issues relating to menstruation, reproductive health, and sexuality. I realized the sensitive nature of these issues, but the *Devadasis's* cooperation during questions about anal and oral sex, boyfriends, sexuality, income, HIV and STDs, and family during the first trip led me to believe they would be ok with inquiries about things that, to me, seemed less threatening. Also, because I had followed the research protocol of trying²² to ensure that the interviewees understood the voluntary nature of their participation and confidentiality of data, I felt relatively secure that the work was being conducted with their consent. There were, as it turns out, much more complex forces at play in my use or abuse of what these seemingly neutral terms stand for.

The scientific gloss of terms like 'consent', 'voluntary', and 'confidentiality' conceals the possibility of conflict in meaning of such words in different cultural contexts. This is important in any research setting, perhaps especially in Hindu society where such powerful religious and cultural directives like *dharma* (moral duty, rightful action) stipulate the necessity of following the orders of one's superior (or affiliated institution) and maintaining one's position within the social hierarchy. It is believed that individuals have innate qualities relating to their caste status that are not subject to alteration and operate according to an internal order. People's actions, especially those in authority, are judged as an outcome of their place within the system, not a product of individual 'rightness' or 'wrongness' (Kakar 1979: 41). Stemming from this, individual

²² I say 'trying' because of the difficulties in trying to ensure fair and equitable treatment in a society so hierarchically structured as India, where crossing caste lines can engender significant negative religious, moral, and social consequences.

initiative or efficacy is not highly valued because it is seen as useless and potentially dangerous, especially when other options will be available in the next life (*Ibid.*: 37). The cultural friction involved in trying to apply certain individualistic Western research procedures in a society organized by socio-centric principles is not a novel conclusion. However, this example helps illustrate how, and why, the factors involved in this friction remained hidden for a time, not emerging until those in control (i.e. BIRDS organizers and counselors) signalled their disapproval.

The second issue of sampling was problematic for reasons that are linked with those discussed above, as well as the basic exegeses of doing fieldwork. The bulk of our interviews were carried out with individuals selected by the peers and counselors in different communities, based on their familiarity with the women and girls and the age requirements I specified as important. Our guides' inability or unwillingness to seek more non-*sangha* members and the sample numbers I desired may be because of their uneasiness with pushing the boundaries of acceptable behaviour, especially that involving a focus on individual performance. It may also be an outcome of the relatively intangible benefits of research, especially at the early stage when there is little to 'give' them in return for their participation. We were able to talk with a large number of women and girls from different areas in northern Karnataka though, particularly those from the highly *Devadasi*-populated district of Bagalkote. In addition, although *sangha* membership signals a different kind of orientation towards HIV and the process of collectivization, because it does not seem to divide the population of women into entirely different sectors within their community it is an influential but not essential determinant of life conditions and experiences.

My inability to conduct a significant number of tape-recorded interviews plagued me throughout my project, especially at the end when this method was refused. I was frustrated because I had gathered some taped recordings without event on the first trip and because the research programme I signed with the *sanghas* in my last trip described this as an important aspect of doing interviews. Looking back at the nature of the women's participation during the first trip, however, it may have been more a result of BIRDS organizers and counselors' approval of the WAF project than a matter of personal engagement with the research process. The incident involving a story to the media about the women in one community, the one where tape-recording was not allowed, must have also impacted their concerns about their security and anonymity.

While taping interviews is a benchmark of anthropological field methodology, it can complicate things too, especially when dealing with sensitive issues of an illegal profession like sex work, money, relationships, reproductive health, and family background. It can also make interactions about such intimate topics more formal and possibly less conducive to discussing feelings and experiences in depth. Angie Hart's (1998) work with male clients of Spanish sex workers reflect similar feeling I had about the importance but difficulties of this method:

I began to see that I was using the taped-interview method as a kind of defensive shield, a shield that represented 'scientific' authority. Whilst clients may have been much more at ease without a tape recorder, and may have revealed a great deal more about themselves informally chatting to me at the bar, I wanted to put them in a more formal situation where I was clearly the researcher, authenticated by expensive recording equipment (1988:65).

Practical considerations like noise in the interview setting and the labourious project of translating and transcribing the data are other draw-backs of taping. The fact that there were often several women at each interview meant that, in some instances,

many of them were talking at once; making it difficult to pick out the specific words of each woman. Being located near roads with busy vehicle traffic and the flow of people in and out of the nearby houses and lanes also produced considerable noise during our conversations. Since I was unable to translate and transcribe any of the interviews, I had to hire an independent researcher to complete this job. Doing this on top of her day job at a research institute in Dharwad, the woman I hired had difficulty finishing the work on time. In fact, all four taped interviews were sent to me in Canada after I left India, a rather risky procedure given the unreliability of e-mail and international postal services.

lessons learned

One of the most important outcomes of the problems I encountered while doing participatory-action research was my on-going analysis of these problems in light of 'standard' research practices within this methodological approach. Instead of writing them out of my dissertation I think it is more productive to use these difficulties to critically examine and further develop this research methodology. This is important for others conducting similar research projects with female sex workers, but it may also be helpful for the *sanghas* and BIRDS organizers as they expand the collective networks and take steps to move beyond condom distribution in attempt to engender greater means of empowering the women.

The first major lesson learned during the project relates to BIRDS, and the need to expand the peers' training and *sangha* focus, which revolves around condom distribution and demonstration and providing basic HIV/AIDS information to the women in their areas. The large number of condoms reportedly distributed each month (e.g. 96,000 in the

Bagalkote district²³) is less important than the ability of the women to enforce their use, which is a persistent problem. This is crucial because if the women are unable to achieve success in their principle activity, how will they be able to move beyond condom use to implementing some of the programs they identified as important (e.g. school for children, literacy and other training for *sangha* members and coordinators, ration cards, and housing)? This problem has important structural implications too because BIRDS needs to cite condom distribution as a thriving exercise within the collectives to ensure their funding, which comes mainly from foreign donors. Unless the *sanghas* can make room for increased peer training and program development the women want, they risk falling between the cracks created by prevention strategies that are useful but difficult to enforce, and a concerned but cash-strapped NGO that must secure monetary support by continuing to focus on condom distribution.

Another outcome of the project is the nature of intervention strategies, specifically the problems that can be created by programs targeted at a specific social group. From the wind-up workshop held at the end of my project (November 11, 2002), it was evident that some of the reasons why I was having difficulties talking with younger women in one community especially was that my focus made them suspicious. They were concerned with the greater vulnerability of the younger women and girls, many of whom are very young and not well versed in HIV prevention information because of their low *sangha* participation. The women may have feared reprimands from BIRDS counselors or organizers if I spoke to young girls because of their age and lack of knowledge, which could reflect poorly on their peer education skills. Since many of the older women are also in need of programs and training, my focus on younger *Devadasis* may have also

²³ This number is taken from the first BIRDS workshop we attended, held from February 9-11 of 2001.

fostered jealousy among the women and feelings that their problems are not as important. This point is useful because of the tendency to narrow research program focus on one or two specific population groups. While this is important for academic and funding feasibility, it can lead to fissions within the community at large and significantly hinder participation. Community-wide consultation of the specific research objectives and using community suggestions to expand the investigation beyond the original study group are ways to help alleviate this difficulty.

A third lesson relates to the intangibility of the benefits of doing research. We could not offer them any programs in the first stage of the project because those programs had to reflect their needs, which could only be deduced through research. This explanation rang rather hollow at the first BIRDS workshop we attended, when the women voiced their disdain for corrupt NGOs and other "foreigners" who have not delivered on the promises they made to help them. Their prior experience and frustration with the nature of my investigation during the last research trips may be why they were reluctant to extend themselves to find interviewees. Making research seem valuable and then operationalizing it is a fundamental task of any intervention program. Overs (2002:15) outlines three main factors that these issues depend on: (1) inform not only sex workers, but also clients and others involved of the value of safe practices; (2) the working environment must change in ways that enable sex workers to put these ideas into practice; and (3) involving sex workers at all stages of planning and implementing interventions, including where this participation requires substantial support and possibly adaptation of procedures. These areas need developing within the *sangha* structure. Doing so would help shift the thrust of current activities away from changing the

women's behaviour and the presumption of their ability to affect these changes by themselves, to one that addresses wider issues of gender and power relations with clients, client participation, and greater emphasis on policy and legal changes. Implementing these strategies depends upon financial resources and structural support from BIRDS, which may prove difficult given the scarce monetary landscape within which they operate.

Another much more basic suggestion for making research seem valuable would be for project organizers to implement a 'start-up' period before beginning with data collection, which would act as an information sharing phase during which researchers explain more clearly the nature of social science research, including the often latent benefits. The participants' suggestions for more immediate returns would be very beneficial to shaping the methods and overall aims of the projects.

The fourth lesson has to do with the nature of the women's participation and the complex web of relations that influenced how they took part. In the first research trip they cooperated fully, which seemed to signal their support or tolerance of the project. However, cooperation does not mean a successful PAR program, which was evident during the later trips when several thorny dilemmas arose. The women's refusal to participate in my work could, from one perspective, be applauded as an act of resistance against an insensitive and non-participatory mode of inquiry. However, to understand the women and girls' reactions, they must be contextualized within the several tiered structure of the BIRDS organization. It was only after the leaders' difficulties with my project foci and certain ICHAP initiatives that the women began to contest the research process, citing my disrespectful topics of inquiry as the main reason. I should have

introduced the areas of menstruation, reproductive health, family, and relationships in a way that they could have understood how they relate to HIV prevention. However, the women and girls' "actual" feelings on these issues is not easy to discern because of their full participation in interviews on similar topics during the first trip. Were they coerced to cooperate because of the anticipated benefits of being involved with our project? Or, were they equally distressed at the beginning but not in a situation to express their discomfort until other political issues were raised at the top, issues that could then be used to legitimize voicing their feelings about my project?

While I am not in a position to answer these questions with certainty, additional examples of the women's need to comply with BIRDS directives that emerged in the last research trip reaffirm the problematic issue of 'participation'. Several times the peers I worked with told me not to tell the counselors that they were not doing a good job. I assured them I would not and that they were doing excellent work, and when I thanked them they often responded by saying "it's my duty." This reflects their desire to avoid problems with the counselors, but it also speaks to more fundamental cultural values of adhering to one's senior. The following section from my fieldnotes highlights how this situation complicates both the meaning(s) of 'participatory' research and adherence to hierarchical norms.

"it's my duty", which is what the BIRDS counselors and some Peer-educators mentioned when I thanked them for all their help. That the emphasis seemed to be on them being told to do something by the person above him or her bugged me and appeared, at first and maybe second glance, to run up against all that "participatory" research is supposed to be. But, look at what "duty" may refer to in the Indian context- *dharma* and the importance of doing what a superior says. Both of these things are essential to fulfilling one's personal and spiritual journey... While this felt like a problem, it's much more important to look at what people say and how it fits within India, versus only how it doesn't fit with what "participatory" has come to stand for (October 2002:18).

Another issue that impacted the nature of the women's involvement is the tension that existed between the organization of the WAF project and the realities of doing fieldwork. While the research was designed to be 'participatory' and to be directed by the needs and goals expressed by the women and girls, several factors made it very difficult to actually achieve this. The time-frame of one year and the challenges involved in conducting research in this setting (i.e. large numbers of women to coordinate with, limited communication networks, the *Devadasis*' unfamiliarity with the research, project expectations for information in a short period of time) put a significant amount of pressure on the women and our research team, such that we were hard pressed to meet the demands of the ideal 'participatory' research model while producing sufficient hard data to satisfy the WAF objectives. This is not to say that the 'participatory' approach is not an effective or empowering method, it is. The point raised here speaks more to the structural constraints involved with doing projects of this sort and the (unintended) ways that they can impact the research process, participation, and outcomes.

As the foregoing discussion reveals, the position the women inhabited during their involvement in the project was a difficult one. They may have 'participated' to avoid a loss of income as peers and social status in the eyes of superiors. This is not to say that the *sanghas* and BIRDS are not serving an important role in their own right and within the state-wide network of collectives. They are essential in mobilizing women, providing life saving information and services relating to HIV prevention, and fostering a greater sense of self-respect among the women. By shedding light on some of the underlying factors inhibiting major strides toward their empowerment, this discussion is intended to support the women's efforts toward empowerment, safer working environments, and to

achieving training and support programs. It is also intended to provide a critique of aspects of the PAR model, and to demonstrate how some of the problems can be exacerbated, and produced to a certain degree, by the structure and demands of large research projects. The ways in which researchers assist in the reproduction of socio-economic, gender, and sexual inequalities is another crucial outcome of this discussion. It is hoped that others will avoid such mistakes and help in the development of more representative and effective strategies for preventing HIV and helping sex workers take more control over more areas of their lives.

CHAPTER 3- SEX WORK IN THE INDIAN SETTING

Ancient India contained one class of women who were not bound by the rules and restrictions which limited the freedom of the high-caste wife. These were the prostitutes (*vesya*, *ganika*). There were certainly many poor and cheap prostitutes...but the typical prostitute of literature was beautiful, accomplished, and wealthy, enjoying a position of fame and honour comparable to that of the Aspasia and Phrynes of classical Greece...Another type of prostitute pursued her trade in an odour of sanctity. They attended on the god's person, danced and sang before him, and, like the servants of an earthly king, bestowed their favours on the courtiers whom he favoured, in this case the male worshippers who paid their fee to the temple (Basham 1954:183-185).

Introduction

Prostitution has a long and complex history in India, and as a socially embedded system the various forms it took were linked with the political, religious, cultural, and economic conditions of the time. Most research concentrates on pre-modern periods and the positions or duties of select groups of women (e.g. heavenly *apasaras*, courtesans, *Devadasis*), which makes it difficult to get a sense of the full range of sex work that has taken place over the centuries. Another problem with the existing literature is the male bias that runs through the epic texts, travel writings (for an exception see Ghose 1998), and legal documents which have greatly influenced our understanding of prostitution and prostitutes in the Indian context. More recently, the ties between sex work and the HIV/AIDS epidemic have led to investigations of the current organization of more general forms sex work, however, the overwhelming focus is on women and girls in red-light districts and large urban centers.

This chapter describes the socio-economic, religious, sexual, and political context in which the *Devadasi* tradition is based. Unlike the other chapters, the present discussion

is predominantly a literature review, covering historical and contemporary research on Indian sex work generally, with a specific focus on studies dealing with *Devadasis*. The androcentric, positivist, and sometimes poorly researched studies that make up the Indian sex work canon tend to reinforce and re-circulate biased and stereotypical representations of these women, and it is against these harmful constructions that I write. Sex workers, including *Devadasis*, have consistently been objectified as victims, fallen women, or voiceless pawns of a degenerated religious tradition, images that revolve around their deviation from mainstream feminine norms and maintain cultural currency in a patriarchal society that devalues women. This kind of social labelling and construction works through an extraction of *Devadasis* from the larger forces of gender, sexuality, socio-economic inequality, nationalism, and religion. However, I argue that it is more useful to critically examine the women and girls' experiences in direct relation to these issues, because only then will the complex networks between their lives and the macro forces affecting the structure and conditions of living, working, and socio-sexual relationships be revealed. In many ways, this chapter acts as a companion piece to Chapter Four, which is a discussion of the anatomy of sex work and the *Devadasi* system in the rural setting today.

Chapter 3 opens with a presentation of the research dealing with sex work in India generally, and then the work that deals specifically with *Devadasis*. Due to the diverse and often confusing literature on this issue, this chapter is broken down into sub-sections that are designed to help clarify a range of aspects of both the tradition and how it, along with the women who belong to the system, have been represented thus far. The issues discussed include definitions, origins, typologies, motivating factors behind the system,

and an overview of the development of the system. It concludes with a review of the main points raised and the implications of these data for understanding the complexities of the contemporary *Devadasi* practice, system, and self-representation of the women. The Figure below is a chronological guide to the different periods within Indian history, and is intended to help contextualize the data presented.

Figure 1- Historical Outline²⁴

2000 B.C- Decline of the Indus Valley Civilization
1500 B.C.- Aryan invasion of North-Western India
1700-900 B.C.- The Vedic period
900-520 B.C.- The Epics written (e.g *Mahabharata* and *Ramayana*)
520-320 B.C.- Contacts with Persia, emergence of Buddhism and Jainism
320-200 B.C- The Maurya Age
200 B.C- 300 A.D- Disintegration of Empire, India's 'Dark Age'
300-600- The Gupta Empire, the 'Great Tradition' of Hinduism
500-900- Conflict in the Southern Kingdoms (e.g. Chalukya, Pallava, and Pandya)
900-1300- The rise of the Chola Empire in the South and the triumph of the Rajputs in the North
1180- 1320- Triumph of the Sultans and the beginning of the Mughal Empire
1320-1525- Dominance of the Delhi Sultanate
1336-1565 -Vijayanagar Empire in the South
1500-1682- Prominence of the Mughals
1682-1750- European traders (English, Portuguese, French, Dutch) and Maratha rule
1750-1820- The British Conquest
1820-1947 British rule

Historical Perspectives on Sex Work in India

A review of the literature on prostitution in classical India reveals that it was a socially integrated institution, one that was often described in relation to other spheres of life it challenged and found expression in, namely marriage and sexuality. Epics like the *Mahabharata* and *Ramayana* contain many references to love, sexual intercourse, and the

²⁴ Adapted from *India: A History*, by John Keay (2000) and *A History of India*, by Romila Thapar (1966).

spoils of sexuality that result from transgressions of socially sanctioned cultural mores. One example is the *apasaras*' (heavenly nymphs/prostitutes) destruction of male chastity and spiritual power resulting from their seduction of ascetics. Found in early Buddhist texts as well as contemporary writings, this enduring theme in Indian literature reinforces both the corrupting sexual nature of these women and the usefulness of their temptation, which was believed to test and strengthen the chastity of male Gods (O'Flaherty 1973:43,50). Another story illustrating the importance of sex workers as intermediaries between the sacred and profane is that of King Krodha, who was advised to attain salvation through attachment to the *panca-veysa*, the five celestial prostitutes (Mookerjee 1988:26). The reasons for the sex workers' contested yet highly valued roles are complex, and rooted in classical Hindu values of fertility and the powerful yet potentially destructive female power (*sakti*) that is at once the source of women's procreative abilities and an energizer of the universe. The association between sex workers and good luck and accumulation of wealth (Henriques 1962:140; Meyer 1971:268) is another rationale for the positive attributes of these women in ancient writings.

However, a reading of these and other ancient texts reveals that women- typically wives- suffered then, as they do now, from the double standards inherent in Indian patriarchal society. Writing about the idealization of marriage in the epics, Kakar and Ross (1996) note that:

the obligation of conjugal love and the virtue of chastity within marriage were primarily demanded of the wife, while few limits were set on a husband who lived under and looked up at a licentious heaven teeming with lusty gods and 'heavenly whores'- otherworldly and utterly desirable (83).

With the strict regulation of marriage and women described in Vedic writings as "insignificant receptacles for the unilaterally effective male fluid" (O'Flaherty 1980:29),

sex workers were the penultimate affront to normative Hindu socio-sexual relations because they often had sex without procreation and did so with other women's husbands. That being said, they are relegated a purpose, albeit a functional one, that relates to the operation of the caste system. In that, since each caste has its own morality associated with its respective position in the political and occupational hierarchy, only women from lower castes were permitted to engage in sex work (Henriques 1962). While lower caste women were selected because of their polluting identity²⁵, in many instances they ended up occupying social and religious roles of greater esteem than women in the higher castes (e.g. saints during the *Bhakti* period, well-educated, consorts of nobility).

Although the legal and mythical constructions of prostitutes in ancient writings provide useful information regarding these women and their social status within society, a more complete record of their various duties, organization, and highly valued links with ruling political regimes emerged during the Maurya Period (320 B.C.- 200 B.C.). Between 321-296 B.C. a Brahmin named Kautilya (or Vishnugupta) wrote the *Arthashastra*, a treatise on the art of government which took the form of 15 books, each dealing with a different aspect of governing a kingdom (Henriques 1962:141). The 27th chapter of the second book describes the duties of the *Ganikadkshya* (Superintendent of Prostitutes), which is the earliest and most detailed account of Indian sex work in the classical period (Joardar 1983:30).

Kautilya uses an array of classificatory terms for and attendant responsibilities of courtesans, which indicates a well-developed socio-economic, occupational, and sexual hierarchy. These women were trained in singing, dancing, acting, music, soothsaying, the

²⁵ Or rather, their unpollutability through sexual contacts with men of various castes. There were, of course exceptions to this, in the case of wives of actors and other higher caste and class women who sought adventure through sexual experimentation and prostitution (Henriques 1962:144-145).

making of scents and garlands, and they received a high quality education, which was paid for by the state (Henriques 1962:144). Male children of prostitutes belonged to the king and were trained at his expense for a stage and management career, while girls carried on their mothers' profession (*Ibid.*:144). The sex workers and those with whom they associated had to follow strict rules that were ordained, and punishable, by the king. For example, there were fines for men who forced women to be concubines or spoiled their beauty by cutting their face, and courtesans were punished for not going to a man at the command of the king (Joardar 1983:31-33; Henriques 1962:141-145). The obligatory monthly tax (double their daily earnings) *ganikas* and any prostitutes who live "on their beauty") were required to pay provided the government with considerable income, and is another indication of the state control in regulating prostitution. The prostitutes' services as spies, infiltrators of enemy armies, security forces for the king, and testers of any food, garments, flowers or ornaments, or scents to be used by the king reflects their importance to political and national affairs (Joardar 1983: 29; Henriques 1962: 142).

Another critical record of sex work in the Indian setting is the *Kamasutra*, the famed treatise on love and the pursuit of social and cultural refinement. Written between the 2nd-4th centuries A.D. in North India (Roy 1998:54), chapter 6 dealt with the social life of courtesans and was documented with the guidance and insistence of a group of sex workers. It covers such issues as the advice of assistants on the choice of lovers, looking for a steady partner, and ways to make money (Danielou 1994), and lends greater insight into the complications and difficult emotional terrains the women inhabited. The courtesans were relatively free to work in different locales, earned more money than women of their same social group, and could bypass the difficulties inherent in marriage.

However, they dealt with unsavoury clients who could be violent and they experienced social stigma and dissatisfaction with personal relationships. In addition, the values attributed to sex and sex workers in the *Kamasutra* reflect an expression of desire that is defined by heterosexual male constructs of power (Roy 1998:55-57), thereby limiting severely an understanding of the prostitute's perspectives. These things considered, courtesans as they appear in this classic text were highly valued by certain upper echelons of society and they reaped educational and socio-economic benefits, such that many of them were influential historical and political figures (Oldenberg 1990).

Sex workers maintained their important social positions within Indian society during the Gupta Age (300 A.D.- 500A.D.), when they continued to sing, dance, and entertain, and receive training through royal patronage. The following Medieval (500 A.D.-900A.D.) and Chola (900 A.D. -1300 A.D.) periods are particularly important in relation to the emergence and development of the *Devadasi* system, and they will be focused on in separate sections below.

With the Muslim invasion of the Indian sub-continent around 1000 A.D., major changes occurred in the perception and social roles of prostitutes. Unlike Hindu writings that accorded an important if somewhat ambivalent value to these women, the *Koran* denounced sex workers and endorsed severe punishment for women found to be practicing (Henriques 1962). Despite the official renunciation of sex work, when Mughal power later became more established (1526-1707) royal and aristocratic support of the institution was firmly entrenched, and a feast or festival was not considered a success without the presence of singing and dancing girls (Joardar 1983:48). The courtesans lived in lavish apartments and separate palaces were also constructed as harems, some of which

were named for the days of the week the Emperor would visit (Misra 1967:76). As with the classical Hindu period, the harems were very well organized and some of the women within them filled important state-appointed positions. Superintendents were appointed to manage and sometimes spy on the courtesans, and many women occupied important government jobs like report writing, newsletter reading, and personal security for the king (*Ibid.*:78-80). More common sex workers also flourished during this time, evidenced by a report from a 17th century French traveler in the city of Hyderabad in present-day Andhra Pradesh. He reported that there were over 20,000 prostitutes in one particular area, all of whom were to be registered with the Chief of police and report to the king weekly (Henriques 1962:172). During the period between Mughal rule and the early stages of European contact in the 16-17th centuries, there is relatively little written on sex work compared to the more classical and contemporary eras. It is for this reason that the discussion now shifts to an examination of more recent works on prostitution, beginning with those during the time of colonial presence and rule.



Colonial and Contemporary Research on Indian Prostitution

Most accounts of sex work during the colonial period focus on the impact of regulatory practices relating to the introduction of the Contagious Diseases Acts in the mid-1860s, such as mandatory registration and physical examinations. Central to this body of research is an examination of how 'Orientalism' and social reform movements worked together to produce images of Indian men and women, but especially prostitutes, as inherently diseased and morally repugnant, images that were used by imperial powers to justify British rule. The ways that prostitution was constructed changed significantly, and

this process is an important piece of understanding the presentation of sex workers in the contemporary setting.

The British understood prostitution as a socially embedded institution and a hereditary caste profession (Levine 1994:586) and, by extension, they thought that its regulation would not be as problematic as it would be in more industrialized nations. Commander in chief Geoffrey White sums this up well, saying: "Prostitutes are not looked upon by the natives of India with the contempt which attaches to them in other countries. They are accepted as safeguards to society and are not themselves ashamed of their calling" (*Ibid.*: 586). Another government official supports this statement in his decidedly nonchalant opinion that "...The regulation of courtezans in the public interest offends no native susceptibility" (*Ibid.*: 586). The 'public interest' here was, of course, in reference to the British troops, who were young, often single, men from lower socio-economic and educational social strata who flocked to local sex workers in the absence of 'suitable' European women²⁶. In an effort to protect the health and moral standing of British soldiers, the Indian Contagious Disease Act instituted two classes of prostitutes: a first class group comprising women who were reserved for Europeans and a second class that was available to local Indian men (*Ibid.*: 586; Raj 1993:56). The Indian CDA also stipulated the separation of women with venereal disease from the troops, through the construction of Lock Hospitals (where the women were contained until disease-free) and the erection of high compound walls around the hospitals (Raj 1993: 24). However, a combination of incompetent administration, bribery among hospital and military staff,

²⁶ European (and other South Asian) women had been migrating and trafficked to India for the purposes of sex work since the early 1800s.

and strong economic and sexual drives of both women and men to ensure continued liaisons (*Ibid.*: 24-25) made the application of measures very difficult.

Not only were many of the government's disciplinary techniques challenging to put to practical use, the rising incidence of venereal disease (VD) among the troops introduced somewhat different views of Indian women selling sex. Aside from being presented as morally inferior yet socially acceptable to a certain degree, prostitutes were increasingly viewed as a direct threat to the colonial enterprise through the process of disease transmission, and its presumed travel from the Indian prostitute vector to the 'clean' British soldier (Levine 1994:598). The colonial model of contagion was confirmed when it was discovered that more Europeans died because of VD than in combat during the mutiny rebellion of 1857²⁷ (Oldenburg 1990:260; Whitehead 1995:48). That local Indian troops were far less infected roused suspicions and raised the issue of inherited immunity, which was commonly associated with 'natural' states of sexual degeneracy and cultural inferiority in the colonial imagination.

The period of official British rule that began in 1858 ushered in a time of greater state intervention in sex work regulation, and it added to the demise in socio-economic status of many prostitutes that had already taken place during earlier foreign occupations of smaller regional kingdoms (Oldenburg 1990:260). Following the abysmal failure of the CD Acts²⁸ a series of Cantonment Regulations (1864, 1880, 1889, 1897) were enforced to combat rising VD rates and numbers of women in prostitution, who were entering the profession because of poverty conditions, drought in some areas, and loss of military or regular patrons (Raj 1993:51; Whitehead 1995:46). However, these

²⁷ This was also the case in the Crimean War.

²⁸ Which were repealed in 1888, two years later than in the U.K.

regulations did little to curb disease transmission and governments began to look to policy changes to suppresses prostitution instead of regulating it (Raj 1993: 69). In Madras the government relied on sections 52 and 71 of the City Police Act of 1888, which effectively empowered the Commissioner of Police to remove a brothel and make sex work a judicially enforceable offence (Joardar 1983:72). Not surprizingly, this approach was also unsuccessful because prostitution was already so well entrenched into the societal and economic fabric of many urban centers. The organization of sex work began to expand during this period too, as brothels were constructed near high schools and colleges, temple sites, and along the expanding railway lines (Raj 1993:69-72), and there was greater involvement of subsidiary players (e.g. cart drivers, rickshaw men, hotel staff).

The situation of Indian prostitution changed during the politically volatile early-mid 1900s period as they became entangled with the manipulation of the image of women as the ultimate site of colonial degradation and national rebirth, which was drawn upon heavily during the fight for independence. Reconfiguring themes of reproduction and nurturing for political aims was an effective tool to mobilize women in the fight for Indian freedom, but their participation remained on the periphery as "petition politics"²⁹(Forbes 1996;; Ray 1999). In addition, many of those who took part in these activities were largely middle-class and educated, which excluded the rural masses and helped entrench ideas about the 'right' kind of Indian woman that were highly mis-representative. The role of prostitution during this time was problematic because of its

²⁹ i.e. lobbying liquor shops, boycotting salt taxes by making their own, and spinning *khadi* clothes from local cotton. In subsequent periods (1940s) women did participate in more mainstream political fights, including the Bengal Famine 1943-44, the armed struggle about land reforms in Hyderabad, communal violence involving Pakistan, and the Quit India movement of 1942.

connections with the reified constructions of women generally, and the nationally offensive characteristics attributed to sex workers in particular.

The position of sex work was heavily influenced by social reform movements and larger nationalist discourses, such as those advocated by Gandhi, both of which revolved around images of the women as either victims, morally corrupt, or a drain on the nation. The reform movements led by local Indian elites (often men) and White women supported abolition of sex work and rehabilitation of the women into mainstream society, through education and alternative income-generating activities. Male reformers often saw "fallen women" as embarrassing evidence of India's inability to conform to the much sought after international standards of social decency and national development. For their part, the foreign women who wanted to 'save' Indian sex workers from their wretched conditions of cultural backwardness, inferiority, and helplessness were doing so under the effect of a similar paradigm where the position of women was the key marker of 'civilization'. In doing so they aligned themselves with the larger colonial agenda, which Spivak characterizes as "white men (and women) saving brown women from brown men" (cited in Ghose 1998:63). Despite his recognition of women and lower castes, Gandhi's position reflects many of the problematic issues that prostitution engendered. In 1925 he strongly advised a group of prostitutes to sever their ties with the Congress party, including their memberships and donations, (Joardar 1983:60), thus further stigmatizing them for their deviation from the moral and behavioural conduct of 'good' women.

The representation of Indian sex workers was also affected by the debates surrounding trafficking in women and the "White slave trade" that emerged as issues of global importance during the first decades of the 20th century. Although the focus was on

young, White women and girls being coerced by foreign or immigrant men into sexual slavery which, in turn, was linked with threats to family well being and national honour (Doezema 2000:45), Indian prostitutes also figured in the dialogue. Like previous reform campaigns, they were largely construed as unwitting young women who were subject to 'barbaric' cultural traditions like the *Devadasi* system³⁰, child marriage, *sati*, and *purdah*. Following the International Conferences for the Suppression of White Slave Traffic (first held in 1902), governments in various Indian areas began introducing legislation to ban the traffic in women and girls for the purposes of prostitution. The 1923 Prostitution Act (amended in 1926 and 1927) was the first sex worker reform that made it illegal for a male, but not a female, to manage a brothel (Forbes 1996:184). A year later Sections 372 and 373 of the Indian Penal Code were changed and it was ruled that no girl below the age of 16 was to be used for immoral purposes (Raj 1993:79). Following the United Nation's adoption of the international Convention for the Suppression of the Traffic in Persons and of Exploitation of the Prostitution of Others, the first Suppression of Immoral Traffic in Women and Girls Act (SITA) was signed in India in 1956 (later amended in 1986).

