

**EXAMINING THE HUMAN IMMUNODEFICIENCY VIRUS (HIV)
SEROSTATUS IN MALE PROSTITUTES IN
ATLANTA, GEORGIA**

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CHAPTER I

INTRODUCTION

The increase in urbanization, urban population and commercial growth; the breakdown of traditional religion; and, social and geographical mobility are factors considered prevalent to the increase in drawing men away from the static of everyday families and plunging them into the whirling anonymity of the city. Such anonymity creates a new freedom for sexual experimentation, consequently providing clientele for male prostitutes.

In fact, for this researcher, an interest in sexual self-identity and sexual behaviors manifested when reading "Tearoom Trade" in a sociology class.

Humphreys¹ published an observational study of homosexual acts that took place between strangers in certain men's rest rooms that were used almost exclusively for sexual encounters ("tearooms"). Only a small minority of people with homosexual inclinations participated in this highly impersonal form of sexual activity, and Humphreys was interested in finding out more about the special

¹L. Humphreys, Tearoom Trade: Impersonal Sex in Public Places (Chicago: Aldine, 1970).

characteristics of those who did. Because the participants wanted to avoid any involvement with juveniles or the police, one person always served as a lookout. Taking this role, Humphreys was able to observe hundreds of sexual encounters without disclosing his identity as an outsider. To gain further information, Humphreys noted the automobile registration numbers of the participants and traced their addresses. After waiting a year to ensure that he would not be recognized, he visited their homes under the guise of a survey researcher looking for information on an entirely different topic. Thus, he was able to obtain a great deal additional information about them, including for example, the surprising fact that the majority of them were married and living with their wives. Herein, continued this researcher's keen interest in the topic of impersonal sex, whether offered for pay or proffered freely.

However, a number of questions remained unanswered as propulsion for possibly developing research in this area. This student believed that if there were, as early as the 1970s, significant interest in sex between two males, at what point would men pay for sex, hence male prostitution could be a viable means for survival for many, especially in large cities. Then, in the advent of AIDS, would there be high rates of seropositivity in HIV? Additionally, what would be the risk factors associated with male prostitution? Among other issues were: Would there be high HIV infection

in male prostitutes in major cities like Atlanta where HIV seroprevalences are high? What is the sexual self-identity of these male prostitutes--possibly their clients? Are there preventional and interventional strategies? As these issues are raised, this graduate student saw a need to research in this area of limited literature--male prostitution, HIV infection, associated risk factors, and sexual identity.

Statement of the Problem

Extensive studies regarding the role of female prostitutes especially in the advent of acquired immunodeficiency syndrome (AIDS) epidemic have been documented. However, considerably less literature is available about male prostitution, even though available current studies indicate that male prostitutes engage in several identified high-risk behaviors for sexually transmitted disease and HIV. This justifies continued need for research in this area.

Elifson, Boles, and Sweat² found, from a public health perspective, that the reported HIV seroprevalence rate of nearly 30% among male prostitutes strongly indicated a need for innovative preventional and interventional strategies for the spread of HIV. The fact consistently

²K. W. Elifson, J. Boles, and M. Sweat, "Risk Factors Associated with HIV Infection Among Male Prostitutes," American Journal of Public Health 83, No. 1 (1993): 79-83.

remains that male prostitutes engage in a unique combination of HIV behaviors that include simultaneously engaging in high-risk sex, especially receptive anal intercourse, having multiple paying and non-paying sexual partners, and using drugs intravenously. According to the Centers for Disease Control (CDC),³ persons engaging in these behaviors account for most of the AIDS cases in the United States.

Accordingly, this researcher has found interest in contributing to the limited scope of information available to the public through conducting further research in this area with further intentions to gather data from direct contacts and interviews with male prostitutes in Atlanta, as Boles and Elifson⁴ have conducted for the Center for Infectious Diseases, Centers for Disease Control.

Source of Data

Street and observational interviews of male prostitution on these Atlanta streets: Cypress Street, Peachtree Street, and Broad Street. Moreover, theoretical contributions by others in the area of male prostitution, as well as information given by the Centers for Disease Control of Atlanta, Georgia, on the issues of male prostitution in Atlanta, as well as HIV and AIDS.

³Centers for Disease Control, Emory University, Atlanta, Georgia, 1995.

⁴J. Boles and K. W. Elifson, "Sexual Identity and HIV: The Male Prostitute," The Journal of Sex Research 31, No. 1 (1994), 39-46.

CHAPTER II

LITERATURE REVIEW

Of particular relevance to this research is a recent study that was funded by the Division of HIV/AIDS, Center for Infectious Diseases, Centers for Disease Control. Boles and Elifson¹ from the Department of Sociology at Georgia State University, using a sample of 224 male street prostitutes, examined the relationships among sexual self-identity, sexual and drug use behaviors, and human immunodeficiency virus (HIV). In fact, this study contributed additional information to their previous study regarding male prostitutes. Elifson, Boles, and Sweat² conducted research that documented the human immuno-deficiency virus (HIV) and sexually transmitted disease seroprevalence rate for male prostitutes, identifying risk factors for HIV and providing baseline information for preventional and interventional

¹J. Boles and K. W. Elifson, "Sexual Identity and HIV: The Male Prostitute," The Journal of Sex Research 31, No. 1 (1994): 39-46.

²K. W. Elifson, J. Boles, and M. Sweat, "Risk Factors Associated with HIV Infection Among Male Prostitutes," American Journal of Public Health 83, No. 1 (1993): 79-83.

strategies. Furthermore, Cates and Markley³ conducted similar research that compared demographic, clinical, and personality variables in a sample of 15 male prostitutes and 15 male non-prostitutes. Significant findings in each study provide additional background for future research with this proposal.

McKusick, Horstman, and Coates⁴ found that since the beginning of the AIDS epidemic in the United States the highest prevalence is usually in the homosexual-identified risk group. Darrow and others,⁵ as well as Wasserheit and others,⁶ have reported that the high prevalence of HIV infection has been tied to several behavioral practices, including unprotected anal sex, multiple sex partners, alcohol and illicit drug use, and immune systems which have been assaulted by various sexually transmitted diseases (STDs). That is, HIV serostatus is tied to behavior rather

³J. A. Cates and J. Markley, "Demographic, Clinical, and Personality Variables Associated with Male Prostitution by Choice," Adolescence 27, No. 107 (1992): 695-706.

⁴L. McKusick, W. Horstman, and T. Coates, "AIDS and Sexual Behavior Reported by Gay Men in San Francisco," American Journal of Public Health 75 (1985): 493-496.

⁵W. W. Darrow, D. F. Echenberg, H. W. Jaffee, P. M. O'Malley, R. H. Beyers, J. P. Getchell, and J. W. Curran, "Risk Factors for Human Immunodeficiency Virus (HIV) Infections in Homosexual Men," American Journal of Public Health 77 (1987): 479-483.

⁶J. Wasserheit, S. Aral, K. Holmes, and P. Hitchcock (Eds.), Research Issues in Human Behavior and Sexually Transmitted Diseases in the AIDS Era (Washington, DC: American Society for Microbiology, 1991).

than sexual identity. Since male prostitutes have paid and unpaid sex with multiple partners, engage in risky sexual behaviors and use frequently illicit drugs, they are an appropriate group for studying the role of sexual identity on HIV serostatus.

Boles and Elifson⁷ guided their study to address a key question: Is sexual self-identity linked to HIV risk? This study used a sample of male street prostitutes and provided for authors a view toward explaining the relationships among sexual identity, sexual behaviors associated with sexual identity, and HIV serostatus.

