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Client Power and Condom Negotiation: Dyadic Conflict and Social Structure in the Post-Apartheid Sex Work Industry

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An abstract of A thesis submitted to the Faculty of the James T. Laney School of Graduate Studies of Emory University in partial fulfillment of the requirements for the degree of Master of Arts in Sociology 2017

#### Abstract

Client Power and Condom Negotiation: Dyadic Conflict and Social Structure in the Post-Apartheid Sex Work Industry By Michael Patrick Vaughn

Relational and societal power structures characterize and impact client-sex worker interactions and, in turn, are likely to influence the negotiation of condom use in their transactions. In the present multimethod study, I investigate South African clients of sex workers' access to different dimensions of power and their impact on condom use and negotiation. Sex work in South Africa provides a unique setting for the study of power through its highly visible connections to racial, sexual, and economic power structures. Drawing on survey data, I find that race impacts condom use, with Black clients of sex workers reporting greater condom use than non-Black clients. I supplement these findings with client interview data, which illustrate how different dimensions of power can be used to influence decision making within the sex work transaction, often to overcome sex workers' resistance.

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I first and foremost would like to thank the peer educators and staff at the Sex Workers' Education and Advocacy Taskforce, especially Pepsi, Lloyd, Elma, Lesego, Ishtar, Miss Angie, and Mama Joyce. This project would not exist were it not for their support from day one. Thank you for inviting me into your safe space and on outreach trips. I hope this work expresses my gratitude and returns the kindness you showed us during our stay in Cape Town by assisting, in some small way, in decriminalizing sex work in South Africa and abroad. And a big thank you to Dr. Gordon, who oversaw client outreach and acted as both mentor and mother to us, and my co-interviewer and friend Dipaali. Thank you both for keeping me focused and on track.

Thank you to the Global Health Institute at the Rollins School of Public Health for funding my initial trip to Cape Town, where I, what feels more literally than metaphorically, stumbled upon this project. Thank you to the GHI 2015 group, Geraldine, Jenny, and Kate. I am especially grateful for your help, insight, and friendship, Kate; thank you for the days spent in cafes fighting with technology and the nights debriefing over wine and pizza. This project would never have come to be without your constant support and compassion. Thank you.

Thank you to my committee, Brandy, Rick, and Sabino, and to my advisor and chair, Karen, for your immense investment in this project, leaving no stone unturned or explanation un-investigated. You have helped me grow as a researcher and scholar. For that, I am indebted to you all.

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# Client Power and Condom Negotiation: Dyadic Conflict and Social Structure in the Post-Apartheid Sex Work Industry

"It's about fetish, fantasy, and power..." -Doc

Social power largely influences interactions between sex workers and their clients, most especially within the sex work transaction. From a behavioral perspective, sex work is the exchange of sexual activity for material resources (Adriaenssens and Hendrickx 2012). While recent actions have been taken to move towards decriminalization, sex work is still widely criminalized and often heavily stigmatized (Amnesty International 2016). Within the sex work transaction, clients are typically seen as power-advantaged over sex workers due to their greater access to material and social resources, such as money and legal protection. This comparative safety often places clients seemingly beyond reproach for their actions within in the sex work industry, which has been linked to an increase in violence against sex workers (Mgbako 2016). In the present study, I analyze how clients' perceptions of their own power-advantage within the sex work transaction (i.e., role of the client) and within society (i.e., one's race or class) impact condom use and negotiation.

Previous qualitative work has dug deep into the meanings associated with sex work, finding client-centered contextual fantasies guiding interactions in many erotic industries. Contextual meanings of sex work may include the facilitation of homosocial (Allison 1994) or enacting seemingly authentic (hetero)sexual desire, even without direct sexual contact (Franks 2002a; 2002b). Client fantasies are acted out with what Bernstein (2001) refers to as a bounded authenticity, meaning the erotic performance is believable during the transaction. However, these above texts are generally the exception; most empirical work on the sex work industry is quantitative and relies on data drawn from sex workers rather than clients (Adriaenssens and Hendrickx 2012). I add to this literature by drawing upon both quantitative and qualitative data from South African clients of sex workers, analyzing first how condom use and negotiation may function within this power-imbalanced industry and also the contextual meanings clients ascribe to condoms and bring to the sex work transaction broadly.

The present study focuses on the South African context because of the explicitness of power relations under the Apartheid government (1948-1994) and continental meanings associated with sex. Apartheid-era legislation forcefully paired race and class in a lasting way by delineating which racial groups could live, work, and use public resources in certain regions. This created an explicit, codified power structure that was actively enforced by the South African government. Zooming out, previous comparative work has found that meanings surrounding the desired end of sex vary between sub-Saharan Africa and North America (Tavory and Swidler 2009), with the desired end typically being an exchange of fluid rather than physical sensation, as is often seen in U.S.-based work. This contextual meaning would be directly prevented through the use of a condom.

Mixed methods research is a program of empirical study in which "the researcher mixes or combines quantitative and qualitative research techniques, methods, approaches, concepts, or language into a single study" (Johnson, Onwuegbuzie, and Turtner 2007, p.120). Multimethod research, a form of mixed method work, involves qualitative and quantitative data collection being conducted separately, potentially independently, and brought together during analysis. Quantitative data on condom use enables the analysis of clients' self-reported sexual behavior and perceived power over said condom use. Qualitative interview data allows for deeper, more nuanced interpretations of power dynamics, providing what Collins, Onwuegbuzie, and Sutton refer to as "significance enhancement" (2006).

First, I introduce issues that make this analysis unique: data drawn from clients rather than sex workers. From there, I outline my theoretical argument for the analysis of power in the study of sex work. I begin by discussing dyadic power, or the power dynamics between the client and sex worker and within the sex work transaction. Then, drawing on the work of Lukes (1974) I discuss additional dimensions of power, agenda setting (be these rules created by pimps, brothels, or the legal system), and the social construction of reality, specifically within the social context of South Africa. Condoms function in this theoretical argument as a tangible, discrete piece of the sex work transaction, the use of which is negotiable and therefore influenced by power dynamics. Next, I present findings from a secondary analysis of self-reported condom use and clients' perceived power over condom use initially collected in the 2007 South African HIV/AIDS TRaC survey. Then I draw on interview data provided by the Sex Workers' Education and Advocacy Taskforce (SWEAT) to explore South African clients' condom use and perceptions of power in their encounters with sex workers. Finally, I discuss the implication of the results in terms of further research, including the utility of a power-informed conceptualization of sexual desire, what I term the erotic fantasy.

#### **On Studying Clients**

The majority of studies regarding the sex work industry use data drawn from the sex worker population, commonly in the realm of HIV prevention (Barrington et al. 2009). Studies focusing on the experiences of clients are far fewer and tend to be primarily qualitative (Adriaenssens and Hendrickx 2012), predominately ethnographic (see: Allison 1994; Frank 2002a, 2002b; Hemmingson 2008). Centering the analysis on the client is a statement of both methodological and political intent. Methodologically, studying up has been used to more deeply understand unequal power relationships by including data from all sides of the relationship (Nader 1972), as opposed to the traditional practice of exclusively studying the powerdisadvantaged (i.e., studying down). The danger of exclusively studying down lies in the potential to unintentionally reify stereotypes, leading to people in these social positions (e.g., sex workers) to become viewed by the academy exclusively as oppressed individuals.<sup>1</sup> By including analyses that study up, scholars acknowledge that all parties are important to an understanding of social phenomena. Studying up has been found to be fruitful in previous studies of sex work (Allison 1994; Frank 2002a; Frank 2002b; Brady, Biradavolu, and Blankenship 2015). The present study, by using client-data, will provide additional insight into the experiences of those who are perceived to be power-advantaged. By understanding some of the dimensions of power at play during the sex work interaction, this study may identify what contributes to or may disrupt how the sex work industry disadvantages sex workers and privileges clients.