Around the same time "rescue homes" were established for prostitutes and other destitute women in major cities to provide alternative economic training and moral/behavioural rehabilitation, often by Vigilance Associations. Gauri Banerjee's (1953) account *Sex Delinquent Women and Their Rehabilitation* reveals the abominable housing, dietary, medical, and training conditions in the three different types of "women's institutions": asylums, training centers, and homes (*Ibid.*:43,51). She argues that aside

³⁰ Another reason the *Devadasis* were mentioned in these debates because their unregulation reflected poorly on Britain's ability to control the Indian populous.

from the structural and financial constraints working against an adequate running of these places, the social attitudes of staff and society are more likely to impede their success. "This is not a question of punishment but of protection and rehabilitation of the sex delinquent. Therefore, it is the duty of the society to teach her to behave better so that she does not become a menace to herself as well as to the community " (*Ibid.*:42). The organizers of the centers did not appear to share the author's compassionate insight, however, as they generally put the women to work, provided nothing in the way of education or training, and offered no treatment for the head lice, malnutrition, and skin diseases that plagued many of the "inmates".³¹ They preferred to focus on trying to get the women married as a way to "settle her down owing to her passionate nature" (*Ibid.*:53), which was one of the primary sources of income for several homes. The practice of setting up trafficking networks through some homes was also reported (*Ibid.*:65), an ironic but not incredulous situation given the women's low social standing and lack of socio-economic options.

In the period immediately following independence there were few studies on sex work, with the exceptions of *Fallen Women* by Vidyadhar Agnihotri (1954) and *Prostitution in the City of Bombay and its Maleffects on the Society* by R.B.K. Jayakar (1955). Punekar and Rao's (1962) research on sex workers in Bombay remains one of the few detailed ethnographies on the subject, focusing particularly on the women's family background, motivation for entry, daily life conditions, and recommendations for prevention (see also Mathur and Gupta 1965).

³¹ The situation of certain staff members was equally problematic, however, as some were reduced to begging in order to feed themselves and to provide for other institutional expenses (64).

The 1970s were a more productive era of research, largely because of the international focus on women and development, especially after 1975 (International Year of Women). In 1974 the landmark publication *Towards Equality*, a report of the Committee on the Status of Women in India (GOI Dept. of Social Welfare), was released. Its critical discussion of the multiple factors that continue to work against the socio-economic, sexual, political, and religious equality of women, rural and urban, is a watershed document for the women's movement in India. A sub-section of the 4th Chapter (entitled "Some Special Problems") reviews the historical and current situation of prostitution and some of the contributing factors to sex work entry³² and regulation. Two main types of sex workers are identified, hereditary (e.g. *Devadasis*) and non-hereditary, which is further divided into professional (i.e. call girls) and non-professional (i.e. clandestine) groups (*Ibid.*:92-94). In defiance of the functional or 'prostitution as a necessary social evil' model, the feminist researchers of this document state that it must be seen as a form of exploitation, of women and girls by men, and of the poor by the rich. They suggest amending SITA, which was not very effective in stemming trafficking or prostitution activities due to several difficult requirements surrounding arrest, like the mandatory inclusion of a 'respectable female witness' and the de-centralization of sex work areas following its introduction (*Ibid.*:95). Additional recommendations include establishing counseling services for the women and their families, sending women to protective or rehabilitation homes instead of jail, and institutionalizing the girl children of prostitutes so they do not follow in their mother's footsteps.

³² The main ones being: (1) natural events such as death of father/mother/guardian/husband or relatives; (2) economic causes such as poverty and destitution; (3) domestic causes such as ill-treatment or neglect by parents, husband or relatives; (4) social causes such as kidnapping, seduction, deception, bad influence; (5) causes of physiological significance such as sexual urge, illegitimate pregnancy, etc.; and (6) causes related to mental disposition of attitudes such as ignorance, desire for easy life and moral values (93).

The socio-psychological study of call-girls in New Delhi by sociologist Promilla Kapur (1978) represents a critical turning point in the analysis of sex work in India because she goes beyond identifying the "push factors", and looks more closely at how they interact with the material, social, and sexual "pull factors" that make prostitution desirable. In doing so, she complicates the sex work canon that existed at the time, which tended to be concerned with the 'who is a prostitute and why' question, individual moral and sexual deviation, and the absence of agency in women and girls' decisions to become involved (see, for example, Pillai 1982). Biswanath Joardar's (1983, 1985) books on prostitution in northern Calcutta are other examples of comprehensive research that is attentive to developing a better understanding of how micro and macro issues connect in the personal lives of the women.

The emergence of HIV/AIDS and the re-emergence of international concerns regarding trafficking in women and children in the late 1980s-1990s sparked a new interest in research devoted to prostitution in India. While some of the more classic socio-economic profiles (Shankar 1999) and victimized "fallen women" studies (Raghuramaiah 1991) remain, a number are becoming increasingly critical in focus, concentrating on the impact of structural inequalities on the status and life experiences of women in prostitution (D'Cunha 1997; G.O.I. 1996; Nag 2001; Rajan 1996; Rozario 2000; Sinha 1999). Ethnographic research with women in different areas is also on the rise, which is essential to gain insight into the variation, as well as the similarities, of certain sex work conditions (APAC 1998; Asthana 1998; Bhattacharya and Senapati 1994; Rao *et al.* 1994; Verma 1999). Also crucial are the projects that highlight the complications surrounding prevention activities, especially those involving sex worker communities

(Asthana and Oosvogels 1996; Evans and Lambert 1997; Jana 1999; Jana *et al.* 1999; Jenkins and Rahman 2002; Jhaveri and Datta 2002; Point of View 1995; Pal *et al.* 1998). Not only does this body of work provide insight for other program planners, their difficulties with such things as sustained community participation and widespread condom use expose the gaping holes within our theoretical and 'on the ground' understanding of sex workers lives which, by extension, help to reformulate future programs in ways that more accurately reflect the women's experiences.

Despite this, neocolonial tropes regarding sex workers as vectors of disease continue to be seen in many academic works and in the popular media (e.g. posters, pamphlets). Take this quotation from S.P. Sinha (1999:25):

Public opinion sees the sex workers as the evil source of this sickness as it is connected solely with sex. The public is right up to a certain extent. Only they do not blame those men, on whom the sex business depends wholly and solely- the customers of all those girls. It's they-the clients, who bring the virus into their homes.

This passage contain dangerously incorrect information regarding HIV/AIDS etiology, with sex workers portrayed as portals of infection that are responsible for spreading disease to members of the unassuming household. The author argues for more focus on clients, but this is only important in relation to protecting their families (read wives³³) from diseased prostitutes. In this strain of academic discourse, prostitutes are critical to transmission, yet they are also made strangely invisible-in human terms-through their labels as "risk groups", "reservoirs of infection", and "bridge populations" (Pike 1999:3). In popular media and parlance STDs and AIDS are often referred to as "Bombay diseases", thereby supporting the idea of sex workers as the prime source of

³³ Which reflects the "national mother" vs. "global whore" dichotomy that has been at the heart of many international HIV/AIDS prevention campaigns (Booth 1998; Caravano 1991).

contagion. Equally relevant to these constructions is the way that AIDS is often associated with death (or "no cure"), which permeates local discourses and further entrenches the idea that prostitutes are dangerous, even deadly.

The *Devadasi* System: An Introduction

The *Devadasi* system is, in a real sense, a sacred cow within Indian culture. From time immemorial, *Devadasi* women have embodied significant cultural values and knowledge (i.e. sacredness of sex, dance and singing as worship) and yet their very enactment and possession of these things seems to single them out as somehow deviant and dangerous. Their ability to occupy definitive spaces at both the apex and margins of society can be attributed to several factors, firstly, the ways in which their history has been recorded, and by whom. From their initial appearance in mythology and classical texts (e.g. *Ramanyana, Vedas*), *Devadasis* were at once an anomaly and a prototype of feminine portrayals: they were set apart as wives of Gods and aligned with 'normal' women through their powers to weaken men through sexual intercourse³⁴. This is due, in part, to the ambivalent psycho-sexual relationship between mothers and sons, which is then transmitted into complex emotive feelings men have about the smothering/fearful yet desirous sexuality of grown women (Caldwell 1999:171; Carstairs 1999:172; Kakar 1978:93). However, a second point regarding *Devadasis'* duality is that it can also be seen as a function of myth and textual description. In that, their binary nature may have been

³⁴ Women are considered to have greater sexual desires than men, a cultural 'fact' established in many ancient writings. Part of this has to do with the abundance of blood thought to course through women's bodies (as evidenced by menstruation), along with fear of female sexuality and its related weakening of men (when semen is lost or 'swallowed' by the vagina).

essential for instructing fundamental cultural mores and values, to demonstrate what is 'good' and 'bad'.

Thirdly, this pattern of reified representation is also linked with the particular historical circumstances surrounding the (re)"discovery" of these depictions by foreign male scholars in the mid 19th century. The translation of certain 'lost' texts led to the unearthing of an invented 'Golden Age' (the Vedic period), wherein the presentation of different types of Indian women were homologized in the making of a mythic womanhood, one that reflected the high-caste experience (Chakravarti 1989:28). In partnership with this development was the use of women as emblems of tradition, a process, which, as Mani (1989) demonstrates, is much more about what constitutes tradition than what being a woman meant. A final complicating swatch in this already dense fabric of *Devadasi* (re)presentations is how their opposing descriptions played into the European imagination of 'Oriental' sexuality (backwards but bawdy) and prostitution, which underwent intense state regulation during the Colonial period. The titillating image of 'sacred prostitutes' differentiated them from common sex workers³⁵, a division that was further entrenched, albeit for different reasons, following the 1857 Mutiny when the British acknowledged the abominable rates of VD among their troops (and assigned blame to sex workers, including *Devadasis*). Thus, the forces of culture, textual reliance, sexual double standards, and colonial process have, over the years, worked to create and reproduce the phenomenon of the "divided *Devadasi*"; i.e. nun or prostitute.

This conceptual background is key because it sheds light on how and why these women, and the system to which they belong, have been presented in the ways they have.

³⁵ Which was critical for temple managers, staff, and the women's high caste patrons, whose economic income and political sensibility depended on the continued association of *Devadasis* with a cultural tradition that set them apart from common prostitutes (Raj 1993:49-50).

It is also important to the process of locating my position within the diffuse and sometimes confusing *Devadasi* research. The revival/reform debate dominates the literature (Datar 1992; Epp 1997; Shankar 1990; Srinivasan 1983, 1985; Tarachand 1991), and focuses on the various factors that influenced the use of the tradition for the means of either national pride (*Devadasi* as priestess or nun) or a desire to conform to the Empire's socio-moral and cultural standards (*Devadasi* as strumpet). While I am influenced by this body of work, there are also issues I find problematic about it: the largely historical (mainly the Medieval period) thrust, the overwhelming focus on reform, and the lack of attention to the perspectives of the women, much less girls, themselves. What does the contemporary *Devadasi* system look like? Are women's lives the same as girl's, if not how? Do *Devadasis* have intimate relationships despite the prohibition against marriage? Do they want to put a stop to their traditional system of sex work? What do they know about HIV/AIDS? To address these questions this thesis examines the topics of socialization into sex work and growing up, sexual and social relationships, and the impact of HIV/AIDS on the system and the participant's lives. I hope to present data that turns dimensions of the traditional "divided *Devadasi*" stereotype on its head, and in the process contribute to more comprehensive understandings of the system and the women today; the 'modern' *Devadasis* (Orr 2000:8).

definitions

Devadasis were women dedicated through marriage to different Gods and Goddesses, after which they became the wives or servants of the deities and performed various temple duties. These duties included cleaning devotional vessels, decorating shrines,

dancing for the deity and in festivals or important ceremonies, delivering prayers and food to gods, and offering of light; all of which were regarded as sacred forms of worship or *puja* (Hanna 1998; Kersenboom 1987; Orr 2000). As wives of deities, *Devadasis* never attained the socially and morally stigmatized status of widowhood³⁶, and this was a primary reason for their auspiciousness within Indian society (Kersenboom 1987; Marglin 1985a). Along with possessing ritually significant social positions many *Devadasis* learned to read and write, an opportunity not afforded to other women (Evans 1998; Hanna 1998:212). In addition, some women received large tracts of land and material wealth from admirers, from which they made significant donations to temples to ensure the continuation of particular ceremonies and upkeep of the building (Gaston 1982; Nair 1994; Orr 2000).

Another aspect of the *Devadasis*' roles within temple and ritual life involved providing sexual services to male temple attendants, priests, and men who could be regarded as patrons or clients. The idea that sexual acts performed in a sacred setting with a woman who embodies some form of divinity could ensure prosperity and fertility is often termed "sacred prostitution" (Datar 1992; Frazer 1957). This notion was originally used in references to the priestess and Goddess cults of the ancient Near East, but it has also been applied in the *Devadasi* context vis-à-vis the concepts of *prasada* and *shakti*. In Hindu religion, after offerings to the deity are made and distributed among worshippers they are transformed into *prasada*, items made sacred on account of their presentation to and presumed contact with the divine. It has been argued that giving a daughter to the

³⁶ Hindu tradition holds that a woman (and her conduct) is responsible for her husband's longevity, and if a man dies before his wife it is often interpreted as her fault. Thus marks the beginning of much hardship for a widow (desertion, severe social marginalization, death). Due to these severe cultural prohibitions, a woman is considered 'lucky' if she dies before her husband.

deities could make her a kind of *prasada* (Orr 2000:16) and therefore a channel to the God or divine power, including the creative and essential life-force associated with women called *shakti* (Tarachand 1991). Moreover, *kanyadan*, offering a virgin daughter to the deities, is consistent with Indian religious traditions of giving gifts and making sacrifices to appease Gods and Goddesses (Kinsely 1986:200); it is also one of the highest honours for a father for with this offer comes a recognition of the fulfillment of his *dharma* or religious duty (Kumari 1995:182).

This dimension of the *Devadasi* tradition is often viewed as part of a pan-Indian “temple prostitute” phenomenon. However, in many instances the women’s sexual agency has been romanticized (Datar 1992; Evans 1998; Orr 2000) and the focus on sex work as ritual exaggerated. While aspects of their sexual relations with men may have been influenced by beliefs similar to “sacred prostitution”, *Devadasis* were typically not allowed to refuse the sexual requests of men, especially Brahman priests or temple servants, because these services were considered part of their temple duties (Bradford 1983:315; Hanna 1998:212-213). Moreover, since their activities and functions varied according to region and historical period, ranging from temple donors, daughters or wives of Gods, part-time sex workers, ritual specialists, and dancers, all *Devadasis* cannot be understood as only “dancing girls” or “temple prostitutes”.

While sex work was not the *Devadasis*’ sole profession, historical, religious, political, and economic developments over the last several hundred years have produced a situation where more and more women were engaged in this aspect of ritual service. Orr’s (2000) careful analysis of temple inscriptions of *Devadasis*’ status and functions in medieval Tamil Nadu illustrates that before the political and temple administrative

changes at the end of the Chola period (A.D. 850-1300), most women were ritual functionaries, donated money and services to their 'hometown' temples, and few were solely sex workers. Under the "warrior kings" (A.D. 1300-1700), however, the religious systems that privileged and depended upon *Devadasis*' specialized temple duties were displaced by increasingly androcentric forms of worship and patronage, such that male temple functionaries took over many of their tasks. Also, as the patrons of temple activities, Kings assumed greater importance in directing the particular activities to be carried out by the women (Orr 2000:176-77). This was a decisive point in the passage of *Devadasis* from persons with agency and ritual significance to symbols of divine sexuality for the enjoyment of royalty, wealthy donors, and attendants who formed part of the politico-ritual temple structure. While this transition was not complete or instantaneous and the tradition remained important within religious worship and practice, the examples set by kings, priests, and wealthy landowners helped solidify connections between *Devadasis*, sex work, and sacred eroticism that are often assumed to be age-old features of the tradition.

origins

The *Devadasi* custom has links with other forms of traditional (some temple/court-based) sex work, and there is significant regional diversity of the system throughout South and Central India. In the diverse literature, which includes writing from 12th century travelers, pre-Colonial missionaries, male Indian reformers, and Western feminists, the term '*Devadasi*' is used in a wide array of contexts and areas of the country, accounting for much confusion. Two competing tendencies surrounding data presentation are at the crux

of this confusion, the first one being the way that regional versions of the *Devadasi* custom (which have their own terms) and other kinds of prostitution are both referred to as the '*Devadasi*' system. The second is that of super classification, where regional variants are held to be unique sub-systems of prostitution. This casts considerable uncertainty on assigning the 'correct' meaning to what one observes in the field. Are the '*Basavis*' (another term for *Devadasis*, see upcoming '*types*' subsection) of northern Karnataka *Devadasis* or are do they belong to another form of non- temple-based traditional sex work? If they are part of structurally different systems but also identify with the '*Devadasi*' custom, how to account for their distinctive characteristics while also respecting their ascribed self-identification with the larger tradition?

These questions have significance beyond establishing classificatory and ethnological clarity because of the ways that the '*Devadasi*' label is tied up with contemporary social reform movements and the HIV/AIDS discourse. In the face of economic disparity, beginning with the dedication ban and related drop in patrons in the early 1980s, many commercial and other traditional sex workers are calling themselves '*Devadasis*' to increase their opportunities for government and social assistance programs (e.g. micro credit, alternative economic training). This move overlaps with a development occurring within the field of HIV prevention and funding for work with prostitutes. Many such funding initiatives are from international donors, whose mandates can cause considerable difficulties. The general secretary of one *sangha* discussed this problem, saying "...there seems be pressure to have collectives and start lots of registered *sanghas* because it is 'fashionable' to have a registered collective." In northern Karnataka, the *sanghas* involved in HIV prevention are primarily made up of *Devadasis*, which makes sense given the

historically high concentration of these sex workers in this area³⁷. This may also reflect the 'cultural currency' of the '*Devadasi*' label, given the potential economic and social incentives behind belonging to this group of traditional sex workers.

My point in outlining the complexities surrounding the term '*Devadasi*' in the literature and in the socio-economic and political landscapes the women inhabit is to, firstly, extend some of the earlier observations regarding the various social positions and representations of *Devadasis* throughout time. The meanings surrounding women and the system to which they belong are again shifting, again in response to state social reform and disease discourse, and again through their own organizations (they had associations in the 19th and early 20th century). In doing so they expose the tensions the women must balance or work through in their process of self-identification: the 'weight of tradition' (i.e. disease vectors, fallen women) and the 'cultural currency' of the '*Devadasi*' tradition (sacred women, government support). Tradition here is a divided trope and, like the debates surrounding claims of 'authenticity', using it in tandem with a particular group (the *Devadasis* in this case) is a powerful tool for social mobilization and identity politics.

Secondly, this is also an attempt to provide a context within which the women's sometimes competing socio-linguistic alliances can be better understood. In *sangha* and research-related events "*Devadasi*" was heard frequently, and the women sometimes used this word or "sex worker" in interviews. However, among themselves '*sule*' or '*veysha*' (*Sanskrit* for prostitute) were used to refer to their 'prostitute' selves, while more affectionate terms like "*akka*", (older sister) or "auntie" were commonly heard when the

³⁷ Referred to as the "Devadasi belt", located on the border of northern Karnataka and southern Maharashtra. However, before the border changes in 1956, many of the *Devadasi* communities in this part of the state were part of the Bombay Presidency.

women referred to one another. Mixing kin and more formal associations may be analytically problematic, but it helps bring into focus their designations of themselves, as women embedded within families, communities, and their work.

motivating factors behind the system

The practice of dedicating women and girls to temples for the purposes of prostitution began in ancient times, most likely during the first Mesopotamian dynasty of Babylon around 2090 B.C. (Penzer 1924:23; cited in Sadasivan 1993:2). It later spread throughout many different cultures, predominantly those of the Middle East, Greek, Roman, Western Asia, and parts of Africa (Frazier 1922: 164-169). The conditions of dedication and social positions for these women varied considerably and some were forced into service for varying times, while others lived out opulent lives as wealthy and esteemed concubines. Following Shankar (1990:36-37), three main traits characterize temple prostitution during this early period, the first being the need of a male deity for concubines. Second, given the ties between female reproductive capacity and fertility in general, it follows that women in temples should assist in procreation endeavours. Lastly, the widespread importance of making sacrifices for the greater good led to the inclusion of offering women, especially virgins, to temples (and their male patrons).

As mentioned fertility, of both land and human populations, was often the impetus behind their connections with the temple. The sexual union of a temple woman with a deity (or her patrons) was seen as a secular replication of sacred propagation which, in turn, acted as a boon to help ensure crop growth and general well-being of the devotees. Another underlying factor behind temple dedication and sex work relates to cultural ideas

regarding sexuality, and its interconnectedness with spirituality and the pursuit of pleasure. These ideas are captured in Foucault's (1980:57) definition of *ars erotica*, when "truth is drawn from pleasure itself, understood as a practice and accumulated as experience...evaluated in terms of its intensity, its specific qualities, its duration, and its reverberations in the body and the soul." However, alluring and likely well-representative this conception of sexuality is, it should not be understood in isolation from the more shady realities affecting this practice. In that, women were often objectified and commodified through temple dedication in an attempt by men to regulate what was presumed to be their inherently voracious sexual appetites that threatened to suck dry the male seed (King 1994:30-31).

In India the system of temple prostitution is not recorded in the very ancient periods, but archaeological finds from the Indus Valley provide insight into the early beginnings of the institution. Considered by many to be part of the Mother-Goddess tradition, the famous "dancing girl" of the Mohenjo-daro civilization (c.2500 B.C.) is often cited as the oldest example of temple dancers (Sadasivan 1993:2-3; Shankar 1990:39). The small copper statuette is naked, except for a decorative necklace and bangles, which line the length of her left arm and are seen above the elbow and at the wrist on her right arm. Her left leg is barely lifted and slightly bent at the knee, and her left arm is bent and rests just above the same leg.³⁸ (Cawthorne 1997:15). Other precursors to the *Devadasi* system are the phallic/fertility rites, in which a maiden girl was dedicated to an idol of Siva *linga* (phallus) in a ritualized marriage (Dikshit 1973:32; cited in Sadasivan 1993:3). Tantric cults that worshipped the union of the *phallus* and the

³⁸ A rather lax dance position. This, in combination with her closed eyes, slightly raised chin, and the placement of her right hand on or just behind her hip give the figurine a very composed look.

yonī (female sex organ) also influenced the tradition of temple prostitution, especially their veneration of sexual union and the central role played by the creative and omnipotent female force *śakti*. The sacredness of the *yonī* receives special attention under this custom and it, along with menstrual and sexual fluids, was worshipped as a transmission-point for subtle forces, the gateway to cosmic mysteries, and a symbol of the Goddess (Mookerjee 1998:30).

The earliest reference to *Devadasis* is from the Ashoka era (273-232 B.C.), in a cave inscription at Ramagarh in the Vindya hills, approximately 160 miles south of Varanasi ³⁹(or Banaras/Benares). The first part of the inscription is in the form of a verse:

Poets, leaders of lovers:
Light up the hearts which are heavy with passion,
She who rides on a seesaw,
The object of jest and blame,
How can she have fallen so deep in love as this?"

The following two lines of prose follow:

The excellent youngman Devadinna, the painter, loved 'Sutanuka' the slave-girl of the god (Archaeological Survey of India Annual Reports 1903-04: 122; cited in Basham 1954:185).

While many of the founding texts mention courtesans, dancers, and prostitutes, the paucity of specific references to the *Devadasi* system in the early texts likely reflects its rarity during early and classical times. It could, however, be a function of linguistic preference because of the prevalence of the term *veysha*, used to refer to prostitutes, including those employed -not necessarily dedicated- at temples (Parasher and Naik 1986: 64-65). The first record of girls being dedicated to temples is from a Tamil inscription during the reign of the Chola king, Rajaraja The Great, who ascended the

³⁹ Interestingly, this is in the northern state of Uttar Pradesh, not a southern territory where the system has flourished for a much longer period of time.

throne in 985 A.D. The source indicates that in 1004 A.D. the main temple at Tanjore had 400 "tali-cheri-pendugal" ("women of the temple") attached to it (Shakar 1990:53). The Medieval Chola period (900-1300 A.D.), for a number of complex socio-economic, administrative, and political reasons outlined in the section below, is when the *Devadasi* system was at its height.

To summarize, there are a number of different and sometimes interconnected factors that led to the emergence of the *Devadasi* system. The original influence of Mother-Goddess worship, along with *shakti* cults and *phallic* worship, upheld and extended pre-historic cultural traditions that venerated female fertility. Similarly, tantric customs also honoured women's reproductive capacity, and their intense devotion to the sexual powers of the *yonis*, and male-female union, transferred intercourse to a higher spiritual plane. The ways that certain tenets of this system were imbued in classical forms of Indian dance and dramatic performance is also central (see Kersenboom 1987:6-16). Gupta (1998:180) argues that through dance they were able to integrate the 'erotic and maternal'⁴⁰ feminine aspects in a single image, *Devadasis* performed a "tantric" function within Hindu society. In that, their dancing allowed them to celebrate the 'dark' side of female sexuality, the erotic, while performing culturally validated social roles.

Certain religious traditions also played crucial roles, namely the offering of a sacrifice in exchange for a religious boon. The ties between fertility, sexuality, along with servitude and regulation of female sexuality, were embodied in sacrifices or sales of young girls to temples. The role of mythology is also relevant for, as outlined in the first section of this chapter, celestial courtesans like the *apsaras* provided examples for earthly rulers to replicate with temple-women and prostitutes in their courts. Additional

⁴⁰ Versus the split between eroticism and fertility (O'Flaherty 1980:248).

considerations include the process of Sanscritization, whereby local, often lower (and in the Southern case, matriarchal) caste traditions are superseded by heterodox religious authorities (i.e. Brahmins) who corrupt the customs to ensure spiritual, socio-economic, political, and not uncommonly, sexual supremacy (Shankar 1990: 65). Tarachand (1991:21) offers another important push-pull factor, that of political rule and/or military service. As entertainers prostitutes were essential to many campaigns, yet in the wake of a community's loss of men in battle the women left behind were sometimes left with no option but to take up sex work.

overview of the development of the system

Most accounts of the *Devadasi* system refer to its 'rise and fall', a characterization that belies the many internal developments and factors affecting its organization and place within Hindu society over time. This sub-section provides an overview of the system, focusing on the Chola period, which is the most well-documented phase in the history of *Devadasis*. This era is also when the system flourished and underwent significant socio-economic, political, and religious changes, many of which are glossed over by writers who focus, instead, on the general decline of the tradition following these years. Central to this body of work is the moral stumble and fall of individual *Devadasi* women, a classic example of 'blaming the victim'. This leaves the host of micro and macro issues impacting the development of the system unexamined, and further entrenches the 'Divided *Devadasi*' image: once sacred but now a strumpet. Countering this approach with data that illustrates the impact of an array of forces on the system is important to the endeavour of writing against dominant cultural representations. It also lays some of the

groundwork for subsequent sections and chapters, in which I aim to demonstrate the interplay between local and larger socio-economic systems on its effect on contemporary practices and in the lives of *Devadasi* women and girls.

The lack of inscriptions, monuments, and historic literature describing *Devadasis* prior to the Medieval (500-900 A.D.) and Chola periods (900-1300 A.D.) severely limits an understanding of the make-up of the system and the roles of the women involved. What is known is that they paid taxes to the temple during the 3-4 century B.C, as recorded by Kautilya in the *Arthashastra* (Tarachand 1991:13). This is not unique to *Devadasis*, however, as other groups of prostitutes like the *Ganikas* had the same requirements to the state. The system was likely operating in some form during the gap in recorded data, but for numerous reasons outlined below it did not expand, and did not receive much written attention, until several centuries later.

It is generally accepted that the system began in South India around the 6th century, during the Gupta-early Medieval Period (Dasgupta 2000:155; Tarachand 1991:12). At this time the region was divided largely according to geography, the vast plateau areas enclosed by mountains along the coasts of the western Deccans, on the one hand, and the fertile plains south of Madras in Tamil-Nadu, on the other (Thapar 1966:167-168). Three major kingdoms fought for supremacy during this era, the Chalukyas of Badami, the Pallavas of Kanchipuram, and the Pandyas of Madurai (*Ibid.*:168). The military, educational, and artistic contributions from this era of rule were significant, but equally vital were the changes that took place in the sale of land and the general economic organization, which was moving towards feudalism under the Pallavas (A.K. Singh 1990:33). The large-scale transfer of lands to Brahmins, temples, and state

officers coincided with a decline in trade and commerce, the disappearance of coins, and the decay of urban centers (Ali 2000:168; Ramaswamy 1997:119-120; A.K. Singh *Ibid.*:33; Thapur 1966:176). As a result, villages emerged as the new economic, political, and religious centers, and their influence expanded rapidly during the Chola⁴¹ reign. Within the growing rural infrastructure, temples were particularly central to royal power and spiritual influence.

Related to the rise of temple importance was the populist *bhakti* movement, which emerged during the 7th-12th centuries. From the root *bhaj* ("to serve, to share"), *bhakti* stressed the importance of loyalty and communality with the deities and among supporters. Also highlighted is the idea of mutuality between the Gods and devotees, and the metaphysical notion and spiritual objective of transcendence of material, gender, and caste constraints. Building on earlier *Agamic*⁴² traditions that stressed the importance and sacredness of reciting hymns, singing in praise of Gods, and dancing in front of their images, the *bhakti* movement popularized ritualistic worship (Srinivasan 1993:28-30). This created much religious activity and directly promoted temple building and the employment of large numbers of *Devadasis*, who, in turn, were feature attractions for pilgrims and visitors alike (Reddy 2000:167; A.K. Singh 1990:41; see Parasher and Naik 1986:72-74 for Karnataka). These women were crucial components of the new temple-court system, and the many donations of their earnings back to the temple provided huge sums of revenue and land for the religious and political administration (Orr 2000).

⁴¹ Which, in its zenith (985-1279 A.D.) included all of South India and parts of Indo-China, Malay Archipelago, Indonesia, Cambodia, Burma, and Ceylong (Kersenboom 1987:24).

⁴² *Agamas* were composed for *Sudras* and women who were not qualified for studying *Vedas*, who thus had no competence in performing rituals (Srinivasan 1993:28).

Another factor to consider is how the new Saivas and Vaisnavas religious orders began to rival earlier religious traditions of Jainism and Buddhisms, and which depended on great deal on state and private patronage (A.K. Sing 1990:39-40) to entice new devotees to either sect. This piece of the overall development of the *Devadasi* system is important because it signals the penetration of dominant Hindu faith in heterodox Dravidian cults, an example of Sanscritization (Ramaswamy 1997:115). This is key for several political, caste-related, and social reasons, but for the purposes of this sub-section, its impact on constructions of power, pleasure, and kingship are most relevant. As Ali (2000:169) explains, the Saiva and Vaisnava orders made the logics of courtly artifice and practice integral components of the liturgical temple practices. The temple became seen as a royal household and daily rituals focused on honouring the deity, traditions which were carried over from both earlier *Agamic* and courtly traditions. Following this, the daily pleasures elaborated on in the *Kama Sutra* then became the services performed to the deity, who was, from the Chola period on, the king (Ibid.:170; Dasgupta 2000:158). This intermingling of court and temple duties led to a proliferation of certain kinds of *Devadasi* roles, namely their positions as singers, dancers, and prostitutes. It was also a time marked by a marginalization of other duties, such as religious functionaries and donors, because of the increasingly prominent role played by male temple servants (Orr 2000: Chapters 2 and 3, esp.68, 132-133).