Troiden⁸ discussed sexual identity as a cognitive construct with an organized set of characteristics that an individual perceives as representing the self in certain situations. These are defined as real or imagined and sexual or romantic. Specific components of the self and sexual identity are:

1. self-identified sexual identity;
2. clothing styles, mannerisms, and other observable signs of self-identified sexual identity;
3. sexual role preferences (insertee-insertor);

⁷J. Boles and K. W. Elifson, "Sexual Identity and HIV: The Male Prostitute," The Journal of Sex Research 31, No. 1 (1994): 39-46.

⁸R. Troiden, Guys and Lesbian Identity: A Sociological Analysis (Dixie Hills, NY: General Hall, Inc., 1988).

4. sexual acts (oral-anal);
5. friendships and association.⁹

Kamel¹⁰ focused on the relationships between sexual identity and self-presentation, which he called imaging. He noted that heterosexual-identified prostitutes presented a hypermasculine persona (trade), whereas bisexuals adopted a more androgynous image (jock), and homosexuals, who were usually the youngest, presented a more feminine, childlike persona (chicken).

Most researchers of male prostitutes have used self-identification to measure sexual identity, although in a limited number of studies researchers have used Kinsey's seven-point scale which measures both sexual behavior and psychological response to sexual stimuli.¹¹ Pleak and

⁹T. C. Calhoun, "Male Street Hustling: Introduction Processes and Stigma Containment," Sociological Spectrum 12 (1992): 35-52; G. W. L. Kamel, "Downtown Street Hustler: The Roles of Dramaturgical Imaging Practices in the Social Construction of Male Prostitution," Ph.D. diss., University of California, San Diego, 1983; R. Troiden, Gays and Lesbian Identity: A Sociological Analysis (Dixie Hills, NY: General Hall, Inc., 1988).

¹⁰G. W. L. Kamel, "Downtown Street Hustler: The Roles of Dramaturgical Imaging Practices in the Social Construction of Male Prostitution," Ph.D. diss., University of California, San Diego, 1983.

¹¹D. M. Allen, "Young Male Prostitutes: A Psychosocial Study," Archives of Sexual Behavior 9 (1980): 399-426; G. W. L. Kamel, "Downtown Street Hustler: The Roles of Dramaturgical Imaging Practices in the Social Construction of Male Prostitution," Ph.D. diss., University of California, San Diego, 1983; R. Pleak and H. Meyers-Bahlberg, "Sexual Behavior and AIDS Knowledge of Young Male Prostitutes in Manhattan," The Journal of Sex Research 27 (1990): 557-587.

Meyers-Bahlberg compared the self-reported sexual orientation of 50 male prostitutes with their interviewers' ratings using the Kinsey scale and found that "the subjects' self-rating of sexual orientation was highly and positively correlated with their Kinsey scores as rated by interview."¹²

In similar studies, researchers have related the sexual identity of male prostitutes to risk factors associated with HIV infection. Findings from these studies indicated that homosexual-identified prostitutes might be expected to have the highest rate of HIV seropositivity and heterosexual-identified prostitutes the lowest.

Elifson, Boles and Sweat¹³ reported that HIV studies of male prostitutes have been of limited scope, have been conducted in larger institutional settings, or have involved self-reported HIV status. Male prostitutes engage in several identified high-risk behaviors for sexually transmitted disease and HIV. For example, they have multiple paying and non-paying sex partners whom they have little opportunity to screen, engage in sexual behaviors that place them at high risk for HIV, have high rates of sexually transmitted disease, and are often intravenous drug users. They and their

¹²R. Pleak and H. Meyers-Bahlberg, "Sexual Behavior and AIDS Knowledge of Young Male Prostitutes in Manhattan," The Journal of Sex Research 27 (1990): 556.

¹³K. W. Elifson, J. Boles, and M. Sweat, "Risk Factors Associated With HIV Infection Among Male Prostitutes," American Journal of Public Health 83, No. 1 (1993): 79-83.

paying partners, who are almost invariably male, do not necessarily self-identify as bisexual or homosexual; a substantial number view themselves as heterosexual and report having female partners.

The objectives of the Elifson, Boles and Sweat¹⁴ study were to: (1) determine the HIV seroprevalence rate for male prostitutes, (2) identify their risk factors for HIV infection, and (3) provide baseline information for the development and implementation of appropriate intervention strategies for these men.

Cates and Mackley¹⁵ compared demographic, clinical, and personality variables in a sample of 15 male prostitutes and 15 male non-prostitutes. These young men reported that they were involved by choice, primarily to earn extra money. Significant findings included heavier drug and alcohol use, more limited vocational success and aspirations, and greater alcohol use among family members of male prostitutes. Male prostitutes were also more likely to identify themselves as drug or alcohol addicted than male non-prostitutes. No significant differences were found in personality characteristics between the two groups.

¹⁴Ibid.

¹⁵J. A. Cates and J. Mackley, "Demographic, Clinical, and Personality Variables Associated with Male Prostitution by Choice," Adolescence 27, No. 107 (1992): 695-706.

Boles and Elifson,¹⁶ who provided a basis for this thesis, interviewed 224 male prostitutes in Atlanta, Georgia. All study participants were observed soliciting customers in the areas identified through social mapping and confirmed that they had exchanged sex for money and/or illicit drugs within the last month. Of the 224, 50% were black (and the remainder were white) with a median working-time as a prostitute of six years. Nearly one-half of the men (46%) self-identified as heterosexual, 36% as bisexual, and 18% as homosexual. Among the several measures conducted were sexual identity, number and gender of partners, demographic measures, and occupational measures to determine sexual identity. Respondents were asked, "Aside from hustling, are you gay, straight, or bisexual?" If bisexual was the response, a follow-up question was asked to probe for preference, male or female. To assess the number and gender of partners, each was asked how many different male and female sex partners, paying and non-paying, he had over the past month. The measures included the proportion of sexual encounters during the previous month with paying and non-paying partners in which the respondent engaged in anal and oral sex (insertor and insertee). The extent to which condoms were used was also assessed.

¹⁶J. Boles and K. W. Elifson, "Sexual Identity and HIV: The Male Prostitute," The Journal of Sex Research 31, No. 1 (1994): 39-46.

Demographic measures included years of education, age, race, state of residence at age sixteen and current living arrangement. Occupational measures included number of years working as a prostitute, average weekly income from prostitution, friendship with other prostitutes, acquaintance with persons with AIDS, and hustling in cities other than Atlanta. Additionally, questions that measured drug use included, "Have you or anyone else ever injected drugs under your skin or into your veins?" And "Have you ever shared a needle for drug use, the mode of drug use, and frequency of drug use.

Last among the measures were serological tests conducted by the Centers for Disease Control (CDC). The respondents' blood was tested for hepatitis B, syphilis, and the antibody for HIV.

The structured interviews were conducted in a sample that consisted of 18% homosexual, 46% heterosexual, and 36% bisexual identified men. Congruence between the prostitutes' non-paid sexual behavior and their sexual self-identification were closest for the heterosexual and homosexual identified men. The significant demographic and occupational differences between the prostitutes in each sexual self-identity category included education, history of physical abuse, homelessness, and geographical mobility. Based on self-identification, the rate of HIV infection was 50% for homosexuals, 37% for bisexuals, and 19% for

heterosexuals. The differences in HIV infection rates between men of each sexual self-identity category were significantly related to self-reported receptive anal sex, number of non-paid sexual partners, cocaine use, injected drug use, acquaintance with a person with AIDS, history of syphilis, and history of hepatitis. Sexual self-identity was not a significant predictor of HIV serostatus. Elifson, Boles, and Sweat¹⁷ provided a basis for the most recent study.¹⁸

Similarly contributing to the research in this area of study, Cates and Mackley¹⁹ compared demographic, clinical and personality variables in a sample of 15 male prostitutes and 15 male non-prostitutes. The criteria for male prostitution entailed at least one attempt to sell sexual behavior for barter or money. Criteria for the comparison group included no history of sexual behavior for barter or money and no attempt or plans to do so. Each subject was paid \$20 for his participation. All subjects were administered a similar interview that posed questions regarding living status, education, employment status,

¹⁷K. W. Elifson, J. Boles, and M. Sweat, "Risk Factors Associated With HIV Infection Among Male Prostitutes," American Journal of Public Health 83, No. 1 (1993): 79-83.