#### Power and the Sex Work Industry

Multiple dimensions of power exist within the sex work transaction, creating a power structure in which clients tend to hold a power-advantage over sex workers. I conceptualize power within the sex work industry by drawing on Lukes' (1974) three dimensions. I will discuss each of the three dimensions in turn, outlining the theoretical importance of each and mapping my data onto them. Using this framing, I come to my three hypotheses regarding power and condoms within the sex work industry.

<sup>&</sup>lt;sup>1</sup> For alternative academic narratives of sex workers, see Mgbako (2016).

Power broadly is an individual's ability to influence (French and Raven 1959).

Traditionally, dyadic conflict has been studied using Power-Dependence theory (Emerson 1962; Cook and Emerson 1978). Power-Dependence theory conceptualizes power as relational and inversely related to dependence. Emerson (1962) argues that dependence stems from the perceived value of one's resources. Within the sex work dyad, both client and sex worker hold a desired resource on which the other is dependent: for the client it is the sex worker's services and for the sex worker, it is the client's payment. When the client may purchase services from a variety of sex workers and when the sex worker is highly dependent upon the client's payment, the client has more power within the transaction. This is often the case, given the likelihood of sub-Saharan African sex workers being economically disadvantaged (Mgbako 2016) and the majority of sex workers in South Africa being Black women (see: SWEAT 2013a, 2013b, 2013c).

The sex work transaction is a unique interaction in that it is, in South Africa as well as in many other nations, legally prohibited and highly stigmatized. These broader social considerations are difficult to capture with Power-Dependence theory alone. Lukes' tridimensional model of power (1974; Gaventa 1980; Hoffman 2007) allows for the analysis of the interaction to be framed within the broader social context. Lukes argues that there are three dimensions to power: interpersonal conflict, agenda-setting, and the social construction of reality.

## First dimension of power: Power dependence and dyadic conflict

The first dimension of power focuses on the actual actors in conflict, their "observable *conflict* of (subjective) *interests*" (Lukes 1974:15) where different individuals are able to come together and struggle against one another during the decision-making process. This interpersonal

conflict is akin to what is captured by Emerson's Power-Dependence theory. Condom use is one such conflict. Condom use has been studied extensively from a public health perspective (Sanders 2004) with explicit focuses on HIV and STIs (Andrews et al. 2015; Lazar et al. 2015) and physical and sexual violence (Krüsi et al. 2012). Pricing for services may depend on whether or not a condom is to be used during the transaction. Due to the potential to be uncomfortable and dampen the physiological experience of sexual intercourse (Tavory and Swidler 2009), requiring condom use could push down the price clients are willing to pay. In contrast, clients may pay a premium for services without a condom.

This conflict is resolved through condom negotiation, or the interactional process by which the client and the sex worker determine whether or not a condom will be used during sex. Condom negotiation is, behaviorally, a conflict of interests; clients and sex workers come to the transaction seeking different valued resources (e.g., sensation and fantasy versus payment). Condom negotiation captures both condom use and the decision-making process, making it a more rigorous measure than condom use alone. For sex workers, economic pressure or financial need, threats of violence, and substance use, all of which impact power and dependency, have also been found to also negatively impact the sex workers' ability to negotiation condom use (see: Choi 2006). Previous work in Cambodia shows that condom negotiation often involves unequal power, with women being at a disadvantage compared to men in the decision-making process (Wilkinson and Fletcher 2002) and even stigmatized for carrying condoms (Richter, Bobin, Wilkinson, and Fletcher 2002).

These structural and interpersonal factors all bear on the power relations within the sex work transaction, generally leaving the client power-advantaged. Given that sex workers in South Africa tend to be economically disadvantaged, this would increase their relative dependence on the clients' economic resources within the transaction, putting the client at a power advantage. Additionally, societal-level factors such as gender inequality (most sex workers are women and most clients are men) and social stigma would further put sex workers at a power-disadvantage as compared to clients. Given this relative power-advantage, as well as contextual meanings associated with sex that are generally incompatible with condom use, I put forth the follow hypothesis:

H1: As the client's self-reported power over condom use increases, condom use will decrease

However, recent qualitative work on condom use has called for a more fluid understanding of sexual behavior. Most importantly, Tavory and Swidler, in their study of discourse around condom use in Malawi, find that the definition of pleasurable sex, and even what "counts" as sex, is contextually dependent (Tavory and Swidler 2009). Additional work has found that the contextual dependency of sex and pleasure influence trends within the sex work industry (Rao, Gupta, Lokshin, and Jana 2003; Gertler, Shah, and Bertozzi 2005), such that clients are less likely to pay a comparable price for less pleasurable sex, or even purchase it at all. This impact of social context on the sex work transaction demonstrates the influence of broader societal factors within the industry and on the client and sex worker specifically. By including the social context in the analysis, I am also able to address the impact of societal influence on the sex work transaction in terms of power and dependence, as well as sexual desire.

#### Second dimension of power: Agenda-setting

Lukes' second dimension of power is agenda-setting. Actors who participate in agendasetting (e.g., lawmakers, brothel managers, etc.) leverage their access to the second dimension of power to prevent conflict, or the exercise of the first dimension of power. Having known rules removes uncertainty from interaction by taking autonomy away from the individuals. The criminalization of sex work is one instantiation of the second dimension of power. South African anti-prostitution legislation reduces the sex worker's access to the first dimension of power within the client-sex worker interaction through the threat of fines, jail time, and further, potentially violent interactions with the police. Additionally, clients are rarely sanctioned for acts of violence against sex workers, drawing on second dimensional power, to the extent that criminalization of sex work actually "empowers clients with criminal tendencies because the client who wants to rape, physically assault, and murder sex workers knows that the likelihood of his being held to account for these crimes is incredibly low" (Mgbako 2016, p.58).

While the post-Apartheid South African government does not currently support sex workers' rights, sex work venues have the potential to locally enact the second dimension power to impact condom negotiation. Urada and colleagues (2012) find that Filipino/a sex workers were more likely to negotiate in clubs, bars, and spas than they were in karaoke bars for this reason. The influence of the venue's gatekeepers, such as encouraging/enforcing regular HIV/STI testing has also been found to increase consistent condom use (Chen et al. 2015). The legal prohibition of sex work creates a unique intermingling between the second and third dimension of power. By criminalizing sex work, anti-prostitution legislation also generates stigma (Mgbako 2016) which implicitly affects both sex workers and clients.

#### Third dimension of power: The social construction of reality

The third dimension of power is the ability to shape social reality and perceived possible courses of action. Societal level constructs, such as race and class, are created by and enactments of the third dimension of power. Courses of action outside of the social reality created through the third dimension of power appear seemingly impossible. For example, owing to social stigma, as well as the race and class system, it may appear impossible for sex workers to speak openly or even attend the South African Parliament. Yet, due in large part to the efforts of the Sex Workers' Education and Advocacy Taskforce and its activists, many sex workers have gained the opportunity to be known as both sex worker and expert while addressing Parliament. The third dimension of power may account for the discrepancy between *perceptions of possible action* and evidence of said action *actually having occurred*.

The Apartheid government, an infamous wielder of the third dimension of power, functioned, as the Afrikaans word implies, as a system of "apartness," actively using its access to the second dimension of power to legally divide the nation along racial lines. By restricting residence (e.g., Group Areas Act of 1950), labor (Bantu Building Workers Act of 1951), protest (Public Safety Act of 1953; Prohibition of Political Interference Act of 1968), housing (persistence of the hut tax on all households not living in a European-style home), public utilities (Reservation of Separate Amenities Act of 1953), as well as sex and marriage (e.g., Immorality Act, 1927; Immorality Amendment Act of 1950; Prohibition of Mixed Marriage Act of 1949) along racial lines, the Apartheid government actively denigrated initially Black South Africans and later also Coloured South Africans, supporting white Afrikaner supremacy. This intentional apartness legislated the pairing of race and class. In doing so, the Apartheid government enacted societal change via the third dimension of power. Their actions went beyond agenda-setting and actually shifted the ways in which South Africans viewed the world, especially in terms of race, a legacy that still persists even after the formal dismantle of Apartheid-era legislation. It is for this reason that, in the present study, I do not attempt to disentangle race and class, but rather try

to understand the system as it currently exists, which reflects the lasting impact of Apartheid-era legislation on South Africa.