The economic benefits of having scores of *Devadasis* dancing and providing other services were enormous, and many new festivals, processions, music concerts, dance performances, and hymn recitals were introduced to capitalize on their drawing power (Srinivasan 1990:36-38). This success, along with opportunities for artistic training and

esteemed religious service, motivated even more dedications during this period and some temples had hundreds of women attached to them (Reddy 2000:168; A.K. Singh 1990:35). However, with greater numbers came new forms of state regulation over the women's qualifications, service conditions, duties, and rewards. One problem surrounded dedication, and although some came forward voluntarily, many were sold into servitude, some chose the life to alleviate poverty within their families (famines, drought, debt), and others joined the ranks to avoid dowry or because they were deserted (Reddy 2000:171-172). Succession, which contrary to Orr's (2000: 150-153,172) strong arguments, appears to be hereditary (Kersenboom 1987: 26; Reddy 2000:175; A.K. Singh 1990: 38; Srinivasan 1993:71), also caused internal conflicts. The rising numbers of 'illicit' relations between *Devadasis* and their patrons/clients made discerning patriliney and further recruitment very difficult, and this made adoption necessary, which had other implications for family genealogy and social status (Srinivasan 1993:106-107). The hierarchical structure that developed in temple administration and among the ranks of different *Devadasis* (e.g. part and full-time, dancing girls, musicians, menial services) also caused problems linked with payment, privilege, and duty differentials (Kersenboom 1987: 28; *Ibid.*:109).

The increasingly complex organization of the *Devadasi* custom weakened it to a certain extent, and when the Muslims sacked Delhi in 1318 A.D. and then invaded the South, the tradition and the governing system upon which it depended lost considerable stature. During this dark time many temples were looted and destroyed, and the very survival of Hindu culture hung in the balance. For their part, *Devadasis* lost their patrons and their positions within their artistic communities, and many died or migrated

elsewhere in search of employment (Sadasivan 1993:112,115). A number were even captured and forced to marry because of the initial Muslim disdain for prostitution, and thousands more were captured along with musicians to serve the Sultans and palace guests (*Ibid.*:113). The difficult conditions encountered during this period engendered yet another form of the *Devadasi* system, one defined mainly in terms of secular pleasure and royal patronage for foreign rulers. However, less than 20 years later the ever-mutable custom and resilient *Devadasis* would again regain their place within court and temples under the powerful Vijayanagara Empire.

The first ruler of the new independent Hindu kingdom, Harihara I, was crowned in 1336 A.D. at the capital of Vijayanagar ("City of Victory")⁴³, situated on the southern bank of the Tungabhadra river (Basham 1964:76; Kersenboom 1987:31). This was a dynamic and productive period in South Indian history, in part, because it was borne out of a fierce desire to protect Hindu culture. This resulted in a very self-conscious brand of Hinduism, which engendered the production of unique artistic, philosophical, architectural, and political accomplishments. Particularly important is the way that Vijayanagar rulers drew upon the assets of the different regions (i.e. Kerala, Karnataka, Andhra Pradesh, Tamil Nadu), such as maritime contacts, music and dance, and a renewed sense of North-South cultural polarization to foster and maintain a distinctive South Indian cultural identity (Kersenboom 1987:34-35).

As a "buffer state" designed to protect the South from Northern foreign invaders, Vijayanagar rulers assumed a cultic status that built upon and ingrained earlier equations of King with God. Their efforts to reinvigorate the kingdom were aided through the construction of many new temples, in which *Devadasis* danced, sang, waved the lamp,

⁴³ Which is today near the city of Hampi, in Bellary district in north-central Karnataka).

and through other new rituals (i.e. carrying the sacred pot, morning and night worship) helped remove all inauspicious forces from threatening the deity and the King (*Ibid.*:36; Srinivasan 1993:119,125). Several kinds of dancers are mentioned in historical records, and a description of them helps illuminate the nature of their service and the typologies that existed at the time. Writing sometime after 1509 A.D., Paes describes the *Devadasis* of a Ganesha temple:

They feed the idol every day, for they say that he eats; and when he eats women dance before him who belong to that pagoda...and all girls born of these women belong to the temple. These women are of loose character, and live in the best streets that there are in the city; it is the same in all their cities, their streets have the best rows of houses. They are very much esteemed, and are classed amongst those honoured ones who are the mistresses of the captains; any respectable man may go to their houses without any blame attaching there-to (Sewall 1900 Ch.I: 77; cited in Kersenboom 1987:36).

The palace-dancers are introduced as somewhat different in dress and status:

The women begin to dance, while some of them place themselves in the circular galleries that I have said were (erected) at their gate of entrance. Who can fitly describe to you the great riches these women carry on their persons?- collars of gold with so many diamonds and rubies and pearls, bracelets also on their arms and on their upper arms, girdles below, and of necessity anklets on the feet (...) there are women among them who have lands that have been given to them, and litters, and so many maid-servants that one cannot number all their things (Sewall 1900 Ch.I: 10, 50; cited in Kersenboom 1987:37).

Along with dancing and entertaining temple and court staff and visitors, *Devadasis* during this period contributed substantial income tax to the state, which was used to pay for the upkeep of the police force (Tarachand 1991:14). The women also performed community service (e.g. feeding the poor), endowed money for public works, presented many costly gifts to the Gods, and helped with the costs of temple repair and construction (Sadisavasan 1993:128-129). A more extreme display of dedication to temple and state service is when the *Devadasi* Acharyasuktimuktavali enticed and killed

a Muslim Chief by pushing him down a set of temple stairs, and then committed suicide by falling from a temple tower (*Ibid.*: 129). On account of her remarkable actions, her descendants enjoyed certain temple privileges until 1947! (*Ibid.*:129).

Following the defeat of the Vijayanagara Empire in 1565 by Muslim forces the border of Hindu territory slipped further southwards and the Nayaks, who ruled from around 1565-1800 A.D., founded several new kingdoms (e.g. Madurai, Tanjore) that continued in their attempts to protecting Hindu culture (Kersenboom 1987:38). Tanjore courts were particularly supportive of performing arts, music, dancing, and intellectual pursuits, making them hubs of academic and cultural activity. This period also brought about an even more pronounced fusion of temple and court traditions, one that continued until its annexation by the British in 1856. The end of this period brought many changes for *Devadasis*, who were often shifted from one temple to another and, for the first time, performed outside of temple premises and began servicing the general public in large numbers (Srinivasan 1993:140, 144). Severe disciplinary measures were instigated by royal and court orders against any woman who did not perform her assigned duty, and many were on the brink of poverty (*Ibid.*: 140)⁴⁴. The loss of royal patronage signaled a decisive turn in the system and women, along with other temple/court employees, were forced to try and eke out a living through their artistic and, in many cases, sexual trade.

Most sources present the *Devadasi* custom at this juncture through idioms of decay and disappearance, exploitation and extinction, which were common responses given by academics (mainly men) when I described my project. But it did not die, instead the system and women belonging to it had to adapt to increasingly difficult economic,

⁴⁴ The following proverb captures their difficult position: "the devadasi who (formerly) detested the rice of the temple, (now) turns a somersault to get a poor helping of rice" (Kersenboom 1987:48).

social, religious, and political surroundings in which their spiritually validated role as wives of the God-King was diminished. In the 19th and 20th centuries, some secured patrons in the Wodeyar Kings of Mysore, who supported instruction and performances in the special dance form possessed by *Devadasis*, *bharatnatyam* (Shankar 1990:62). In earlier times, many found work as dancers and prostitutes in what were termed "nautch parties" by the British, from the Hindi term "*nat*", meaning 'dance'. In 1754 Kindersley wrote that whenever any Indian gentleman had a mind to compliment a European, he treated him to a *nautch* (Kindersley 1777:231; cited in Joardar 1983:52). *Nautch* parties were in vogue for new arrivals to India, men and women, and they quickly became tools through which wealthy Europeans could gain social prestige. However, subsequent social and political developments decades later, namely the Mutiny of 1857, widespread social reform movements, and the Contagious Diseases Acts, succeeded in presenting *nautch* parties and "dancing girls" through the lens of moral degeneration and abominable sexual tradition. This is yet another example of the hybridization or confusion of *Devadasis* with other forms of prostitution, because although many sex workers were not dancing girls, all *nautch* or dancing girls were treated as prostitutes (Thurston and Rangachari 1909:127).

types

As mentioned, the *Devadasi* custom is one among several forms of traditional sex work in India. The system did not flourish in the North because of the Muslim presence, however, several castes and tribes specialized in dancing, singing, and sex work. *Patar*⁴⁵

⁴⁵ *Patur*, *Paturia* from the Sanscrit "*patra*", denoting an actor. The term *Tawaif* was used to refer to Muslim girls who practiced singing, dancing, and sex work in this area.

girls were married to a pipal tree and then commenced their careers as prostitutes (Crooke 1896:VI.I 245; cited in Shankar 1990:44). Girls referred to as *Gandharbs*, from the Sanscrit term *Gandharvas* for the celestial musicians who played at Indra's court, were dancing girls who went through similar ceremonies en route to entering a life of prostitution (Shankar 1990:44). Northern tribal groups like the *Bedia* (*Bediyas*), *Rajnats* (*Nats*), *Dommaras*, and *Bancharas* also practiced singing, dancing, acrobatics, and prostitution, and many continue to do so today (Giri 1999:41-48).

Owing to the more removed location and different regional military and artistic traditions, the *Devadasi* system was well-established in Central India. In Maharashtra they were called *Murlis*, *Bhagtan*, or *Devlis* (Giri 1999: 32; Patil 1975:380; Shankar 1990:45-46), but their different characteristics present challenges to traditional notions of what a '*Devadasi*' was/is. For instance, *Murlis* are described as being dedicated to God Khandoba (an incarnation of Shiva) as children, being mainly from lower castes, and after their marriage to the same God at puberty they begin prostitution (Giri 1999:40). As the title of 'wives of holy men' infers, *Bhagtanis* had the rather unique distinction of actually being married (at puberty) to a *Sahdu* (holy man) or a picture of Lord Ganesh⁴⁶ before starting sex work (Patil 1975:380). A special feature among the *Devlis* (also called *Bhavins* or *Naikins*, mistress or procuress) is that they traced their inheritance from community chiefs (Savantavadi or Malvan) and an out-going *Devli* was allowed to choose two or three of her daughters to succeed her (Chakraborty 2000:26; *Ibid.*:380). Another account from the 12-13th century by the Chinese traveler Chan-Ju-Kwa describes over 20,000 'dancing girls' living in a huge Buddhist complex consisting of over 4000

⁴⁶ The elephant-headed son of Shiva and Parvati who helps remove obstacles and brings good fortune.

temple buildings in present-day Gujarat, where they sang twice a day and offered flowers (Shankar 1990:45).

Additional variations are found in different parts of Central India, beginning with the *Devadasis* of Puri, a famous sacred pilgrimage site dedicated to the God Jagannatha. From Marglin's (1985) documentation of contemporary (1975-1981) *Devadasi* rituals, sexuality, and kinship, most women here conform to the more 'traditional' definition; i.e. temple dancers, singers, and concubines of the King (or one man). Another institution is the *Bogams* of Andhra Pradesh, who are called *Sani* or *Nayaka* if Hindu and *Jan* or *Nakan* if Muslim (Giri 1999:39; Shankar 1990:49-50). They were attached to Shiva and Vishnu temples and held service positions as singers, dancers, and prostitutes and had different initiation ceremonies, with *Sanis* being married to an idol of Krishna and *Jans* to a dagger (Giri 1999:40; Shankar 1990:50). *Jogtins* or *Jogins*, who marry a God before puberty and enter sex work upon menarche, along with performing public dances in religious occasions, are also found in this state (Giri 1999:39). On this group of women Jogan Shankar, author of one of the better contemporary ethnographies of the *Devadasi* system in Karnataka, says:

These Bhavins, Murlis, and Jogtins and others seem to be considered a lower order of being than the devadasis or the nautch-girls; but, under whatever name these women pass and however, much the details of the customs among them may differ, the principle is the same in all, immorality under the shelter of religion and custom (1990:51).

His description reflects the problematics of presentation that surround this issue. Although he includes different variants under the heading of "Devadasi Cult Central India" (45-52), they are separated and ordered hierarchically in the above section. It also

captures the dominant opinion of these women within academic and popular circles: same sin different garb.

The custom flourished for a longer period of time in the South, and it is not surprising to find a number of regional variants here too, including the *Bhavins* in Goa, *Basavis* in Karnataka, *Maharis* in Kerala, and *Thevardiyers* in Tamil Nadu (Bhani 1981/1982: 5-6; Giri 1991:33; Goswami 2000: 48; Patil 1975:380). However, there are still other divisions within the category of '*Devadasi*' that do not conform to any particular region. Many historical works cite "seven types" of women belonging to the tradition (often thought to be a special caste) are mentioned, most of which relate to the system as it existed in the early days (c. 3rd Century B.C.-6th Century A.D.). They are: 1) *Datta*- one who gives herself as a gift to the temple; 2)- *Bikrita*- one who sells herself for the same purpose; 3)*Bhritya*- one who offers herself as a temple servant for the prosperity of her family; 4) *Bhakta*- one who joins a temple out of strong devotion to the deity; 5) *Hrita*- one who is enticed away and is presented to the temple; 6)- *Alankara*- one who, being well trained in her profession and profusely decked, is presented to a temple by kings and others; and 7)- *Rudraganika* or *Gopika*- one who receives regular wages from a temple, and is employed to sing and dance in the temple at the time of worship (Henriques 1962:180-181; Patil 1975:380; Thurston and Rangachari 1909:125). Early historians also identified left (*Idangai*) and right-hand (*Valangai*) divisions of what was considered a "dancing girl caste" (Thurston and Rangachari 1909:128).

Present-day Karnataka is home to another kind of *Devadasis*, the *Basavi*, a female form of the term *basava* that refers to the "breeding bull" (or *nandi*-the bull of Shiva), worshipped widely throughout the area (Parasher and Naik 1986:69). The connotations

surrounding *Basavis* draw on the powerful associations between the breeding bull and sexual potency, traits typically associated with these women (Bradford 1983:313; Mahale 1986: 125; Tarachand 1991:14). This term is commonly used today, but did not appear in inscriptions until the 9th century. "*Sule*" ("prostitute"), "*patra*" (used to describe dancing girls, e.g. *sule patra*), and *bhoga* (Sanskrit for "enjoyment" or sexual pleasure, also attached to *sule*) were more frequent (Parasher and Naik 1986:65,68,69). The earliest inscriptions mentioning temple girls in this region are between 730-795 A.D. from Pattakakal in Bijapur district, and their numbers rise from the 11-13th centuries (*Ibid.*:66)⁴⁷. Like many other types of *Devadasis*, their duties included singing, dancing (which involved intensive training), and prostitution (*Ibid.*:76). Similarly, they were dedicated to a God or inanimate object (i.e. dagger, sword, drums) through a marriage ceremony, and sometimes they were branded with either a trident or shell, depending if they belonged to the Shiva or Vishnu tradition, respectively (Mahale 1986:126). It has been suggested that this particular custom grew out of a tradition among the Boyas and other castes of providing sexual and medical services for traveling soldiers (Henriques 1962:183; Mahale 1986:127; Thurston and Ranghachari 1909:133).

Accompanying most discussions of *Basavis* are descriptions of different types, and the other forms of sex work and/or religious service associated with this tradition. Patil (1975:381-382) mentions four types: *Garuda*, *Linga*, *Bala*, *Batla*, Tarachand (1991:15-16) cites 7: *Gudi*, *Jati*, *Balagada*, *Lingada*, *Nandikola*, *Divatige*, and *Yade*, and Bhani (1981/82:6) lists five kinds of *Basavis*: *Gudi*, *Mane*, *Balagada*, *Jati*, and *Beedi*. The distinctions between these forms are too numerous to mention, but commonly

⁴⁷ The first mention of the term *Devadasi* in Karnataka came later, in 1113 A.D. at Alanahalli (Shankar 1990:59).

revolve around services performed, family motivations, dedication, and caste. *Jogappas* are men who have, through the power of the popular Kanataka Goddess Yellamma become 'sacred women'. They wear long hair, saree, jewelry, change their names from male to female, and serve the Goddess by dancing, playing musical instruments, and some do sex work (Assayag 1989: 359; Bradford 1983: 311-312). *Jogammas* are female ascetics who often dress like men and may take up spiritual devotion to the Goddess later in life (Bradford 1983:317), or they may have been dedicated to the deity at a young age for the purposes of prostitution (Assayag 1989:362). Then there are the *Jogatis*⁴⁸, women who renounce the world in favour of a spiritual existence and who may also act as oracles and preside over religious functions (Bhani 1981/82; Patil 1975:382). Two sub-types of *Jogatis* are also given: *mangalarati*, *muttukatida* (Patil 1977:31).

My reason for laying out the multiplicity of traditional sex work and regional versions of the *Devadasi* system is to demonstrate the embeddedness of prostitution within the Indian context, and the considerable fluidity (and confusion) that exists within the literature dealing with '*Devadasis*' and other systems of prostitution. The range of terms and attendant characteristics also shed light on some of the factors behind dedication (forced or voluntary), terms of temple service (singer/dancer/prostitute/functionary/slave) cultural values pertaining to worship and sex (dance as *puja* and the allure of unmarried women to male pilgrims), and the socio-economic and political context in which these women and girls lived.

⁴⁸ Derived from the Sanscrit term "*yogi*", meaning an enlightened person in the pursuit of knowledge who has renounced worldly pleasures and devoted the rest of his or her life to the attainment of *moksha* (liberation)

Discussion

This review of sex work literature has demonstrated the multiple constructions of and socio-economic, cultural, and political roles for sex workers within Indian society over the centuries. In early mythology, these women were often described in relation to the twin themes of desire and destruction (seduction = loss of male power), and were assigned a functional role in society that related to (lower) female caste position and unregulated male sexuality. Courtesans and *ganikas* had important political, socio-economic, and educational status between the 4th and 2nd century B.C., when they were organized into guilds, worked closely with and were trained by royalty, and contributed substantially to the state revenue. However, as detailed in the *Kama Sutra*, sex workers also faced considerable hardships in their personal relationships and in establishing a respectable position for themselves in a society that had decidedly mixed feelings about their occupation. The following Mughal era began as a time of severe regulation and attempted abolition of the sex industry, but these efforts soon fell by the wayside and prostitution flourished.

Data on the influence of the British illustrated how the tensions between moral purity and rule, backwardness and dangerous traditions, were articulated through the colonial regulation of prostitution. During this time the construction of sex workers went through a crucial transition, and they went from being seen as part of tolerated and exoticized traditions to being viewed as potential saboteurs of the empire through the spread of VD. While many of these ideas carried over into the early 20th century, the many social reform movements of this era led to more concerted efforts on promoting moral education and training for some of the women. The nationalists' use of women as

symbols of 'Mother India', along with the global "slave trade" discourse that revolved around issues of victimization and sex work as mark of 'backwardness', were powerful tools used to support the education and rehabilitation campaigns launched at this time.

The post-independence period has been the most productive for in-depth research dealing with sex workers and the many intertwined socio-economic, gender, and cultural conditions that shape their lives. Much of the early work during this time concentrated on the psychological make-up of 'the prostitute' (which was in line with many Western research projects), especially sex work entry, family background, brothel conditions, and re-introduction into mainstream society. Owing largely to international and local responses to the issues of development and the women's movement, the mid-1970s-1980s sparked a new phase of research that probed more deeply into the women's work situations and the interplay between micro-macro forces affecting prostitution. The advent of HIV/AIDS signals another era of sex work research, one that has several complicating features. Many researchers are deeply committed to further developing our understanding of the effects of social, economic, sexual, age, religious, cultural, and political inequalities on sex work organization and the women involved. Yet, some appear to be concerned with resurrecting the linkages between sex work as a source of contagion and a threat to national health or survival that were so prominent during the colonial era, perspectives which are often supported by popular media and discourse.

The next section of Chapter 3 examined the specific case of *Devadasi* sex workers, focusing on definitions, types, origin, overview of the system, and legal reform. One purpose of this section was to try and clarify the confusing literature dealing with the issue, which runs from equating regional variants with the general *Devadasi* custom to

super-classification of local systems as unique and distinct from the 'mother' tradition. Deciphering who and what is under investigation is even more conflicted when one includes how the women and girls identify themselves, which is being affected by factors like the modern reform movement and HIV/AIDS.

Owing to the greater state/social support programs afforded to *Devadasis*, many women in Karnataka who appear to fall under the local *Basavis* tradition are claiming *Devadasi* status. In common parlance, however, they never refer to themselves as *Devadasis*, preferring the more generic terms *sule* or *veysha*. Yet the following quotation from CSW and *Devadasis* at a BIRDS workshop sheds light on the difference some make between *Devadasi* and *Basavis*. "*Devadasi* is a tradition, but *Basavis* just like that, she can do sex work with any person...worship and if are problems they offer one girl to the God...live like sex workers". So, while the question "will the 'real' *Devadasis* stand up?" seems appropriate, as I argued, it may be more crucial to identify the many different factors at play in this contemporary process of identity politics. It is by locating the everyday strategies and mutable constructions of self and community used by the women and girls, not (only) seeing how they fit or fall short of official classifications, that the emic modes and components of identification can be better understood.

CHAPTER 4- THE ORGANIZATION OF SEX WORK IN RURAL KARNATAKA

Many rural village women involved in multi-partner sex are associated with pimps and other 'managers'. These activities are much less organized in rural areas compared to the urban environments. More needs to be known about the role of pimps, 'fixers', and others in the rural commercial sex system and 'informal' sexual activity in rural areas (Pelto 2000:126).

Introduction

Aside from descriptions of certain forms of traditional prostitution outlined above, the basic anatomy of sex work in rural India is not well-documented. These data are crucial to uncover and track the various factors affecting HIV transmission patterns between rural and urban and intra-rural areas. They also shed light on how HIV/AIDS penetrates the socio-emotional, economic, sexual, cultural, gender, religious, and political fabric of individual lives, family experiences, and community organization. In the case of the *Devadasi* custom, much has been written about the impact of legal and social reform, but comparatively little is known about the inner workings of the system today and its ties with some of the macro forces driving social change, including social reform, HIV, and collectivization.

An outcome of the paucity of information about the contemporary situation is that several "core" tenets of the system are assumed to operate as they have for hundreds of years. Three such tenets form part of Orr's (2000:172) description of the "modern *Devadasi*", they include hereditary eligibility (matrilineal), professional skill, and temple dedication. From a survey of the literature, I would add: the system as a response to no male heir, one girl is dedicated per household (usually the oldest), dedication occurs during childhood, and the women are not allowed to marry. Challenging the notion that

these are unchanging facets is central to dismantling particular constructions of 'Oriental' culture and sexuality that reinforce ideas about the *Devadasi* system as somehow fixed, but also fallen. This is not an exercise in 'saving' the 'dancer' or 'priestess' part of the 'divided *Devadasi*', but in showing the complexity of individual women and girl's lives and how they are connected with larger socio-economic, religious, culture, gender, sexual, and disease forces.

Tracing these complexities begins with a description of the basic landscape they inhabit, how sex work is organized. This chapter draws on data collected during each research trip, mainly the first and third as they were the most productive. The focus is largely on home-based *Devadasis* living in rural areas of northern Karnataka, which includes small villages and larger rural centers. Information regarding the situation of prostitution in small-medium cities is also included for comparison, and because many women and girls criss-cross rural and urban locales during their careers. It begins with a description of the participant's age, where they were born and raised, caste, and family deity. More detailed information is then given on their family make-up and sex work entry. I then move to sex work typology, geography, migration, and mapping. Social networks, and earnings are discussed next, followed by HIV, STDs, health care. Chapter Four concludes with a presentation of life-histories, four *Devadasis* and four commercial sex workers, and a brief discussion of the different conditions affecting these prostitute women and girls working in rural India.

Age, Born and Raised, Caste, Family Deity

The sex workers range in age from 14-40 years, with a mean age of 23.5. *Devadasis* enter the trade young because their initiation in the "first client ceremony" (*shuregu hedasudhu*⁴⁹) is 1-2 years after they attain menarche, which is usually around age 11-12. While they do not always begin doing *dhandha* immediately following *shuregu hedasudhu*, most are in the business by the time they are 14 or 15. CSWs, on the other hand, are commonly married, widowed, or abandoned, and thus are generally older than most *Devadasis*. That being said, given their young age at marriage, these women also have an early sexual debut.

The majority of *Devadasis* were born and raised in their natal homes or in nearby locales with other family members. A significant number of older women traveled to other towns and large cities like Pune or Mumbai in neighbouring Maharashtra when they were younger, often to help pay familial debts and accumulate money to finance siblings' marriages. However, a few informants indicated that they left home for other places because they were bored. Unlike middle-class wives, but like other rural married women, this form of travel for employment purposes is a not an uncommon recourse in times of severe economic constraint.

The *Madar* (or *Madiga*, *Madaru*) caste is virtually exclusive among the women and girls interviewed⁵⁰. The traditional occupation associated with this group is scavenging and disposal of dead livestock, and tanning and curing leather (Bhani 1981/2:3; Shankar 1990:91; Thurston and Ranchari 1909:309). *Madar* is a sub-

⁴⁹ "Shuregu" is the end of the saree that falls over a woman's shoulder/front/head, and "hedasudhu" means to "hold or catch". During a marriage ceremony the *shuregu* is tied with a scarf worn by the groom, and this is what the term refers to in the first client celebration. The "holding or catching" indicates the client's ability to hold or contact the woman (i.e. to have sexual intercourse).

⁵⁰ Constituting 42/44 responses during the interviews conducted on my third research trip.

classification within the large *Harijan* (meaning "children of God", a euphemism for ex-Untouchable or Shudra castes) group, and a few women said they belonged to the more general *Harijan* caste. A couple of young girls and women were uncertain about their caste affiliation, but answered *Madar* after being discreetly informed by older women.

The *Madar* (and *Holeyar* or *Holer*⁵¹ in some other areas) caste dominate among *Devadasis*, and the participants offer interesting affirmations of this and comments on other customs affiliated with the system. When I asked if they carried on prostitution because of Yellamma (the deity to which most are dedicated), one woman said "yes, in our caste we have to do this, only in our caste." Several said "it is only in our caste", and one indicated that "Madar and Harijans" dedicate girls for this purpose. Another woman told us that "in every caste there are *Devadasis*, like the ones who beg on Tuesdays and Fridays" (referring to *jogammas* and *jogappas*). These ideas are elaborated on by a different woman who relayed the following, "...for sex work they dedicate in their caste only, but other castes have *Devadasis* who may have husbands, these are the ones who beg for Yellamma" (referring again to *jogammas*). Linking the specifics of the *Devadasi* system with broader dimensions of sex work, one woman explained that, "it is only our caste that has the custom and religion, but many other castes (e.g. Muslim) are doing sex work only for the earnings." After asking how one girl felt about being dedicated she replied, "bad" and then asked "why did God have to give birth to me in this caste?...[adding that] only the *Madaru* and *Harijan* castes dedicate their daughters."

In response to our questions regarding their family or house deity (*mane devaru*), a variety of Goddesses were cited, often several by one informant, and a few Gods were

⁵¹ Who engage in disposing dead animals and use carrion as food, very polluting and low caste associations (Shankar 1990:91).

also mentioned. Out of 45 respondents, the following were listed: Durga (11), Yellamma (9), Laxmi (9), Kariawwa (4), Chandrawwa (3), Shatawva (3), Basaveshwar (1), Lacou (1), Mallingshwar (1), Hanuman (1), and Saisappa (1). One young informant was unsure as to her family's *mane devaru*.

Family Make-Up

Unlike the majority of rural women and young girls who move to their husband's family home following marriage, *Devadasis* customarily stay with their mother's kin, girls take up *dhandha*, and they are supported in old age by their children (especially girls). However, when asked if their mother (*amma*) or grandmother (*agi*) were *Devadasis*, 38% of younger (n=31/50) and 28% of older women (n=19/50) said no, and only 22% of younger and 10% of older women replied yes. There are other variations on the ideal model of *Devadasi* familial organization, with many sisters (younger and older) of *Devadasis* getting married, men living with women like husbands, and in a few cases the *Devadasi* tradition was passed on through women from the father's side. These alternative situations were illustrated in the participant's (n=48) response to the question "who lives in your house?" Each interviewee listed several family members, usually beginning with mother, which was noted in 75% of the respondents. 56% said her children, 52% indicated they lived with their father, 31% had younger sisters at home, 25% cited younger brothers, 23% told us they have older sisters, and 17% responded by saying older brothers (but 4 had died). Other answers include sister's children (12%), grandmother (8%), auntie (6%), woman working for her (4%), brother's family (4%), and one response each was given for *gharwalis* (madam) and a regular client.

Greater detail on family make-up and the participant's place within the household came from inquiries regarding their earnings, employment, and the status of other family. Out of 28 respondents, 21 (76%) indicated that they were the main earners, with father, children, daughter (a *Devadasis*), and regular each receiving one response. When we asked about supplementary income and what other forms of work the women and girls would rather do (if any), many mentioned their lack of education and low status as sex workers as the two factor impeding their success in other jobs. Many older women work as labourers in the field, for a mere Rs 30/- per day (Cdn 0.95), a task some dislike because it is difficult, pays little, and darkens their skin. One woman performs in dramatic productions, for which she receives around Rs 2000/- per show⁵². A number of older respondents indicated that *dhandha* was the only way to finance their many responsibilities, such as food, clothes, festivals, children's school fees, and the marriages of siblings. One woman mentioned the severe pressure *Devadasis* feel to begin earning and supporting the family. It feels like "we (the family) are all depending on you" she explains, adding that there may be harassment and beatings from fathers or brothers if they do not follow through.

Although *Devadasis'* earnings form the mainstay of most households, their kin do contribute in a variety of ways to the family economy. Brothers were mentioned as working in vehicle repair garages, in fields, in the weaving industry, in timber factories, as cleaners (of trucks), in construction, in municipality jobs, and the local *panchayat* (local caste council). Mothers work in fields, are sweepers, and own pan shops. Fathers also work in fields, clear lands, cut wood, make ropes, and are porters. Sisters do

⁵² Which is a great deal of money, considering that most rural women earn between Rs 5.11/- to Rs 10.85/- per day (Narasimhan 1999:25).

dhandha and work in fields. Grandmothers work in fields and beg. When the women and girl's response was more general, the jobs most frequently mentioned were field work, construction, *dhandha*, and agricultural labour.

Fourteen participants provided useful information about the age and social status of their other brothers and sisters that contest the ideas that the *Devadasi* system is one response to a lack of male heirs and that the oldest girl is usually dedicated. All 14 have brothers, and 7 are older than themselves (5 had one older, 1 had two older, and 1 had three older), and 5 are younger (3 have one younger, 1 has 3 younger, and 1 has 6 younger). Two women did not mention their ages, but one had 3 and the other had 5 brothers. 13 women and girls mentioned sisters, with 6 being older (5 had one older and 1 had two older) and 6 being younger than themselves (2 had 3 younger, 1 had 2 younger, and 3 had 1 younger). Of the older sisters, 3 are married, the status of 2 was not indicated, and two are *Devadasis*. One respondent did not give the specific age or occupation of her sister. It is clear from this small sample⁵³ that girls are dedicated despite the fact they have older brothers and they straddle the positions of older, younger, and middle girl child; and more than one daughter per household is dedicated.

Another feature of the system is that is assumed to be 'traditional' is that the women inherit the family's property like sons and, for all intensive purposes, are the heads of their households. This may be true in theory, but many women told us that if they do not support their family (read their brothers) 'properly'⁵⁴ they will not obtain the family house and/or lands, and they are not always in charge of their homes. At the time of interviews (n=44), 40% said their mothers were household head and owned the house,

⁵³ Approximately 30% of my core sample of informants (n=48) during from my third research trip.

⁵⁴ For instance, hand over a certain amount of their earnings, pay for their wives and other family's expenses, and finance their children's weddings.

18% cited their fathers, 13.5% answered parents (2 each for grandmother, mother, and father), 11% responded themselves, 9% listed sister, 4% said grandmother, and one mentioned her auntie.

Critical to the objective of demonstrating the complexities and various interconnections in the women and girls' lives is providing contextual information about their daily activities and interactions. The following two segments from my fieldnotes capture some of the richness, communality, and loving relations that frame their everyday lives.