¹⁸J. Boles and K. W. Elifson, "Sexual Identity and HIV: The Male Prostitute," The Journal of Sex Research 31, No. 1 (1994): 39-46.

¹⁹J. A. Cates and J. Mackley, "Demographic, Clinical, and Personality Variables Associated With Male Prostitution by Choice," Adolescence 27, No. 107 (1992): 695-706.

values, relationships, use of drugs and alcohol, knowledge of human immunodeficiency virus (HIV) and acquired immune deficiency syndrome (AIDS), and family history. These young men specifically reported that they were involved by choice, primarily to earn extra money. Significant findings included heavier drug and alcohol use, more limited vocational success, and greater alcohol use among family members of male prostitutes. Male prostitutes were also more likely to identify themselves as drug or alcohol addicted than male non-prostitutes. No significant differences were found in personality characteristics between the two groups, although there was limited support for the hypothesis that male prostitutes are more anti-social.

Early History

Male prostitution is probably as old as that of "the oldest known profession"--be that female prostitute or homemaker. In a lengthy historical discussion, Benjamin and Masters²⁰ found male prostitution relatively frequent throughout time and across cultures. According to Blair (undated, p. 3), the Holiness Code of Helviticus (18:22 and 20:13) concerns itself with the issues of "male prostitutes in the temples of the Canaanites, Babylonians, and other neighboring peoples" that "were common features of the pagan

²⁰M. Benjamin and R. E. L. Masters, Prostitution and Morality (New York: Julian Press, 1964).

rites." Furthermore, several scholars have documented the early history of male prostitution in the Orient²¹ and the Middle-East.²²

Male prostitution continued during Biblical time and into the Middle Ages. During the Christian era civilizations of Greece and Rome, "... male prostitutes ... left the temples and became part of the urban street life. An increase in age, masculinity and economic motives coincided with this change."²³ Male prostitution was thought to be limited, but to this early Greek and Roman era it was often associated with sexual excesses and open homosexuality. Henriques²⁴ found that the world had rid itself of such vices in modern times; that the "progress of

²¹M. Ranada, "Socio-Religious and Psychological Study of the Transvestic Cult in India," Mahorashtra Medical Journal 19, No. 1 (1972): 23-25; A. Karlen, Sexuality and Homosexuality: A New View (New York: W.W. Norton and Company, Inc., 1971; R. Lewinsohn, A History of Sexual Customs (New York: Harper and Brothers, 1958); G. M. Carstairs, "Minjra and Jurijan: Two Derivatives of Hindu Attitudes to Sexuality," British Journal of Medical Psychology 29 (1956): 128-138.

²²V. L. Bullough, The History of Prostitution (New York: University Press, 1964); W. Churchill, Homosexual Behavior Among Males: A Cross-Cultural and Cross-Species Investigation (New York: Hawthorn Books, 1967); F. Henriques, Prostitution and Society: A Survey (New York: Citadel Press, 1962).

²³G. W. L. Kamel, "Downtown Street Hustler: The Roles of Dramaturgical Imaging Practices in the Social Construction of Male Prostitution," Ph.D. diss., University of California, San Diego, 1983, p. 8.

²⁴F. Henriques, Prostitution and Society: A Survey (New York: Citadel Press, 1962).

good morals had divested this theme of its importance." The extent and types of male prostitutes during the Greek and Roman eras were well documented by Bullough²⁵ and Verstraete.²⁶ Despite Henriques' injunction, the persistence of male prostitution is documented across cultures well into modern times.²⁷

Secularization, urbanization and capitalism were to heighten this change in male prostitution to a more urban and economic form in Europe and early America. Several scholars document this first truly modern appearance of male prostitution.²⁸ House and street male prostitution in

²⁵V. L. Bullough, The History of Prostitution (New York: University Press, 1964).

²⁶B. C. Verstraete, "Slavery and the Social Dynamics of Homosexual Relations in Rome," Journal of Social Issues 33 (1980): 93-107.

²⁷S. Barley, Sex Slavery: A Documentary Report on the International Science Today (London: William Meineman, 1968); F. Henriques, Prostitution and Society: A Survey (New York: Citadel Press, 1962); A. Karlen, Sexuality and Homosexuality: A New View (New York: W.W. Norton and Company, Inc., 1971); E. W. Lane, The Manners and Customs of the Modern Egyptians (New York: E.P. Dutton, 1923).

²⁸Europe: J. Weeks, "Inverts, Perverts, and Mary-Annes: Male Prostitution and the Regulation of Homosexuality in England in the Nineteenth and Early Twentieth Centuries," Journal of Homosexuality 6, No. 1/2 (1980-1981): 113-134; V. L. Bullough, The History of Prostitution (New York: University Press, 1964); A. Karlan, Sexuality and Homosexuality: A New View (New York: W.W. Norton and Company, Inc., 1971); R. Kraft-Ebbing, Psychopathia Sexualis: A Medico-Forensic Study (New York: Pioneer Publications, Inc., 1939); Early America: V. L. Bullough, The History of Prostitution (New York: University Press, 1964); J. Burnham, "Early Reference to Homosexual Communities in American Medical Writings," Medical Aspects of Human Sexuality 7 (1973): 34-49.

major industrial cities of this time are reported in those works. The streets and classifies of any major eastern city will provide the interested observer with evidence of the persistence of male prostitution today.

Badgley's²⁹ report was based on a sample of 229 juvenile prostitutes, most of whose educational attainment was grade zero, and had no desire to start their formal education. About 63% of the males had no other form of employment at the time of the study. For those with other forms of employment, the jobs were typically low-skill, low-wage positions as waiters, cashiers, ice cream vendors, kitchen helpers, and housekeepers.

Additionally, Badgley³⁰ reported that about 40% of the young people regarded street prostitution as a full-time job, about 25% as a part-time job, about 30% saw it as occasional work, and about 65% worked on the street at least four days a week. Average daily earnings for most of the young male prostitutes were \$140.85.

The age of entry into prostitution for young males ranged between eleven and twenty-five years.³¹ Adolescent

²⁹C. Bagley, "Child Abuse and Juvenile Prostitution: A Commentary on the Bagley Report on Sexual Offenses Against Children and Youth in Canada," Journal of Public Health 76 (1985): 65-66.

³⁰Ibid.

³¹R. Deisher, V. Eisner, and S. Sulzlacher, "The Young Male Prostitute," Pediatrics 43 (1969): 936-941; D. M. Allen, "Young Male Prostitutes: A Psychosocial Study," Archives of Sexual Behavior 9 (1980): 399-426.

runaways are an important source of young male prostitutes, and in the United States, there are an estimated one million runaway males each year.³² Some 300,000 male adolescent prostitutes are under the age of sixteen years old, and during the ten-year period from 1985 to 1995, there was an increase of 245% in the 12-16 years age group of male prostitutes.³³

Young male prostitutes have many characteristics in common. Most are school drop-outs with low to average intelligence. Many come from broken homes and abusive families with deprived socio-economic backgrounds.³⁴ The majority (82%) come from broken families with absent, alcoholic or hostile fathers and over seventy percent have ineffective or absent mothers.³⁵ One-third have had their first sexual experience with an older male, while another twenty-eight percent had their first sexual experience with a male peer.³⁶

³²M. E. Brown, "Teenage Prostitution," Adolescence 14 (1979): 655-680.

³³Ibid.

³⁴K. Nield, Prostitution in the Victorian Age: Debates on the Issues from 19th Century Critical Journals (Westmead: Greg International, 1973).