With this frame in mind, it is important to note that sex work is common in South Africa and the majority of sex workers in Gauteng province (Johannesburg), kwaZulu Natal province (Durban), and Western Cape province (Cape Town) are Black, cis-female, and of a lower SES, whereas their reported clients tend to be male and vary in terms of race and class. Conducting an accurate count of active sex workers in a region is challenging given the hidden and highly mobile nature of the population. Best estimates calculate Gauteng province is to have between 31,278 and 94,150 sex workers (SWEAT 2013a), kwaZulu Natal to have between 19,335 and 42m994 (2013b), and the Western Cape between 13,670 and 35,328 (SWEAT 2013c). While not all sex workers are people of color or of a lower class and not all clients are white or of an upper class, widespread trends emerge mirroring the social reality created by the Apartheid government through its use of the third dimension of power.

These societal-level trends, when taken into consideration with the contextualized meaning of sex and condoms, impact condom negotiation within the sex work dyad. Davis and colleagues (2014) demonstrate that sexual sensation seeking behavior and misogynistic beliefs about both women and condoms are positively related to young American men's use of condom resistance tactics, or efforts to subvert condom negotiation and avoid condom use during vaginal intercourse. Such dynamics illustrate how both dyadic- and societal-level concerns enter into the condom negotiation.

While the term "sex" tends to be an ambiguously defined term (see: McPhillips, Braun, and Gavey 2001), Tavory and Swidler (2009) argue that the valued sensation of the sexual encounter is contextually dependent and can impact widely held perceptions of condoms. They

find that, in Malawi, the goal of sex is fluid exchange ("sweetness" as they translate it), which condom use inherently disallows. Their findings also suggest that condom use is paired with distrust, implying that suggesting or requesting condom use could indicate sexual health risk, such as being HIV+. The authors expand this perspective to a wider array of sub-Saharan African cultural contexts, arguing that the pairing of condom use with avoiding sexual health risk has lead to a broad association of *condoms with risk*. Tavory and Swider (2009) explain that this pairing "operates semiotically to discourage condom use" broadly (180) and, for sexual partners who use condoms, "relegates a relationship to an inferior status" (p.181).

The sex work industry is impacted by the cultural context in which it is situated. Widely held social meanings impact individuals' sexual behavior and condom use, generally discouraging use. Additionally, sex workers in South Africa are overwhelming Black, cis-female, and lower socioeconomic status. This demographic trend, at least in part, is due to the intentional legislating of race and class differences during the Apartheid era government and continues to persist post-Apartheid. The intentionally created social shape of reality is evident here in who is most likely to be a sex worker. Clients do not appear to have any trends in who can or cannot embody this role, though they do tend to be of a higher SES than sex workers and have greater racial variety. Through this comparison, the third dimension of power becomes evident. Clients, through their higher socioeconomic status, will have greater access to the third dimension of power.

H2: Client income will be inversely related to condom use The race system functions as another means of accessing the third dimension of power. Given that the majority of sex workers are Black and the clear power differential between Black and non-Black South Africans, clients who are non-Black are likely to also have greater access to the third dimension of power than sex workers.

H3: Non-Black clients will be less likely to use condoms than Black clients.

This study focuses on the client's perceived power. I argue that the client mobilizes their power advantage on all three dimensions to influence condom negotiation, resulting in lower condom use. The quantitative analysis empirically tests the three hypotheses above and qualitative interviews with clients offer insight into what they consider while negotiating with sex workers.

## **Quantitative Methodology**

#### Data

Data were initially collected in the 2006-2007 South Africa HIV/AIDS TRaC Study (Vilakazi and Sekhar 2014), examining sexual behaviors, condom use, including consistency and brand preference, and HIV/STI counseling and testing. The authors conducted stratified random sampling using race, type of housing, and household income as strata. Primary sampling units were 90 enumeration areas (EA) for each of the three major cities selected – Johannesburg, Durban, and Cape Town – drawn from the 2001 Census. EAs were chosen using a probability sampling frame, proportional to size. Secondary sampling units were households within each EA. Within households selected, respondents were randomly sampled. Each city's sample was proportionally distributed across all strata (n=2685, male=1345). Data were obtained for secondary analysis with the permission of Population Services International.

#### Sample

Total sample size was 2685 respondents between the age of 15 and 35 years old, with a mean of

24.929. Client status was determined by a non-zero response to the average number of times the respondent had sex with another person in a commercial sex work capacity ("exchange money for sex") or in a transaction sex work capacity (providing "financial / material support") in the past month. Participants reporting purchasing either or both transactional or commercial sex were coded as a client. Due to the theoretical significance of the impact of gender on interactional power dynamics, only male clients were included in the final analysis. Additionally, while all respondents were asked about purchasing transactional sex, only male respondents were asked about commercial sex. Participants were dropped from the final analysis for nonresponse on theoretically significant variables (i.e., income, perceived power, and gendered norms regarding condom use), bringing the final sample size to 82. Mean total number of sexual encounters purchased in the past month was 4.61. The sample reported high condom use, with the mean total number of sexual encounters with a condom being 3.854, or about 84% of mean sexual encounters. The majority of respondents reported living in a township (52.79%), followed by suburbs (23.46%), informal settlements (12.35%), and the inner city (7.41%). The sample was overwhelmingly Black (76.83%). See Table 1 for additional information regarding sample demographics.

## [Table 1 About Here]

#### Measures

Participants reported sexual frequency as clients of commercial sex work and of transactional sex work over the past month. Participants were asked a follow-up question for each of these frequencies: "You say you had sex \_\_\_\_\_ times with [partner type] during the past month. Of these, how many times did you use a condom?" Condom use, then, is viewed as a subset of total sexual frequency. I created a frequency measure of total paid sexual encounters by adding total sexual

encounters with commercial sex work and total sexual encounters with transactional sex work.<sup>2</sup> I also created a frequency measure of total paid sexual encounters with condoms by adding the follow-up question reports for both types of sex work. Impossible responses, such as reporting a higher frequency of condom use than total sexual frequency, were top coded as the respondent's reported total paid sexual frequency. Total paid sexual encounters with a condom was the key dependent variable and total paid sexual encounters was used as an exposure term. Separate analyses for transactional and commercial sex work resulted in much smaller sample sizes and are not included in the present study.

They key independent variable was an index of the respondent's perceived power in condom negotiations. This measure was created by indexing four items: "I can say no to sex with a new partner if we don't have a condom even if I want to have a relationship;" "I can say no to sex if my partner and I don't have a condom even if we have not used one in the past;" "I can talk to a partner about using a condom before I become too aroused;" "I can insist that a long term partner uses a condom." Each item was measured using a four-point scale – strongly disagree (0) to strongly agree (3). These four items were used to create a 12-point index ( $\alpha =$  .76), with 0 being low perception of power in condom negotiations and 12 being high perception of power in condom negotiations. Factor analysis showed all four items loading onto a single factor, with an Eigen value > 1. ANOVA testing found that clients' power was not significantly different from non-clients' power. Mean score on the 12-point power index was 7.561.

<sup>&</sup>lt;sup>2</sup> Commercial sex work is an exchange of sexual services for money, whereas transactional sex work is an exchange for financial or material support, generally over time. I include both forms of sex work in my analysis due to their high prevalence in Sub-Saharan Africa (Luke, Goldberg, Mberu, and Zulu 2011) and their core similarity of exchanging resources for sexual behavior.