Some men are working on a building that is being constructed in the HK area, adjacent to the area we are in. The walls are being sprayed with water and the men stop to stare down at me in the house for a few minutes. Renuka leaves with a cloth wrapped on the top of her head to support the large silver bowl that is filled with laundry and covered with a blue cloth which is tucked into the sides of the bowl. An old man walks past several times and girls in school uniforms flit by. Rani's youngest daughter comes in wearing her burgundy and white school outfit, she holds her school bag, and has her hair braided neatly in two loops that are tied with white ribbons. She says hi and looks a bit surprised to see me. She stands on some sacks filled with grains or rice that sit in the corner of the front room to hang up her school bag, and then goes outside. An old woman in a green saree with gorgeous big white teeth teases or talks to a few children loudly. She sits on the edge of the stone bench near Kamala's shop and looks very much like Kamala. I wonder how many women have inhabited that perch while waiting for clients, yelling at kids, and watching the days bleed into one another. An adolescent girl in a nightie calls my name and peeks her head into the door as she carries her sister's kid on her hip. The older woman with the nice teeth and Kamala's sister try to persuade Shirmala to come and talk to me. The little girl takes a few steps towards where I am sitting and then veers off, running away and smiling. As the older woman gets up her small left breast is exposed. She doesn't move immediately to cover it up and when she does it is only slightly contained by the bottom of her blousepiece. Rani gets ready, sitting in front of the mirror with her rectangular, tin make-up box handy. Her older daughter takes over the job of rolling, pounding, and cooking the rotis (September 1-15, 2002:1-2).

(At Lalita's)...She gave me her teardrop shaped tikka to wear and from the thumbs up, head shaking from side to side, and tsk'ing sounds I received it looked nice to them. Her sister even brought a hand mirror for me to look at it! A few of the little girls were taking my hands and folding theirs into mine, touching my jewelry, and talking quietly. Lalita laid down on her side and her son and one of the other little ones snuggled in on either side of her. Her younger sister and another younger woman sat across from the bed in metal chairs, observing,

talking to us a bit, and chatting amongst themselves. Around 3:00 I got ready to go and as I did there were some questions about photos, but not certain if they were in reference to ones taken or ones they wanted to be taken. I found out a few seconds later it wasn't in reference to photographs but they were talking about a movie that apparently features a heroine that looked like me, according to Lalita's younger sister! I repeated to her that Meena should be coming to the meeting on Saturday and that Veena would also be coming for a few days to help with the work. We went outside and milled around the pan shop Lalita's mom was sitting in and running. She searched for some kind of treat to give me from among the ½ full plastic bags of dried sweets, savoury snacks, and different betel packages. She settled on a cookie and they all smiled as I chomped away on it. Some other women and kids, along with the original bunch from inside the house, were gathered outside and touched my new things and asked me some questions. Lalita and I laughed as we relayed to them how two young boys said "hey baby" in English to me as we walked to her house. I said "television", referring to the possible source of their salutation. I walked out of the community with Lalita stopping for a few moments to talk to a couple of women and kids (April 1-8, 2002: 7).

Sex Work Entry

Our questions about the conditions surrounding the women and girls' introduction to *dhandha* focused mainly on the issue of dedication (when, who, where, why) and how it has changed over the years, along with their feelings when they learned they would be doing sex work. The Kannada term for dedication is "*deva-rige-bidu*", which means to "leave/give to the God." Another phrase "*muttu-kutudi-mugitdu*" (literally "bead-tying-to finish") or "*muttu kattavadu*" ("tying the beads") refers to the tying of the red and white bead necklace (*muttu*) that sanctifies the girl's marriage to the deity and defines her as a *Devadasi*. In Kannada "*muttu*" also means "kiss", but I do not know if its use in the ceremony connotes this double meaning.

Of the younger women and girls (n=29), 21 were dedicated before puberty and 8 after menarche. The pattern for older *Devadasis* (n=14) was similar, with 9 dedicated during childhood and 5 following the onset of menstruation. That a total of 14 (32.5%)

interviewees were *deva-rige-bidu* after menses contradicts the "very rigid" rule that stipulates girls must be dedicated *before* puberty (Sadisavan 1993:46; Shankar 1990:100; Tarachand 1991:17). Grandmothers and mothers emerged as those most often in charge of dedication, each registering 29% of responses (15/51). Parents were next with 17%, followed by grandparents and aunties⁵⁵ who each garnered 7% of the total. Three participants could not recall who dedicated them and one just said a family member. Out of 30 respondents who could remember where their dedication took place, 20 said Saudatti (5 specified not in a temple and not by a *pujari*), 7 occurred at home (with a *pujari*), and 3 dedications happened in the *Devadasis'* home town (not sure in a temple or house). As outlined in the table below, the reasons for dedication speak to the multiple and intersecting socio-economic, religious, familial, gender, and reproductive conditions of life that influence their entry into sex work.

Table 2 - Reasons for Dedication

n=52	First Reply	Second Reply	Third Reply
Don't know	10		
Poverty	8		1
Praise God/culture	6		
No male heir	4	1	1
To support family	4	3	2
Only 1-2 girls	3		
Sons unreliable	2	1	1

⁵⁵ Two of which were from the respondent's father's side of the family.

Lost father	2	1	
Lost older brother	2		
"Problems"	2		
Grandmother's vow	2		
Health problems	1		1
Mom saw others	1		
Dad a drunkard	1		
No husband for her	1		
Should stay at home	1		
Dev. sister barren			1
Brother problems	1		
Siblings married	1		
Mother's vow		1	

An older *Devadasi* described the dedication process, which is as follows:

(1) Around age 5-7 the parents tell elderly people in the village that their daughter is going to be initiated as a *Devadasi*;

(2) The initiation ceremony into the *Devadasi* tradition is similar to a Hindu marriage, where in the 'pujari' (priest) ties the 'tali' or marriage necklace (the black ones). A 'muttu' (the red and white beads) is also tied along with the talli and *this signifies her as *Devadasi*;

(3) After the ceremony on 5 Tuesdays and 5 Fridays they have to beg at a minimum of 5 houses;

(4) After this there is a feast served to the older *Devadasi* in the new girls' place, after which she is considered a 'jogati' = a *Devadasi*;

(5) When puberty is attained special ceremonies are performed as a way of declaring that she's eligible to do sex work, they want people to know;

(6) After this the parents/older *Devadasi*/or others in the area may approach men who they think would be suitable as the all-important first client (such things as caste and amount of money figure as important here), or the client may approach any of these "middle people" if he is interested in being the first client. From what they said it seems as though the clients should provide some of or all of the following items for the girl, which should be placed in front of her: money, saree, gold (e.g. ½ a tola or 5 grams of gold), a bedsheet, and a blanket. These things were described as making her eligible to start her trade as a *Devadasi* (Fieldnotes February 6-12, 2001:23).

Several changes in dedication patterns were mentioned, the overwhelming one being an apparent decline in the process because of HIV/AIDS. Since the advent of the disease the numbers of clients have dropped significantly and many are afraid of contracting the virus, thus the economic benefits and health-related risks associated with the contemporary situation are deterring families from dedication. Almost all women and girls said that they would not dedicate their daughters into the system, preferring marriage instead. However, countering this development is a rise in dedications from non-*Devadasi* families, who view the material benefits garnered by some women and girls as something they want (or need) for themselves. Those who already belong to the tradition view these mothers as not fully considering darker realities of the sex trade (or perhaps they are overridden by economic need and/or material wants). Another change pertains to girls becoming pregnant and having "love affairs", and because both of these events morally stain the girl and her family a dedication is sometimes one of the only logical outcomes. By doing so, the girl will also be able to earn for the family and take care of ailing relatives and other siblings.

The banning of dedications in the early to mid-1980s has also contributed to a sharp decline in temple dedications, especially at the Saudatti temple complex, and while some may have gone through the ceremony in this area it is a much simpler affair than in

previous years. More recent dedications take place in women's homes with a *pujari* and other community women present, and many occur in villages, after which the young girl is sent to a town or larger city to work among relatives or other contacts. There is an important dimension of these village dedications that relates to not only a lack of sons, but also the paucity of choices for parents of unmarried daughters living at home. If they are not married, mature daughters are considered inauspicious because they are not fulfilling the menstruation-marriage-reproduction sequence that defines feminine identity in India, which bodes poorly on the family and has ever-widening negative spiritual, social, and economic ramifications. Thus, many parents choose to dedicate such daughters, not only for monetary reasons, but to ensure they remain close to the family and help out with household needs. Such situations often involve life-long partnerships between the *Devadasi* and one man, much like husband and wife.

Upon learning that they would do *dhandha*, 90% (20/22) women and girls felt "bad". This response was fleshed out when they explained why they felt bad and what bad meant. One woman said "one by one different men come, (I) sleep with so many different people", and another mentioned that they have to "cooperate" with clients. A young girl expressed the helplessness she felt, "I could not take off the *muttu* or get married, there was no way out for me". Most mentioned their preference for marriage and lament, but ultimately respect⁵⁶ the choice of their parents. One informant said "I felt bad but we have to listen to our parents, we can't neglect the rules". Another young woman felt bad because she had a boyfriend she cared about, and another was ashamed because she did not know that doing *dhandha* meant having sex. Importantly, two young girls said

⁵⁶ And also fear of the potentially dangerous spiritual, economic, reproductive, health effects that could arise from speaking negatively against the system (see Puneekar and Rao 1962:83 for a similar response).

they were happy, which, for one was linked with her enjoyment of sex and for the other it had to do with seeing her friends and enjoying material and other social benefits (i.e. peer activity, leisure time, male attention).

Since parents were not always aware of their daughters' dedication, their responses are relevant and help provide a more complete understanding of this event. A significant number of girls underwent the ceremony under the watchful eyes of grandmothers, behind the backs of their mothers and fathers. Some parents were unhappy, even furious, because they did want their daughters to be married, not stigmatized. Others were happy because their children could help support the family through sex work, it was "for God's sake", and "because then it was something that brought happiness".

Commercial sex workers share some basic conditions of life with *Devadasis* (i.e. gender-based oppression, economic hardship, lower caste), but many of the precipitating factors affecting sex work entry are different. During a BIRDS workshop these issues were discussed and excluding those pertaining to *Devadasis*, the following reasons were given: poverty, tradition of male domination (which begins from an early age), lack of knowledge regarding the outcomes of doing sex work, religion and the unfair treatment of widows (vs. widowers, who can marry), being cheated through promises of love or employment, powerful landlords who demand sex from young girls, abusive husband, in-laws, and parents, dowry, child marriage, illiteracy, and desires for material goods. These are similar to those listed by Joardar (1983:210) in his excellent study of prostitution in Kolkatta (Calcutta): ill-treatment by husband resulting in desertion or separation, death of husband or father, deception, environmental influence, bad influence, introduced by

husband, brother, or uncle, desire for easy life, illegal pregnancy, poverty, neglected (see also Punekar and Rao 1962: 91-92).

More detailed presentations of the women and girl's life histories are given in the final section of this chapter, but an illustration of one woman's experience of beginning *dhandha* is provided below. The pain and deceit of sex work entry is vividly described, as is her strength and commitment to her family (the different spellings and emphasis on certain words is because of the translator).

K: My name is K. Earlier I didn't know about Devadasi. We were poor. I was the eldest so my parents made me as devadasi. When I attained 11 or 12 years, I was matured and they took me to Karada, Maharashtra. Have you heard the place, Karada?

I: Yes.

K: There, I didn't know the language of Maharashtra. For a month, they asked me to clean the utensils. There was a person who belonged to our family but they didn't tell me about this 'dande' (prostitution business) how could they tell all these things to me?

I: Person belonging to your family means, was he your relative?

K: Yes. He (she used plural I don't know whether that person was male or female but I guess he was a male) was our relative. He took me to Maharashtra. We are villagers. At that time I didn't understand all this. When I went to Maharashtra, till one month, I use to clean utensils. On Ugadi Padya (one of the Hindu's festival), they decided to do 'hennu madodu' (making as devadasi) They have fixed that but I didn't know that.

I: Did your family members tell you about this?

K: They didn't tell me, but the garwali(madam) and my family members decided that. They took me to one house and asked me to sleep there. In that house, one woman was speaking Kannada. That night I slept there. That night one fellow came and touched me. Suddenly I started to beat him. He also beat me. We did noise. Then garawali (madam) opened the door and saw us. I (narrated the incident) told that this fellow was touching me and I beat him and he also beat me. They told him to not behave in such a way. They thought that I might feel bad so they told me that he was their enemy. I trusted them because she was the only woman, who spoke Kannada and nobody used to talk to me because all of them

use to speak Marati. After 15 to 20 days, again they did the same. Third time also they did the same. I also did the same thing as I did earlier. They thought that it was not easy to convince me. I was remembering my village very much and I had fever. They took me to the hospital. I was afraid of injections. They saw that I was avoiding doctor. They brought a beer bottle from the market. They told that it was tonic and asked me to drink that. Then I started searching for a spoon. I am a villager but I heard about tonic. In our village people use to take tonic by spoons (little quantity). But they told that it was Maharashtra tonic and she has to drink using glass and they asked me to take the glass. I denied and told that tonic must be taken in a spoon and not by glass. They didn't listen to me. They asked me to drink the whole bottle, since it was Maharashtra tonic. Again I have argued that, tonic must be taken by spoons, that too only 2 to 3 spoons per day, till 2-3 months. But they didn't listen to me and forced me to drink the whole bottle with a glass. They opened it and poured it in to the glass. While pouring that liquid foam was coming and it tasted like urine so I refused to drink it. They forced me to drink it; otherwise they will take me to the doctor and give injection. When I heard about injection, I got afraid and drank little quantity but I spit it because I tasted it like urine. They asked me to close my eyes and to drink that. I drank one glass and forced me to drink the whole bottle. I was sitting on a chair and I was in the same position after that I didn't know what happened. Next day morning I was on the bed. I asked them how I came on the bed, since I was sitting on the chair. They told that I willingly slept on the bed. Like this they did with me.

Male voice: (not clear) did they make you to sleep with 'giraki' (client)?

K: Yes. They made me to sleep with 'giraki'. Next day morning I asked the garawali, who speaks Kannada, she told that she also felt like that. What to do? They did the same for 2-3 months. After 3 months, my relative came there from my village. They abused/scolded me 'hadargitti, udali (scolding/vulgar words) with bad words, and under influence of alcohol ('nishe') I was doing the 'dande'. That time I did not understand all that. I didn't know the word giraki or dande and I did not understand the language also. Again they scolded me the same. I asked them what I was doing to scold like that. . They told me that with nishe I was doing the dande. Again I have asked the meaning of that then they questioned me what I use to drink. I told that I am taking tonic. They scolded me and told that it was nothing but beer and it is not the tonic. At that time, I didn't know that it was beer or tonic. And they told that if we drink that, under the influence of that drink I am doing that job. Then asked whether I use to take the drink before the food. I told that without the food they forced me to drink that. They were not giving food to me before drinking the beer.

I: Who did all this?

K: Garawali use to do that.

I: Did you working in the garawali's(madam) house?

K: Yes.

I: Did your relative left you in the garawali's (madam) house?

K: Yes.

I: You were cleaning the utensils in the garawali's (madam) house after that she has arranged all this?

K: Yes.

I: Didn't your relatives turn back?

K: They use to come. My family members use to come and collected the money with garawali. My parents didn't tell me all these things, thinking that, I was young and I may afraid.

Male voice: Did your family members only left you there?

K: Yes. I am the only person, didn't know about that. I knew about 'muttu kattodu' and making devadasi. But I didn't know that I have to make this business. When my relative cleared me all the happenings, I left drinking. I told that, I will do the business and I asked them to send the clients. Like this we have made improvements. After starting this business, my sisters, brother and my daughter got married. And I have purchased a house in Rabakavi. We lived like this. But at that time, I was not aware of all these things.

Male voice: After leaving Karada, straightway do you come to Rabakavi?

K: No sir. After that I went to Kholapur. Then, to Rabakavi.

I: Did you start the same business there?

K: When we started this business, if we live a comfortable life ('tuppa sakkari') with any client, then also people (comfortable living) us 'dande maduvavaru' (prostitutes). That time our house condition was not good. After doing this business only, we met our needs (the necessities). Earlier, my parents' use to work, but due to low wages, it was not sufficient for us. I use to understand the problems. So I started the same business. Earlier I use to do all the works like weeding, taking mud in the baskets for bunds formation. I use to do all the works in the fields. When I started this business, I earned some amount. I didn't think of myself. I wish that all should be happy (started crying)

Sex Worker Typologies, Geography, Migration

There are a number of ways to classify the types of sex workers in rural Karnataka, such as location of work (i.e. brothel, street-based, home-based, public places) and the reasons for initiation into *dhandha* (i.e. *Devadasi* system/traditional prostitution, individual life circumstances, trafficked/coerced). Although many *Devadasis* sell sex for commercial purposes, because the women and girls who participated in the research carry on a number of their customary ceremonies (i.e. first client ceremony) and often view their profession as being ordained by tradition, they are distinguished from women who are not associated with religious customs (i.e. commercial sex workers or CSWs⁵⁷). As outlined above, *Devadasis* tend to start sex work earlier, be younger, live and work in rural areas (often their homes), and they have higher rates of illiteracy than CSWs. They are also more likely to travel to another state (usually Maharashtra) for work and less likely to experience violence from clients. *Devadasis* also report lower rates of oral, anal, and group sex, which is more commonly demanded by men from cities, who generally offer more money for these services. The women view these kinds of sex as unnatural because of the increased chance of contracting some kind of disease if they are performed.

When I asked about differences between themselves and CSWs, initially the *Devadasis* said nothing⁵⁸ and added that poor economic conditions, an absence of male sons, and that the custom runs in the family is why they are initiated. Later in the same interview they said that *Devadasis* earn more than CSWs, who are of the opinion that *Devadasis* are of lower status and charge less for their services. They then discussed their

⁵⁷ Which includes migrant women, who may sell sex infrequently to make extra pocket money or who may move away from their families to pursue the occupation full-time.

⁵⁸ During my third trip I asked the same question and the women responded that *Devadasis*, *sule*, and sex worker are all the same.

greater visibility on account of their dress, they wear more make-up, they may cut their hair or put flowers in it, and they have a larger than usual *bindi*⁵⁹. The following description from a collection of short stories about *dhandha* in rural Kanataka mirrors the women's description of themselves.

She was dressed in a Lekhani saree and 'Yadawad' blouse. There was a 'mugati' (nose ring) in her nose and 'bugudi' (earrings) in her ears. There were silver chains around her ankles. The wrists were adorned with green bangles. There was a red 'Kumkuma' (powder bindi) almost as big as a rupee on her forehead and just below it a black dot. Her lips were vermilion with red 'tambul'. These features well declared that she was a village prostitute (Belagali 2000:7).

Migrant sex workers include a range of situations, including *Devadasis* who travel to different towns on market days and festivals to take advantage of greater numbers of clients, rural women selling vegetables and curd (yoghurt) who do sex work secretly for extra money (they sometimes bring clients with them), women working in *dhabhas* and lodges on their own, or married women who visit other towns to carry on affairs with their lovers. Like CSWs, migrant women often work outside of their home areas and tend to have been married, abandoned, or run away from abusive family situations. Interestingly, although most migrant and commercial sex workers entertain clients in lodges, small brothels, *dhabhas*, or in other public places, some prefer to go to the *Devadasis*' area, where they pay a minimal fee (Rs 10/-) to the woman providing space. This may be a safer alternative because *Devadasis* are likely to have condoms, which are not guaranteed in lodges and *dhabhas*, and there is less stigma associated with prostitution in this setting because it is where *dhandha* is a way of life.

⁵⁹ As in the following passage, the *Devadasis* I know customarily wear 10-20 green (sometimes other colours) bangles on each arm, nose rings, silver ankle chains (which are usually considered improper for married women because of their connotations with young girls and drawing attention to oneself), silver toe rings, a *mangalasutra* (marriage necklace), gold rings, many earrings (sometimes all along the outside and tops of their ears), and *bindis* of both powder and sticker variety.

Although I did not gather a great deal of information on the impact of geography on Northern and Southern sex workers, through mapping exercises at WAF workshops and state-wide BIRDS meetings some important differences were discerned. The type and locale of sex work are especially influential factors, with home-based *Devadasis* being more common in the North and CSWs (including migrant women) working in public places, roadsides, and lodges or brothels more common in the South. There are greater incidents of violence and demands for more kinds of sex in the South as well, which may be linked to the client types. Regular or lover/husbands are found more frequently in the North, versus the one-time and ex-husbands that are common among Southern sex workers. Women in the North are also more likely to belong to a collective and experience fewer conflicts with police.

The complex issue of migration is crucial to unpacking the dynamics of HIV transmission between various areas, urban-rural, rural-urban, and intra-rural. The present data is rather cursory, but they provide a sense of some of the underlying features of sex work migration in rural Karnataka. Most of the older *Devadasis* have, at one time or another, traveled beyond their home communities to do *dhandha* in larger cities/towns within the state (e.g. Gokak, Belgaum, Bijapur city, Jamkhandi, Rabkavi, Mudhol), and outside (e.g. Miraj, Sangli, Pune, Mumbai)⁶⁰. The push factors behind leaving are diverse but generally revolve around the need to make large sums of money to either clear family debts, to finance a sibling's wedding, or to work off the initial sum of money paid by the agent or middle-man to a woman's family for her purchase. One woman returned from

⁶⁰ The Miraj-Belgaum-Bijapur city 'triangle' is a center of trafficking for women, predominantly *Devadasi*, from these smaller areas to Mumbai. The so-called "Pink Triangle" covering the states of U.P., Rajasthan, and M.P. is another trafficking circuit to bring rural girls, often from families who practice forms of traditional sex work (e.g. *Bedia*, *Kanjar*, *Nat*), to large urban centers in the North (Gathia 1999:79)

Mumbai because she was frightened by the men's (often foreigners) demands that she remove all her clothes, and their unpredictable nature. The high cost of living and exploitation by *gharwalis*, who often take advantage of new rural girls and charge for food, fan bills, water, and laundry (on top of their initial sale fee), impedes their ability to save money and caused several women to come home.

As difficult a place like Mumbai is, a number of *Devadasis* fondly recalled the useful things they learned about make-up, fashion, the business, and romance while living there. One woman described sadly, yet also somewhat proudly, an American who proposed to her and wanted to take her to the U.S. Unfortunately, he never returned, despite his promise and gift of a watch and necklace that he left behind. Equally important are the pull factors of important boyfriends and relationships back home, which was why another woman returned.

Some younger *Devadasis* in their mid-20s have also been to larger cities, but typically for less time and if they do migrate, it tends to be from their natal villages to other towns or small cities to work with relatives or other contacts. They express little desire to go to big cities, usually because they say their parents would not send them or because they are managing fine where they are. This response is often clarified through references to HIV, which is embedded in the minds of most Indians- including rural sex workers who are aware of the virus- as a mainly urban phenomenon. For instance, an informant said that although her mother wanted to send her, a *gharwalis* prohibited it because of the many diseases in the cities. Another young girl explained that she moved from her village to the town of Jamkhandi "for stomach's sake". Other young girls from a

very prosperous sex work community feel no need to migrate because they make sufficient income at home, which is referred to as a "little Bombay".

Mapping⁶¹

The organization of *dhandha* throughout rural north Karnataka varies widely, mainly in terms of the number of sex work areas and women in a particular locale. One large city, for example, has three main spots for prostitution that are named after the movie theatres that are within close proximity to where the women work (Dreamland-15 women, Alankar-25, and Laxmi-20). A small village in Bagalkote has four areas divided by different streets, which are home to around 100 *Devadasis*. Another rural center has three different areas that have been created from the competition between two NGOs and a government training scheme that facilitated the construction of an extension area, and a total of 55 women live here. There is one area in a different village that is home for 25-30 women, all of whom live with their families. A feature all of the sites have in common is that they are almost always situated in the *Harijan Keri* (Untouchable area), constituting a community within a community. Out of 12 villages, rural centers, and small cities the average number of sites per locale is 3.3, and the mean number of women in each area is 94.16.

The following excerpt from my fieldnotes provide a better sense of what these micro-communities are like and how the women orient themselves within the difficult

⁶¹These data were gathered during interviews throughout northern Karnataka. There was no formal methodology used to estimate the total sex work population size and distribution, we relied instead on the women's personal experiences and perspectives to determine the kind of sex work locales and numbers of women working therein in their respective town or small city.

and close-knit environments. The first two describe the working conditions for women and girls in rural centers in Bagalkote district.

As we left the area some of the people that quickly gathered around the house we came out of laughed and joked around. As walked down the little street that runs perpendicular to the alley leading to the main street we saw a couple of the girls who had just been in the house with us. They looked so young and the one we interviewed last sat on one of the benches that are spaced along the street, while the other one hung around on the corner of the street. Judging from her expensive-looking saree, gold jewelry, and more aggressive behaviour I think she's a bit older and more experienced in dhanda than the little one on the bench. I waved at a couple of girls as we passed by and again after rounding the corner. They smiled and waved back (September 1-15, 2002:7).

Towards the end of interview #2 Rani said she had to go out for a while. When she returned about 15 minutes later her hair was done, she was dressed neatly, and she had make-up on. A number of women could be seen from where I sat against the wall, almost right across from the door. They were hanging out by Kamala's (her sister took over for her a couple of times during the time we were there) pan shop. They looked in the direction of the yard/street area, likely for clients. In some respects they seemed out of place because they were all decked up with nice sarees, gold jewelry, neatly styled hair, all amidst the (other) daily hand-mouth activities and scarce environment of a slum. Several women walked by together, one younger one (chubby) led an older man down the lane, and a few men by themselves walked by too (August 1-23, 2002:14).

The next description is of a brothel in a small northern city, which was inhabited by three very young *Devadasis*:

The market yard was a short distance from the slum, less than 10 minutes by auto rickshaw. Shaila escorted us to a house located around 50 meters away from one of the main roads running through the area. The house was very well kept, clean, and had many pictures displayed throughout. Some of the photos are of Indian Gods and Goddesses, one was of Jesus (Yesu they called him), prominent politicians were displayed, and personal or family pictures were also hanging on the walls in the different rooms in the house. There are two rooms and a bathroom upstairs that are used exclusively for sex work. Downstairs there is a spacious bedroom, kitchen, and a bathroom. There is also a kind of sitting area with a television, telephone, and they also have a refrigerator. Three very young looking girls were in the house, which is owned by a gharwallis named Rheka. As the gharwallis was in the Miraj hospital, Shaila and to a certain extent the girls, provided the information about Rheka (February 13-21:41).

The final excerpt is more of a vignette of the interactions between the women in the *dhabha* we visited and their clients. They were especially busy because this *dhabha* was one of the only one for miles along the highway that had not been raided recently, owing to the bribe the owner paid to the police. Although somewhat lengthy it captures the dynamics between the women, clients, and owners in this context. It is also a testament, of sorts, to not knowing the language well, which allowed me to focus almost entirely on documenting the situations.

Within the first 10 minutes of our arrival a client peeked into the large room where we were sitting and then he took off his sandals and pointed to the younger one. She got up and took some condoms (and the piece of paper/token⁶²) and went with the man to a room off of the large one where we were.

About 5 minutes later we could hear more talking in the front room of the *daba* and an older man came into the large room and chose the older woman. At this point the younger woman returned from client #1 and continued talking with us (she looked as fresh-faced and neat as she had before). Client #1 of the younger walked out of the room after she had sat down with us. He didn't look at her and walked into the front room. She didn't pay any attention to him and put some money into her change purse, which was then put into her bra (which is where most women keep their money, not only sex workers).

After a few moments with her client #1 the older woman called out from the room for the *daba* owner. The owner went to see her, went back into the front room⁶³, and returned to the older woman. He gave her something but I am not sure if it was a condom. Again, less than 10 minutes later the older woman emerged from the room. She was wiping her hands on her saree and readjusting her pony tail. A few seconds later her client emerged, pulled his shirt tails on a few times, looked at us, put his sandals on, and walked into the front room. Before sitting down again the older woman went into the front room and then stood for a few minutes in the doorway between the front room and where we were. She was holding a few crisp Rs bills in her hand.

⁶² To record the number of clients per day, for which women are reimbursed at the end of the day by the *dhabha* owner (Rs 20/- per man). However, in many instances this sum is cancelled out by the Rs 50/- or so the women pay the manager for protection against police raids (i.e. hiding them or informing them in advance).

⁶³ The woman kept the door to the room open while waiting for the owner to return. In the shadows cast on the wall the door the image of bodies coming and going from the room were visible from where I was sitting. The sound of water being splashed was also audible, and was usually heard after each client.

A young man wearing a white tank top came into the room and selected the younger girl. She continued to talk to us but laughed for a moment and smiled when she saw him. Then the older woman gave the younger girl's client #2 some money and he went in to wait for her. A number of people were talking in the front room and an old-looking man came in, took off his sandals and went into one of the back rooms with the older sex worker. It was only after some people said "client" (in English) that the younger woman got up and went to see her 2nd client (client #1 of the older woman was still around and peeked into the large room periodically). When she went to see her customer she took a condom (and the token?) and a mat from one of the rooms near the front room wall, in the other area of the daba but still off of the main room we were in.

Five minutes later the young woman emerged from the back area, followed a few seconds later by her 2nd client. Several other men were in the front room and another man had removed his sandals. At this point the older woman returned and we left. Patel said that in @ half an hour the daba owner had made Rs 240/- from the men. We walked to the road side and waited for a ride back into Hubli. While we were waiting Renuka commented that some of the customers can be even older than the older woman's client #2, who looked to be in his late 50s. We all laughed. Once we arrived in Hubli we had lunch (@4pm), found the travel agency, and I booked my flight (March 16-23, 2001:6-7).

Social Networks and Earnings

The organization of rural sex work is facilitated through a dense web of people and institutions. Of primary importance are *gharwalis*, agents, *goondas* (hired thugs with underworld and police connections), police, locale owners (*dhabha* and hotel/lodge), and clients. There are two types of *gharwalis*, and the one most common in villages and rural centers operates a house and/or several rented rooms that girls and women (1-2) live in for indefinite periods of time. The sex workers give the *gharwalis* a portion of their earnings (usually 50%), they pay for food (Rs 15/-) and personal expenses (e.g. medicines, clothes, make-up), and often help with housework. The women in charge of operations is often a retired prostitute, but sometimes she is still working and may also double as a peer-educator for BIRDS. In this setting the system is quite informal and for a

fee of Rs 10/- to Rs 15/- women rent out their homes or rooms to migrant sex workers or others within their community who need space. They may or may not be referred to as *ghawalis*, depending on the frequency and dependability of their service. The second type resembles urban brothels and women (2-5, usually younger) live in a larger house, either full-time or when clients are arranged for. This kind is more prevalent in the smaller cities of northern Karnataka, and here too the *gharwalis* takes half of the women's earnings.

An important distinction between these two models and those in Mumbai is that the women working in the rural and small urban areas are typically not sold to *gharwalis*. Since they are not indentured to madams until they pay back the initial sale fee, the women and girls in the smaller settings are able to start saving relatively soon after they are established. These women are critical to sex work operations, as it is through them that customers select girls and the women receive payments. Some men who are familiar with an area may find their way to a particular house or girl on their own, but often it is the *gharwalis* who makes arrangements with the clients. In addition, because men typically give the money to the madams, who then give 50% to the sex worker, having good relations with *gharwalis* is vital to securing a decent income and avoiding being cheated out of earnings.

Although some madams exploit the girls and women working for them, there are instances where they help the sex workers swindle customers out of a few extra Rupees. Many *Devadasis* do not drink alcohol but they may request two bottles of beer (clients often come to the women drunk and like them to drink together), one for themselves and one for the *gharwalis*. During her time with the client the sex worker requests some time

alone with the madam, at which point she empties the beer into a container provided by the *gharwalis*. She retains her beer bottle, however, to 'prove' to the man that she had finished the drink, which, in reality has been sold by the madam, with whom she splits the small profit.