³⁵D. M. Allen, "Young Male Prostitutes: A Psychosocial Study," Archives of Sexual Behavior 9 (1980): 399-426.

³⁶P. Gandy and R. Deisher, "Young Male Prostitutes: The Physician's Role in Social Rehabilitation," The Journal of the American Medical Association 212, No. 10 (1970): 1661-1666.

Demographic, Clinical, and Personality Variables Associated with the Male Prostitute

Male prostitution by choice, rather than for survival, is rarely addressed in research literature. Limited information and data were found about the demographic, clinical, and personality characteristics of this group. Previous research found male prostitutes to be asocial, and prostitution a natural outgrowth of the desire to achieve financial gain.³⁷ Mathews focused on those who participated by choice. Those involved by necessity have often been coerced into prostitution, and with limited vocational or educational skills, contend that they applied their trade as a means of survival. In contrast, males involved by choice often hold regular employment and supplement their income through prostitution. The majority of the males interviewed were working in the fast food industry or in some form of manual labor. A few of the prostitutes were at one point full-time university students.

Male prostitution emphasizes the young age of participants³⁸ and conceptualizes hustlers as victims of circumstance.³⁹ Recent research shows an increase in the

³⁷F. Mathews, Familiar Strangers: A Study of Adolescent Prostitution, (Ontario, Canada: Central Toronto Youth Services, 1987).

³⁸N. R. Coombs, "Male Prostitution: A Psychosocial View of Behavior," American Journal of Orthopsychiatry 44 (1974): 782.

³⁹D. M. Allen, "Young Male Prostitutes: A Psychosocial Study," Archives of Sexual Behavior 9 (1980): 399-426.

number of hustlers;⁴⁰ thus, the stereotype of a runaway in a large city, forced into prostitution to survive, may represent a decreasing proportion of this population.

As important as a description of the hustler himself may be, the characteristics of his milieu are also important. Because the sale and purchase of sex is both illegal and socially denigrated, an aura of caution and mistrust permeates the exchange. Although typologies vary slightly, hustlers generally apply their trade on the street, in bars, on call for select clientele, or as the financial dependent of a single customer.

A study done by Earls and David⁴¹ relating to identity of male prostitutes found that 70% of hustlers identified themselves as heterosexual. For example, hustlers were likely to have had an earlier male sexual partner, but research indicates that this is true in general for homosexuals when compared with heterosexual males.

In virtually all studies, financial reward is given as a primary reason for engaging in prostitution. Cates⁴² reported two males who actively sought to prostitute

⁴⁰F. Mathews, Familiar Strangers: A Study of Adolescent Prostitution, (Ontario, Canada: Central Toronto Youth Services, 1987).

⁴¹A. P. Bell, M. S. Weinberg, and S. K. Hammersmith, Sexual Preference: Its Development in Men and Women (Bloomington, IN: Indiana University Press, 1981).

⁴²J. A. Cates, "Adolescent Male Prostitution by Choice," Child and Adolescent Social Work Journal 6 (1989): 151-156.

themselves, without coercion, in a small city. One appeared to be making an effort to resolve the suicide of an older brother who had taken a paternal role; the other actively sought financial rewards, and both were self-identified as homosexual.

Role Typology

Much of the literature on male prostitutes directs attention to distinguishing between types of male prostitutes. The typologies may provide for the analytical distinctions that are instructive of researchers' concerns and theoretical distinctions, but are obfuscatory when they become reified. Analytical concepts that serve to organize the phenomenon of male prostitution became troublesome when they took on a life of their own. The data may be forced to serve the concepts rather than the other way around.

We must be careful that our tools are adequate for the job, not that our job is meant for these tools and these tools only. Where data about male prostitution are forced into analytical "boxes," we do well to consider that the phenomena under question are more fluid than our symbolizing about and ordering of them. Instructive theoretical concerns in the literature on male prostitution are drawn along lines of sexual orientation, occupational identity and mode of operation.

Reiss' work⁴³ on male prostitution is perhaps best known and provides a good example of the issue of sex and occupational orientation in the role typing of male prostitutes. Reiss is able to describe how, through peer association, a set of norms may insulate male prostitutes from any conception of themselves as homosexual in an otherwise tainted situation of male-to-male sexual behavior. For Reiss' male prostitute, it is adherence to these group-based norms that allows the peers to define this activity as non-threatening to a heterosexual self-concept. We may regard these group-based norms as occupational ideology and the peer group as a subculture (or reference group). Since the behavior is sanctioned in the peer group, significant others will not define the peer as homosexual so that he has little difficulty in maintaining a "straight" self-concept. Reiss concludes that at least the type of male prostitutes he has described are heterosexual. However, Reiss recognizes that hustlers may not maintain a straight self-concept or identity.⁴⁴

Reiss cites Ross⁴⁵ as another source of material for this other type (homosexual identity) of deviation which is distinguished from that of peer-queer transaction. Yet

⁴³A. J. Reiss, Jr., "The Social Integration of Queers and Peers," Social Problems 9, No. 111 (1961): 102-120.

⁴⁴Ibid.

⁴⁵H. L. Ross, "The Hustler in Chicago," Journal of Student Research 1 (1979): 13-19.

another type for Reiss' is found in the literature of John Rechy,⁴⁶ as those "who conceive of themselves as hustlers but not as homosexual".⁴⁷ Reiss mentions a fourth possible type represented by the literature of clinicians in which the deviators describe themselves as homosexual, but not as hustlers.

Organizationally, there are four different types of male prostitutes which exhaust the possible combinations of sexual and occupational identifications. There is little room for varying degrees of movement. Weeks⁴⁸ found historical evidence for the social construction of male prostitution along the lines of occupational and sexual identifications as in Reiss' typology.

Analytically, the boxes (or categories) provide for a concise way of describing male prostitutes. Unfortunately, the categories sometimes become reified when the boxes take on a life of their own and the orientation concepts (sexual and occupational) turn into personality types that are descriptive of theorizing rather than describing and identifying real people. It is interesting to note that

⁴⁶John Rechy, City of Night (New York: Grove Press, 1963); John Rechy, The Sexual Outlaw (New York: Grove, Press, 1977).

⁴⁷A. J. Reiss, Jr., "The Social Integration of Queers and Peers," Social Problems 9, No. 111 (1961): 103.

⁴⁸J. Weeks, "Inverts, Perverts, and Mary-Annes: Male Prostitution and the Regulation of Homosexuality in England in the Nineteenth and Early Twentieth Centuries," Journal of Homosexuality 6, No. 1/2 (1980-1981): 113-134.

Type 4 in Figure 1 that has been described by the clinicians, illustrates the "psychopatholization" of male prostitution through the "medicalization" of homosexuality.

FIGURE 1
REISS' TYPOLOGY

| | Homosexual | Heterosexual |
|-------------|-------------------|---------------|
| Hustler | 4 (Ross) | 6 (Rechy) |
| Non-hustler | 6 (Clinicians) | 2 (Reiss') |

Weinberg⁴⁹ says that labels do not apply. Certainly, we have seen in this review of the literature on male prostitution that notions about sexual orientation tell us more about sex and society than about male prostitution. Clearly, perceptions of sexual orientations have as much to do with theoretical positions (and definitions) of male prostitution as it does to whether one really is either homosexual or heterosexual. The typologies' simplistic boxes ignore issues like bisexuality, situational sex and

⁴⁹M. S. Weinberg, "Labels Don't Apply," Sexual Behavior 2, No. 8 (1972): 18.

the social construction of sex (which they actually reify). It is reasonable to assume that the hustler's self-definition is as fluid and a matter of perception as those who study him. From Figure 1, it is clear that occupational and sexual constructions based in quasi-behavioral definitions offer us static boxes of possibilities.