Relevant demographic characteristics were utilized as control variables. Marital status was measured as a dichotomous variable (0=not married, 1=married). Age was measured in whole years, including individuals aged 15 and 35. Gross monthly income was measured stepwise, with no income coded as 0. The remaining 11 income brackets (measured in rand) included: 1-400; 401-800; 801-1600; 1601-3200; 3201-6400; 6401-12800; 12801-25600; 25601-51200; 51201-102400; 102401-204800; >204800. Employment type (full-time, part-time, student, etc.) and residence type (urban, suburban, township, etc.) were highly correlated with income and were omitted from the final model. Participant's gendered beliefs about control of condoms ("Men are in control of whether a condom is used during sex") was measured using a four-point scale, strongly disagree (1) to strongly agree (4), and included as a control variable. Race was initially measured by a single question, allowing for the following responses: Black, white, Coloured, Indian and other. Race was collapsed into a dichotomous variable, with categories of Black (coded 0) and non-Black (including white, Coloured, Indian, and other; coded 1).<sup>3</sup>

#### Results

<sup>&</sup>lt;sup>3</sup> This methodological decision was made for a number of reasons. First, Black South Africans, under Apartheid and still in many ways today, hold the lowest social status in the South African racial hierarchy. I center Blackness in my operationalization to capture this importance, as it relates to one's ability to exercise power and achieve desired ends. Second, I aggregate these respondents into the category of non-Black due to low sample size and to circumvent the complicated question of the status of Coloured individuals in South Africa. Coloured as a racial category blurs the Black/white dichotomy and in many ways queered the Apartheid system, as evidenced by their absence in the first group-targeted legislation. "Coloured" is a complicated category and should be the focus of its own sociological analyses of power and status.

Table 2 presents correlations among theoretically relevant variables. Results indicate a negative relationship between perceived power and paid sex overall that approaches significance (-.216, p<.055), implying that individuals who are reporting having more sex may also perceive that they have less power over condom use. Paid sex overall and paid sex with a condom were significantly and positively related (.713, p $\leq$ .001), so as a client purchases more sex over all, they report greater sexual encounters in which a condom is used. Results also demonstrate that income and race are positively, significantly related (.347, p $\leq$ .001), indicating non-Black respondents tended to report higher income brackets than Black respondents. This correlation is indicative of the legacy of Apartheid, in which race and class were intentionally paired. See Appendix 1 for the distribution of income by race. Income was also positively correlated employment type (.267, p <.05) and negatively correlated with type of residence (-.314, p<.005). Race was also negatively correlated with gendered control of condoms (-.226, p<.05), implying that Black respondents tended to report that men should control condom use more so than non-Black respondents.

## [Table 2 about here]

Due to non-normal distribution of the dependent variable, I use a Poisson regression. The dependent variable is total paid sexual encounters with a condom, with total paid sexual encounters as the exposure term. Table 3 presents two nested models for this analysis. Model 1 includes variables relevant to the transaction and dyad directly (client's perceived power in condom negotiation, client's gendered beliefs about condom control, and access to condoms), and relevant personal characteristics (marital status, age, and education). Model 2 is included to test the impact of the access to the third dimension of power through SES (monthly income) and race. Alternate models are provided as appendices, including a regression using

each item used to create the power measure (Appendix 2) and separate models for commercial and transactional sex work (Appendix 3).

#### [Table 3 about here]

No variable in Model 1 was significantly related to condom use in paid sex (p>.05). In Model 2, only race is significantly related to condom use. Non-Black respondents reported significantly lower condom use in paid sexual encounters than Black respondents (-.512,  $p\leq$ .001), thus supporting Hypothesis 3. Perceived power was not significantly related to condom use in any model, failing to support Hypothesis 1. Income also was not significantly related to condom use, failing to support Hypothesis 2

## Discussion

Results from the regression analysis fail to support the relationship between perceived power and condom use at the individual level (Hypothesis 1). Perceived power over condom use is an individual's understanding of their own access to the first dimension of power. The above quantitative analysis indicates that, within the sample of South African clients, this sense of one's own power does not significantly impact interactional outcomes. In Lukes' (1974) tridimensional model, the third dimension of power acts to prevent individuals from conceiving of the possibility for open conflict, or the exercise of the first dimension of power. Given this conceptualization, the clients' perception of their own power may be less impactful on the condom negotiation than their access to the third dimension of power. This is especially probable given the historical and social context of the South African sex work industry.

These findings provide some evidence to support the impact the third dimension of power on the sex work transaction. Race is significantly related to condom use, with non-Black respondents reporting paid sex with condoms in greater frequency than Black respondents

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(Hypothesis 3). Yet, income was not significantly related to paid sex with condoms (Hypothesis2). Given the social context, post-Apartheid South Africa, race may be a more fundamental contributor to the social construction of reality, via the third dimension of power, than income.This shaping of social reality gives non-Black South Africans the illusion of greater autonomy and control than Black South African.

Given the contextual nature of sex previously discussed, the above analysis presumes that condom use is a less desirable service. With this meaning ascribed to the sex work transaction, non-Black participants reporting lower frequency of condom use could potentially be due to their relatively greater access to the three dimensions of power within the South African context. This meaning has been inferred from the literature, though. I conduct a qualitative analysis of interviews with South African clients to understand more clearly these local meanings and methods of mobilizing the three dimensions of power are related to condom use and negotiation.

## **Qualitative Methodology**

To further investigate the ways in which South African clients use and are affected by the three dimensions of power, as well as the ways in which condom negotiation play out, I analyze 8 in-depth interviews of male participants in the sex work industry – seven male clients of sex workers and one male pimp. Using the interview data, I strive to present a richer picture of the meanings associated with power access and use within the sex work industry. These interviews allow insight into an otherwise hidden, often inaccessible, population.

Interviews were collected in Cape Town, South Africa by the Sex Workers' Education and Advocacy Taskforce (SWEAT), where I was an intern, from May to August of 2015. Interviews were conducted as part of an evaluation of SWEAT's outreach and advocacy programs. Participants were recruited using a snowball sampling method. Clients self-identified race as either white or Coloured; no Black clients could be located despite conscious recruitment efforts. Average interview time was 76 minutes, with interviews ranging from 41 minutes to more than 3 hours. All interviews were conducted in English. Data were analyzed using a codedriven thematic analysis. Inductive codes included power, race, fantasy, and condom use. Coding was conducted using MaxQDA.

While a large sample size is rarely the explicit goal in qualitative research, the archive obtained from SWEAT contained only 8 interviews, which likely had not attained theoretical saturation as per Small's (2009) definition. These interviews, however, also contextualize the quantitative results and allow for a deeper understanding of the ways in which power operates within the sex work transaction. These interviews were conducted as an outreach effort to the client population in Cape Town, South Africa, to learn more about clients' perspective of the sex work industry and their efforts towards decriminalization of sex work. The initial interview guide focused on the client's purchasing habits and desired services, condom use, beliefs about appropriate behavior within the sex work transaction, among others. See Appendix 4 for complete interview guide. The present study is a secondary analysis of these interviews, conducted with permission from SWEAT. By utilizing this qualitative data, in conjunction with the quantitative, I present the utility of a power-informed frame to studying sex work.

Condoms are a useful starting point to discuss power and negotiation within the sex work transaction because they are tangible and their use is generally unambiguous. Self-reported condom use reveals the end result of condom negotiation and provides insight into whether or not the client purchased their preferred outcome. Qualitative results suggest that clients not only "book based on fantasy and fetish," as Doc suggested during his interview, but that powerdynamics are also integral to the understanding of client-sex worker interactions, both in terms of condom negotiation specifically and the sex work transaction broadly. All respondents reported that they typically use condoms, if not always. Upon further probing, however, clients interviewed reported the criteria upon which they base their decision to use a condom or not.

## Negotiation

Consistent with the quantitative results, clients reported using a condom for the vast majority of sex work transactions. To get at those moments when the sex worker and client were at cross-odds in terms of desire within the transaction, all participants were asked "have you ever been angry with a sex worker" to prompt a discussion of moments when conflict arose. Interestingly, no client discussed any form of negotiation, regarding condoms or otherwise, with sex workers to resolve conflict. Instead, clients described their ability to overcome the sex worker's resistance or their freedom to cancel the transaction. Clients used greater access to the first dimension of power (e.g., using force to get what they want) or third dimension of power (e.g., buying what they want) to obtain their desired ends. Alternatively, clients, given the large number of sex workers in Cape Town, reported that they had the option to choose another worker if they could not obtain their desired end.