Agents are vital links in facilitating prostitution between rural and urban and within rural areas, particularly in relation to trafficking and migration. These two issues were not the focus of this investigation, but general inquiries indicate that agents are often women who visit smaller locales (their home towns or others nearby) and entice young girls and their families with promises of lucrative employment. A common refrain is that such women dress in expensive sarees, are draped in gold jewelry, and flaunt their relative wealth through conspicuous displays like paying for a package of biscuits with a Rs 100/- note. However, family members, even (or especially given the income potential) when they know the fate of their children or relatives, often work in collusion with agents. A four-year study of Indian prostitution (1983-86) reveals that in rural areas traffickers/agents are responsible for 41.4% of sex work entry, with kith and kin following closely at 32.1% (Rozario 2000: 129). However, in the urban setting (Mumbai in this case) the numbers shift dramatically and traffickers account for 73.6%, while family registers at only 2.4% (*Ibid.*:129).

The role of *goondas* and police varies throughout the different areas varies. Generally speaking, these men are more important, and problematic, in larger rural centers and smaller cities. *Goondas* are often paid by the women each month to provide a measure of security, mainly against police raids and disruptive clients. These men are described as drunk, sometimes violent, and they often demand free, unprotected sex from

the women and girls. They are also responsible for hurling very hurtful comments at sex workers, especially those known to be HIV positive. In one community as one such woman walked by a *goonda* sneered "you women are all responsible for this disease", and he said they should vacate the area. But why do they commonly insist on sex without condoms? As my fellow researcher explained, this behaviour has less to do with the men's HIV/AIDS knowledge than with caste and low social status. The polluting identity of *Devadasis* and other prostitutes have made them a source of disease⁶⁴ contagion, such that while they may be suitable for intercourse it would be unthinkable to actually listen-let alone act upon- what they say. The intersecting issues of pleasure and power are also in play, as the men succeed in the more enjoyable 'skin-skin' contact and maintain control over the women by doing so.

The police cause severe difficulties for *Devadasis* and other prostitutes in some rural and most urban regions. For instance, if arrested a woman is usually beaten or raped by police in jail, after which she has two choices: pay a fine (Rs 1000/- to Rs 2000/-) to a lawyer for the charge to be dropped or do 2-3 months time if she will not pay the fine. However, even if she makes the unusual choice of jail there is usually still a fine waiting to be paid when she is released. In another city police ask women for certain personal details, such as their real names (most change their names when they begin *dhandha*) and home addresses. The women are reluctant to hand over this information because although it may provide them with better protection, via increased surveillance, doing so will take away their sense of security and the limited power they have over their work and home lives. A particularly brutal police assault was recalled by women in another city, when

⁶⁴ But not caste contagion because the system works according to a descending pollution gradation, such that a low caste woman cannot make impure a man of higher caste.

they repeatedly thrust a stick covered with chilli powder into a sex worker's vagina while she was held in the police station.

Other players that often work in tandem with police and *goondas* are *dhabha* and lodge/hotel owners. The former regularly pay police or other criminal elements for advance notices of raids so they can evacuate their places of sex workers, thereby avoiding an even larger fine. A significant portion of this money comes from the women, who are required to chip into this fund that, ultimately, saves them from fines too. The same holds true for hotel or lodge owners, who also pay for police notification and rely on the women's earnings to account for some of the amount. Despite their initial resistance against condoms, BIRDS' peer-educators and AIDS counsellors indicated that both kinds of establishment owners have recently started supporting their use. Contrary to their fears that it would lead to a drop in clients, many such owners find it to their economic advantage to stock condoms because it encourages a more regular presence of women who are willing to work in their places of business.

Clients are another essential piece of the rural sex work landscape, and on average women see between 0-5 per day, with a mean of 2.7. All participants said that there has been a substantial drop in clients over the past 5-8 years, and this was consistently attributed to the advent of HIV/AIDS. That being said, their numbers do rise during festivals and holiday celebrations. Most women said clients prefer young girls because of the greater tightness of their vaginas, but the widespread belief that sex with virgins (or very young women) can cure STDs and HIV is also a contributing factor to their youthful desires (not to mention the issue of power again). Some of the older *Devadasi* contested this, however, pointing to their ability to "cooperate" better with clients by agreeing to

different positions and possessing greater sexual skills. They added that some clients also prefer older fat women versus young skinny ones because they think that people with AIDS are thin. One woman provided some interesting information about a strategy she adopts when clients ask for young girls. She may just not look for any and profess ignorance as to their whereabouts, or she may find a girl and then make a dramatic scene, where she bemoans her many hardships ("I'm poor, I need money") to extract more money from the client (like a cut of the total fee for finding the kind of girl the client wants).

When selecting and soliciting men the sex workers outlined a number of criteria and strategies. As is common in the HIV literature (Verma 1999:10), they assured us that they could detect whether or not a client is sick or has AIDS. They can "make out by their appearance" if a man is sick or infected, which refers predominantly to a client's face (whitish lips) and if they look weak (often equated with being thin and having a "dull" or drawn visage). Although the STD cards were mentioned as an additional source of information for learning if men are, the women's focus on the men's faces implied that this form of identification is secondary⁶⁵. In areas where the clients are familiar, the men come freely to women's homes or are guided by *gharwalis*. In many cases sex workers openly and sometimes aggressively seek out men. Some stand along road-sides to attract them, while a large number focus their efforts in certain spots like the bus stand or market areas. In these settings the women dress up, put make-up on, and make like they are going to the market. Once in their desired locale they make "signs" to men, which include

⁶⁵ Since dirt is understood within the Indian discourse to be visible (Ramasubban 2000:302) and the germ theory is unheard of among the women, their assurances of identification are plausible.

blinking, winking, and waving their hands discreetly. When a man approaches the price is discussed and the two proceed to a nearby lodge, hotel, or a woman's home.

The dominant form of sex engaged in is peno-vaginal intercourse but some men, usually from larger centers, do ask for anal and oral sex. One group of women said that men who request this also watch "blue movies" (pornography) and they laughed while explaining what they do instead of these undesirable acts, like putting a client's penis between their breasts or thighs. Some younger and mainly urban-based men (18-22) want the women to remove their clothes and although more money is provided for this the majority of women do not feel comfortable (some older women admitted to doing it). Taking off clothes was interpreted by the women as providing more enjoyment for the clients, which is likely linked with the fact that wives do not usually remove their *sarees* when having sex with their husbands. They all "enjoy" rather speedily though, as the standard time with the women is 10-15 minutes, or less.

The clients range in age from the mid-teens to 60s-70s and the women often make fun of those on either end of the age spectrum. I witnessed a group of them snickering and pointing at a young boy after his very quick visit to a woman in their community. Others talked of the reprimands they make to really old clients when they jest that the girls they request are young enough to be their granddaughters! The men span all caste and occupation groups, but for the *Devadasis'* first client ceremony Muslim or *Koruba* (shepherd caste) are preferred because they are considered to be prosperous. Field workers, drivers, coolies, college students, and government officers were among those listed. *Giraki* is the term for everyday clients that the women and girls may or may not know. The majority of older women and some younger have regular clients, some of

whom are like boyfriends of husbands. "*Geneya*" "man on the side" (i.e. a man who is married) is sometimes used for this kind of man, but its meaning is seen as somewhat immature or degrading, both to the woman and the relationship. It also provokes gales of laughter whenever mentioned. "*Khiam*" is the preferred term to describe these more formal relations, but women in some parts use the Marathi "*malak*" ("owner") instead. More will be said about these important relationships in the next chapter.

The amount of money women and girls earn per day depends on client type, the number seen each day, and tips⁶⁶. Rs 50/- was listed as the average starting amount for sexual interactions (peno-vaginal intercourse), but some admitted to settling for less if they were in severe economic need. The women make between Rs 0/- to Rs 500/- per day from *girakis*, sometimes more if it is festival time or they are from a more prosperous community (i.e. "little Bombay"). Spending a whole night with a man can garner Rs 200/- or more, but this involves having sex multiple times, which can be dangerous⁶⁷ if a woman does not bring enough or have access to condoms. These are large sums of money compared to the average daily income of rural women of Rs 11/- (Narashimhan 1999:25) or the Rs 30/- the women earn for labouring in the fields. It is also substantially greater than the monthly earnings of most *Madar* families in rural northern Karnataka, which ranges from less than Rs 100/- to Rs 600/- (Shankar 1990:94). Tips run around Rs 10/- to Rs 20/- and depend on how "free" the women are with the clients, which refers to the removal of clothes and "cooperation" levels. If a man asks a woman to take her clothes off she asks for more money first, if he agrees then she takes her saree off. But, if the

⁶⁶ One woman said that "destiny" is responsible for her earnings.

⁶⁷ It can also be risky if a woman has a *khiam*, who often demand loyalty despite the fact they are often married and having relations with other women. They can become violent or abandon a woman if she accepts these offers.

client refuses she just lifts her clothes. Most men from the villages do not ask them to disrobe, but ones from the cities often do and they are typically younger (18-22).

Virtually all of money the women and girls make goes towards household maintenance, which is controlled by their parents or themselves if they are older. Out of 32 informants, 17 said they give the money to their family, household, or parents. 7 specifically indicated their mothers, 3 said no one, and 5 told us they did not keep a *paise* (the smallest Rupee denomination) of their earnings. Those that are able to keep Rs 20/- to Rs 30/- of their income spend it on a variety of things: food, clothes, shelter, kids, books, grains, *sarees*, eating what they want, movies, tea, *paan*, temple visits (and offerings), and "habits" like drinks, meat, cosmetics, and clothes.

HIV/AIDS: Knowledge, Fear, Stigma, and Denial

When asked about their knowledge of HIV/AIDS, most of the sex workers begin by saying that it is a "new", "big", or "bad" disease that leads to death. Some women have been aware of the disease for as long as 7 years, but younger girls who are typically less involved in BIRDS-related activities have known about it for only 1-2 years. Three main routes of transmission were listed, unprotected sex with an infected person, using the same needles as someone with the disease, and through blood transfusions. The perinatal mode was rarely mentioned and the risk of mother to baby via breast milk was never raised. Several different symptoms of HIV were described: loose bowels (most frequent), *bisi* ("hot") or *beedi* ("fever", very often), *wanti* ("vomiting"), *teli-nu* ("headache"), small boils on the body, loss of appetite, and weight loss. The disease can also affect the colour of the body and turn it black, an indication of a drying of blood, excess body heat (caused

by too much sex), or ill fortune. All the women and most of the girls said that in the absence of a cure or medicines for the disease, the best protection against infection was condom use.

Getting an accurate estimate of condom use is difficult because of the stigma surrounding non-use and contagion, along with the pressure to adhere to NGO program policies. The women and girls told us that they always use condoms with every client, sometimes two, and they have few problems dealing with men who refuse. One woman provided detailed insight into how they "convince" clients to wear condoms, often referred to as *nirodh* (the name of the government-produced product):

In *sangha* we teach how to behave with clients and how to convince the clients. When clients come, don't ask questions like "do you use *nirodh*?" If you ask in the beginning, he will go back if he doesn't want *nirodh*. So call him inside the room, fix the rates and take the money from him. Take him to your room. When he removes his clothes, flirt with him, touch his body and provoke him for sex like you see in films and when he is ready ask him to use *nirodh*, at the peak time, most of the time he will not deny. Because he will be deeply involved. In case he denies or rejects for *nirodh*, tell that already half an hour you have spent time and enjoyed with me so I will not return your money (Life history interview, February 19, 2001).

From *sangha* meetings I attended, however, enforcing condom use continues to be a big problem. Also, many women and younger girls have children, so how did they get pregnant if they use condoms all the time? When I asked this most admitted to not using with their *khiums*, which is true for most sex workers (Farmer 1999:83; MacPhail and Campbell 2001; Ramakrishna 2002:42; Sobo 1995: 82-85). Condoms are not used with regulars because their relationship resembles a more formal union, they trust these men, and their *khiums* also refuse (despite their partners' profession). A group of younger girls in one town said that the only time they had unprotected sex was with their first client, adding that they were "very young" during the ceremony and did not know about

AIDS. But BIRDS has been conducting peer-education and condom distribution in that particular community for several years, and so there appears to be a gap between HIV/AIDS knowledge and practice. Are the young girls not informed about condoms and HIV by older women, despite what they told us? Or are they instructed to not use condoms during *shuregu hedgesudhu*? This is probable given that the sexual pleasure (and disease cure) associated with virgins is at the heart of the ceremony. Thus, the unprotected and often forced nature of sex puts them at risk not only becoming pregnant and experiencing bodily trauma, but also of contracting STDs, possibly HIV.

Discussions of disease risk revealed mixed responses. Some women view themselves as being at greatest risk, while others think the general public is most at harm. Given that the sex workers repeatedly said they use condoms all the time this issue was probed to gain insight into why they think they are in danger. The main responses were fear of condoms breaking and the lack of protection with regulars, indicating an awareness of their men's outside sexual contacts. The population at large was cited as being at greater risk because of low rates of condom use and because they are not taking heed of the limited HIV awareness campaigns launched through the media (radio, television, film stars' advertisements, billboards).

The issues of fear, death, and stigma are intertwined in the women and girl's discussions of the impact HIV has had on their lives and the treatment of those infected. Central changes include the decline in dedications, the desire of mothers to marry their daughters instead of inducting them into the system, and the lack of interest in the custom among the younger generation. A group of older women in one community told us that although their girls can make good money as *Devadasis* and the tradition retains

significant meaning, the fear of HIV is more powerful than the desire to keep the custom going. The negative economic fallout associated with the the disease and the related drop in clients were linked with one woman's regret of not obtaining more clients when she was younger. She said, "I could have had lots of men when I was young but I didn't have enough knowledge about making money and so only had a few. *Now* though, I would like to have more but I am afraid of HIV" (emphasis in original). Others describe AIDS as a definitive marker separating the freedom and happiness of childhood from the anxiety of adulthood, "as a child I was happy, eating and playing, but now I am worried about my daily life and also about AIDS." Young girls and women commonly said that their fear of contracting the disease is why they do not want to have any children, or any more if they already had one or two.

Women infected with HIV are usually cared for by their relatives and/or members of the sex worker community, who often indulge them in their favourite foods and certain "bad habits" (i.e. smoking, alcohol, *paan*)⁶⁸. However, women who were well treated by their family prior to getting sick have been abandoned by their kin, a telling indication of the power of HIV stigma. A particularly troubling reaction to positive test results that was cited on several occasions is when the infected person is not informed of her status. One young woman (around 20) was not told because everyone (i.e. community women and family) agreed that she would "die from the shock" or try to commit suicide. When this girl's mother, who is also a *Devadasi* and quite well off, took her back to their village she told no one of her positive status because she was afraid of the impact on their family's social standing and reputation. The girl's earlier stomach problems were used as the

⁶⁸ These actions were explained in relation to the common belief that a dying person should be fulfilled, and if they are not (especially if they are young) the dead may become unhappy ghosts who make trouble for the living.

explanation for her sickness, an illustration of how medicalization can be used to hide the truth and to control events that threaten familial and communal reputation. This example of the ways that fear and stigma are bound up with disease and family status, even within a *Devadasi* community where *dhandha* is a way of life, helps shed light on the complicating factors that structure people's responses to HIV

Denial of the disease is another response, both by individual women and communities at large. One *Devadasi* we met was convinced that her sickness was a product of black magic ("*visha*" or "poison") and before she passed away she spent thousands of Rupees on healers and homeopathic treatments, none of which worked for very long. She would get extremely upset if anyone mentioned HIV, which was not uncommon in certain communities where the disease had taken the lives of a number of women⁶⁹. Owing to a large number of AIDS-related deaths in one village, this particular place has been branded a hotbed of infection, which has led to an even further drop in *girakis*. The women in this area were actively resisting this label, however, and suggested that another group that was responsible for disease spread, the migrant women who sell curds and vegetables on market days. They said these women likely are not aware of condoms "like we do" (then they added that they use 2 per client, which was not mentioned their responses to earlier questions specifically about condoms) and they might be giving the disease to their husbands; and then passing it on to them. These constructions of etiology and blame highlight the dense nexus of meanings associated with the "bad" disease, which may at some level be aligned with the *Devadasis'* "bad" reputation as socially marginal disease vectors. Thus, by distancing themselves from HIV

⁶⁹ A number of women also denied ever having fevers, a commonly cited first symptom of HIV.

and attempting to gain control over the terms of disease association, the women may also be engaged in a struggle for a new kind of identity vis-à-vis the AIDS discourse.

A final topic to be mentioned under the rubric of fear and stigma relates to the women and girls' potential fear of the Goddess Yellamma, which is a persistent and penetrating force behind the dedication of girls into the *Devadasi* system. Equally important are the connections between Yellamma and sicknesses, specifically those called *hunnu* ("skin disease") that show visible symptoms like rashes, sores, swellings, discolourations, scabies, shingles, gonorrhea, syphilis, and leprosy (Bradford 1983:310). Also of interest is the new Goddess Aidsamma that has a temple devoted to her in Mandya state in Southern Karnataka. Could Yellamma's ties with sexually-transmitted infections shed greater light on the 'folk model' of AIDS etiology? Since there are long standing links between other Goddesses and specific diseases (e.g. *Sitala* and small pox) I asked the women and girls if Yellamma could possibly cure HIV/AIDS or what role she might play in the spread of the epidemic.

The responses were mixed, but the dominant answer was that no, Yellamma "has no cure, only we have to do things (i.e. use condoms). Yellamma didn't tell us to do this sex work in her name, and people are misusing her name in this way". Other women echoed this position, saying "what can she do?, We must use condoms and if we don't we get AIDS", "no, she is the Goddess and she didn't ask us to do this *dhandha*." Another informant supports this view but seems to also be hopeful of Yellamma's power, "no, she didn't say to have the disease and enjoy without condoms. But, she said people may pray to her to help protect them." Only two women were fairly certain that the Goddess might have some role to play. One told us that "if we praise the God it might get cured", while

another replied that "she said that if we have lots of faith in God it may be able to get cured. Only God created people and the disease, so maybe she can help cure it too."

An interesting reply came from a group of older *Devadasi* who described a recent street play put on by state-level reformers. The performance included a message about how Yellamma will not care for them if they get AIDS and they should not give their daughters to the Goddess. When I asked what they thought of the play's theme they added that the play also indicated that people will try to cheat them and say that they should give their daughter to Yellamma to appease their problems, but they should not listen to such people. They appeared to appreciate the reformers 'protective' message and they too agreed that the Goddess could not cure the disease.

A well-developed model of disease causality and ties with the Goddess did not emerge from my inquiries, but the way most women assumed individual responsibility for their dangerous and potentially infecting behaviour is telling. The Goddess has nothing to do with HIV because she seems to have nothing to do with *dhandha*, despite the fact that virtually all of the women are dedicated to her. Yellamma did not tell them to do sex work in her name, but they persist and it is for this reason that they alone must pay the price of pestilence. Another reason the deity is not directly named in relation to HIV may also have to do with the belief that if something is uttered it may come true, which, in this case could spark a cycle of problems for the person stemming from a lack of faith in Yellamma.

STDs and Health Care

Many sources cite terms like "*gupt roga*" or "*khayile*" ("hidden disease") and "*gupta langika roga*" ("secret sexual disease") as the most common colloquial terms for STDs (Ramakrishna 2001: 43; Ramasubban 2000:308), all of which highlight the shame and suppression that surrounds these infections. However, the *Devadasi* women and girls use the basic term "*khavu*", meaning "heat", when describing STDs, which stems from the belief that excess heat from excess sexual intercourse is at the root of these diseases (See Bang and Bang 1994: 82-83). Sex is a heat-producing activity and too much of it, like too much of either cold or hot things (namely foods, environmental conditions, and human emotions) upsets the humoral balance in the body. Sex workers in Mumbai described a similar model of STD etiology that is based on the term "*garmi*", which also means heat (Verma 1999:10). Another term is common among prostitutes in Calcutta is "line diseases" (Evans and Lambert 1997:1795), referring to diseases contracted through their "line of work". Here too, the women's conceptions of causality of STDs are linked with the hot-cold system and certain dimensions of their profession, such as drinking alcohol (a heating substance), unable to follow proper diets, and pain due to an accumulation of semen (*Ibid.*: 1795). Dirt and rough/violent sex were also mentioned, which are connected with pollution and internal bodily imbalance, both of which make them more vulnerable to infection. It is for these reasons that most *Devadasis* avoid sex during menstruation, since they think of the blood as dirty, polluting to men, and making the men more prone to sickness.

The older women in our study provided several descriptions of STDs, *vhudhu/chatta* ("small boils"), *bili multi* ("white discharge"), *kemp multi* ("red

discharge”), and *udach*⁷⁰ (“tumors in the pelvis area”). The basic symptoms of these infections were burning sensation while urinating, white discharge, and abdominal pain. Although the incidence of STDs has declined since the women's increased use of condoms, many continue their monthly visits to doctors for an "injection" (penicillin shot) and/or "tablets" for treatment. They also relayed some of the traditional ways of dealing with these diseases, which are passed down to younger women through older sex workers and *gharwalis*. They include placing salt in a heated cotton cloth and applying it to the wounds and applying hot water with dettol. These "old way" methods may be effective, but they all prefer the allopathic options because of their quicker healing time, perceived efficacy (see Evans and Lambert 1997:1798), and because penicillin is believed to lower the temperature of the body.

The women's descriptions of STDs often led to discussions about health care services. The majority of women prefer private hospitals versus government institutions because they face less stigma, have fewer concerns regarding confidentiality, and receive more effective and timely service. Generally speaking, they visit hospitals for fevers, cough, back/body ache, and colds. When asked why they go to doctors for what seem to be minor things, the kind that are usually taken care of at medical shops or by quacks. One informant explained that although coughs and fevers are not normally regarded as very serious conditions, since the advent of HIV and their awareness of the symptoms many do not want to take any chances with their health. There are others, however, who continue to purchase medicines from the medical shop first and only go to a hospital if the problem persists. It is too early to say whether or not HIV is having a positive impact

⁷⁰ Which, as Bradford (1983: 311) argues, refers to gonorrhea and is derived from the pouch women make in their sarees that is euphemistically the vulva.

on the women's motivations to maintain better health, but their seemingly greater concern for this important aspect of their life indicates that this may be the case.

Life-Histories

The goal of this section has been to fill in gaps of the Indian sex work canon, which has, until very recently been focused predominantly on the urban prostitution setting. I have also tried to present data that illustrates the multiple and intersecting socio-economic, geographic, familial, sexual, and cultural forces that shape the lives of *Devadasi* women and girls in rural northern Karnataka. Perhaps nothing can do this as well as the voices of the informants themselves. In this final segment eight life-histories are presented, four *Devadasi* and four CSWs.

Devadasis

Shoba- age: 22, caste: Harijan, from: Ramdurg. This girl is also from an agricultural family, however her parents work in the fields that they own and do not sound as poor as Renuka's. One of her sisters is married and the other goes to school. Her two brothers also do agricultural work. When asked why she-as the middle child- was initiated to the Devadasi tradition, which was to Yellamma at Saundatti age age 12-13, she just smiled, looked away from us and did not seem to know (or want to tell us why). She said something about the fact that it's part of her 'tradition'. A middle person who informed Shoba's mother about Shanta's brothel and said that she takes care of the girls is how this girl ended up here. She's been practicing sex work for 2 years, since around the age of 20.

Shoba goes home quite regularly, once a month, and she pays her family around Rs 3-400/- month. She keeps between Rs 2-400/- for herself, which is spent on clothes and make-up. She sees 3-4 clients per day and practices safe sex. However, before the PE came she had no knowledge of HIV. She doesn't use any other form of birth control and condoms are, from her perspective, about protecting herself against HIV/AIDS. If she was to become pregnant she said she would not have an abortion but would keep the baby. We asked about problems with clients and she said there aren't any because of the *gharwalis*. Clients come at any time of the day/nite. Regarding education she said she should have gotten more but then did not say much after that, just laughed and smiled. In

terms of her future she said that while she is young she will practice sex work, she will earn money, and then she will go back home to do labour work in the fields. She said that she does not want her daughter to be a *Devadasi*⁷¹ (February 13-21, 2001:43).

Anupamma age: 40; caste: Madaru. Seeing as there had been no boys in her Anupamma's family in the previous 3 generations her grandmother initiated her to the *Devadasi* tradition. Apparently an elder in the community opposed her initiation and wanted to arrange a marriage for her. There is something in the notes about a court case regarding this situation....she was eventually "proven" to be a *Devadasi* and was allowed to practice. It seems Anupamma had serious economic burdens placed on her and because of this she migrated to Bombay to do sex work. There she would make a maximum of Rs 50/- per day, which did not allow her to save any money. So after 2 years (?) she returned to Chimmaud, sold some gold jewelry and cleared her debts. Her mother died around this time and she had the responsibility of marrying off her 3 sisters.

Despite the many difficulties she had experienced Anupamma initiated her daughter to the *Devadasi* tradition. However, her daughter was not interested in this way of life,...but with the help of community members somehow she got her initiated...? Her daughter (who was in the house for the duration of our interviews) said that she is loyal to one person, with whom she has 2 sons, and has not practiced sex work. She explained that her mom wanted her to earn more money and make the property? And that was the reason for wanting her to be in the custom. It seems that now Anupamma feels that no girls should be initiated for the *Devadasi* because of the fear of "new diseases" (AIDS). (March 1-7, 2001:26-27).

Renuka- age: 20. She was the one girl who stayed behind was very shy and sat facing the older women, and so her back was almost to us. She held her handkerchief near her mouth and smiled nervously while talking. Renuka's mother is a *Devadasi* but she has never practiced sex work it seems and is living with the man she married (a registered marriage). She has two sisters, both of whom attend school, and one brother who works as a labourer. Renuka was dedicated to Yellamma of Kogtnur, (a place near Athani) because she had small boils ("haruku") all over her body when she was quite young; a condition that was understood as "kakata" (trouble). Neem paste and yellow powder called "bhandar" (which are two commonly used items by Yellamma devotees) were applied to her body and she feels that her condition has been helped (she has very clear skin and hasn't had any other kind of health problems) because of the Goddess. I asked what if she had matted hair instead of the skin condition, would she have been initiated? The older woman said that no one in Chimmaud has matted hair. She added that anyone can get this kind of hair and said it is because of Yellamma. Interestingly, she told us that even if they don't comb their hair for 8 days it doesn't get matted (which it should), a

⁷¹ When Veena and I were asking her about her initiation into the custom she was not answering and seemed very shy or unsure. At this time Lalita came over, sat beside her on the bed, and put her hands on the young girl's shoulders; kind of supporting her and letting her know she was there.

point which explained or helped illustrate that the hair condition is because of the Goddess (March 24-31, 2001:18).

Lakshmi, who is 28 years old and from the Madaru caste. Laxmi was initiated when she was very young by her father's sister, who was also a *Devadasi* (her mom died when she was just a baby). One of her sisters is also a *Devadasi* and both live with her brother, who is a truck driver. It seems that he asks them to leave the sex trade because he feels insulted about his sisters' profession in front of his friends. Their brother provides the women with the basic amenities of food and clothes, but he does not treat them very well. Also, the women say that they need to keep working to have enough "chini"⁷², which describes small luxury items that give them pleasure. Face powder, creams, toothpaste, and soaps were described as being not only quite expensive, because after each client the women wash themselves and apply fresh make-up to make themselves "beautiful" (i.e. attractive to their clients), they are also essential to their work. Both of the sisters have no children and have gone for fertility treatment in Hubli. However, when they went to Hubli the Dr. suggested bringing in their husbands to test them but because they don't have husbands, and thus do not have an appropriate reason for coming back to the clinic, the women dropped the idea of treatment (March 8-15, 2001: 12-13).

Commercial sex workers

Savita, age: 28, caste: Muslim, marital status: married, from: Munavalli (Belgaum district). Savita had a difficult time with her husband and his family because they beat her and even threatened to kill her. Both her parents and her husbands' family were poor and she felt that she had no other choice but to leave. She left her only son with her parents, so that he could help earn for them eventually, and came to Belgaum 8 years ago. Her parents and family members do not know what she does and Savita tells them that she sells fruits. Last year she arranged her son's marriage. She provided some additional information regarding the general pattern the women fall into that "traps" them in sex work. Savita said that when the girls arrive (usually in the bus station) they are in quite a vulnerable state and only too ready to tell others about their problems. If it is a sex worker who hears her story she will tell the young girls that men will pay her for sex, and that she can stay at the sex workers house for a few days. That is how things begin she said, after that there is little the girls can do but keep on doing the sex work (February 13-21, 2001:39-40).

Roopa- age: 35; marital status: married-widowed; caste: Odia; and place of origin: Narasipet (Guntur), Andhra Pradesh. Her husband died in a construction accident and because her parents were very poor she had to work to help her family. At the time of her

⁷² Comments regarding the necessity of these items and the rising cost of them have been made throughout the research. Although they could be seen as simply extra expenses, the women have come to take great pleasure in having them and possibly also in being able to have them, i.e. having the purchasing power. However, because these are viewed as extras by family members and others who may help support the women they cannot be provided for them unless they do sex work to make the extra money to buy them.

husband's death one of her daughter's was married, but the other one was not. She left her younger girl with her mother and went to Gangavati (in Raichur district) in search of labour or other employment but ended up in the sex trade. At this time she took a loan and went into fairly serious debt (around Rs 25,000/-) to arrange for her younger daughter's marriage, which is why she continues to do sex work. She left Gangavati and came to Gadag upon hearing from another woman about Javal Galli. She did not tell her parents or daughters about her current profession, instead she said that she's working as a maid- servant in a rich household in Hyderabad. Roopa said that after she clears her debt from her daughter's wedding arrangements she will leave sex work and take up any job through which she can support herself. She is very afraid of HIV/AIDS and does not entertain clients without condoms (February 22-28, 2001:13).

Shanta-age: 35-40; caste: Muslim; marital status: married (separated). She was harassed by her husband, who had a concubine and abandoned her and their children. She did not know what to do but Shanta somehow ended up in Javal Galli practicing sex work. She was a sex worker for three years, after which time she met Hamal, a labourer in the bus stands/railway station (i.e. a baggage handler). Although Hamal helped support Shanta he placed many sexual demands on her, expecting her to have intercourse with him 4-5 times per night. She could not take this treatment any longer and, over time, broke off their relationship. She told us that she managed to arrange for the marriage of 2/3 daughters but is worried because she is feeling sick and one daughter is still unmarried. It seems that she came to our interview spot because she heard a "foreigner"(me) was there, who she thought was a Dr., and she hoped we could help her. While she was talking she described all of her symptoms: no appetite, loss of weight, and her mouth was very dry. In fact, she described her tongue as feeling like a stone. She opened her left hand, which held some of the green grapes she always carries with her to relieve her extremely dry mouth. She asked Veena several times 'what she had' and asked if she 'maybe had a little of the AIDS or what?' (February 22-28, 2001:16).

Radhika: Is about 18-20 years old; caste: Samagar (sub-caste of Harijan); from: Irolagi (near Gollapur, which is about 70 kms from Bijapur); and has been in Bijapur for 3 years. She was married and remained with her husband for one year, even though he was impotent⁷³. After a year she returned to her parents who did not want her to return to her husband. She was sent to live with her grandmother in Bijapur city, where she came to be familiar with the Dreamland area. Through some people she came to know who were staying near her grandmother's place she moved into the *gharwalis*' house where she now lives. Her parents know about her job, they come to visit her, and she goes home once a month to visit them (and give them money). While at home she also does the marketing for her parents. Regarding HIV/AIDS she said it's a "new" disease and to prevent it she uses condoms regularly, which she has been doing for the past 3 years (March 8-15, 2001:16).

⁷³ It is interesting that because this girl did not know the word to describe impotency she used the term "jogappa", which describes the male religious mendicants who worship Yellamma and who dress like women.

Discussion

One of the main goals of this chapter was to present information that tests and challenges the idea that certain tenets of the *Devadasi* system have not changed significantly over time. Adapted from Orr 2000:172, these tenets are: hereditary eligibility, professional skill, temple dedication, system as response to no male heir, one girl per house dedicated, dedicated as children, and not allowed to marry. Research data illustrated that a family *Devadasi* tradition was the case for only 10% of older women and 22% of younger girls (n=50). Their skill is restricted to sexual performance, as none were aware of different kinds of duties like dancing, singing, or temple functions- despite the fact that such roles were performed by certain *Devadasis* at Saudatti until fairly recently (see Assayag 1990). Temple dedications are now banned and while some occur on temple sites they do not involve priests or *pujaris*, and most take place by *pujaris* in the women's homes. A significant number of respondents have brothers, older and younger, countering the claim that the *Devadasi* system is a response to an absence of male heirs. The women and girls also indicated that often more than one girl is dedicated per household, and it is not always the oldest. Another rule that did not hold was that of childhood dedication, as 32.5% of the *Devadasis* we spoke with were dedicated after menarche. We also found instances of women marrying, often their first customers, and living with *khams* like married couples.