It is now possible to develop a typology of sexual orientations based on social perception (labeling and imputations) and self-identity (cognitive self-perception). In Figure 2, we see that strict behavioral definitions are artificial (and that the perception typology is restrictive as well).

FIGURE 2
SOCIAL IMPUTATION AND SELF-IDENTITY

| | <u>SOCIETY</u> | |
|------------------------|---|---|
| | Perceived as Homosexual | Perceived as Heterosexual |
| "Gay" Identity | Perceived as 1 Homosexual with a Gay Identity | Perceived as 2 Heterosexual with a Gay Identity |
| "Straight" Identity | Perceived as 3 Homosexual with a Straight Identity | Perceived as 4 Heterosexual with a Straight Identity |

In order to classify as "normal," it is apparent that the objective perception and subjective identification must be heterosexual and straight (Figure 2, Box #4), respectively. In order to minimize stigma, it is possible that a "secret deviant" might pass (Figure 2, Box #2) and contrawise, it is possible for a "normal" to be labeled deviant (Figure 2, Box #3). The normal perceived as deviant might share with the self-identified deviant (Figure 2, Box #1) status of sickness accorded to them because of social perceptions of them (see also Figure 1, Box #4).

Figure 3 presents the same categories of sexual and occupational orientations as in Figure 1, except here the emphasis is on social and/or self-perception rather than theoretically derived, quasi-behavioral definitions.

FIGURE 3
PERCEPTION TYPOLOGY

| <u>SELF and/or SOCIETY</u> | | | |
|------------------------------------|--|--|--|
| | | Perceived as Homosexual | Perceived as Heterosexual |
| | Perceived as Hustler | Perceived as Homosexual Hustler | Perceived as Heterosexual Hustler |
| <u>Self and/or Society</u> | Perceived as Non-hustling (legitimate) Homosexual | Perceived as legitimate (non-hustling) Homosexual | Perceived as legitimate (non-hustling) Heterosexual |

From Figures 2 and 3, it can be seen that significant room exists for movement and it is clearly to the advantage of a given individual to project the "correct" image. Hustlers may image (present) themselves between straight and gay worlds by playing straight and gay roles. Vocabularies of motive are situationally appropriate and are directed to the respective appropriate audience where they meet with the greatest amount of success in the hustler's presentation of self. The dual meaning of the word appropriate used here is evidence of how accounts vary by identity types. A hustler may appropriate a given account according to the situational perception of his identity. In this sense, the typology is a priority. This is the social construction of male prostitution.

Despite the fluidity of perception in regards to deviance designation possibilities, much of the literature related to role-typing has been put forth to account for the sexual orientation dichotomy based on so-called objective conditions. Reiss⁵⁰ found that a situational factor--lower class delinquent learning--accounted for the type of "male prostitute" who had no conception of himself as homosexual, nor as hustler. Middle-class boys, according to him, are excluded from this activity "as much through lack of opportunity as through any criterion of differential

⁵⁰A. J. Reiss, Jr., "The Social Integration of Queers and Peers," Social Problems 9, No. 111 (1961): 102-120.

association."⁵¹ Weeks⁵² stated that the issue of emotional involvement is necessarily one of self-concept and identity, as well as one of affection. Indeed, situational factors, features and commitment are often linked to the male prostitutes' mode of operation in order to account for varying degrees of sexual and occupational identifications. These factors reflect spatial, status, and temporal organization of male prostitution.

Male prostitutes may be classified according to the spatial organization of their work.⁵³ They work: (1) from the streets, (2) from bars, (3) on an out-call and in-call basis, and (4) are "kept boys."

Notions about deviance designations and male prostitution are culturally derived. "The European hustler quite naturally works in a different milieu, in which attitudes toward homosexual and even toward prostitution

⁵¹A. J. Reiss, Jr., "The Social Integration of Queers and Peers," Social Problems 9, No. 111 (1961): 112.

⁵²J. Weeks, "Inverts, Perverts, and Mary-Annes. Male Prostitution and the Regulation of Homosexuality in England in the Nineteenth and Early Twentieth Centuries," Journal of Homosexuality 6, No. 1/2 (1980-1981): 113-134.

⁵³D. M. Allen, "Young Male Prostitutes: A Psychosocial Study," Archives of Sexual Behavior 9 (1980): 399-426; S. E. Caukins and N. R. Coombs, "The Psychodynamics of Male Prostitution," American Journal of Psychotherapy 30 (1976): 441-451; A. J. Reiss, Jr., "The Social Integration of Queers and Peers," Social Problems 9, No. 111 (1961): 102-120; H. L. Ross, "The Hustler in Chicago," Journal of Student Research 1 (1979): 13-19.

differ considerably from those encountered in America."⁵⁴ The reflexive nature of interaction between social structure and individual is culturally and organizationally specific. Hustlers may present the proper motives to appropriate communities in presentation of self, thereby touching the social/cultural bases that are available to them when called to account for their untoward behavior.

Male Prostitution and Homosexual Identity

Historical studies of homosexuality have indicated that "writings on male prostitution emerged simultaneously with the notion of homosexuals as an identifiable breed of persons with special needs, passions, and lusts".⁵⁵ Yet, contemporary studies are most remarkable for their ambivalence toward the sexual orientation of male prostitutes. Sexual orientation of male prostitutes is the subject of contradictory findings. The question: "Are they or aren't they homosexual?", is of paramount concern to researchers, but homosexuality is generally excluded as a motivation for prostitution by males.

⁵⁴W. Churchill, Homosexual Behavior Among Males: A Cross-Cultural and Cross-Species Investigation (New York: Hawthorn Books, 1967), 186.

⁵⁵J. Weeks, "Inverts, Perverts, and Mary-Annes: Male Prostitution and the Regulation of Homosexuality in England in the Nineteenth and Early Twentieth Centuries," Journal of Homosexuality 6, No. 1/2 (1980-1981): 113.

Reiss,⁵⁶ for example, described homosexual prostitution among his sample as a reflection of the greater sexual experience of lower class males, who did not define themselves as homosexual. Coombs⁵⁷ described 72% of his sample (N = 41) as heterosexual. As for the others, Coombs stated: "He probably is not homosexual. Many subjects were super-masculine in appearance. Only six percent defined themselves as homosexual."⁵⁸ Coombs supported his statements by suggesting that those who reported to be homosexual were overcompensating for their social failings. In a later article, Caukins and Coombs⁵⁹ concluded that most hustlers insisted they were not homosexual.

Craft,⁶⁰ in another well-known study, interviewed 33 males who participated in homosexual activity within an institution. It is unclear if the latter prostituted within the institution or were identified for the study because of their known homosexual activity. The ambiguity is interesting because Craft seems to assume that prostitution and

⁵⁶A. J. Reiss, Jr., "The Social Integration of Queers and Peers," Social Problems 9, No. 111 (1961): 102-120.

⁵⁷N. R. Coombs, "Male Prostitution: A Psychosocial View of Behavior," American Journal of Orthopsychiatry 44 (1974): 782.

⁵⁸Ibid., 783.

⁵⁹S. E. Caukins and N. R. Coombs, "The Psychodynamics of Male Prostitution," American Journal of Psychotherapy 30 (1976): 441-451.

⁶⁰M. Craft, "Boy Prostitutes and Their Fate," British Journal of Psychiatry 112 (1966): 1111-14.

homosexuality are synonymous. Craft does not pursue the possibility that a homosexual orientation may be a plausible factor in the homosexual behavior of his sample. He suggested that poor parenting and bad home environments result in personality disorganization. Prostitution is an incidental feature of social and personal maladjustment.

MacNamara's study⁶¹ of 37 male prostitutes suggested that they were homosexual, but that sexual preference is attributed to socioeconomic factors. Ginsberg⁶² likewise did not view individual prostitutes as homosexual. He concluded that male hustlers are motivated by psychological needs that can only be achieved through physical relationships. According to Ginsburg,⁶³ the motivation of the hustler in the sexual act is different from the homosexual, although hustlers may covert in time to homosexuality.