While client's perception of their access to the first dimension of power was not significant in the quantitative analysis, clients did discuss open conflict with sex workers during their interviews. When asked about a time when he had ever gotten angry with a sex worker, Carlos shared the following response:

[... Have you ever had um have you ever gotten angry with one of the girls you've been with?] Yeah, I wanted to have anal sex with this chick but she didn't want to. She crossed me. "I want this ass," you know? [What happened?] Well I grabbed her (mumbles) she said "Just fuck me, do it, finish" because I was angry. She knows, she, even they are doing sex work. They can't let the client go. And she gives it. [So did you, um, you ended up, you did have anal sex with her?] Mmm [She did agree to it?] Mmhm. [And did you have to pay more for it?] Yeah. [And did she, what did it sound like when she was saying no? Did she fight, get aggressive, did she?] At first it was like (stern) "No, you're not

going to do it." Why not? I was angry and stuff, so she gave in. Cuz I can be, I can moan the whole time, you know? [And so at the end, when you did it, was it a good experience? Was she good at it, did it feel good?] She didn't like it but I liked it. Mmm.

Carlos, in the above narrative, discusses a situation in which he forced a sex worker to sell him anal sex. He acknowledges that there was a conflict of interests, that he wanted to purchase anal sex and that she did not want to provide that services, and that there was a power differential in that she "can't let the client go." Carlos overcomes the sex worker's resistance and obtains his desired end.

Phillip, when if he had ever had a bad experience with a sex worker, also discussed a time when a sex worker refused to provide services:

I got, what would be the term, stiffed, I got stiffed by uh a hooker. She, uh, screwed me over and then I went to find her and I found her and her pimp came along and told me to fuck off. I said, "hey, dude, alright, she's just fucking stolen uh stolen from me" and he showed me a gun and said "well, what are you going to do about it?" So I was like, "right now, I am going to walk away." He nodded his head, he said "that's a clever decision." So I walked away.

Phillip, in his anecdote, perceived that he was wronged by a sex worker and attempted to engage in open conflict to resolve the issue. He was overcome by the threat of physical violence and conceded. In this situation, it was the client whose interests were subverted by the exercise of first dimension power, in the form of force, of the pimp.

The second theme that emerged within descriptions of the process of deciding was also present within both Carlos' and Phillips' anecdotes: the ability to leave. As Carlos explained, you "can't let a client go." While sex workers do, in many cases, have the ability to choose their clients, economic need may make these choices more challenging, or appear to be less possible via the third dimension of power. Phillip provides a second anecdote on the same topic, a sex worker refusing to provide a specific service: I guess so, when um things are being refused, yeah. Cuz it's like, I'm paying and now you're refusing, like what, you know, don't you want the money? What the fuck's your problem? You know? [How would you resolve those situations?] Peacefully. Um, either with more money or cancelling the transaction right then and there and finding someone else. [Would there ever be arguments?] No. No. Um, like I said when you're doing this sort of thing its buying someone so, like, I never really saw the point of getting into arguments, it's like simple...

In this instance, however, Phillip illustrates the two ways the third dimension of power could be mobilized by the power-advantaged actor. The first is the ability to cancel a transaction. There is no point in arguing, or entering into open conflict, if one has the ability to prevent conflict instead. The second avenue Phillip implies is the ability to prevent open conflict by incentivizing the other party. Both the ability to cancel a transaction and the ability to incentivize the other party require access to additional external resources, reducing dependence via the first dimension of power.

#### Condom use and relative sexual health risk

Condoms, strictly speaking, are a health technology. Clients often discussed their decision to use or not use a condom in health terms. Access to medical care was a common response from white, upper class clients as to why they might not use a condom. Richard dismissed questions about concerns regarding his sexual health by invoking access to medical care. He went on to explain how his medical expenses were incredibly high (2000ZAR for one visit). "I don't go to the clinics. I go to my own *private family doctor*. (laughs) ... He's right here on the corner. More money, but I get my own private doctor. He takes blood in his office, the blood gets sent to a pathologist, and he phones me three days later" (emphasis own). By using a private physician, Richard is able to keep his involvement with the sex work industry discreet and, in his mind, avoid any negative sexual health risk. The existence of an alternative to

condoms shifts the power structure within the sex work transaction. Johan, a white, wealthy, selfdescribed hobbyist within the sex work industry relates a similar experience:

Always use condoms, yeah. And also I know the Dynasty doctor, I, we, us guys we got to know him and uh and *the first thing I did by the way, when I took this girl out for the apartment thing, we both went for an HIV test and uh I put her on an injection because I don't want babies.* Um so I went to this guy and you know while he actually looks after the girls at the Dynasty, we would go there so many times *we would pay him to look after, you know, us.* So I know to know him, I know him well, so I took this girl there and so um do I have someone that because *I wouldn't want to go to my house doctor* and have an HIV test, you know what I mean? Have I had HIV tests? Yes. Regularly. I practice safe sex. Have I been offered without? Yes. Many times.

Johan is able to afford to see two different physicians, one for his routine medical care and another, privately, for his sexual health. By purchasing this discretion, he is mobilizing the third dimension of power via his social class and whiteness, often paired in the South African context, to avoid conflict. Johan opens his explanation with a statement that he always uses condoms, but his discussion about condom use in the sex work industry centers not on *condoms*, but rather alternative, more expensive means of reducing sexual health risk. By leveraging his access to the third dimension of power, Johan is able to not only stay current on his HIV testing, but he is able to hire a physician to treat the sex workers he frequents, presumably with their consent, to make any future conflict impossible. Through this use of the third dimension of power, Johan also frames condom use as wholly within his purview; he decides the physician to use and he always uses a condom, despite others have offered him sex without a condom many times.

For many, though, access to healthcare is more limited, if accessible at all. For respondents like Eric, a lower SES Coloured man, frames his relationship with condom use and sexual health in terms of risk. "... you don't have a choice. Otherwise, you will regret it after 3 months, you go for check-ups (Eric mimics gasp) HIV. It'll kick your ass, ass-kicker, know what I'm saying?" Zach, a Coloured client who also works as a sex worker, discussed interactions

with female sex workers as follows: "Because, she, how can I say, in this day and age, with all this HIV stuff in the media and stuff like that, you can't take that that like that risk, so you can't take that risk. She won't have a problem with me using a condom. She will actually agree, yes, it's better. Let's use a condom." He goes on to discuss that, "you do have more pleasure without using a condom, but um it's difficult to like do that with a stranger, you know, that you just met..." Zach acknowledges the negative aspects of condom use (i.e., less pleasurable) but he also holds that the potential for heightened pleasure does not outweigh the sexual health risks.

In Zach and Eric's social reality, the meaning of a condom centers, at least in part, on vital risk reduction. According to Johan and Richard, this same object appears to emphasize instead the reduction of a risk which is otherwise surmountable. This difference in perspective is in-keeping with the above statistical analysis, in which individuals with less access to the third dimension of power (Black clients as compared to non-Black clients) reported significantly greater condom use within paid sexual encounters. In these interview, respondents relatively power-advantaged in terms of race and class tended to define their relationship to condoms differently than the relatively power-disadvantaged. In summation, access to the third dimension of power, through race and class, appears to impact the meaning of condoms, thus shifting the perceived impact of condom use.