The remainder of the chapter described the organization of sex work in rural Karnataka, including the women's age, where they were born, caste, house deity, family make-up, sex work entry, sex work types, geography, location, social networks, earnings, HIV, STDs, and health care. These data are essential to help flesh out and complicate the

wider sex work canon in India, which focuses almost entirely on urban brothels and red-light areas. The 8 life-histories presented at the end of the last section attest to and describe, in the women and girls' own words, the many complicating factors, local, macro, familial, and stigma-related, that impact upon their worlds.

The *Devadasi* histories give a detailed picture of life for young and old girls, urban and rural, and they lend insight into the many complicating forces that affect their lives. The conditions of dedication are among the most varied, and range from being facilitated by agents, disease problems, a father's sister, and a contested court case. The women and family member's feelings about it also differ. One older woman dedicated her daughter against her will and now regrets it, while another talked of the shame her brother feels knowing his two sisters do *dhandha*. The young girl in the small urban brothel did not seem to know much about her dedication, and the other spoke of the healing power of Yellamma following her induction into the system. Other noteworthy facets of these histories include one older woman's experiences of migration, two of their thoughts on discontinuing the system, and one *Devadasi's* discussion of the material benefits necessary for her work ("*chini*"), along with the pain of her infertility.

The stories from the commercial sex workers represent equally diverse and powerful experiences. Marital difficulties emerge as a main factor behind sex work entry, ranging from death of a spouse and physical and mental abuse to impotence. Leaving children behind with parents and hiding the work they ultimately ended up doing was common. Economic pressures also figure prominently, mainly as a motivating factor to begin *dhandha*, but also to maintaining their position in the sex trade. As the women described, prostitution is one of (or the) only way they can finance the weddings of their

children and help care for their families in the absence of a dependable husband. The CSWs fear of HIV was also mentioned on several occasions, as were some of the traps that young girls fall into that make them especially vulnerable to agents and other facilitators of the sex trade in northern Karnataka.

CHAPTER 5- COMING OF AGE, MENSTRUATION, & SOCIALIZATION INTO *DHANDHA*

The child prostitute has taken on such iconic status that each child's suffering is no longer seen as the suffering of an individual but has become a stereotype of martyrdom. The assumptions behind this have not been examined, and yet it seems obvious to ask; why is the picture received through the media or through the case studies of the NGOs so uniform, with such repetitive ingredients? (Montgomery 2001:21)

Introduction

Coming of age is universally recognized as a period when youth acquire the social skills, training, and role development necessary to become functioning members of society (Schlegel and Barry 1991). However, the features, conditions, problems, and outcomes of this bio-social process vary cross-culturally, even intra-culturally, and since the late 19th century important scientific and popular debates have been waged as to the uniqueness of this period (Aries 1962; Booth 2003; Kett 1977), and the competing influences of 'nature' and 'nurture' in shaping individual identity (Hall 1904; Erikson 1968; Mead 1928, 1930; Shankman 2000). Recent investigations into these issues for youth in the 'developing' world have illustrated different cultural models of coming of age that highlight the important role of reproduction, sexuality, peers, and family, and an absence of any 'identity crisis', an idea developed from Western clinical traditions that has characterized this period since the 1950s (Booth 2002; Burbank 1988; Davis and Davis 1989; Condon 1987; Holos and Leis 1989; Leichty 1995; Nsamenang 2002; Orchard 1998; Stevenson and Zusho 2002).

While forays are being made into examining culturally diverse experiences of growing up in different parts of the globe this is not the case for young sex workers,

whose lives are typically examined in relation to certain topics like sex work entry, family background, sexual abuse, drug addiction, and the role of social/justice services (Cusick 2002; Jesson 1993; Joseph 1995; Lowman 1987; O'Neill 2001; Weisberg 1985; for an exception see Gorkoff and Runer 2003). This is also the case in 'Third World' contexts, where there is often a special focus on HIV/AIDS, trafficking, sexual tourism, the eradication of prostitution, and cultural traditions of sex work that are thought to place young girls at greater risk of ending up in the trade (Firme, Grinder, and Barreto 1991; Kuntay 2002; Lalor 2000; Muecke 1992; Pike 1999). Popular media coverage and academic research on the *Devadasi* system consistently presents young girls as passive, commodified victims of trafficking rings and superstition, and no attempt has been made to contextualize prostitution within the broader context of their social lives. Take the following quotations from a press release and a Karnataka-based study on the *Devadasis*:

Most of the girls brought into the Devadasi system will return home, but once they reach puberty they will become human cargo in the sex traffic in cities like Bombay, where sex can be bought for less than the price of a bottle of beer (Shah 1997).

Like the rest of the Indian communities, the Harijans are also very conservative. They do not think it in any way extraordinary to follow the old custom and dedicate a girl of their family to prostitution. Then there are so many girls born in the family should there not be at least one dedicated to the goddess? This is the argument advanced coolly by the parents of the girl, as if dedicating the girl to prostitution is in no way different from sending the son of the family to a village school (Banhi 1981/2:14).

Such portrayals reflect the dominant model of the *Devadasi* system in circulation throughout India, which concentrates on individual social factors (i.e. caste, illiteracy, 'backwards' tradition) to the exclusion of the wider macro forces. From my perspective, any attempt to understand the contemporary conditions affecting *Devadasi* women and girls must not only take into account how these conditions impact one another, but how

they are impacted by larger conditions of socio-economic, health, and political inequalities. In this chapter these issues will be addressed as they relate to some of the most formative stages in young *Devadasis*' lives- childhood, sexual maturation and commencement of *dhandha*. I also provide data on the changes that are occurring in the life-cycle rituals associated with coming of age and beginning sex work, which, as will be demonstrated, also have important connections with HIV, social reform, and the political-economy. Before proceeding with the literature review and data presentation, I wish to make my position about the sensitive issue of 'child prostitution' clear.

My bracketing of 'child prostitution' with single quotations indicates my critical use of the term or, more precisely, the discourses that accompany it. The four following reasons help explain my position on this complex and emotive topic. First, the widespread application of this term to different geo-social and cultural contexts by NGOs (e.g. ECPAT), international groups (e.g. UN, UNICEF, W.H.O.), and the media is problematic because in doing so the conditions and meanings of both childhood and prostitution are universalized. Neither being a child nor engaging in prostitution are unitary experiences, and the different cultural constructions of these issues must be considered when defining them (Kuntay 2002:347; Lalor 2000:228; Nsamenang 2002:61; O'Connell and Taylor 1995). Second, while 'child' may be appropriate for some forms of the sex trade, trafficking in particular, research has indicated that most young sex workers are not below the age of 12 (Cusick 2002: 233; Nixon *et al.* 2002: 1017; Weisberg 1985). Third, the dominant representation of children as powerless victims denies any expression by young people of their perspectives and it excludes the possibility of a more complex model of prostitution, one that takes into account some of the positive meanings

the trade has for the youth and their family; i.e. survival, maturity, status among peers, material possessions (Baker 2000:16; Montgomery 2001,1998:140; Muecke 1992; O'Connell and Taylor 1996:16).

The final reason for my criticism of the term 'child prostitution' relates to the overwhelming tendency to frame this issue as somehow being unaffected by the political-economy. While I agree that young girls (and boys) in the sex trade experience gross oppression by gender, violence, and disease, I argue that to fully understand the many complex forces impacting young sex workers, along with the girls' own perspectives on their situation, these factors cannot be set apart from the forces of socio-economic, political, gender, and health disparities. Given the recent work on the body politic (Lock and Kaufert 1998; Scheper-Huges and Lock 1987), the political-economy of HIV/AIDS (Farmer 1999, Farmer, Connors, and Simmons 1996; Singer 1998; Treichler 1999), pro-sex work movements (Kempadoo and Doezema; Overs 2002; Nagle 1997; Sycamour 2000), and the politics of youth culture (Giroux 1998), to not make the vital connections between child prostitution and political economy would be not only erroneous, it would aid in the reification of patronizing and simplistic models of child sex work.

This takes on special significance in the case of the *Devadasis*, where there is a virtual absence of data on growing up as part of this tradition and writers on the subject tend to either universalize their living conditions with child prostitutes globally, or vilify these youth as ignorant and deviant dupes of a no-longer important system. I argue that this phase of life among *Devadasis* in this context (i.e. rural, in their natal communities) is different than the experiences of other young sex workers, because they are based within supportive networks of female kin, friends, and other women, their work is highly

valued because it provides the mainstay of support for their families, and they see reflected in the lives of the women around them socially validated models of feminine behaviour and identity. While I do not believe that this makes coming of age necessarily 'easy' and I do not support 'child prostitution' *per se*, exposing the unique situation of coming of age among *Devadasis* is important because it speaks to the multiplicity of sex work experiences, which, in turn, is essential to expanding current understandings of the nature of prostitution in general.

With this position in mind, the ensuing chapter is an attempt to shed light on the many facets that constitute and impact young *Devadasis*' lives, not just sex work. To understand the significance of their experiences they will be compared with literature dealing with growing up among non-sex working Indian girls, especially those in rural settings, and other young Indian sex workers. This is followed by the introduction of an alternative model of 'child prostitution', which draws upon data from the previous section, along with the issues of political-economy and the girls' points of view on *dhandha* and how it is incorporated into their lives. The final section of the chapter describes menstruation, which is *the* pivotal event en route to adulthood for all Indian girls, and the rituals that accompany the transition from childhood into womanhood, namely the puberty and first client ceremonies. Chapter 5 concludes with a discussion of the major issues raised and their implications in relation to perceptions about both girlhood in India and the 'child prostitution' discourse.

Kabhi Khushi, Kabhie Gham⁷⁴: Growing up Outside the Institution of Sex Work

Non-sex working girls: demographics and identity development

India's massive population of 1, 027,015,247 (2001 Census) contains an extremely large number of young people, approximately 200 million between the ages of 10-19, 300 million if the age bracket is extended to 24 (Verma and Saraswathi 2002: 106). Like the majority of the country's people (65%-70%), most youth live in rural areas. The ratio of females to males in the total population has been declining over the past 50 years, with a decrease from 946 females per 1,000 males to 933 per 1,000 males in 2001 (2001 Census). Owing to socio-cultural values surrounding female sexuality and marriage, girls marry and start having children young. The National Family Health Survey indicates that 34% of girls between 15-19 are married, with the mean age being lower in the rural areas. With respect to child bearing, about 19% of the total fertility in India is attributed to young girls in the 15-19 age group (Verma and Saraswathi 2002:107), and at any given time there are 10 million pregnant adolescent girls (Gupta 2003: 8). Although it has one of the largest school systems in the world and is constitutionally committed to providing universal, free, and compulsory elementary education, India also has the most children and adolescents not enrolled in school, and largest number of nonliterate adults between 15-35 years of age (*Ibid.*:117). Rural-urban rates of education vary widely and while girls have been gaining more literacy skills, almost 30% of rural⁷⁵ girls are unable to read and write compared to boys, and this number increases with age to 55.2% for girls between 20-29 versus 23.7% for boys (IIPS & ORC 1995).

⁷⁴ This translates as "sometimes good, sometimes bad" and was the title of a hit Bollywood movie during my fieldwork in India.

⁷⁵ For their urban contemporaries the numbers are much lower, 9.6% in 10-14 age group; 13.4% for 15-19 year olds, and 21.6 for those between 20-29. But they still fall behind boys in each category, whose rates of illiteracy are 7%, 8.8% and 9.1%, respectively (IIPS & ORC 1995).

The classical Indian paradigm of the life-cycle, known as the theory of *ashramas*, includes four different stages, which are defined mainly by the accumulation of education/training and increasingly complex realizations of one's *dharma* (religious or rightful duty). These stages are: (1) *brahmacharya* (apprenticeship), which spans school age and adolescence; (2) *garhasthya* (householder), lasting into young adulthood; (3) *vanaprastha* (withdrawal), occurring in late adulthood; and (4) *sannyasa* (renunciation), which encompasses old age (Das 1979: 101; Kakar 1978:43; Naidu 1983: 396; Zaehner 1962:111,114). The first period covers the phase of growing up but its rather artificial divisions and adherence to upper-caste male Brahmanical ideals make this model inapplicable for not only lower caste girls, but most Indian youth today.

The introduction of extended schooling, socio-economic development, and the importation of global youth culture in various forms of media, fashion, music, films, and behaviours is having a major impact on the construction of the idea of youth in India. While a number of studies identify the presumed source of these changes (often "corrupt" Western influences) and some of the outcomes of these changes (lengthening of the youth stage, generation gap), there is also a recognition that because this life phase is so new, and I would argue class-based, it has not completely replaced the more traditional passage into adulthood (Leichty 1995; Saldanha 2002; Saraswathi 1999; Thapan 2001). This is particularly the case for rural youth for whom 'adolescence', as a prolonged, troubling period of individual development, does not exist due to the high degree of continuity between childhood and adulthood, and quick assumption of adult status following puberty (Kumari 1995:178; Kumari *et al.* 1990:5; Saraswathi 1999: 214;

Sharma 1996:25). The following quotation from Karanth's study in Karnataka sums up the brisk development of a 'typical' village girl:

For her, by the time she is 10 years old, and if she has a younger brother or sister who is one or two years old, she starts taking care of the child. She is also found cleaning the household vessels and clothes. By the time she is 15 or 16, her parents start talking about marriage and in another year or two she is in her husband's home. She visits her home occasionally, but gradually these visits reduce, and are made only at the time of child-birth. By the time she is 25, it is common to find her with two children, and a third on the way. One wonders whether to consider them as youths or adults (1981:93).

Thus, for rural girls life is viewed as more of a progression of changing roles and responsibilities than a process of personal development, an idea that underlies Western psychology and has become part of global youth culture (Seymour 1999:279).

socialization, sexuality and reproductive health, and the social world of contemporary Indian youth

Although quick, their path to maturity contains a number of key features that provide insight into the process of socialization and gender development. One of the fundamental influences on the experience of growing up female in India is the generally negative status attributed to girls. While boys are valued for their economic and spiritual⁷⁶ contributions to the family, girls are typically viewed as economic burdens because they move to their husband's household following marriage and require some form of dowry (Das 1979: 93; Dube 1988:167; Kakar 1978:57; Kumari *et al.* 1990:11; Seymour 1999:55). This emphasis on their eventual marriage translates into their upbringing, as the preeminent goal of bringing up female children is to impart the skills required to be a

⁷⁶ In the Hindu tradition only boys are allowed to perform the final funerary rites for parents, which is considered essential to the transition to the 'next life' and to help ensure spiritual peace for the family left behind. The only exception to this rule is among *Devadasis*, who were traditionally allowed and expected to carry out this ceremony at the death of their parents or certain family members.

good wife, daughter-in-law, and mother (Kumari 1995:179; Saraswathi 1999:217). Girls are reared to be obedient, self-sacrificing, modest, submissive, nurturant, hardworking, and home loving (Dube 1988:169; Seymour 1999:55; Sharma 1996:26).

Along with the physical requirements of preparatory training from daughter to wife is the more interior development of feminine identity, which is often assumed to be purely socio-centric in nature. The idea that “an Indian woman does not stand alone; her identity is wholly defined by her relationships to others” (Kakar 1978:56)-mainly her father, husband, and son- summarizes the popular and academic position on this issue. This clinical, psycho-analytic theory has been contested by recent fieldwork, however, which demonstrates that although girls’ social positions are highly dependent on their relationship to others, the factors of interdependence and individuality are essential tools with which children may exercise social flexibility while maintaining prescribing social hierarchies (Seymour 1999:82-83; see also Briggs’ 1998 brilliant analysis of this situation among the Inuit).

Along with gender discrimination, marriage, and identity achievement, the intertwined topics of caste and the special sexual vulnerability associated with females during this life stage also impact what growing up is like for young Indian girls. The deeply entrenched belief that women’s unregulated sexuality can endanger caste purity (which is discussed in greater detail Chapter 6) has profound restrictions on the spatial movements, activities, and social position of girls within their household and communities. While female virginity is celebrated through its links with purity, a menstruating virgin is quite a different phenomenon because of the special dangers engendered by her newly emerging sexuality. The lack of access to sexual satisfaction

and only recent ability to menstruate (and cool the body of accumulated blood), means that menstruating girls are considered to be extremely over-heated, which is perceived as dangerous to men and her caste line if she engages in sexual intercourse with the 'wrong' person (Caldwell 1999:162; Kumari 1995:179). These complex associations between menstruation, burgeoning female sexuality, and caste purity also help explain the emphasis on early marriage in the Indian cultural context. Another motivating factor behind pre-pubescent marriage and strict regulation of young girls' sexuality is the belief that a father incurs the sin of destroying an embryo at each appearance of the menses so long as the girl is unmarried (Bhattacharyya 1980:37; Kakar 1978: 71; Kumari 1995: 179; Kumari *et al.* 1990:51)⁷⁷.

Against this cultural network of meanings that frame the process of growing up in India are the girls' experiences. With respect to sexuality and reproductive health⁷⁸, as two of the dominant features of maturity impacting their lives, what do they know and how do their behaviours compare to the prescribed norms described above? The evidence illustrates a distressing combination of low levels of awareness about sex and reproduction, higher than expected rates of pre-marital sex, and risky sexual situations (Choose a Future 1999; Jejeebhoy 1998; Ramakrishna 2001:41-42; Peltó 2000).

Studies of school and college students reveal the pervasive effect of the 'culture of silence' that surrounds sexuality and the body in India, as respondents frequently had inaccurate understandings of STDs, HIV/AIDS, and reproduction (Aggarwal *et al.* 2000;

⁷⁷Despite the ancient roots of this particular idea it continues to impact people's actions regarding the status of young women living with their families, some of whom have been dedicated into the *Devadasi* system to avoid any deleterious religious outcomes associated with their mature and unmarried status.

⁷⁸ Given the social and religious prominence of menstruation, it will be focused on among non-sex working Indian girls in the second major section of the chapter that deals with the event and the ceremonies associated with it.

Mathai and Ross 1997). In one study of grade 12 students, 18.5% agreed only prostitutes could get HIV/AIDS; 67% reported that they were not the *type* of person to contract HIV, and 17% of the boys and 9% of the girls indicated that they would actually risk getting AIDS rather than miss the chance of having sex with an attractive stranger (Tikoo 1996:78). Research findings from rural settings report equally low rates of knowledge regarding sexuality and reproduction among young girls, with only 22% having an accurate understanding of their anatomy, and 61% believing that pregnancy occurs by the grace of God (Murthy 1993:45, 46). Another study, based in rural Karnataka, describes what girls are told by their mothers to keep them away from boys: "if girls talk close to the boys and the boy's breath goes into the girl's mouth then she will get pregnant" (Raju 1988:47). It is no surprise then that among this and other samples girls report ignorance about and of fear of boys and sex (Jejeebhoy 1998: 1283-1286; Kumari *et al.* 1990:61; Murthy 1993:37; Rakesh 1992:96).

Contrary to the longstanding belief that commercial sex workers are young males' first sexual contact, recent evidence shows that many young girls (between the ages of 15-19, sometimes younger) are engaging in sex before marriage, often with neighbourhood friends or family members (Aggarwal *et al.* 2000: 228; Mathai and Ross 1997: 568; Peltó 2000:111). Armed with many questions, lack of experience, sexual desire, and virtually no information from schools or parents, it is to their peers that youth turn for advice on these matters (Murthy 1993: 42; Rakesh 1992:99; Ramakrishna 2001: 42). While they may be able to pool their collective understandings, observations, and bits of knowledge gleaned from commercial films, pornography, popular magazines, and television, it is more often than not a case of the blind leading the blind with respect to

transfer of accurate sexual and reproductive health knowledge. A number of studies indicate that young people want to receive sexual education in schools, but this is not being followed up by most educational institutes because of prevailing ideas that such information is private or taboo, and if provided to youth they will become promiscuous (Aggrawal *et al.* 2000:226; Kumari *et al.* 1990: 60; Tikoo 1996:79)⁷⁹.

The misinformation about sexuality, reproductive health, and issues like HIV/AIDS not only makes youth confused, it places them at significant risk for contracting diseases and other health problems. While data on crimes like rape are just recently becoming available, statistics suggest a rise in the incidence against young girls⁸⁰ under the age of 16, who comprised 24.8% of the total cases in 1990 and 35.7% a year later (Mehra and Chatteraj 1995:136). These numbers represent only the tip of the iceberg, as evidenced by Ramakrishna's (2001:42) study on adolescent boys in Bangalore, who rated rape as the second most pleasurable experience even though they did not have first hand experience⁸¹. The socio-economic, cultural, and religious implications of such an event for a young girl ripple far beyond the initial bodily trauma, to the possibility of pregnancy, induced abortion, family shame, reduced marriage possibilities, and even forced prostitution. Factors such as lack of awareness, fear of social stigma, lack of decision-making control, and inadequate services result in delayed clinic visits by adolescents seeking abortions, for instance, and they consequently have greater chances of complications during the procedure. One study in Bombay reported

⁷⁹ However, schools in at least four of the South Indian states now have sexual education programs, including HIV prevention components.

⁸⁰ See Nayyar and Rajashekhar 1998 for a discussion of the social conditions and experiences of rape among male street children.

⁸¹ Importantly, when asked how they knew rape was pleasurable, they replied that they had seen it in films and the rapist always seemed to find much pleasure (Ramakrishna 2001:42). As simulated rape is a staple of Indian commercial cinema, they may have seen many rape scenes and incorporated this form of violence into their ideas and practices surrounding sex and gender relations.

that as many as 20% of all pregnancies to adolescent abortion seekers occurred as a result of involuntary contact (14% rape, 6% incest), an indication of the severity of these acts against young girls and the potential health risks that can result (Jejeebhoy 1998:1283; Ouattara, Sen and Toomson 1998: 29; see Caldwell 1999:223-246 on the issues of rape and incest in India, specifically Kerala).

These connections between adolescent health, HIV risks, and reproductive health knowledge and larger issues of sexuality and gender inequality are of the utmost importance when trying to gain insight into what growing up female is like in India. However, other issues like family, work, peer relations, leisure, and future aspirations are also vital to the experience of being young. Research into these topics in the Indian context is limited compared to the veritable industry of global youth culture that exists in 'Western' countries, and most studies tend to focus on the 'problems' of youth, especially for girls (i.e. gender discrimination, illiteracy, young marriage, social restrictions, sexual harassment); nevertheless, they are significant to understanding the totality of maturation among Indian girls today and how this experience compares with those of young *Devadasis*.

The family is the cornerstone of social influence, and in India the position of youth in this context is somewhat unique because of its joint/extended nature. The familial unit typically consists of the patriarch of the household and his spouse, children, married sons, their spouses and children, and other members of the extended family like single brothers, sisters, widowed aunts and other dependent kin (Sinha 1994; cited in Verma and Saraswathi 2002:108). As with social organization generally, the family is structured hierarchically by the principles of age and gender, with elders having more

formal authority than those younger and men having greater authority than women (Kakar 1979:117). Kinship is another determining factor that impacts the experience of growing up, as it governs the recruitment and placement of individuals in the group, formation of the household, residence at marriage, resource distribution (including inheritance and obligations), and responsibilities in the business of living (Dube 1988:167).

Being female in this context means being subjected to many more forms of discrimination and social control than for boys, especially in terms of access to food, health care, education, and mobility (Raju 1988:26-30). While their disadvantaged status within the family engenders many hardships for girls, the love, duty, and socio-economic needs that bind family members together work in complex ways in reality, such that girls are not all or always treated as non-entities or chattel to be shipped off to another family. Indeed, a number of studies illustrate that contrary to its depiction as an almost emotionless event, a daughter's departure at the time of marriage is a deeply charged moment within the life of a girl and her family members, especially for the mother who is losing a valued helper and companion (Dube 1988:169; Seymour 1999:52-59; Thapan 2001:363).

In terms of work experience, girls make significant contributions to the household economy by performing a range of tasks around the home, and many also participate in wage labour (until puberty, that is). Most duties fall to the oldest girl of the family, but all children are expected to help in some ways by collecting firewood, cooking, washing vessels, fetching water, shopping, childcare, washing clothes (Bhogle 1999:290; Karanth 1981: 35-37; Patwarthan *et al.* 1985:95; Raju 1988: 39-40; Vlassoff 1978:179-180;

Waddin, Gaonkar and Kataraka 2001:32-33). Looking after cattle, herding goats and sheep, selling produce at markets, and casual work in agricultural fields are some of the paid jobs performed by girls (Kumari *et al.* 1990: 88-89). Although women and girls are engaged in more and various kinds of work than men and boys, when asked if they would appreciate assistance from their male family members rural girls in one study said no, "it's not their work, they are women's tasks" (*Ibid.*: 1990:94). These responses are not surprising given the ways in which occupational and domestic responsibilities are structured by gender and age, and while their perspectives might not mean that they are necessarily happy with their lot, they may reflect a sense of ownership surrounding these forms of work given the positive values placed on work as an economic necessity, opportunity for female socializing and gossip, and an integral component of female identity formation.

Concomitant with many aspects of growing up, the extent to which young girls participate in peer groups fluctuates according to socio-economic and caste status. It has been argued that friendship has little chance to flourish in societies where kinship structures remain strong (Bell and Coleman 1999:6), and the scant amount of data on the subject in India appear to support this assertion. This may be particularly true for poor girls in rural parts of the country, most of whom do not have the luxury of spending hours a day with female friends at school and cannot afford the leisure activities that require extra time and money to participate in (Saraswathi 1999: 217; Sharma 1996:50). Those living in urban centers, however, especially those who attend school and whose mobility is less confined, do belong to more well-defined peer groups. With shared concerns like music, fashion, body image, parties, mixing with boys, joy riding, sex, and "acting cool",

many facets of urban Indian peer groups mirror those of larger global youth culture (Saldanha 2002; Sharma 1996:54-55; Thapan 2001: 367-368). Although it is difficult to say with certainty, a handful of studies have documented the importance of friendship groups among rural girls and boys, which suggests that the presence and extent of peer involvement may not be so cut and dry along rural-urban lines (Murthy 1993:17, 19, 42; Osella and Osella 1998). Indeed, my data contests this dualism, as many rural *Devadasis*, who have their own income and a certain amount of control over their earnings, do spend significant amounts of time with female friends at work and in the pursuit of leisure.

The types of activities young girls take part in depend a great deal on their age, education, economic status, time constraints, and resourcefulness. To a large extent, the things young, educated Indian girls do for fun in large cities are similar to lower-middle class youth around the world: going to movies, parties, artistic or sport performances, for walks, watching television, eating outside the home, and shopping. Such opportunities in the rural context, however, are more limited and girls may read together, listen to music, play games, attend the cinema, go for tea or a snack at a canteen, work in the fields, go to the temple, and participate in annual festivals (Karanth 1981:83-87; Kumari *et al.* 1990:102; Murthy 1993:25). With regard to future aspirations, the majority of young Indian girls expect and desire to be married, have children, and among the upper classes some also express interest in employment of some sort or higher education (Murthy 1993:72-73).

Tough Love in a Complex World: Literature on Socialization Among Commercial Sex Workers and *Devadasis*

In many respects, growing up within the context of the sex trade differs from the experience among non-sex working girls, as outlined above. Yet, when some of the external manifestations of what being young among the two groups is like are stripped away a remarkably similar set of factors can be identified as structuring the 'female youth experience' in India (mainly rural and poor urban). Sensationalized media stories and many academic works consistently portray 'child prostitution', especially in 'developing' countries, as a product of corrupt international trafficking rings, 'backward' cultural traditions, national underdevelopment, parental greed, and traditional systems of sex work like the *Devadasi* institution. What has emerged from a careful reading of the literature and my own fieldwork is quite a different model, one that hinges on the connections between some of these larger socio-economic and political forces and local conditions of gender, age, sexuality, power, disease, poverty, and culturally sanctioned knowledge transfers regarding issues of sex and reproduction, which affect all girls.

My aim in trying to formulate an alternative model of 'child prostitution' is twofold. First, to shed greater light on the complexities, good and bad, of what being a young sex worker is like, which is essential to contesting dominant, largely first world constructions of 'child prostitution'. Second, by demonstrating some of the similarities between the conditions of growing up for young *Devadasis* and non-sex working girls, I hope to show that the seemingly impenetrable gulf between sex workers and other women and girls that societies erect, and make great pains to maintain, is not an accurate representation of life for those on either side of the divide. Another use of these data is

that they can help inform HIV prevention and programs aimed at reducing the vulnerability of young girls' risk for disease infection.

The illegal status, diversity, and increasingly dispersed organization of sex work in India make discerning a reliable estimate of the total number of prostitutes very difficult, but the number ranges include 70,000-100,000 (Karmakar 2001:77), 270,000 (ECPAT), 1.5 million (Gathia 1999:15), and as high as 8 million (Amin 2004:8). Due to the invisibility or secrecy surrounding young prostitutes and the differing age ranges used by academics, NGOS, and other international bodies (for some it is under 16, others 18 or 20) it is even harder to gage the percentage of young sex workers. For example, those using the under 16 range estimate that children constitute 20% of the total sex worker population (Gathia 1999:15), while Karmakar (2001:17) uses the age bracket of 15-17 and concludes that 25% of the total are children. Using Gathia's figures, which are more reputable if still low, child sex workers in India constitute roughly 13-15% of the total sex worker population, and number around 75,000. To understand how these percentages relate to international figures, the UN Human Rights Commission estimates that of the 10 million children (boys and girls) around the world who engage in sex for money each year, one million become prostitutes. UNICEF, on the other hand claims that there are at least one million child sex workers in Asia alone, with the majority being in India, followed by Thailand, Taiwan, and the Philippines. Despite these competing claims, it is quite clear that young girls do constitute a significant portion of the sex industry in India and their numbers may be rising due to an increased demand for virgins since the advent of HIV (Karmakar 2001:81).

Like the literature on sex work in general, the theme of entry into the trade dominates the research on 'child prostitution' in India. In their classic study based with young girls and women in Bombay, Punekar and Rao (1962:91-92) found 26 causes of prostitution, which are divided into the following 6 groups according to nature and origin.

- I- 1. Death of father/mother/guardian/husband/relatives
- II- 2. Poverty
3. Destitution
- III- 4. Ill-treatment by father/mother/guardian/husband/relatives
5. Neglect by father/mother/guardian/husband/ relatives
6. Otherwise unhappy family relations
7. Unfaithfulness of the husband
8. Desertion by the husband
9. Otherwise unhappy marriage
- IV-10. Connivance of parents/husband/relatives
11. Introduced by parents/husband/relatives
12. Bad influence
13. Deception
14. Kidnapping
15. Tradition or heredity
16. Environmental influence
- V- 17. Sexual urge and sex curiosity
18. Illicit sexual relations
19. Illegitimate pregnancy
20. Rape
- VI- 21. Desire for easy life
22. Love of adventure
23. Hatred for marriage
24. Ignorance
25. Low moral values
26. Desire for revenge

In his reformulation of this extensive list, Joardar (1983:210-211) reduces the vital factors behind sex work entry to: environmental influence, deception, bad influence, introduced by husband/brother/father's brother, and illegal pregnancy. Although both

groups of authors acknowledge that one issue alone does not precipitate the commencement of prostitution, most items on these lists revolve around personality traits, recalled emotional motivations, or singular events. The same is true of most stories of trafficking, which concentrate on individual and situational issues like kidnapping, demand for virgins, or the evils of prostitution; all of which exclude any examination of the broader factors like drought, disease, gender inequality, or socio-economic need. A more tangible account of how such factors come together to produce situations of sex work entry is from Razia, an informant in Jhaveri and Datta's book *Unzipped*.