More recent studies have reported a larger percentage of gay identified youths among male prostitutes.⁶⁴ In Fisher's study of 79 male prostitutes, only 16% identified

⁶¹D. E. MacNamara and E. Sagarin, "Homosexual Prostitutions," Sex, Crime and the Law (New York: Free Press), 142-149.

⁶²K. N. Ginsberg, "The 'Meat Rack': A Study of the Male Homosexual Prostitute," American Journal Psychotherapy 21 (1967): 170-185.

⁶³Ibid.

⁶⁴D. M. Allen, "Young Male Prostitutes: A Psychosocial Study," Archives of Sexual Behavior 9 (1980): 399-426; B. Fisher, K. Weisberg, and T. Marotta, Report on Adolescent Male Prostitution (San Francisco, CA: Urban and Rural Systems Associates, 1982).

themselves as heterosexual. Fisher concluded that male prostitution was becoming "gayer." Agreeing with the conclusions of earlier studies, he suggested that male prostitution is a post-World War II phenomenon that has emerged only with the contemporary gay subculture. This conclusion runs counter to historical evidence given by Weeks⁶⁵ to demonstrate that the Western tradition of homosexual subcultures were organized around prostitution.

The more recent research necessitates us to assume the plausibility of a causal relationship between the post-World War II growth of a gay subculture and homosexual involvement in male prostitution, without a discussion of the social, cultural, and historical process involved. We are left with the questionable descriptions of: who male prostitutes are, their sexual identity, and the individual and cultural processes involved in male prostitution. Most of all, we are left with an incomplete understanding of the relationship of male prostitution to homosexuality in this culture. There were three different case studies completed during the period of this research on the male prostitute. All three subjects were geographically located from different parts of the United States.

⁶⁵J. Weeks, "Inverts, Perverts, and Mary-Annes: Male Prostitution and the Regulation of Homosexuality in England in the Nineteenth and Early Twentieth Centuries," Journal of Homosexuality 6, No. 1/2 (1980-1981): 113-134.

Case Studies

Bernard is a Black, twenty-one year old who says that he is gay. He lived most of his life in a very small town in the rural part of South Carolina. His mother and natural father were never married. Moreover, Bernard was adopted by an extended female family member. Bernard felt an attraction for males at an early age. His first memory of sexual play was at age six with a male neighbor, as well as a male cousin. At age twelve, Bernard was raped by an older boy, a family friend. Following the rape, Bernard started to feel sexual play for many other neighborhood boys and men:

I was always harassed for being gay. It was always frustrating. Most of my family as far as I knew were "anti-gay." My grandmother was from an old Christian background. I love religion and I believe in GOD, but it looks down on homosexuality. It was told to me that this act was sinful.

Mark is eighteen years old, Black, and says he "might still be homosexual." He responds that his father was an alcoholic and beat his mother. Sometimes, Mark stated that he slept with his mother because of nightmares, and sometimes his mother felt she needed him as a source of protection from his abusive father. When Mark was fourteen years old, his father died in a car accident: soon after that, the pressure and stress was so overwhelming that he dropped out of school.

Mark remembers having strong sexual desires for males his entire life. He, like other young boys, at one point in

his childhood played in his mother's makeup and her nightgowns. At one particular point in Mark's life he stated that he considered suicide:

I might still be homosexual or something, but I want to think about my future and my religion. I feel like I have two strikes against me because I am black and I am gay. I started to feel real bad about myself and my surroundings and stuff; it was basically because of my religion you know, that's what it was.

Timothy is twenty-five years old, and a native of Jacksonville, Florida. Timothy remembers being molested around the age of eight. This, he states, left him severely traumatized, as well as scared for life. Timothy, also recalls his childhood being that of a middle-class setting. His mother worked in a local factory and there was not a father figure in his life or home.

I explained to my mother what happened to me, but she did not pay attention to my cry for help. She thought I was making this nightmare up. As a child, I always had a very vivid imagination. I pleaded to mother that a man friend she was seeing molested me. She never took me to be medically examined and she herself never examined me. My mother continued to see this man, and whenever she left me alone with him, something sexual always happened. I soon became addicted to the sexual acts. Eventually, mother stop seeing this particular gentleman, but I continued to have sexual flings with guys who would allow me to. Most of the time the sexual acts were oral. I don't consider myself 100% gay. I just go with the flow.

Risk Factors Associated with HIV Serostatus of Male Prostitutes

The leading risk factors associated with HIV serostatus of male prostitutes according to the Centers for Disease Control (CDC)⁶⁶ and the Georgia Department of Health are:

1. Unprotected Sex
 - A. Men having sex with men
 - B. Heterosexual acts
 - C. Bisexual acts
2. Intravenous drug users
3. Transmission via cuts, needle sticks, blood transfusions

Definition of Terms and Abbreviations

AIDS (Acquired Immune Deficiency Syndrome): A disease caused by a virus that attacks the body's immunological system.

HIV: Persons who possess the antibodies of the AIDS virus, existing in their blood which counteract bacteria and their toxins.

Prevalence: Widely or commonly occurring or existing; generally accepted or practiced.

CDC: The Centers for Disease Control and Prevention.

Sadism: The intentional, repeated infliction of pain on another person to achieve sexual excitement.

⁶⁶Centers for Disease Control, Emory University, Atlanta, Georgia, 1995.

Masochism: A condition in which a person derives sexual arousal from being hurt or humiliated.

Golden Shower: The act of urinating on a sexual partner before or during sexual intercourse.

Talk Dirty: Making sexual comments to arouse a person's sexual appetite.

Hand Job: Masturbating a client with the fingers and hand.

Greek (Anal Sex): Stimulation and/or penetration of the anus during sexual intercourse.

STD: Sexually transmitted diseases.

Trade: A male who is seen by homosexuals as macho and dominant and possesses more heterosexual than homosexual tendencies.

Hustler: To sell or obtain by questionable means, or to obtain something by deceitful and underhand methods.

Rent Boy: A male who is rented by another for monetary gain in exchange for sexual acts. (Most rent boys work for escort services.)

Punter: Also known as a pimp or person who employs male prostitutes for a percentage of their earnings and cares for them through everyday living accommodations.

Heterosexual: Characterized by attraction to the opposite sex.

Homosexual: Sexually desiring for others of the same sex.

Bisexual: A person who is sexually attracted to members of both sexes.

IDU: Injecting drug users.

MSM: Men who have sex with men.

CHAPTER III

METHODOLOGY

Inasmuch as the most recent study in 1994¹ has significantly contributed to the available information for some of this research and has provided a foundation for this thesis, this researcher has based part of this study on that framework. Obviously, prostitution is illegal in Atlanta, as is with many states. So to approach male prostitutes for information, the researcher must do so in an amicably, yet casual manner, establishing an initial trust. Literature in sampling recommended targeted sampling² to facilitate gathering information for difficult-to-locate populations like prostitutes, drug dealers and users, and the homeless. Additionally, social mapping and snowball sampling are also found to be effective strategies to identify geographic areas or beats.³

¹J. Boles and K. W. Elifson, "Sexual Identity and HIV: The Male Prostitute," The Journal of Sex Research 31, No. 1 (1994): 39-46.

²J. Watters and P. Biernacki, "Targeted Sampling: Options for Studying Hidden Populations," Social Problems 36 (1989): 416-430.

³G. W. L. Kamel, "Downtown Street Hustler: The Roles of Dramaturgical Imaging Practices in the Social Construction of Male Prostitutions," Ph.D. diss., University of

The instrument is a two-page, one section questionnaire developed by the author (see Appendix). The questionnaire is designed to collect descriptive data about the subjects (e.g., age, sex, race, education, marital status, and employment) and specific questions regarding prostitution (e.g., length of time, frequency of prostitution, other work ethics, level of education, and sexual practices). It also solicits details surrounding criminal background information, relationships, abuse, and preference.