#### Condoms as regulation

Numerous clients reported that local institutions, such as brothels or pimping structures, disallowed condom negotiations through the rules governing the sex workers in their employ. Nick, a long-time pimp, discussed the use of condoms within his role as a pimp as a tool for regulation of sales. One standard action he took as a pimp was to "take down plates" as a safety precaution. According to Nick, clients were aware that he, the pimp, was protecting the business and watching out for "his girls" by enforcing an informal code of conduct. This code of conduct granted Nick access to the second dimension of power, giving him the ability to influence the sex work transaction even when he was not directly involved. Nick's business model, too, functioned as a means of mobilizing the second dimension of power. The sex workers (or "girls") he employed were expected to "finish your condoms" by the end of the shift. Nick explains the process as a means of preventing in-fighting among his workers:

[And so, is there any, so, I know you said at one point you had like a few women working for you. Um, is there ever any animosity or jealousy between the girls? Let's say one girl is making a lot more money than anyone else, she has a lot more clients?] No, um, the understanding is like um every day you can't make the same money. *If you have to work until 1 o'clock, from 6 till 1, you, and you had ten condoms, you not finish your condom, its nothing*. But you gonna get even up with what the other girls are gonna get. Cause tomorrow you make more than them money. Today they make a lot of money, tonight you make less. Tomorrow you make more and they make less. You see? That's how it go. It's not like like you are the favorite one. Sometimes you do it two, three nights, a lot of money, it's your luck. It's how you build your clients. You see, if you build clients for you regularly, then you know you gonna get regular money. That's how it work, yeah. (emphasis added)

The model Nick and his dealer used to regulate business was to give each of their "girls" ten condoms. Each condom was assigned a monetary value, typically 100ZAR each (roughly 7USD). The sex workers were asked to either return the condom or to hand over the money earned. In doing so, the negotiation process is subverted by a second-dimensional force, the pimping structure, regulating both the use of condoms and the fees associated. Nick clarified that his "girls" would often be searched to ensure that rates were not raised during any otherwise disallowed negotiation process.

Again, the meaning of the condom is contextually dependent, not only on the society, but also on the local context of the interaction. Shifting the meaning of condoms is largely possible through the exercise of power. In the case of a pimping structure, the second dimension of power is invoked to prevent condom negotiation and enforce in-house behavioral codes. These rules, often obeyed by clients in the face an underlying threat of violence in street-based sex work and a veneer of decorum in indoor venues, supersede the client's ability to overcome risk.

These instances in which client power is subverted (e.g., sex work institutions, threats of violence, threats to sexual health) elucidate the similarities and differences in construction of social reality across clients. Clients interviewed unanimously agreed that clients were superior to sex workers and that sex workers have little voice in the transaction. For these men, the concept of a condom negotiation did not reflect their lived experience; they framed condom use typically as a one-sided decision. Clients' perspectives varied in terms of response to sexual health risk, and these differences tended to sort along race and class. White and high-income clients tended to report fewer threats than Coloured and low-income clients. White, high-income clients have more access to the third dimension of power, I argue, by virtue of their race and class within the post-Apartheid system, thus allowing them to re-draw the bounds of social reality to ostensibly eliminate threats to their well-being.

#### **Overall Discussion**

Social power has the capacity to impact the sex work transaction on all three dimensions, impacting actors within the interaction, through the contextually-relevant rules, and within the shifting bounds of reality. Condom negotiation exists within the first dimension of power as an open conflict over subjective interests. While quantitative measures appear to be inadequate to map the first dimension of power, qualitative results indicate that clients and sex workers both have a number of avenues through which they can engage in open conflict. Clients and sex workers both have access to physical force as a source of the first dimension of power. Both also have the ability to cancel a transaction, though, given previously observed differences in SES and the size of sex worker labor force, clients potentially have a power advantage.

In terms of the second dimension of power, differential arrest patterns and the prevalence of police violence (Mgbako 2016) imply that clients tend to be power advantaged over sex workers in terms of the effects of agenda setting. Qualitative results show that institutions within the sex work industry, such as pimping structures, may shift this imbalance to favor sex workers over clients, though they are not without their own drawbacks. Quantitative data drawn from clients on the second dimension of power, such as frequency of police involvement or fines accrued for solicitation, would further illuminate these trends.

While quantitative measures failed to provide insight into the first dimension of power, they proved illuminating in regards to the third. Race and income were highly correlated, demonstrating the lasting effect of Apartheid-era legislation and providing support for the assertion that race and class have been paired. Regression analyses find that race is significantly related to condom use, with non-Black clients reporting significantly lower frequencies of paid sex with a condom than Black clients. This finding suggests that, if Tavory and Swidler's (2009) definition of the desired end of sexual intercourse to be an exchange of fluid, then Black clients may be using condoms at higher frequencies because of their relative lack of access to the third dimension of power. Qualitative data find more pronounced class effects than race effects, given the archive of interviews consisted exclusively of white and Coloured respondents. Within this racially privileged group, participants mobilized their access to the third dimension of power via their social class and economic resources. Mobilization of one's social power on either the first or third dimension resulted in clients reframing condom negotiation as a condom decision, one which the client believed he ultimately made alone.

## Conclusion

Taken together, the findings of this study demonstrate the utility of a power-informed analysis of the sex work industry. Future sociological analyses of the sex work industry should strive to take into consideration both the position of the sex worker and the client, as well as the multiple dimensions of power at play during the transaction. Condoms in the previous analysis function a tangible object within the sex work transaction, the use of which is dichotomous and can be negotiated. This potential for negotiation within the sex work transaction also implies a potential for conflict, which brings to bear Lukes's three dimensions of power.

Condoms also have symbolic meaning in themselves which may or may not be compatible with the symbolic meaning of the sex act. These meanings are contextually dependent and conflicts are impacted by relative power. Within the sub-Saharan African context, definitions of sex that require an exchange of fluid may bring about conflict if the sex worker and client hold different values (e.g., prioritizing sexual health over sexual experience or pricing based on sexual health risk). Further quantitative research should strive to develop and validate measures that encompass multiple dimensions of power.

Due to the hidden nature of the population and the illegality of sex work, data drawn from clients of sex workers is rare. The nature of this population has led to small sample sizes in both the qualitative and quantitative analyses. While statistical measures have demonstrated the reliability of findings, more robust statistics would require larger sample sizes. Client data including a wider range of races and classes would further strengthen the analysis as well. Primary data collection, in collaboration with local sex workers or organizations working within the local sex work industry, could address some of these concerns. Further theorizing into the nature of both the meaning of condom use and the sex act within the sex work transaction is required. Additional research should strive to measure power within a given social context and, ideally, draw data from both clients and sex workers. In doing so, future work can avoid the trap of inferring meaning or values from the reports of outsiders (e.g., clients reporting on the perceptions of sex workers)

Bernstein (2001) posits that client desire, or fantasy, is one driving force within the sex work transaction, shaping the interaction. Other qualitative scholars have found similar trends across erotic industries, with client desire and relative power-advantage largely shaping the transaction itself and interactions within the dyad (see: Allison 1994, Frank 2002a, 2002b). I propose the inclusion of an explicitly power-informed conceptualization of client fantasy within future research.

Drawing on interview data, I refer to this concept as the "erotic fantasy" – a social cognition that influences client decision-making in regards to the terms of the sex work transaction as well as its content. By this, I mean that a client's erotic fantasy is the intangible concept or idea that they seek to purchase. Their erotic fantasy could involve explicit power dynamics, such as being made to feel important, special, or superior. Doc refers to this experience as having that "my god, this person *really likes me*" (emphasis own) moment. Allison (1994) also documented this phenomenon between hostesses and Japanese business men in Tokyo.

Given the nature of the third dimension of power, the erotic fantasy is likely to be shaped by societal-level power structures, such as race, class, and gender, which are three distinct-yetrelated iterations of the third dimension of power. I present Figure 1 as a potential theoretical model of the erotic fantasy. I posit that as individuals are socialized within a specific social context, they are also socialized into local- and societal-level power structures. Socialization is a life-long process and continues to impact individuals as they age and enter into new roles. Much of this socialization occurs at the same time as and may even inform one's sexual development. Given this, it is likely that socialization may impact sexual development, thus forming one's sexual desires within a power-imbalanced system. These desires, formed within a power-imbalanced system, make up the individual's erotic fantasy.