I used to live in Maharashtra, in Sholapur. I used to live there only, till we had a fight at home- then I came to Bombay. I hadn't ever thought about coming to Bombay before. I decided very suddenly...I get angry very quickly, and there was a fight at home. I used to always say, "if you people keep doing this to me, then I'll leave home and go away." No one ever took me seriously. Then one day I really left home. It was 9:30-10 at night and the train was standing right there. I didn't know where all it was going, but I asked, "Where is this train going? Give me a ticket." I got on and fell asleep. Before I knew it, it was morning and we were in Bombay (2002:28).

This example illustrates the complex *mélange* of forces at work: familial instability, inconsiderate treatment, personal anger, impromptu decision-making, ignorance about the consequences of her action, and her vulnerability to those in the trade.

With the exception of the work by Joardar (1983); Patkar (1991); and Sleightholme and Sinha (1996), accounts of socialization into prostitution in India are extremely rare. Based on research in Calcutta, Joardar (1984) discusses the resources imparted by older women to new entrees into brothel life, such as using new names, certain ceremonies, and examples of how to extract money from clients and deal with exploitative *gharwallis* (madams). He notes that during this adjustment period, girls have to unlearn aspects of their previous socialization in order to acquire the skills needed to

survive in the sex trade (*Ibid.*:156). Patkar's (1991) discussion of growing up around a red-light area in Bombay includes several moving accounts by young girls and mothers, who describe the stigma and danger involved in this kind of upbringing, along with the special closeness that often exists between mothers and daughters who depend upon one another a great deal.

Sleightholme and Sinha (1996, ch.6) provide important information on various aspects of how young girls and sex working mothers deal with the process of maturation. Among their most important findings is how the cycle of disadvantage is, more often than not, reproduced among successive generations of female children. Lack of monetary support from lovers or sons, economic need, vulnerability to sexual violence around puberty, and internalized values reflecting the world of sex work all combine to produce situations where girls, almost inevitably, have no choice but to carry on their mothers' profession. As helpful as these three sources are, they all deal with women and girls in an urban context and none of them involve the special circumstances of growing up as a *Devadasi*.

'thin on the ground': literature on Devadasis' experiences of growing up

Sensationalized media coverage, lack of quality investigations, and a near absence of contemporary research on the *Devadasi* tradition makes ascertaining the number of young girls currently involved very difficult. Estimates of annual dedications into the system vary from 1,000-1,500 (Chakraborty 2000:52; Giri 1999:34; Shankar 1990:131) 3,000 (Sachs 1994: 29; Sahoo 1997: 368; Sinha 1999:74), 5000 (Jordan 1993: 269), to astronomical figures like 10,000 or 13,000 (Chakraborty 2000:52). The fear of being

reported to police or appearing morally corrupt led the majority of older and younger *Devadasis* to either deny or hide the on-going practice of dedication, which meant that I cannot confirm or contest the numbers above. Despite the covert and less elaborate nature of the ceremonies today, from the numbers of young girls we spoke with and observed throughout northern Karnataka anywhere between 1,000-2,500 girls may be dedicated per year.

To date, there is no study that documents what coming of age is like for *Devadasis*. The focus where young girls are concerned is on dedication ceremonies and initiation into prostitution, or in the case of more historical accounts, their rigorous training in dancing, music, and temple service⁸². In the past the rules governing dedication appear to have been very strict, and the girls had to be pre-pubescent, preferably before the age of 9 (Sadasivan 1994:46; Shankar 1990: 100; Tarachand 1991:17; Thurston and Rangachari 1909:142). There is such variance on the nature of the ceremony and to which particular system of traditional sex it applies (i.e. those in Tamil Nadu, Andhra Pradesh, Karnataka), that I will include only those general features that appear in most of the descriptions.

Basically, a young girl would: (1) take a purifying bath on the day of the occasion (which would be selected by an astrologer), dress in clean clothes, and bring an offering like betel nut for the priest and deity-to-be; (2) she would travel with older *Devadasis* to a temple, where arrangements between the community and temple authorities had already been reached regarding payment for the service; (3) a *tali* or *manglasutra* is placed before the deity (or item like an iron sword or dagger), and she may put a garland around the

⁸² Kersenboom's (1987:179-202) description of rites of passage among *Devadasis* in Tamil Nadu could be seen as an exception, but her historical and ritual foci do not shed light on the experiential dimensions of being a young girl in this system.

deity or item that symbolizes their union; (4) she sits facing the deity (likely in a Northern direction) and her mother may put rice on her forehead (symbolizing fertility); and (5) the priest then performs a marriage ceremony, circles a lamp before her face to remove evil forces, and ties the *mangalasutra* around the girl's neck, indicating her union with the deity or object (Henriques 1962: 181; Sadasivan 1994:46; Thurston and Rangachari 1909:143).

Contemporary accounts of dedication reveal that the process is quite similar to past ceremonies (Bahni 1981/2: 10-15; Mowli 1992:6; Shankar 1990: 100-105; Tarachand 1991:91-92). The last author cited, however, includes interesting data on some of the transitions that have occurred since dedication were made illegal in 1982. Tarachand (1991:86) learned that the ceremony has become very lucrative for priests, temple officials, and police, all of whom must be paid to keep the practice secret. During the time of his fieldwork (early 1980s) the cost of dedication ranged from Rs 500/- to Rs 5000/- (\$15.00 Cdn), which is an enormous amount when compared to the fee of Rs 5/- to Rs 1001/- required for a hair cutting ceremony (*Ibid.*:86). He also found that contrary to the rigid rule about the pre-pubescent status of the girl at the time of dedication, a number of girls go through the ceremony after they have matured. Some young women have experienced illicit love affairs, unwanted pregnancy, and rape, all of which have the effect of ruining their opportunity for a 'decent' marriage. As a result, some were dedicated as *Devadasis* in an attempt to safeguard themselves and their families from the social stigma of being sexually 'spoiled', and to help with the family economy (*Ibid.*: 61,66, 113).

The second main ritual that defines *Devadasis*' socio-sexual status during their lifecycle is that of sexual initiation, about which very little is written. Traditionally it was the maternal uncles, caste members, and influential or rich men who were given the honour of de-flowering newly matured *Devadasis* (Mahale 1986:126; Tarachand 1991:61). Today most patrons come from the third group, and until recently it was a privilege and status issue to be known as the first client and/or patron of several *Devadasis* (Shankar 1990:105). These men may form long-lasting relations with girls or they may never visit again, but if they do they are given preference over any other clients (Shankar *Ibid.*:105-106; Tarachand 1991:61). The women and girls I worked with provided information on both the initiation and menarche ceremonies, which is extremely valuable given the paucity of ethnographic data, and these accounts are presented after discussing growing up as experienced by my informants.

Helping Out, Hanging Out, and How Maturity is Experienced: Evidence from *Devadasi* Women and Girls

My language instructor told me of a few *Kannada* terms used to denote 'youth', one is "*praudha awastai*" ("young", "youth" + "stage"), and a more colloquial term is "*hare*" ("youth", "in between young and adult stage"). When discussed among *Devadasis*, they indicated that a child is someone who is 10 years old or less, while "*doddaki*" (lit. "big girl" or "she has grown big") refers to a girl who has attained puberty. They described *doddaki* as constituting a separate phase of life, but just how it compares with being an adult was a bit confusing at first. When asked about their term for 'youth' they said "*hare*", which covers the time from menarche until age 20 or so. I was curious about their constructions of this phase and asked if a young woman of around 20 years had a baby,

would she be considered an adult? “Look, she *already* has kids” is how they replied, indicating that having children does not “make” someone into an adult⁸³ and that even though a girl is considered grown up after her period she is still seen as young. This example also illustrates that while their passage to adulthood is quick, it is not as instantaneous as many writers on young people in ‘developing’ countries assume.

It is interesting to compare their responses regarding maturity among boys, which involved a great deal of laughter and, as I later found out, resentment because of the inappropriate nature of the topic (perhaps especially in reference to boys or men, which is considered a taboo issue to discuss⁸⁴). The women said there is no equivalent of *doddaki* for boys, and they are considered ‘young’ when they are 20-30, or even 40, years of age. They will only be “old” when they reach 60 or so. When I asked if boys went through anything like menstruation they laughed, covered their mouths, and told us that when they begin to get moustaches it is said that they are becoming grown up.

When trying to get a sense of what their childhood was like before they started *dhandha*, I asked if they had worked or went to school. Out of 45 responses, the majority (25) indicated that they worked either in the fields, construction, rearing cattle, or sweeping, and 2 of these informants also attended school. Fifteen girls told us they went to school⁸⁵ (7th standard being the highest achieved), and of these 3 also worked. Five young *Devadasis* did not work or go to school, instead they spent time doing housework and playing. Regardless of their particular answer, virtually each girl participated in a

⁸³ While biological changes do not always engender social changes, in some cases they do. One woman said that when her daughter is married and has kids she (the mother) will be considered an ‘old person’, which highlights the importance of reproduction to assigning personal status and age among close kin.

⁸⁴ See the *importance of failures* sub-section of Chapter 2 and fieldwork examples of sexual shame in Chapter 6 for details.

⁸⁵ Their reasons for stopping school included sickness, loss of interest, low skill level (and parental beatings because of this), attaining maturity, and because parents wanted them to cease their education.

significant amount of housework when they were young, mainly helping out with preparing food and washing clothes and vessels.

Another important issue I inquired about was whether the girls knew they would do *dhandha*. Owing to their close proximity to situations of sex work for most of their lives, I presumed that they would indeed know their fate. However, all but one young girl said they had no idea they would be doing *dhandha*. Two participants said that “not even in my dreams did I know I would be doing that”, while a couple other indicated that after they matured their friends or neighbours (*Devadasis*) told them. It could be that their mothers and other female family members doing *dhandha* did so in other people’s homes and nearby lodges or that they worked while the girls were busy with other household/paid tasks⁸⁶ or were asleep. The deeply entrenched taboos surrounding sex may also help explain this situation, with the mothers never discussing the issue and the children never assuming that this is what their mothers were engaged in. That only 22% of girls (and only 10% of older women) come from families where the *Devadasi* system is established is also relevant. When combined, the factors of time management, prohibitions about sexual matters, and low rates of intergenerational participation in *dhandha* may help explain the girls’ lack of awareness about their future in sex work. Or, alternatively, they may have simply been lying to me, not an uncommon occurrence when conducting fieldwork on sensitive issues.

Linked with their lack of knowledge about their eventual entry into *dhandha* are their perspectives on the future. I wanted to know if it is viewed as one of impending doom, as depicted in the dark portrayals of most accounts of ‘child prostitution’. My

⁸⁶ Because the average time spent with clients is between 10-15 minutes and the women do not undress, this is plausible.

points of entry for understanding this issue came from the girls' responses to the questions 'what is the difference between being a child and an adult?' and 'would you rather be a boy?' Beginning and doing sex work are not, and in many ways cannot be, understood by young *Devadasi* in isolation from the other aspects of life it affects. For instance, a significant number of girls indicate that starting *dhandha* is part of what constitutes being an adult, which is connected with the assumption of greater social and economic responsibilities for the household. Similarly, while virtually all participants look back fondly on childhood, only half of them said they would rather be a boy because of the negative consequences of doing *dhandha*⁸⁷. Of the other 50% who answered "yes", a common reason was their desire for mobility and not having to contribute as much work for the family as they presently do. Also telling are the answers given by the girls who said "no"⁸⁸ (8/31 or 25%), many of whom told us that they want to earn and enjoy life, and that their work is fundamental to the survival of their families. Just because their work is highly valued does not mean that it is enjoyed, but what this and the other answers reveal are the complex socio-economic, familial, spatial, and fun-oriented meanings attributed by the young girls to *dhandha*.

To make sense of the young girls' social world I inquired about such things as friends, "timepass" (leisure), and what they do everyday. Most girls spend a great deal of time with their female friends, the majority of whom are also *Devadasis*. Of the participants from smaller villages who moved to larger towns when they began doing sex

⁸⁷ Which include having to sleep with so many different men, a preference for marriage and being from a "good" family, and being bored. Very few younger informants mention the dangers posed by HIV/AIDS compared to older *Devadasis*.

⁸⁸ Another relevant issue that may be behind this response is that of fate, which is a particularly powerful force within the Indian context. Most people understand their current lot in life as being preordained and that another opportunity awaits them in the next life. To contest this sacred order would be dangerous and highly unorthodox.

work, several indicated that they like sex work, which was linked with their preference for living in the bigger centers and because they had friends in these new places. A few others said that they have friends in their home villages, who they could visit when these girls returned to their natal houses during their pregnancy. One or two young *Devadasis* who were new to *dhandha* (and the particular community we met them in) told us they do not have any friends. When discussing “timepass” friends emerged as a vital part of their social lives, and just under 60% of girls indicated that most of their leisure time is spent with female peers. With friends they “think of the life”, talk about clients, go to movies (at home or they travel to nearby towns), watch television (especially *Kannada* language shows), gossip, spend time with their children or look after siblings, do housework, walk around, go to pan shops, wait for clients, go to the market, listen to audio tapes, and do *dhandha*. In terms of what they do daily, 54% said housework, 29% *dhandha*, 10% “timepass”, and 6% said they did other work (e.g. paid labour, childcare).

To learn how young *Devadasis* see their lives compared to boys and other girls, we asked what types of things these other youth did on a daily basis. For the most part, boys either work or go to school. The kinds of work they participate in include construction, vehicle maintenance, agriculture, spinning, factory, or collecting wood. Girls, on the other hand, are thought to be going to school, married, doing housework, working in the fields, or gathering wood. I also asked what non-sex working women do, to which they replied “housework” and “married”. While doing *dhandha* takes up a significant amount of time, in some respects many of the things young *Devadasi* girls are engaged in are similar to those of other girls, as housework, leisure, and other forms of work constitute 70% of their daily activities.

Discerning the ways in which the girls evaluated the quality of their life and set goals for the future was difficult because many did not understand these questions at first (see Kumari *et al.* 1990:104-105; Sharma 1996:68-70 for similar responses among rural girls). This could be due to their ideas regarding fate, not wanting to identify any one person or thing as the “best” for fear of bringing harm to them/it, or the practical outlook that because problems are a part of life it does not make sense to dwell on them. Whatever the causes are, once the questions were explained in greater detail, the girls offered several interesting answers. In terms of what is “best” about their life, 34% said their children, 48.4% parents (includes “mom”, “family”), 20% friends, 11.4% said they have no happy moments, and 5.6% indicated they have had good and bad moments. For “problems”, just under 30% told us they had none, 15% said the loss of a child, 12% gave no response, and 9% was attributed to both a loss in income and losing a regular. Other answers given by a small number of girls include losing a brother, being bored of working in the fields, being dedicated, losing a mother, and having typhoid. The dominant future goal identified by the girls with children was to “give a good life for kids”⁸⁹ (35%), followed by finding another job (35%), having children (14%), and maintaining good health (10%). A few girls replied that helping support the family, not thinking about it (listens to mother and will think about it later), earning and saving money, and maybe developing some kind of business are among their goals.

The final two issues that help clarify what growing up is like among *Devadasis* today relate to the girls’ constructions of childhood, adulthood, and maturity in general. When asked “what is the difference between childhood and adulthood?”, 80% said that

⁸⁹ Which they explained as referring to being like husband and wife, giving them an education, helping them obtain good jobs, and getting married.

being a child was better for the following reasons: they were fat and attractive; they were happy, had nice food, played and slept; they did not know about *dhandha*, had no burdens and were unaware of difficulties of life; they were under parents or brother; they used to roam around and enjoy things; and they did not know of poverty and wealth. Those who viewed adulthood more favourably (20%) supported their points of view by saying that now they have money, a good house, can support the family; they spend their money as they wish; before the family was poor and now they are not; they do not have to work in the fields; they are happy because of sex work because everyone stays together; and one girl said that before she did not know about “enjoying the life”. I also asked when the participants became an adult, or what constituted being a grown woman. Having children was the main response, followed by menarche, beginning *dhandha*, “leading the life”, not sure, and one very young girl said “wearing saree”. Of the 42 girls asked, 4 said that they are still young. Three told us this was because they did not yet have children, and one said that she is older than she used to be but will be an adult when she has kids.

Contesting the Canon: Towards a New Model of ‘Child Prostitution’

The above data about work, daily activities, leisure and time spent with friends, doing *dhandha*, evaluation of life and goals, and the constructions of different life stages reveal a number of significant factors about the experiences of young *Devadasis*. In this subsection I use these main factors and the previous information on maturation among non-*Devadasi* girls to introduce a new, working model of ‘child prostitution’. While mainly applicable for rural *Devadasis*, it represents an important step toward replacing

universalized models with paradigms that are more representative of how young girls experience sex work and how it is contextualized within the matrix of their daily lives.

The first component of my alternative model is the basic idea that 'child prostitution' cannot be understood as an outcome of one or two individual factors. Issues such as poverty, illiteracy, parental greed or ignorance, kidnapping, and 'backwards' cultural traditions are commonly used in media stories and academic works to simultaneously explain the complex phenomenon of 'child prostitution' and disassociate those involved from 'normal' or 'good' girls and their families. Positions like these are substantially weakened by the fact that millions of women and girls in countries like India are poor and illiterate, and not all of them do sex work. Similarly, as the previous sections and the Table below demonstrate, many aspects of growing up female in rural India are similar for non-sex working girls and young *Devadasis*. Both groups of girls are socialized to adopt appropriate gender roles, familial responsibilities, and sexual behaviour; they receive little information regarding sexuality, reproduction, and bodily changes; their maturation from childhood to young womanhood is relatively quick; and both sets of girls may experience trauma during menarche and their first sexual encounter on account of immature physiology and lack of preparation.

Table 3- A Comparison of Key Features of Maturation Among non-Devadasi and Devadasi Girls

Non-Devadasis	Devadasis
Role development geared toward marriage	Similar lessons taught, not in relation to marriage but assumption of household contributions (social, economic)
Taught very little about “facts of life”, learn on own and at time of marriage	Also taught very little, learn on own or from friends and older women
Experience of ‘adolescence’ relatively quick, although marked by MC ceremony	Similarly short ‘adolescence’ period, also ritually marked.
After menarche, marriage is major life passage	After menarche, first client ceremony is major life passage
Treated as ‘guest’ or temporary member in own home	Not the case
Typically leave family for husband’s house following marriage	Most do not leave home today, especially those in rural areas
Transfer of sexuality from father-husband-son	This does not occur
Men are main breadwinners of family	Women and girls support the family, also own or have access to property rights
Trauma often associated with sex in early/forced marriage, takes place without family	Bodily trauma also common, but have family and friends for degree of support
At risk for reproductive problems and disease because of little sexual health knowledge	Similar situation, greater risk from unprotected sex with many men (especially in light of multiple ‘first client’ rites)
Few opportunities for peer activities	Spend a significant amount of time with friends, at work and in pursuit of leisure
HIV/AIDS knowledge low	HIV/AIDS knowledge adequate, less involved with collective activities than older women

Equally important to my argument are the differences between these groups of girls. Unlike non-sex working youth, *Devadasis* are not raised to be wives or treated as guests in their homes, and they typically do not leave home (and not for long periods of time). Also there is no transfer of control over the girl’s sexuality from father to husband at the time of marriage among *Devadasis*. In addition, they participate in peer groups with friends who are maintained over long periods of time, usually become heads of families, have opportunities to access property, and partake in *dhandha*. These particular

facets of growing up are unique compared to their counterparts and they provide evidence of what could be termed “positive” aspects associated with being a *Devadasi*. While being a household head and doing sex work to support family members are not always or only positive, strong kin and peer networks and opportunities to manage their income and property make for supportive communities in which young girls’ work is highly valued, as both an economic resource and a socially validated stepping stone into adulthood.

The second aspect of my model considers how the combined forces of economy, legal status, disease, and the commodification of sexuality impact the structural organization of ‘child prostitution’, a perspective which is absent from most debates about this complex issue. As Montgomery (1998:142) says, “Child prostitution is cast as a clear cut case of good and evil while ignoring the wider political economy that allows child prostitution to flourish”. Chapter Three described the connections between the *Devadasi* system and the political economy as presented in the literature, which focuses predominantly on the history of the tradition as it relates to the rise and fall of political regimes, the structure of royal patronage, temple administration, reform movements, and the role of colonialism (Jordan 1993; Kannabiran 1995; Marglin 1985a; Nair 1994; Sadasivan 1993; Srinivasan 1983, 1985). Little attention is placed on understanding how *Devadasis* today are linked with the political economy because of the widely held perception that the system is no longer relevant within Indian culture, and because of the tendency to portray the tradition as a product of solitary factors like ignorance, poverty, faulty character, or male lust. However, as the facts below demonstrate, young *Devadasis* are intimately connected within the web of influence that links their tradition of sex work to the larger forces of political economy.

A starting point for this piece of my emerging model is looking at how the factors of legislation, economy, and reform impact the dedication process and pattern within the contemporary *Devadasi* system. Following the 1982 legislation banning dedications in Karnataka, *Devadasi* families have had to increase their payments for dedications, which are now required for not only the priests and temple employees, but also police, agents, and government officials (Tarachand 1991:86). Dedications are facilitated by a network of older family members, agents, priests, and local officials, and for the sake of safety and to avoid paying even greater amounts of bribe money to other officials and police, they take place in an underground context (i.e. in women's private homes versus a public temple setting). As a result of the more covert organization of dedications, the elaborate ritual and communal dimensions that traditionally defined the event have been diminished significantly.

Another outcome of state legislation involves the pattern of dedication and the increasingly economic motivation for inducting girls into the system. Interview data show that only 22% of younger and 10% of older women are from *Devadasi* families, which indicates a rise in dedications from families where the tradition is not entrenched. A number of older *Devadasis* lamented this shift and warned against families dedicating purely for economic and material gain because they do not consider the darker realities of doing *dhandha*, like HIV/AIDS, reduced client numbers, and social stigma. These same informants also suggested that many women were dedicating daughters in order to take advantage of state-run reform programs for *Devadasis* that were introduced after 1982. This was confirmed during interviews with several government and NGO representatives, who view this strategy of 'inventing *Devadasis*' as exploiting state programs and as

foiling their efforts to bring an end to the system (See Chapter 7 for examples). That virtually no mention is made of the girls, whose sexual capital is manipulated in this complex process involving legislation, economics, and reform, exemplifies the curious position of young prostitutes in most discourses on sex work. While they are salient subjects for larger political projects their roles in and impact upon the workings of the political economy are simplified, and they are silenced.

In combination with economy, HIV/AIDS also plays an important role in structuring the *Devadasi* system and young girls' disease risk. The emergence and spread of HIV has led to a rising demand for virgins, who are thought to protect and/or cure men against the virus and other sexually transmitted diseases (Gathia 1999:33; Rozario 2000:142; Sachs 1994:27). The introduction of holding multiple 'first client ceremonies' described by several informants is a clear reflection of this. In doing so, the women use their young daughters' prized virginal status to capitalize on men's fears of infection (and sexual desires) and maximize the family income, which has been waning since the advent of AIDS and the related decline in clients. That younger *Devadasis* are excluded from, or not interested in, *Sangha* activities may also be advantageous for the family because the girls are not likely to advocate for condom use during the ceremony (ies), which would effectively ruin the event and diminish the household income. However, like the previous example describing the tendency for non-*Devadasis* families to not consider the problems associated with *dhandha*, *Devadasi* mothers may be engendering health risks for their daughters because the sexual component of the ceremony is conducted without condoms.

The final component of this alternative model of 'child prostitution' is the girls' perspectives on doing *dhandha* and how they fit into the wider context of their lives.

Virtually all the girls interviewed had no idea they would be doing sex work and upon finding out they felt “bad”, which refers mainly to the fact that they have to sleep with so many men and are unable to be married in the traditional sense. Yet, when their answers to questions about gender preference, friends, goals, and family are unpacked they reveal points of view that are more complicated. For instance, only half would rather be a boy because *dhandha* would not be part of their lives, and 25% are satisfied being female because through their earnings they can make and spend their own money, and support their families. The importance of the peer group dominated the girls’ discussions of leisure and what they enjoy in life, and with respect to future goals only 35% indicated they would prefer another job to doing sex work. Since the girls grow up in situations where they are not prepared for sex work and do not generally like it, one might think that their appreciation of family would be low. Yet, on the contrary, it rated the highest among the responses to “what is the best thing in your life?” question, followed by their children and friends.

Understanding this picture painted by the young *Devadasis* is complicated because they do not reveal themselves to be the frightened, brainwashed victims of parental or systemic violence depicted in most accounts of ‘child prostitution’⁹⁰. Instead, they present themselves as girls who may not always like what they do or what is demanded of them, but do so out of a sense of filial duty, economic need, and because doing *dhandha* is incorporated into their models of female maturity. Having friends and a network of kin for support and social validation of what they do make this easier, and in

⁹⁰Cultural beliefs about fate and prohibitions against speaking negatively about something beyond their control, deference to elders, and unfamiliarity with certain questions also undoubtedly influenced some girls’ response.

many ways 'normal' (See Dirasse 1991:58-63 for similar findings among young prostitutes in Addis Ababa, Ethiopia).

In her work with child prostitutes and their families in Thailand, Heather Montgomery (1998, 2001) describes a similar situation. She demonstrates how strategies used by the children, like referring to regular clients as "friends" or "lovers" and earnings as "gifts", reveal their agency and control, albeit limited, to define their participation in sex work in ways that absorb it into the existing socio-economic and cultural frameworks that give meaning to all aspects of their life. Thus, although their apparent ability to deal with such difficult conditions is hard to believe or understand when compared to typical portrayals of young sex workers, this kind of conceptual jarring is precisely what is required to question stereotypical depictions of 'child prostitution'. This finding is important for yet another reason because it mirrors those in the 'adult' sex work literature, which show that being prostitutes is only one aspect of who these women are, what they do, and how they combine work with other facets of life (Albert 2001; Campbell 2003; French 1988).

What's Spoken in the Blood: Experiences of Menstruation and the Related Rites of Passage

The phenomenon of menstruation and the attendant ceremonies that serve to mark young girls' transition into adulthood have long occupied a significant place within anthropological research. Of equal importance to this area of study are menstrual taboos, which were once thought to provide evidence of the universal dominance of men over women, along with the origin of social organization and religious thought (Buckley and

Gottlieb 1988:3). Until recently, the theory of “pollution”, made popular through the work of Mary Douglas (1966), provided the dominant lens through which menstruation and its surveillance have been understood. In a nutshell, Douglas argues that pollutants are culturally coded as “dirt”, symbolic “matter out of place”, which pose significant danger to established social order on account of their anomalous social and symbolic status. The loss of blood during menstruation is an especially potent example of misplaced matter, one that requires strict regulation because of the strong cross-cultural associations between this flow and fertility; which is highly valued and often intimately linked with the well-being of the larger social group.

Some of the gaps between Douglas’s pollution theory and the actual menstrual practices of women have been addressed by scholars who examine issues like the role of class and economic development in the construction of reproductive health knowledge (Martin 1987, 1988), the positive attributes of menstruation for women’s overall health (Skultans 1970, 1988), and how women self-regulate their menstrual flow to secure greater control over other aspects of life (Van De Walle and Renne 2001). In India, where classical Hindu ideology continues to exercise a “direct grip” (Bordo 1993:16) on contemporary cultural practices and beliefs, menstruation is linked with notions of the innate wickedness, uncontrollable sexuality, and the embodied impurity of women. As will be discussed in Chapter Six, the ability of women to ‘weaken’ men sexually and taint caste lines by sexual transgressions with men of a lower social group are two of the main conditions upon which the regulation of female sexuality and the conditions of monthly bleeding, including mobility, food intake, hygiene, and religious worship, are predicated

(Bennett 1983:217; Caldwell 1999:162; Kakar 1979:93; Leslie 1994:63-67; O'Flaherty 1980:40,53; Thompson 1985:701).

Although alternative analyses of menstruation have been slow to develop in India, there is an emerging body of literature that addresses how women's lived experiences contest many of the hegemonic, Brahmanical discourses surrounding menstruation. This discrepancy between theory and practice is being examined through topics like how the binary of 'auspiciousness and inauspiciousness' intersects with 'purity and pollution' (Marglin 1985a,b, 1994); the positive role of menstrual blood for fertility (Dube 1988, 2001); menstruation as rebirth and a blood star guiding familial fate (Kapadian 1996:74-78; McGilvary 1998:41); post-colonial theory of the body, sexuality, and class (Puri 1999:chapter 3); and descriptions of the coping strategies adopted by Indian women to deal with their monthly periods (Garg, Sharma, and Sahay 2001; George 1996; *Sharir Kiri Jankari* 1989). Although there are very few detailed studies on how adolescents go through menstruation, by scouring libraries in various parts of India and making extensive use of inter-library loans I have been able to gather a number of sources. Following an overview of this material, I present data on how *Devadasis* go through menarche and menstruation, which, to date, is one of the only examples of research that considers how young sex worker perceive and experience this part of growing up.

the wound of womanhood?: how non-sex working girls experience menstruation

Like most female youth globally, Indian girls begin menstruating between the ages of 12-14 (Gupta 2003:7; Kumar 1988:96; Kumari *et al.* 1990: 20). However, because of culturally entrenched taboos relating to sexuality and the body, an overwhelming

majority of Indian girls have no preparatory training for or knowledge about menstruation (Garg, Sharma, and Sahay 2001:19-20; George 1996: 171-172; Joshi *et al.* n.d.:10; Murthy 1993:50; Narayan *et al.* 2001:230; Rashid 2000:30; Sharma 1996:73). Poor reproductive knowledge among mothers, anxiety that imparting such knowledge will lead to promiscuity, the belief that peers will inform them, and the tendency to not verbalize feelings and phenomena are other reasons behind the lack of information passed on from mothers to daughters (George 1996:173; Joshi *et al.* n.d.:10; Sharma 1996:76; Shetty, Kowli, and Patil 1999:5; Van Woerkens 1990:WS-9). It is no surprise, then, that most describe the appearance of their first blood as shocking, frightening, traumatic, worrying, embarrassing, or saddening, whereas only a few cite curiosity or happiness (Garg, Sharma, and Rajalaxmi 1998:55; Sahay 2001:19; Pangare n.d.: 189; Srinivasa 1978:30). The following quotations capture the confusion, fear, and lack of knowledge about what happens during menarche that characterizes most young girls' experiences of menarche:

I had it when I was twelve. I was washing vessels when I felt something warm and wet between my legs. I saw blood and started crying. I told my mother. She told me not to wash the vessels. I remember crying and crying (George 1996:171-172).

When it happened for the first time and all my clothes got wet due to bleeding, I did not come to know. I got worried and asked my sister, "Oh! What has happened?" She told me to change my clothes first and then she explained everything (Garg, Sharma, and Sahay 2001:19).

Earlier I was not aware of menstruation. When I got married and came to my in-laws' home, my mother-in law explained everything to me and said that I would not be allowed to sleep with my husband until I start menstruating. This is how I learnt about the menstrual cycle (MC) (Joshi *et al.* n.d.:10).

The main sources of subsequent information about hygiene (i.e. bathing and clothe use and storage⁹¹), behaviour changes, and to a limited degree reproduction, include family members (aunties, mothers, sisters-in law), friends, and school teachers (Garg, Sharma, and Sahay 2001:20; Kumar 1988: 98; Murthy 1993:51; Pangare n.d.: 186). With respect to dress, many girls exchange their skirt and top outfit for a *saree* after getting their first period because it signals their more mature status and acknowledges their newly acquired and highly valued fertility (George 1996:174; Rajalaxmi 1998:32). Most girls also experience new or greater restrictions from the onset of and during menstruation, with respect to mobility, socialization, religious worship, interaction with males (including family members), and certain forms of work like cooking (Murthy 1993:61-64; Sharma 1996:77-78). However, contrary to stereotypical portrayals of women being prohibited from doing all forms of work and household activities during menstruation, factors like class, gender relations, economic need, and familial set up make it impossible for most poor women and girls to withdraw from the bulk of daily activities while menstruating (Garg, Sharma, and Sahay 2001:20-21; Joshi *et al.* n.d.: 12-16; Pangare n.d.:195).