Sampling

Although a scientific sampling could not be drawn from any existing population frames to address the issues at hand, this study targeted 50 male prostitutes on three selected Atlanta streets as first-meet-first-interviewed basis. This method was in fact convenient because of accessibility. The sample consisted of forty-nine black males and one white male. This process was done over a six-month period.

The Setting

Peachtree, Cypress, and Broad streets of Atlanta were the focus of this study. These streets are located within the downtown and midtown areas where homosexual life is

California, San Diego, 1983.

prevalent. All three of these streets have been described by law enforcement officials of Atlanta as drug and sex corroded.

Data Collection Procedures

Instrumentation

A questionnaire survey was employed by the author to each of the fifty subjects for participation. If the subject agreed to participate in the study, it was agreed that it would be with his own consent. Each subject was assured confidentiality and anonymity. The subject was then asked to answer as many questions as he could on the questionnaire (see Appendix). Each subject was asked to be honest, thoughtful, and complete in giving his response.

Procedures

First, the researcher identified geographic areas through the Atlanta Police Department and other public information resources about the most frequent areas of male prostitutes in Atlanta. These targeted sites were expected to gain contact for interviews with male street prostitutes because of high incidence of arrest. The researcher suspected that among the geographic locations, there would be gay bars and other areas within downtown Atlanta.

The researcher, upon identifying male prostitutes, conducted interviews, utilizing the questionnaire included in the Appendix. In order to gain information about

with the respondents in order to conduct focus groups with them. Each respondent was asked if he has had hepatitis, syphilis, and HIV antibody which, when positive, may indicate greater susceptibility to HIV infection. Each willing respondent was asked to have the three tests above administered at the local resources, permitting the researcher disclosure. A release would be signed to guarantee privacy to the respondents.

First, the researcher was hopeful to recompense each respondent approximately \$10, with a hope to gain, at a minimum, a sampling of fifty respondents. Second, the researcher expected a timeframe of approximately six months to gather the anticipated number of respondents. Upon gathering the data, the content was analyzed and summarized for future review and publication. Next, the researcher compiled frequency analysis and distribution on findings about possible preventional and interventional strategies. Finally, upon recommendations of safer sexual and drug behaviors, the researcher conducted follow-up interviews to determine if male prostitutes modified their sexual and drug behaviors in order to protect themselves, as well as their clients.

Limitation of the Study

There are two limitations that restrict the generalization of the findings of this study to the entire male prostitute population. First, this study does not

claim to have a representative sample of male prostitute population. Secondly, the study is based on self-reported responses and no attempts to test for the reliability or validity of the responses were made.

CHAPTER IV

DATA ANALYSIS

The statistical data analysis of this study was based on the responses of the fifteen questions presented to each subject.

Table 1, frequency distribution of demographic data, shows that 40 out of 50 respondents were in the age group of 21 to 25 years. Five were younger (16-20 years) and four were older (26 years or over).

TABLE 1
FREQUENCY DISTRIBUTION OF DEMOGRAPHIC DATA

| Variable | Number of Respondents (N = 50) | Percent |
|--------------------------|--------------------------------------|---------|
| <u>Age</u> | | |
| 16 - 20 | 5 | 10 |
| 21 - 25 | 40 | 80 |
| 26 - 30 | 2 | 4 |
| 31 - Older | 3 | 6 |
| <u>Race</u> | | |
| Black | 49 | 98 |
| White | 1 | 2 |
| <u>Employment Status</u> | | |
| White Collar | 0 | 0 |
| Blue Collar | 36 | 72 |
| Manual Labor | 4 | 8 |
| Not Employed | 10 | 20 |

TABLE 1 (continued)

| Variable | Number of Respondents (N = 50) | Percent |
|--------------------------|--------------------------------------|---------|
| <u>Residency</u> | | |
| 1 - 4 years | 18 | 36 |
| 5 - 9 years | 30 | 60 |
| 10 years | 2 | 4 |
| <u>Educational Level</u> | | |
| High School | 37 | 74 |
| Some College | 8 | 16 |
| Other | 5 | 10 |
| <u>Marital Status</u> | | |
| Single | 41 | 82 |
| Married | 6 | 12 |
| Divorced | 3 | 6 |

Forty-nine respondents were African American and only one was white. Thirty-six respondents hailed from blue-collar working class and ten were not employed.

Eighteen lived in metropolitan Atlanta at least for one year but no more than four years, thirty lived in Atlanta for five to eight years, and only two for long-term residents (10+ years) in Atlanta.

Thirty-seven had at least a high school education and eight had some college. Five subjects reported they did not complete high school education.

The majority (N = 41) were single and three were divorced, but six were still married.

Table 2 represents frequency distribution of sexual history of the male prostitution.

TABLE 2
FREQUENCY DISTRIBUTION OF SEXUAL HISTORY

| Variable | Number of Respondents (N = 50) | Percent |
|---|--------------------------------------|---------|
| <u>Preference</u> | | |
| Heterosexual | 20 | 40 |
| Homosexual | 25 | 50 |
| Bisexual | 5 | 10 |
| <u>Sexual Identity</u> | | |
| Heterosexual | 23 | 46 |
| Homosexual | 20 | 40 |
| Bisexual | 7 | 14 |
| <u>Do You Have Protected Sex?</u> <u>(Use a Condom)</u> | | |
| Yes | 36 | 72 |
| No | 8 | 16 |
| Sometimes | 6 | 12 |
| <u>What Type of Relationships</u> <u>Do You Get Involved In?</u> | | |
| Heterosexual | 20 | 40 |
| Homosexual | 25 | 50 |
| Bisexual | 5 | 10 |
| <u>What Type of Sex Act</u> <u>Do You Get Involved In?</u> | | |
| Oral | 15 | 30 |
| Anal | 12 | 24 |

Table 2 shows that twenty favored heterosexual preference and twenty-five expressed a homosexual preference and five reported bisexual preference.

Twenty-three showed a heterosexual identity, twenty identified themselves as homosexual, and seven reported their sexual identity as bisexual.

In regard to protected sex, thirty-six reported the use of a condom regularly and six on an occasional basis. Eight reported they do not use condoms.

Twenty were reported involved in a heterosexual relationship, twenty-five in a homosexual relationship, and five in a bisexual relationship.

Fifteen respondents participated in normal sexual acts, twelve in anal sex, three in dirty talk sexual acts, and twenty in masturbation sexual acts only.

Table 3 shows that eight reported HIV positive, four contracted full blown AIDS, thirty-one contracted gonorrhea, six contracted herpes, and one subject contracted Hepatitis A.

TABLE 3
FREQUENCY DISTRIBUTION OF SEXUALLY TRANSMITTED DISEASES

| Variable | Number of Respondents (N = 50) | Percent |
|-------------|--------------------------------------|---------|
| HIV | 8 | 16 |
| AIDS | 4 | 8 |
| Gonorrhea | 31 | 62 |
| Herpes | 6 | 12 |
| Hepatitis A | 1 | 2 |

Table 4 shows that forty-seven subjects responded favorably to drug and alcohol abuse. Only three reported the absence of drug abuse within their prostitution activity.

Thirty-eight were physically or mentally abused at least once during their lifetime. Only twelve reported no physical or mental abuse.

TABLE 4
FREQUENCY DISTRIBUTION OF ABUSE

| Variable | Number of Respondents | | Percent | |
|---|-----------------------|----|---------|----|
| | Yes | No | Yes | No |
| Drug/Alcohol | 47 | 3 | 94 | 6 |
| Have you ever been physically and/or mentally abused? | 38 | 12 | 76 | 24 |

Table 5 presents the distribution of criminal activity of the respondents.