Sexual desire shapes one's purchase within the sex work industry, guiding the transaction and providing some shape to the contextual definition of the service being purchased. The sex worker and client both can, and generally must, reshape this definition to fit within the limitations of reality, as no person is ever an exact fit to a sexual fantasy. The completion of the sex work transaction can reify or challenge extant power structures based on the content and mutual definition of the encounter. On the most basic level, this reproduction can be seen if the client and sex worker enacting the societal power structure within the transaction, privileging the clients' voice at the denigration of the sex workers'. Additional research should critically test this model to further examine the links between the dimensions of power, desire, and sex. Future studies utilizing a power-informed conceptualization of sexual desire, or the erotic fantasy, should examine if there is a link between the erotic fantasy and specific dimension or power mobilized to achieve desired ends.

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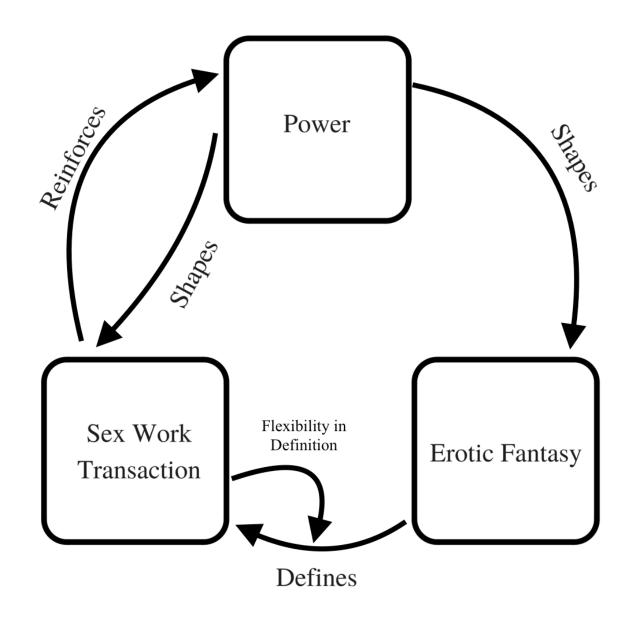


Figure 1. Conceptual Model

	Ν	Mean	Standard
			Deviation
Total Number of Paid Sexual Partners in Past 12 Months	82	4.610	4.677
Proportion of Commercial Sex Work Partners to Total Paid Partners	82	.280	.445
Total Amount of Sex Purchased in Past Month	82	3.854	3.840
Proportion of Condom Usage to Total Sex Purchased	82	.885	.296
Index of Power over Condom (> = More Power)	82	7.561	2.500
Men Control Condom Use (Disagree-Agree)	82	2.427	.917
Married? (0=No)	82	.159	.367
Income	82	4.683	2.018
Age	82	24.854	5.308
Residence			
Suburb	81	.235	.426
Inner City	81	.074	.264
Township	81	.568	.498
Informal Settlement	81	.123	.331
Race			
Black	82	.768	.425
Non-Black	82	.232	.425
Employment			
Unemployed	82	.354	.481
Part Time	82	.098	.299
Full Time	82	.183	.389
Self-Employed	82	.122	.330
Piece Jobs	82	.085	.281
Student	82	.159	.367

with         Paid Sex           Paid Sex with Condom         Overall         Power         Income         Race         Education         Married         Age           Paid Sex Voreall         .684***         1		Paid Sex										Type	Gendered
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Table 3: Poisson Regression	ot condom	usage in paid sex Model 1		l sex as exposure Model 2
	ß	Std. Err.	ß	Std. Err.
Power	.046	.026	.033	.027
Income			.038	.029
Race (Reference Black)				
Non-Black			512***	.149
Gendered Control	009	.069	032	.070
Access	.137	.080	.147	.085
Married	.065	.203	.077	.205
Age	.003	.014	004	.015
Education (Reference Primary or less)				
Secondary	.007	.240	048	.249
Post-Secondary	.175	.275	.076	.281
Constant	-1.017	.595	738	.149
Adjusted R <sup>2</sup>	.0328		.0737	
			82	

(ZAR)	1-	401-	801-	1601-	3201-	6401-	12801-	25601-	51201-	Total
	400	800	1600	3200	6400	12800	25600	51200	102400	
Black	7.9%	9.5%	12.7%	28.5%	15.8%	11.1%	9.5%	4.8%	0	63
	(5)	(6)	(8)	(18)	(10)	(7)	(6)	(3)		
Non-Black	0	5.3%	5.3%	21.1%	5.3%	26.3%	10.5%	10.5%	15.8%	19
		(1)	(1)	(4)	(1)	(5)	(2)	(2)	(3)	
Total	6.1%	8.5%	9.1%	26.8%	13.4%	14.6%	9.8%	6.1%	3.7% (3)	82
	(5)	(7)	(9)	(22)	(11)	(12)	(8)	(5)		

Appendix 1 Distribution of gross monthly income by race

Poisson Regression of condom usage in paid sex - Overall paid sex as exposure	e in paid sex -	Overall paid sex as	exposure					
	"Relationship"	ship"	"Used In Past"	Past"	"Talk to Partner"	artner"	"Insist"	
	B	Std. Err.	B	Std. Err.	B	Std. Err.	B	Std. Err.
Power Item (see column)	.019	.073	.003	.067	.183*	660.	.135	.082
Income	.036	.029	.037	.029	.050	.030	039	.029
Race (Reference Black)								
Non-Black	523***	.154	534***	.149	541***	.149	555***	.149
Gendered Control	046	020.	046	.070	-006	.072	032	690.
Access	.163	.086	.167	.086	.110	.087	.128	.086
Married	.103	.205	.107	.205	.045	.205	.025	.209
Age	004	.015	004	.015	004	.015	002	.015
Education (Reference Primary or less)								
Secondary	081	.247	-078	.249	076	.248	023	.250
Post-Secondary	.032	.279	.039	.279	.137	.285	.100	.281
Constant	510		493	699.	-1.016	.666	888	.655
Adjusted R <sup>2</sup>	.0692		0690		.0811		.0774	
N	82		82		82		82	
*p<.05; **p<.01; ***p<_001								

Appendix 2

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## Appendix 3

C	Ī	ransactional	Co	mmercial
	ß	Std. Err.	ß	Std. Err.
Power	.011	.030	.092	.050
ncome	.020	.030	.074	.065
Race (Reference Black)				
Non-Black	242	.165	-1.087**	.343
onstant	246		-1.060	
Adjusted R <sup>2</sup>	.0116		.2159	
N	60		24	

#### Appendix 4. SWEAT Client Interview Guide

My name is [interviewer]; I am working with SWEAT, the Sex Work Education and Advocacy Taskforce, interviewing people to improve the services we offer for sex workers and their clients. The goal of such interviews is to help understand client attitudes, in general, towards sex workers. Our ultimate goal is to work towards shifting public perception and stigma of sex work as an industry. SWEAT feels that it is important to carry out such work by first talking to clients, as due to the current laws in South Africa clients are equal partners in the sex work industry. Your identity will remain confidential and we will not use your real name. Everything you say will be kept in strict confidence. You are free to refuse to answer any question or to end the interview at any point. If any question does not make sense, I am happy to rephrase it. This interview should not take longer than 45 minutes, though you are welcome to stay longer if you would like.

#### Would you be comfortable with me audio recording this interview?

#### So I see you live in Cape Town. Which neighborhood do you live in?

- How long have you lived there?
- With whom do you live?
  - IF FOREIGN NATIONAL: Are you a visitor or are you residing here? If visiting, what brings you here? Is this your first time here? For how long is your visit?

#### Have you ever given a person something, such as money or assistance, in exchange for sex?

• If in-kind: What and how often (paying bills, food, clothing, shelter, transport, school fees, etc)

## How do you refer to people who sell sex?

• i.e., 'sex worker', 'prostitute', 'hooker', etc.

#### How often do you purchase services?

• If unsure: Weekly? Monthly? A few times a year? Whenever you have extra cash?

#### Do you prefer any time of the day?

• Why do you prefer that time over others?

#### When was your first introduction to a sex worker?

• What was it like?