Data on how young Indian girls feel about having their period and the reason behind it are very rare, but from the few sources available it seems that their rude awakening to the onset of menstruation does not translate into a necessarily negative opinion on the event. On the contrary, it is viewed as a generally positive and natural event because of the associations between monthly bleeding and fertility, along with

⁹¹ Like the majority of women, girls use pieces of old *saree* or cotton to absorb their menstrual blood. These items should be kept out of the view of men and animals (especially snakes because of their association with fertility) to protect them from the polluting and powerful effect of their blood.

cleansing the body⁹² and the maintenance of good health (Joshi *et al.* n.d: 7; Murthy 1993:59; Rajalaxmi 1998:60). That most girls understand menstruation as “God’s gift” or a “natural gift” (Dhingra and Anandalakshmy 2000:325; Joshi *et al.* n.d.:7; Murthy 1993:56) reinforces the idea that menstruation, and the interrelated ability to bear children, are valued aspects of what it means to be female.

boredom and the boon of blossoming: how Devadasis go through menstruation

There are a range of *Kannada* terms to denote menarche and menstruation, and most refer to the girl’s blossoming or growing body and the prescribed behaviours that must be followed at the time (i.e. the mandatory purifying head bath or sitting outside of the house). Three categories of terms were identified during my fieldwork, which include those only for menarche, those for menarche and monthly bleeding, and those only for regular menstruation. In the first category the two terms or phrases “*mai nere yuvudu*” (lit. “body-ripening-to become”) and “*doddaki agyala?*” (“has she grown?”) may be used to refer to or inquire about a girl’s first periods⁹³. I learned of one term for the second grouping, “*mutt agyala?*” Although I did not get a literal translation of this word my language teacher did say that “*mutt*” means touch, and he added that this phrase is used frequently among Brahmans⁹⁴. Three terms fall into the third category: “*horage agyala?*” (“is she sitting outside?”), “*yarakonda*” (a term for “head bath”), and “*teli nirru*

⁹² Which is crucial because most women view menstrual blood as “dirty” or “waste”, which should be expelled from the body.

⁹³ Karin Kapadia (1996:95) mentions two terms to refer to menarche in Tamil Nadu, “*talaitittu*” (“first impurity”) and “*kannittittu*” (“menarchal girl-impurity”). Both terms focus on the impurity of menarche, which is interesting because Tamils, like *Kannadigas* (those from Karnataka), celebrate the girl’s first period.

⁹⁴ A rough translation of this term may be “is she to be touched?”

hakondala" (lit. "head-water-bath + feminine). Virtually all of the *Devadasis* we spoke with use "*doddaki*" ("she is big or has grown") when discussing menarche and either "MC" (short for "menstrual cycle") or "*tingala, tingala*" ("monthly, monthly") when speaking about their regular periods.

The inquiries about their age at menarche may be somewhat arbitrary given that little value is placed on chronological age, and many informants were not aware of their age at the time of the interviews. However, when asked most of the girls said they were between 10 and 13 years old, with a mean of 11 years. A wide array of responses were given when the issue of how they found out they had their period was discussed. In terms of the first person told or who saw the blood, mothers rated highest (38%), followed by the answer "I knew something myself" (16%), friends (11%), auntie (11%), elders (9%), *agi* (5%), and two respondents (5% of total sample) said that their menarche occurred at the time of their first client ceremony (but it is also possible that they bled from intercourse). Other responses from single informants include sister, no one was around, and the school superintendent.

The place and context in which their menarche took place was also varied, as the interview quotations below illustrate:

I went to the bathroom outside and blood fell out. An elder was sitting nearby and she said 'now you are mature' and advised me to tell my parents or those in my house.

I used to collect the wood my father chopped and when I was doing this work my friends saw the blood and said, "*doddaki, doddaki*".

I was taking a bath at the canal and found blood in my dress. I told my friends, who then told my grandmother.

The appearance of blood was startling and confusing for the majority of girls, as Usha's experience demonstrates. "It happened at night, I felt wetness and went to the toilet. I saw the blood and got frightened because I thought something was wrong with me. I didn't wake anyone up but in the morning I showed my auntie." When asked if they were afraid of the blood, all but two girls said yes because they did not know what was wrong. Of those who responded "no" to this question, one participant explained that she knew a bit about what was happening from observing other community women during the month. The other girl had bigger things to think about because her grandmother passed away around the same time as she got her period.

Along with their initial response, I also wanted to know how or if the girls connected the event of menarche with other aspects of growing up. Most young *Devadasis* interpreted the question as an inquiry about the first few days after getting their period which, as discussed in the final section, leave the girls virtually immobile as they have to sit inside their homes for the customary 5 days. It makes sense, then, that 70% of the girls responded first by saying they felt "bored"⁹⁵ about getting their period. Common descriptions of this cultural moratorium include, "I felt nothing, but I used to feel bored sitting five days at home because [we] used to keep ourselves busy at work in the field"; "I am bored. I am eager to go outside"; "Sitting in one place is boring. I am waiting to play." Some girls (3/42 or 7%) added that they felt "sad" and/or "bad" because they knew that doing sex work was around the corner. One expressed her lament by asking "why did I have to mature?", while another said "it [being dedicated and having to do *dhandha*] is a mistake the elders made". Three other participants indicated that they

⁹⁵ This is the same answer given by a good friend of mine from Karnataka, who said that she asked for some magazines to look at to ease her boredom during the five days.

had no idea what happened, and two said they were eager to make money. "I was eager to get gold like they [older *Devadasis*] had, so I thought to myself I must earn", one girl said. Single responses to this question include other interesting answers, such as not being afraid because a friend had informed her; being worried about what happened; and feeling like an adult or older, but also angry because of her situation as a sex worker.

Insight into the girls' perceptions about menstrual blood is important to determine to what extent their lives are dictated by the traditional theory of "pollution". Sixty-four percent indicated that this kind of blood is not different than others, whereas 19% said it is because of the colour (dark red-black versus red, which is because it is stored inside the stomach), consistency (thicker than other blood), and its more pungent smell. The remaining 15% responded by saying they do not lose much blood, they have regular periods and two told us they lose lots of blood. Of those who said menstrual blood is different, four added that they feel dirty during their MC (a common term for the menstrual cycle used throughout India, and among our participants) or think the blood is dirty. Reasons for this are that it is stored inside and comes out; it is a waste product; a lot is lost; and it means that there are no children. The last respondent explains further, "We get children from part of the blood that is stored in the mother's womb, which is good, and for that reason we can't say that the MC blood is all dirty..." Her answer echoes the traditional Indian belief that the blood during the first part of the cycle is dirty and a woman may be considered barren, but that towards the end of the cycle (usually the 4th day, whether the blood ceases or not) women are deemed to be in "*rtu*" ("season") and once again fertile and auspicious (Bhattacharyya 1980:15; Leslie 1994:75; Marglin 1994: 27-28).

Related with menstrual blood is the issue of facial complexion, which is sometimes viewed as a kind of gauge of sexuality as dark patches or pimples on the face are thought to indicate excessive sexual desire or frequency of intercourse. Just 26% think their complexion changes and becomes darker during their MC, which is attributed to increased levels of heat and blood in the body; because blood is leaving the body (which also indicates excessive blood); and one girl who experiences severe menstrual cramping said her face changes because having her period is like having an illness.

Due to the strong value placed on fertility and menstruation as part of maturation, I asked if MC is good for their health. All of the girls said it is indeed important and having regular periods are good because the blood goes from the body; it leaves them feeling slim and active afterwards; and it helps ensure a moderate flood flow. Conversely, missing or having late periods is cause for concern because, as 21% of girls said, something might be wrong with the stomach, they could become weak, or they might get fat because the blood accumulates inside them. Feeling ill or inactive and heavy was another common explanation of why irregular periods are problematic (19% for each answer). 13% indicated that it could mean they are pregnant, the same percentage told us that they are not sure why it is good, and 5% said pimples could develop (as a result of excessive blood and heat). Older women confirmed these explanations, saying the cessation of MC was not good because the body feels heavy and grows fat (because accumulated blood is not lost), they could lose their eyesight, and some women develop heart and joint pains when they stop menstruating.

Since a number of girls appeared to make the link between menstruation and fertility, I was a bit surprised by their responses to my question about the reason for the

MC. Like the majority of Indian girls, most young *Devadasis* (50%) understand it as “God’s gift”, followed by “don’t know” (25%), “it’s common, all ladies get it” (20%), and no answer (5%). However, given strong connections between cosmology, environment, and the body, along with the omnipotent role of the Gods and Goddesses in their lives (Beck 1976), these responses make a great deal of sense.

The last cluster of issues explored as part of young *Devadasis*’ experiences of menstruation include hygiene, pains during or before their cycle, restrictions, and behaviour changes during and following the attainment of menarche. The majority of girls wear old or dark *sarees* and use cloth pads or pieces of old *sarees* to absorb their flow. One girl provided some details about the storage of this material, saying that her *saree* and cloth are placed in a separate cupboard because she does not want anyone else (especially male family members) to see them because she feels shy about the issue. In terms of body changes during MC, 54% indicated they have no major problems, and the other girls experience one or more of the following ailments: stomach ache; back ache; leg pain; body pain and heaviness; inactive; and lack of appetite. Two participants added that they feel “dull” or sad during their MC. About 60% of girls indicated they have premenstrual pains primarily backaches, followed by leg, stomach, and body aches.

Doing *pooja* (religious prayer, worship) and *dhandha* are the two things that all girls told us they not allowed to do while menstruating. Unlike older women who tend to do housework during their MC (except cooking), some of the younger *Devadasis* do not have to do chores around the house at this time. Of those that do not, they said that it is because they do not feel well, if they do exert themselves more blood will come, and in specific reference to making food, other family members carry out this task. A number of

the girls described menstruation as a time when they get together with friends and go to the cinema or watch television together. Older women also indicated that they do not (or should not) do *dhandha* during their MC, but many later admitted to doing so out of economic need. They described strategies⁹⁶ like keeping the lights out, hiding their clothes and panties just before the client enters the room, or if the client sees it they pretend to have just found out (see Verma 1999:5 for similar responses).

With respect to behaviour changes following menarche, 38% told us that the main one involved not being able to 'roam around', followed by no major changes (19%), not allowed to go outside (14%), strict rules (not specified, 14%), be careful of men to not get 'spoiled' (7%), and other single answers include: "you are mature now" and "don't behave like a kid". Mothers were the main sources of instruction and enforcement of these rules, after which were parents, elders, friends, teacher, sister, and older brother. Some of the new warnings/explanations:

My mom told me not to go outside and roam around because I am an adult now.

When I was young I used to work in the fields, but when I matured the elders said that I can't go here and there, a [boy] might spoil me.

My mom and older sister told me not to go outside and not to do work because I need to be aware of guys. 'When you are matured you are a lady and must behave in a disciplined way' [what her mom said].

However, not all girls had such strict rules enforced right away and sometimes they did not follow them when told to. As Jaya said, "I continued to work in the fields for a while and used to play around like a child. When I got home late my mom would beat me because I should be coming home early now that I am mature" (laughter from all present). Another change involves dress, as 27% of girls indicated that they began

⁹⁶ Importantly, they added that these strategies are not as necessary for regulars, with whom they are more familiar.

wearing *saree* after their menarche, where as 73% began doing so later on, after they commenced *dhandha*. Interestingly, a few older women in one community told us that there was a change in their dress code about seven years ago⁹⁷. They said that previously it was hard to distinguish *Devadasis* from other community women and girls because no one used to wear *sarees*. However, since that time all *Devadasis* do don *sarees* because they “look nice” and, as one woman added, because this form of dress makes girls look grown up. The laughter that followed this comment appeared to be closely connected with the sexual undertones of her statement, along with their possible embarrassment in admitting the role of dress in advertising the sexually ‘ripe’ status of young *Devadasis*.

the importance of being ‘cool’: menarche ceremonies in South India

Analyses of menstruation ceremonies have long been a part of anthropological studies of India. This is in large part because of how the twin concepts of ‘purity and pollution’, mainly in relation to the organization of caste, are intimately and sometimes automatically bound up with the regulations and rites surrounding menarche and menstruation; such that the rules pertaining to the latter were and are thought to reflect the wider discourse and practices surrounding caste purity and social organization writ large. My goal here is not to provide a detailed analysis of this complicated and somewhat dated literature, but instead to give a brief overview of the structure and

⁹⁷ Without reading too much into this pattern of dress change, it does roughly coincide with the rise of state reform programs and the advent of HIV, both of which have had a dramatic effect on the women’s clientele numbers. In this light, the widespread adoption of *saree* could be part of the women’s economic strategy to attract customers. The following statement linking *sarees* and adulthood may support this idea as the women rely more heavily on younger girls than they did in the past, when they were youthful and when there were fewer concerns about the continuation of the system.

purpose of menstruation ceremonies to contextualize this aspect of maturation among *Devadasis*.

The attainment of menarche is a pivotal passage in a girl's life because it indicates her biological maturity and it triggers a series of events that help pave the way, spiritually and socially, for the equally important stages of marriage and motherhood. This developmental change is understood in significantly different ways throughout India. In the North, a girl's first period is not ritually celebrated and the observances relating to menstrual pollution (foods to avoid, behavioural restrictions, sanitary procedures) are introduced as quietly as possible to ensure that children, male family members, and strangers are not aware of them (Dube 2001:100). In fact, Veena Das argues that "the onset of menstruation is experienced as a terrible curse" (1988:198), one which signals the loss of innocence of childhood and introduces a new set of communicative rules (mainly non-verbal) and social purpose that are geared toward marriage and the assumption of appropriate feminine behaviour. In contrast, South Indians infuse menarche with rich and complex meanings that are connected with the high value placed on fertility, the role of women in transmitting kin lines, and conceptions of female power (Wadley 1980:163). As several researchers working in this area contend, the dense phenomenological and etiological associations attached to this event in the South necessitate an understanding of menarche as not merely a biological event, but one that is "ethnobiological" (Good 1990:7) or "biospiritual" (Kapadia 1996:71) in nature.

Before presenting the basic features of menarche ceremonies, there is another set of rituals that need to be mentioned because of their relation to certain practices among *Devadasis*. Mock marriages, often to a younger relative or inanimate object, and *tali*-

tying ceremonies were conducted before menarche among several Dravidian groups in present-day Karnataka, Sri Lanka, Malabar, and parts of Tamil Nadu. Their central function was to protect and assert control over female sexuality before the girl matures and has a chance to threaten the boundaries that define caste, kin, and society as a whole (Allen 1990:203; Gough 1955:53,75; Yalman 1963:39,42). Cultural beliefs about the auspicious and dangerous powers of fertile virgins also underlie these ceremonies, as the components of the rites worked to 'cool' and harness the overheated, untapped sexuality of the pre-pubescent girl. This was achieved by offering 'cool' foods and symbolically deflowering her, which was thought to relieve her raging sexual appetite and thus render her sexually and spiritually safe (Caldwell 1999:121-122; Gough 1955:75).

Among matrilineal societies like the Nayars, where women had numerous partners over their lifetime, *tali*-tying rituals gave them access to the male lineage without constraining their sexuality. As Kathleen Gough says, "In this rite, through a chosen representative, the local caste group as a whole 'married' the lineage as a whole, and ritually set free the procreative powers of its girls to perpetuate their lineage" (1955:53). Parallels have been drawn between this particular rite and the childhood marriage ceremony among *Devadasis* because they both ensure that the women or children have one sanctified marriage to an 'appropriate' partner (a deity among *Devadasis* and a maternal uncle for the Nayars) despite their numerous sexual partners. While the two rituals are rooted in matriarchal and Dravidian traditions that honour and protect female sexuality and power, the ways that the issues of 'marriage' and lineage are sorted out differ significantly. This is especially the case today, as many *Devadasis* do not go

through the childhood marriage ceremony and finding *khiams* on whom they can depend for economic and fathering support are more and more difficult to secure.

In terms of the structure of menarche ceremonies in South India, they are similar to Hindu marriage ceremonies and they also follow van Gennep's (1960:67, 191) classic *rites de passage* pattern: physical separation, marginal transition, and reintegration as a mature young woman (Kapadia 1996: Chapter 5; Narayan *et al.* 2001:229-230; Reynolds 1980: 40-42; Winslow 1980:613). The ritual begins with seclusion, which commences with the onset of menstrual flow and lasts from 3-20 days, depending on the caste, class, and economic status (Dharmalingam 1994:34; Ferro-Luzzi 1974; James 1974:162; Krygier 1990: 83-91; Parvathamma 1967:42). Since the girl's body is believed to be particularly hot at this time, care is taken to remove the two dominant factors that could "fan the inner flames" (Reynolds 1980:41; Wadley 1980:163): men and 'hot' foods, both of which are believed to stimulate passion. Stage two consists of a series of actions designed to remove the pollution of the menstrual condition and reaffirm the girl's auspiciousness, including waving the flame in front of the girl to remove evil spirits, serving her special foods, singing of puberty songs, giving her a purifying bath, and purifying her house (Dube 2001:98; Parvathamma 1967:43-48). The final part of the ritual reintegrates the newly matured young woman, which is communicated through certain gifts that denote her adult status and sexual attractiveness, such as a *saree* (versus the skirt and blouse outfit of childhood), green bangles and flowers for her hair (symbolizing fertility), a mirror, hairpins, and make-up (Dube *Ibid.*: 98; Kapadia 1996:103).

With regard to function, menarche ceremonies first and foremost announce a girl's mature/maturing identity: she is becoming a fertile woman, which is highly valued and celebrated. Second, certain foods and deflowering aspects of the ritual are used to 'cool' her overheated, sexually dangerous body, which also help make her ready for marriage. Third, although powerful, her pure, virginal status also makes her vulnerable to attacks from spirits, which is why she is protected through these rituals by the waving of the lamp (which helps remove evil). Fourth, the dangers associated with her emerging sexuality are also illustrated, in her ritual separation and need for purification. Another often overlooked dimension of menarche is its role as a second birth, which is evidenced by the importance of menstrual horoscopes (Kapadia 1996:69; McGillvary 1998:41; Parvathamma 1967:42,51; Winslow 1980). Unlike boys who have horoscopes charted at birth, this only occurs at menarche for girls. Since female blood is viewed as the living medium through which kin lines are transmitted, the significance of menarche rites goes beyond completing the girl's sexual and gender identity because it fosters a "blood bond" between the girl, her wider kin network, and the cosmos (Kapadia *Ibid.*:70). Thus, menarche not only marks a girl's female status, it binds her and her family to the stars that chart family fortune, health, and spiritual well-being.

scared and strong: first menstruation and first client ceremonies among Devadasis

How do the experiences of young *Devadasis* during menarche and the attendant ceremonies compare with those described above? The sensitive nature of the topic and the decline in elaborate and public celebrations in the contemporary setting made it

difficult to gather detailed information on these rituals. However, they represent one of the only records of these ceremonies among *Devadasis* today.

When we spoke about menarche ceremonies, roughly half of the girls could recall when the event was held. Five days following the first blood was most the most common response, then 9 days, one year, 11 days, and one response was given for 16 days, 12 days, 2 years, and 3 years. A significant number of girls (14/42 or 33%) said they did not have any celebration, which one informant said was due to a lack of money within the family. While no ceremony was held, 5 of these girls told us they received green bangles (usually 5 days after menarche) and one added that along with green bangles, she was taken to a temple. For the girls who went through a ceremony, green bangles topped the list of gifts given (62%), followed by a new *saree* (45%), a temple visit (38%), sweets prepared at home (35%), a meal being made (16%), a feast (9%), and a small number of girls added that they received flowers for their hair and one was gifted a garland of flowers (like those exchanged between bride and groom during marriage). Another girl said that the elders sang songs about growing up and another described visiting a temple on the 5th and 9th day after her first period. Interestingly, one informant said she had two ceremonies, a small familial one 9 days after menarche and a larger public function one a year later.

An older *Devadasi* named Rani provided some additional details of the ceremony. She told us that the girl is not allowed out of the house for 5 days, tumeric⁹⁸ is applied to her face, and oil is put on her hair each day. On the 5th day, people are feasted and the girl is taken to the *Durga gudi* (a neighbourhood temple). Rani said that in the past the whole

⁹⁸ Which is said to enhance a woman's beauty, and is often applied to a bride's face during the wedding ceremony. Oil is believed to 'cool' the body, which is particularly important at menarche when the girl is considered to be over-heated.

community used to be feasted, but now things have changed and it depends on the family to decide who gets included in the meal. Those who are well off still invite a lot of people, she added. When I inquired about the lag between menarche and the ceremony in some cases (2-3 years), she replied that the girls are too young to start sex work. She was referring to fact that with menarche the girls are considered mature and physically ready to begin *dhandha*. That some parents, including Rani, are hesitant to hold a public function announcing their daughter's maturity and seek clients for the 'first client ceremony' indicates a concern for their children's welfare and a desire to protect them until the family really needs their economic contributions. It also sheds some light on the mother's conceptions of social maturity, which do not necessarily coincide with biological maturity.

With respect to the link between *doddaki* and *dhandha*, none of the girls indicated that the time around menarche was when they learned they would be doing sex work. The majority (12/32 or 37.5%) found out during their first client ceremony, followed by friends (22%), during dedication (15%, for those not dedicated as children), they saw others doing sex work (12%), community women (9%), others said their mothers or sister, and one girl learned when her parents turned down a marriage proposal for her. In terms of the kinds of things they heard upon finding out this critical information, one informant said her mom told her "we have praised God and dedicated you, later on you will do sex work". Another mother said, "you are dedicated, you have to do it". Friends told the girls things like "your family is in poor condition and you have to start to earn" and "we have to earn to look after our parents".

When I asked who taught them about how to deal with clients, most replied that they learned themselves. Friends and elders were next, then mom, *gharwallis*, no answer, and one response for sister, boyfriend, auntie, parents, and grandmother. The girls were taught very little about what to expect, and they were generally told to cooperate (“because he pays you”), “don’t quarrel”, “don’t be afraid/worry/scared”, “they (the men) don’t do anything”, and one of the answers that is indelibly etched in my memory, “there is a money bank in you, go and earn”. While this may appear somewhat cruel, this lack of knowledge transfer follows the basic pattern with respect to all bodily and sexual issues, they are taboo and inappropriate to discuss. One girl’s remark, “What should they tell? They sent me inside”, after I asked what she was told prior to the first client ceremony reflects this. Furthermore, instead of viewing the mothers and community women as callous for telling them so little, their advice to not be scared or worried likely represents their care and concern for their daughters. This is supported by the fact that on occasion clients (mainly the first, but sometimes the first few) are told to return at a later time when the girl is not so scared, and elders also tell the men not to be rough with the girls because they are small or young.

The girls’ responses about their first client ceremonies provide vital information about the conditions surrounding this event and how it is experienced by young *Devadasis*. The ceremony was most often arranged by elders, then friends, aunties, mothers, sisters, *gharwallis*, grandmothers, and family. 12/46 (or 26%) indicated that no ceremony was held at all, and one girl said she began sex work secretly. Among those girls with no formal deflowering ceremony, some explained that they just started when they arrived at the particular village they now live in; they started one year after they

moved to a new place and were forced to do *dhandha* by a sibling; some men came and the arrangement was made; and in one case a police raid made a ceremony impossible. Of the girls who talked in some detail about their first client, most did not develop any special ties with these men and some did not even know who they were. There are exceptions, however, as three girls said that this man later became their *khiam* and two secretly arranged for their boyfriends to be their first customer. In other situations, the man was a friend of one girl's father who worked in the fields with him, another was from a nearby village, and one guy was drunk and she did not end up entertaining him.

Given the young age of the girls at the time of the first client ceremony (13-16) and their lack of understanding of sex, it is not surprising that 93% of them answered "yes" to the question 'were you scared during this ceremony?' Most girls replied that they were frightened because they did not know what the man would do, they didn't know anything, they didn't know the man, and they didn't know what the arrangements were. Two told us that they were not scared because they liked sex and had previous knowledge of it. As one girl who arranged to have her boyfriend as the first client explains, "My family didn't force me. We did this. They just put me in the room. My lover gave me knowledge about sex, and then we carried on". Three girls described being forced to take part in the ceremony. One girl said she fought with the client and although he left he returned later and raped her. After crying and protesting, another young *Devadasi* described being carried by older women into a room where the client was waiting. The third informant said that she put up a fight, but was forced to go through with the ceremony.

The items received by the girls during the first client ceremony ranged in value and variety. Most were given money, from Rs 50/- (\$1.50 Cdn) to Rs 5000/- (\$150.00 Cdn). Other gifts included *sarees*, blousepieces, gold (1/2 tola- \$85 Cdn and 1 tola- \$165 Cdn), *mangalasutras*, *talis*, bedsheet, and toe rings. A few girls could not recall what they got or had no idea because it was given directly to their family, which is customary among all the girls we talked with.

Like the celebration of menarche, the first client ceremony marks their changing reproductive status and together they transform the girls ritually, socially, and sexually from virginal children into fertile, mature young women. However, as described above, both of these events are undergoing significant change. Previously, the deflowering ceremony was a public event, it was performed once, it established a lasting economic, social, and sexual relationship between a young *Devadasi* and her client, and it brought a certain amount of prestige to the man or patron (Shankar 1990:105). Today, it is a private and illegal affair, sometimes carried out several times, it does not guarantee permanent connections between a girl and the customer, and the degree of social status associated with this form of patronage is waning⁹⁹. Chapter 7 discusses in greater detail how the larger forces state reform and HIV/AIDS are impacting the *Devadasi* system, but it is important to recognize that the current ceremonies both reflect these changes and are being revamped to adapt to them. Equally instructive is how the girls' parents/elders/mothers deal with these difficult circumstances. They support and sometimes force their daughters into *dhandha*, but often do so with as much protection and care they can offer. This exposes some of the emotional anatomy of 'child

⁹⁹ But not dead, as there is a physician from Hubli who has returned to Mudhol to deflower virgin *Devadasis* for years. The women estimate that he has been the first client for more than 10 girls and has fathered several children within the community.

prostitution' and the strategies parents adopt to balance economic need with safety and love for their children, data which helps to complicate aspects of current understandings about this very complex phenomenon.

Discussion

This chapter addressed the fundamental research question that both guided my fieldwork in Karnataka and provides the framework for this dissertation: "what is it like to come of age as a young *Devadasi*?" It is a challenging question, and the personal, practical, and theoretical dimensions that inform this query and influence how I have chosen to answer it have emerged over time, like so many layers of the proverbial onion. My previous research (Orchard 1997, 1998) contests these simplistic and in many respects demeaning perspectives by looking at the many dimensions that make up young people's lives, good and bad, individual and societal. While my efforts to complicate the 'child prostitution' canon follow from this, the dense political, economic, religious, and disease minefield that make up the topic of 'child prostitution', along with the kind of model I introduce, make this pursuit a bit risky. However, for the reasons presented above and below, the many health and socio-economic risks posed by ignoring the infinitely more complicated realities of young sex workers lives make such an examination essential.

Part of understanding the way that *Devadasis* grow up lies in knowing how, or if, the factors that impact this process are different from those among non-sex working girls. It is for this reason that I began this chapter with an overview of demographics, identity development, socialization, sexuality, reproductive health, and the social world that make up maturation experiences among young Indian girls, primarily those in rural areas. What

emerged from these data is a picture of coming of age that is heavily influenced by the event of marriage, which impacts how and what a girl is trained for, and how long she remains in her natal home. Despite the central role of marriage and its culturally valued links with fertility, the taboos surrounding sexuality and the body and inadequate parental knowledge override the possibility of information transfer about these issues from mother to daughter. The huge number of adolescents in India, around 200 million (Verma and Saraswathi 2002:106), their poor level of HIV/AIDS and STD knowledge (Aggarwal *et al.* 2000; Mathai and Ross 1997; Tikoo 1996:78), early marriage and childbirth (Gupta 2003:7; Jeebhoy 1998:1280-1283), and higher than estimated rates of pre-marital sex (Pelto 2000:111; Rakesh 1992) make this situation particularly troubling with respect to disease transmission, unwanted pregnancy, and reproductive health problems.

When these findings were compared to those among *Devadasis*, many of the fundamental forces impacting maturation among the two sets of girls are similar. They are both raised to be hard working and self-sacrificing, they pass from childhood to adulthood relatively quickly, they receive very little preparation about menarche and sexuality, and their experiences of sexual initiation are likely similar with respect to fear, pain, and potential for bodily trauma. These findings reveal that a number of the factors that structure the disease risk and social disadvantage for *Devadasis* are the same as those for non-sex working girls. This is relevant for HIV prevention efforts because it demonstrates that there is virtually no information passed from mother to daughter about female physiology, sexuality, or the links between monthly bleeding and conception. Given the importance of these issues to adult health and health-seeking behaviour, programs aimed at younger sex workers should include culturally appropriate awareness

raising about reproductive health and bodily changes during puberty. These results are also theoretically relevant because they problematize mainstream constructions of 'child prostitution', which concentrate on individualistic factors and the "bad" or morally corrupt background of the children and their families as being at the root of sex work. My data illustrates a very different picture, of, on the one hand, how similar sex working and non-sex working girls' conditions of life are and, on the other, how structurally complex the factors are that support and perpetuate the practice of 'child prostitution'.

The differences between how young *Devadasis* and non-sex working girls mature are also important because they provide evidence of what could be termed "positive" aspects associated with being a *Devadasi*. While being a household head and doing sex work to support family members are not always or only positive, the strong kin and peer networks and opportunities to manage their income and property make for supportive communities in which young girls' work is highly valued, as both an economic resource and a socially validated stepping stone into adulthood. This perspective was supported throughout the interviews, as the girls consistently cited *dhandha* as central to helping support the family and part of becoming an adult. In addition, instead of expressing resentment towards parents or elders for dedicating them, as one might assume given the difficulties, stigma, and risks associated with being a *Devadasi*, family was described as the most important or "best" thing in the girls' lives. Related to this is the role in and perspectives of parents about the girls' transition to sex work. While I was not able to gather a great deal of information on this, mothers and other community women took active roles in directing such things as the first client ceremony, calming their daughters, cautioning clients to be careful with the girls, and in some cases, telling men to return

when the young initiate is ready for *dhandha*. There are also examples of mothers' postponing their daughters' sexual debut because they feel they are too young to enter sex work. Along with the girls' points of view, these actions on behalf of parents are critical to gaining better insight into the lived realities of 'child prostitution' for those most immediately involved. As both parties demonstrate, the complexities of sex work in this context belie simplistic presentations of prostitution as somehow divorced from both the internal workings of emotional, familial, religious, and economic decisions and the larger realm of the political-economy.

Following from this last issue, my brief demonstration of the links between aspects of the political-economy and the *Devadasi* system showed how the combined factors of HIV/AIDS and state-level reform campaigns are profoundly affecting the organization of the tradition. The dedication pattern is changing and economic motivations appear to dominate, often with little attention being paid to the health risks, insecure income, and social exclusion that goes along with being a sex worker. Young girls are central to these changes as their dedications are largely underground, less ritualized, sexually unprotected, and they may occur more than once. These shifts are directly related to the impact of AIDS, which has resulted in a decline in clientele, an increased demand for virgins (thought to cure or prevent AIDS and STDs generally), which, in turn, puts greater pressure on the girls to earn in order to support their family. The women who dedicate their daughters and claim *Devadasi* status to take part of state reform programs also put their young girls at risk because there is virtually no emphasis on HIV in such programs and these mothers/families are also typically not involved in *Sangha* efforts (which provide condoms and AIDS education).

Similar changes emerged in the women and girls' discussions of menarche and first client ceremonies, which are no longer public, they are illegal, and they no longer guarantee a life long partner. This forces the older women to work longer than they may have in the past and to depend more heavily on their daughters, who, on account of their minimal participation in Collective activities, are more vulnerable to disease risks. That the contemporary ceremonies surrounding menstruation and commencement of *dhandha* are not well documented is another important reason to document these changes. Although less elaborate in the past, they do exist and have significant meanings, which helps contest the discourses of superstition, degenerative tradition, and meaninglessness that are entrenched around the *Devadasi* system.