TABLE 5
FREQUENCY DISTRIBUTION OF CRIMINAL ACTIVITY

| Variable | Number of Respondents | | Percent | |
|--|-----------------------|----|---------|----|
| | Yes | No | Yes | No |
| Have you ever been convicted of a crime? | 39 | 11 | 78 | 22 |

Thirty-nine agreed to have been convicted of a criminal offense, while the remaining eleven did not.

Summary of Findings

In sum, the data analysis disclosed that forty percent of the sample were homosexual, forty-six percent heterosexual, and seven percent were bisexual. Congruence between the prostitutes' non-paid sexual behavior and their sexual self-identification were close for the heterosexual and homosexual identified men. The significant demographic and occupational differences between the prostitutes in each sexual self-identity category included education, history of physical abuse, homelessness, and geographical mobility. Based on self-identification, the rate of HIV infection was fifty percent for homosexuals, thirty-seven percent for bisexuals, and nineteen percent for heterosexuals. The differences in HIV infection rates between the men of each sexual self-identity category were significantly related to self-reported receptive anal sex, number of non-paid sexual partners, cocaine use, injection drug use, acquaintance with a person with AIDS, history of syphilis, and history of hepatitis.

CHAPTER V

CONCLUSION

The term "prostitute", value laden as it is, is often not the preferred term adopted by the youngsters in question. "Business boy", "Rent boy", "Hustler", "Trade" are just some of the terms employed as preferences. Indeed, some young people involved in any one of the various forms of "prostitution" would deny totally that they are prostitutes at all. Whatever the individual motivations for adopting one term over another, one effect it has is to take those in question out of the "moral arena" of judgments. As a defense mechanism, the denial of label serves to protect them from any internal or external social forces. Prostitution is behavior--not a person--and a "prostitute" is merely a term which describes a person's behavior.

Young persons involved in "prostitution" tend, despite the risk of murder, to create within themselves the belief that "it" happens to other less "streetwise" kids. Just as the student gets that certain buzz from making that climb, there's the buzz young "prostitutes" to achieve a "power position" over the "adult punter."

The powerless young "prostitute" getting "one over" at the punter's expense, gives and partially satisfies the young person's specific taste both of and for "power". This holds true even for the "prostitute" who would claim to be loyal to his punter. We might understand "power" as being the ability to influence, and in some instances, control one's environment. The young prostitute may feel a need to gain "control" more effectively than on previous occasions. Inherent in "skilled" use of self is the increased size of the buzz to be gained when and if the punter falls into the trap.

Children and young people involved in any form of prostitution face terrible risks. Murder lies at one end of the scale. What lies at the other is uncertain. Young people may deny these risks are real in order to survive their encounters with punters. The truth is obvious: the "denial" puts them at a higher risk.

The majority of male prostitutes interviewed in this study were not as educated as some of them professed to be. Most of the prostitutes were uneducated about life, the meaning of dreams, as well as goals. Many of the prostitutes were without employable skills needed in today's society.

Moreover, the prostitutes had very low self-esteem and had given up on education, life, hopes and aspirations. It is unfortunate that so many of the prostitutes

interviewed were African American and all of these persons had no desire to remove themselves from this degrading and dangerous lifestyle.

Most of these men wanted self-pity, which should not be given. These men are not mentally handicapped and/or physically disabled to be involved in the working arena of today's society. It is a travesty that society is losing African American men to sex that can and will kill. More studies should be done in the near future to educate young men and women about the dangers of the life of a prostitute. The Mayor of Atlanta should focus on cleaning up our streets and seeking help for these African American men.

Additionally, through December 1994, 12,304 cases of AIDS have been reported to the Georgia AIDS Case Surveillance Registry; 6,816 of these cases have been reported to have died. In January 1993, the AIDS case definition was made more sensitive by including persons who test positive for HIV and have a CD4 count under 200 or have been diagnosed with pulmonary tuberculosis, recurrent pneumonia or invasive cervical cancer. A total of 2,317 AIDS cases were reported in 1994; 1,119 of these cases would have been reported under the pre-1993 case definition, while 1,198 only fulfilled the new 1993 expanded case definition. Georgia continues to rank eighth among states in the cumulative number of reported AIDS cases.

Data from various seroprevalence surveys tend to confirm the trends seen in the analyses of the AIDS case data. The HIV seroprevalence data from selected STD clinics over the past five years show a slight but steady increase in the percent of heterosexuals testing positive, from 1.7% in 1990, to 2.3% in 1994. Over the same time period, the HIV seroprevalence in MSM has decreased from forty-four percent in 1990 to thirty-seven percent in 1994.

The seroprevalence rate among injecting drug users (IDUs) has fluctuated between fourteen percent and nineteen percent over the past five years with no clear trend, while it has remained relatively constant at eight percent for non-injecting drug users. Seroprevalence rates were consistently higher among black drug users.

In a surveyed homeless population, the HIV seroprevalence rate was forty-two percent in MSM and seventeen percent in heterosexual IDUs. Although the overall seroprevalence has declined from nine percent in 1990 to seven percent in 1994, this level of infection is high when compared to the general population.

Finally, prostitution and the HIV/AIDS epidemic in Georgia is continuing to affect MSM of all races, but in the 1990s has increasingly affected IDUs and the heterosexual population. Increasingly, blacks in metropolitan Atlanta, as well as in Georgia's small towns and rural areas, are affected. The changing dynamics of this epidemic must be

closely monitored so that effective prevention programs can be designed and implemented in the communities most at risk.

APPENDIX

QUESTIONNAIRE

1. What is your age?
 - a. 16 - 20
 - b. 21 - 24
 - c. 25 - 30
 - d. 31 and older
2. What is your race?
 - a. Black
 - b. White
 - c. Native American
 - d. Hispanic
 - e. Other _____
3. What type of work do you do?
 - a. White collar (business, education, etc.)
 - b. Blue collar (factory, fast food, etc.)
 - c. Manual labor (construction, migrant farm, etc.)
 - d. Not employed
4. How long have you lived in Atlanta?
 - a. 1 to 4 years
 - b. 5 to 9 years
 - c. 10 years or more
5. What is your highest level of education?
 - a. Some school
 - b. High school
 - c. GED
 - d. Some college
 - e. College
 - f. Graduate school
 - g. Post graduate
 - h. Technical school
 - i. Other _____

6. What is your sexual preference?
- a. Heterosexual
 - b. Homosexual
 - c. Bisexual
 - d. Asexual
 - e. Other _____
7. What is your sexual identity?
- a. Heterosexual
 - b. Homosexual
 - c. Bisexual
 - d. Asexual
 - e. Other _____
8. Have you ever contracted any sexually transmitted diseases?
- a. HIV
 - b. AIDS
 - c. Gonorrhea
 - d. Herpes
 - e. Hepatitis A
 - f. Hepatitis B
 - g. Other _____
9. Do you have protected sex? (Use a condom)
- a. Yes
 - b. No
 - c. Sometime
10. Do you abuse drugs and alcohol?
- a. Yes
 - b. No
 - c. If yes, what type? _____
11. Have you ever been convicted of a crime?
- a. Yes
 - b. No
 - c. If yes, what type crime? _____
12. What is your current marital status?
- a. Single
 - b. Married
 - c. Separated
 - d. Divorced
 - e. Widowed

13. What type of relationships do you get involved in?

- a. Heterosexual
- b. Homosexual
- c. Bisexual
- d. Not involved

14. Have you ever been physically and/or mentally abused?

- a. Yes
- b. No

15. What type of sexual acts are you involved in?

- a. Oral/anal
- b. Anal
- c. Oral
- d. Golden showers
- e. Dirty talk
- f. S & M
- g. Masturbation
- h. Sex tapes
- i. Other _____

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