#### What venues are you most comfortable with?

• Hotel, brothel, own home or private venu, worker's home or private venue, cars, trucks, parking areas

#### What do you look for in an appointment (at a...)?

- What services would be offered?
  - IF MULTIPLE VENUES: Do you look for something different at (...)?

## How do you negotiate fees for sex work services?

- Is this arranged with brothel or individual sex workers?
- Do you feel like the prices are generally fair? If no, what do you think is a fair amount for the services you seek?
- Under what circumstances would you pay more?

## Do you pay extra for discretion?

#### How do you pay for services?

Are you comfortable with credit card payments, or do you prefer cash?
 Why?

## What qualities do you expect from a sex worker?

## What attracts you to the specific sex workers you are engaging with?

- Ex: Discreet, Reliable, Engaging, Fulfilling my desires (sexual/intimate?), Companionship, Mobility/Can travel to your venue
- Race, Sex/Gender, Age/Maturity
  - Feminine, masculine, androgynous; dress, demeanor, speech
- Menu, Fetish, Fantasy, Massage, Special services
  - e.g., blow job, penetration (vaginal/anal), sex toys, kissing, cuddling, special services
    - bondage, discipline and submissive, water sports, cross dressing and role play, scat (shit), and fisting.

## Do you sometimes feel you would like a personal relationship with a sex worker (i.e., a favourite)?

• Are there times you feel you would like to "rescue" a sex worker, and offer her/him "other work"- or a place to stay

#### How do you source sex workers?

• Examples: Internet, Newspapers, Websites, Word of Mouth, Drive-bys

## Do you use alcohol and other substances with the sex worker?

- What do you use?
- Who brings it, who pays for it, does the worker use with you?

## Do you give some sex workers gifts and presents over and above payment in cash or kind?

• What do you give? When and how often do you give them gifts?

## Are there occasions you might use more than one sex worker at the same time?

What do you like most about purchasing sex?

What are the benefits of a sex work service for you?

## Do you believe that sex work services assist you with other intimate relationships you have, or might have currently?

- Do you feel you can engage more comfortably with a sex worker than an intimate partner?
  - - i.e., assist you with sexuality, desire, performance and self esteem

## Why did you choose to come to a sex worker for sex?

• Why sex worker instead of hook ups, dating, etc.?

## What prompted you to go today/recently?

## How do you keep yourself safe during sex?

- ARE SAFE SEX practices readily available? –i.e., condoms, lubrication, and femidoms.
- Are there occasions where condoms are not desirable for you?
- Are you concerned about HIV/STIs?
  - Do you know your HIV status? How often do you get tested? Do you discuss this during appointments?
- Would you be interested in confidential testing services?
- Do you think the workers you visit get tested?

## Are you and the sex worker able to negotiate condom usage?

- Who gets to decide if you use a condom?
- PROMPT: Do you bring condoms or do expect them to be provided (or brought by the sex worker)?
- Are condoms accessible for both of you?
- **PROMPT**: Some men complain that condoms affect their performance how do you feel about your experiences with condoms?

# Do you feel like there are any expectations about how you should act during an appointment?

- What are clients "supposed to do"?
- What is the sex worker "supposed to do"?
- What happens when a client doesn't do what he is supposed to do?

## Do you feel anxious when you meet a new sex worker for the first time or a new sex worker?

## Have you ever had a "bad experience" with a sex worker?

• For example: Theft, threat by management/pimp, badgering/harassment, excessive calls, blackmail, physical harm

## Have you ever refused to pay for services?

## Have you ever been angry with a sex worker?

- If so, what happened?
  - Why were you angry towards that worker?
  - Did either of you get physical?
  - How did the situation resolve?
  - Has anything like this ever happened before?
- IF HAS HAPPENED BEFORE: What do you do when you get angry in those situations?
- Do you think violence against sex workers and clients is common?
  - For which group is it more common?
  - Have you ever personally experienced violence?
    - IF YES: Can you tell me a little bit about that?
      - Who did it, when, where, what happened?
    - IF NO: Have you ever heard about it happening to someone else?

## Has a sex worker ever gone further than you wanted during an appointment?

- Did they ever do something more than you agreed upon? (e.g., asked for a blowjob and got intercourse)
- Were you charged for these additional services? How did you feel about that?

## Have you ever had an appointment with a sex worker that you or the worker felt wasn't good enough?

• How did you deal with that feeling?

## Do your friends use sex work services as well?

• Have you ever shared a sex worker either together or separately?

## Have you ever referred anyone to a sex worker?

- If you were to refer a friend, how would you do it?
  - What would you say about the worker? Is there a particular worker or venue you would refer first?
  - Would you be interested in a client satisfaction network?
    - (A space to talk about experiences with sex workers)

## Do you feel like you can talk about your appointments with anyone outside of the sex work field?

- Do you want to?
- Do other people know that you have been to a...?
- Other than your friends who also purchase sex, does anyone else know that you have been to a...?

## Would you be interested in having a space to discuss concerns about sex worker services?

• Do you think you would use it?

#### Have you ever sold sex before?

- Where do you work? How often? OR Have you ever thought about it?
  - Which came first?
  - Do you think [first] has had an impact on [second]? Or has [second] impacted [first]?

#### Have you ever run into any legal trouble for purchasing sex?

#### Do you know the legal status of sex work in South Africa?

- Is it fully criminalized, partly criminalized, decriminalized, or legal?
  - Fully criminalized under the Sexual Offenses Act of 2007.
  - Which means that it is illegal to sell sex and it is illegal to buy sex, run a brothel, or live off the proceeds of sex work.
- Would a change in policy (to full decriminalization) change your buying habits?
  - $\circ$  ex. indoors  $\rightarrow$  outdoors, more/less partners, more/less purchases per week/month

#### Have you heard anything in the news about efforts to decriminalise sex work?

Explanation: Decriminalisation would remove all legal penalties for the sex work industry, including the buying and selling of sex in South Africa. This would allow for sex workers and clients to be legally protected by the Constitution, South African labour laws, the National Health Act, and the Consumer Protection Act.

#### How do you think decriminalisation would change the sex work industry?

• If asks questions about above paragraph: We don't actually know a lot about how things will look in South Africa; very few other areas have decriminalised sex work. How do you imagine it might go? Do you think anything would change?

## What rights would you as a client expect under decriminalisation?

• e.g., protection from violence, legal recourse in the event of violence/theft, availability of condoms and HIV/STI testing

## If sex work was decriminalised, and brothels were allowed to operate within the legal structures of a business, do you feel this would "compromise" your anonymity?

• Would you fear others finding out?

## Do you think that decriminalisation of sex work would change how often you (go to brothels, taxi stands, etc.)?

#### Do you think that sex work, clients and brothels should be decriminalised?

• (i.e., no prosecution for clients as well as sex workers – if yes, why, if not please explain)

#### Have you heard about SWEAT before?

We are the Sex Workers Education and Advocacy Taskforce – headquartered in Observatory, we work with the sex work community across South Africa. SWEAT has been advocating for the rights of sex workers for the past twenty-one years. As sex work is currently criminalized under the law, SWEAT works to offer various resources and services for those who are involved with sex work, especially sex workers. Currently, we are looking to reach out to more and more clients as well. We have a pamphlet here with information for clients, if you are interested. Some of our services include providing free condoms and lubricants, discussion groups, individual and group counseling, and free legal advice. We are hoping to expand our services to include the voices and experiences of clients of sex workers -- as all clients are central to the sex work industry and up until now have been excluded from participating in dialogues, stories and experiences, that can inform our movement before decrim.

#### Services for clients of sex workers

- 1. Access to confidential HIV/TB/STI screenings
- 2. Access to SWEAT's counselling services
- 3. Assistance with legal matters, arrests, fines etc.
- 4. Conflict mediation
- 5. Sexual advice
- 6. Clients who are disabled
- 7. Working with SWEAT to promote decriminalisation so clients and sex workers cannot be arrested
- 8. Anonymous customer satisfaction survey to be fed back to sex workers via SWEAT's programs
- 9. Groups for clients who can discuss their sex work experiences