MALE PROSTITUTION

AND

HIV/AIDS IN DURBAN

Submitted by A.H.J. OOSTHUIZEN in fulfilment of the requirements for the degree of Master of Social Science in Social Anthropology, University of Natal (Durban).

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DECLARATION

I, Abel Hermanus Johannes Oosthuizen, hereby declare that this thesis and findings is the result of my own research. Where appropriate, references have been made and acknowledged.

Signed on this day, 17 May, 2000, at Durban.
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ABSTRACT

This thesis sets out to describe and discuss male street prostitution as it occurs in Durban. The aim is to examine to what degree male street prostitutes are at risk of HIV infection, and make appropriate recommendations for HIV intervention.

The field data, gathered through participant observation, revealed significant differences between the two research sites, reflecting broader race and class divisions in the South African society. At the same time, the in-depth case studies of the individual participants suggest that they share similar socio-economic life histories characterised by poverty and dysfunctional families, and hold similar world-views.

The research was conducted within a social constructionist framework, guided by theories of human sexuality. Yet, sexuality was not the framework within which the male street prostitutes in Durban attached meaning to their profession. Professing to be largely heterosexual, the respondents engaged in homosexual sexual acts without considering themselves to be homosexual, reflecting and amplifying the fluid nature of human sexuality. It was, however, within an economic framework that the male street prostitutes who participated in this study understood and interpreted their profession. The sexual aspect of their activities was far less important than the economic gain to them, and prostitution was interpreted as a survival strategy.

A significant finding of this research is that male street prostitutes in Durban face a considerably higher risk of exposure to HIV from their non-paying sexual partners (lovers) than from their paying sex partners (clients). The research participants all had a good knowledge of HIV and the potential danger of transmission whilst engaging in unsafe commercial sex. In their private love lives, the participants were less cautious about exposing themselves and their partners to HIV infection, hence the conclusion that the respondents face a greater threat of HIV infection from their lovers than from their clients.

Finally, male street prostitutes, like female street prostitutes, do however face some risk of HIV infection as a result of their involvement with commercial sex. The illegal nature of their activities is considered to contribute to an environment conducive to the transmission of HIV, and this thesis argues for a change in the legal status of commercial sex work as a primary component of HIV intervention in this vulnerable group of men and women.
INTRODUCTION

As the title suggests, this study deals with two related core concepts, namely male street prostitution, and HIV/AIDS. These two concepts are linked, for the purpose of this study, within the broad body of studies in human sexuality.

RESEARCH PROBLEM, QUESTIONS, AIMS AND OBJECTIVES

HIV/AIDS is spreading worldwide, daily, and will probably be one of the most formidable transmissible infectious diseases facing mankind in this and the next century. Sub-Saharan Africa is currently experiencing an "explosive" epidemic, characterised by rapid growth, and accounts for 68% of people infected with HIV worldwide (Appendix A). South Africa similarly has experienced an antenatal seroprevalence rate increase from 0.76% in 1992, to 16.01% in 1997 (Appendix B), considered to be amongst the most rapidly progressing HIV epidemics in the world (Taylor, 1999:9; ibid, 1999:50).

In Kwazulu Natal, the antenatal seroprevalence rate of 26.9% is the highest in the country, and significantly higher than the 16.1% national average (Appendix C). These figures are, in Taylor's words, "... the silent expression of a human disaster" (1999:48). With the failure, so far, to develop a vaccine of cure for AIDS, the task of finding ways to combat the AIDS pandemic in South Africa and elsewhere, lies in the realm of public health (Gilmour, 1996:12)
It is against the background of these grim statistics, and the need for public health intervention, that this research aims to contribute to an understanding of the way in which male street prostitution in Durban form part of the HIV/AIDS pandemic, if at all. A review of the literature reveals: a) that prostitutes, both male and female, are regarded as a 'high risk' category for the transmission of HIV, and b) that prostitutes who operate in the 'informal' sector, i.e. streetwalkers, are considered to be more at risk of HIV infection than their counterparts in the 'formal' sector. Nevertheless, there is as yet no HIV intervention program directed at male street prostitutes in Durban.

The majority of studies on male street prostitution had been undertaken in Western cities indicating similarities in cultural meanings and behaviours amongst the research participants despite the geographical dispersion. In Durban, however, the research participants were drawn from a range of racial, cultural and socio-economic backgrounds, and it is therefore to be expected that cultural meanings and behaviours of male street prostitutes in Durban may be different from those reflected in similar studies elsewhere.

The primary research question posed in this thesis is whether male street prostitutes in Durban are exposed to the risk of HIV infection because of their involvement in the commercial sex trade alone, or if there are other factors at play. In addition, this research has set out to determine if there a particular need for an HIV intervention program aimed specifically at male street prostitutes in Durban.

1 'Formal' prostitution, in this thesis, means that the prostitute is *employed* and that they are therefore paid employees. 'Informal' prostitution means that the prostitute works for him- or herself and is *not employed*.
The research seeks to answer these questions through gaining an understanding of male street prostitution as it occurs in Durban, and to achieve the objective of this study to facilitate an informed discussion around a possible HIV/AIDS intervention program for male street prostitutes. Clients of male street prostitutes were not included in the research, as the magnitude of the undertaking would have been beyond my ability. Ideally, a study focussed on the clients of male street prostitutes needs to be done to compliment this research.

**THESIS OVERVIEW**

The first chapter provides an introduction to the discourse of human sexuality, and an argument for social constructionism as an appropriate theoretical model for the analysis of the data generated by this research is presented. A working definition of prostitution is suggested, followed by a brief discussion of male prostitution in South Africa. Finally, I introduce an overview of HIV/AIDS and reflect on the spread of the epidemic in South Africa.

The second chapter provides a description of the methodology applied in this research. Issues dealt with include: - the selection of an appropriate methodological framework, preparations for fieldwork, entering the field, establishing and securing co-operation with research participants and collecting data. Other issues discussed are the methodological limitations experienced, the ethical issues that presented themselves, as well as the personal and emotional implications that this fieldwork held for me.
In the third chapter, the focus turns to a description of the field, emphasising the similarities and differences between the two research sites. I describe and discuss the different ways male prostitutes and their clients make contact at these sites, and the implications these hold for the nature of the sexual contact between them.

In Chapters 4 and 5, selected in-depth case studies are presented. Areas covered include: life histories, employment histories, entry into prostitution, sexual orientation, daily routine and social life, as well as their future expectations. I draw attention to the similarities, which cut across the differences noted between the prostitutes studied.

In Chapter 6, an attempt is made to answer the research question through an analysis of the research data. Issues discussed centre largely on the factors which could facilitate the spread of HIV amongst male street prostitutes, their clients and their non-commercial sex partners. Particular attention is drawn to the risk that male street prostitutes face of HIV infection from their non-commercial sex partners.

In the final chapter, the issue whether there is a need for HIV intervention aimed specifically at male street prostitutes in Durban is addressed, and a brief outline of appropriate intervention options is presented. Of considerable importance is the discussion on the illegal status of prostitution in South Africa and, in particular, how a change in the legal status of the commercial sex trade could impact both on the risk of HIV infection amongst male street prostitutes in Durban, their clients and their non-paying sex partners.
This research concludes with a call for further study, in particular research involving the clients of prostitutes, and a more engaged social science to advocate and promote an understanding of the risk of HIV/AIDS infection the male and female street prostitutes in Durban, and elsewhere, face.
CHAPTER ONE: LITERATURE REVIEW

The purpose of this chapter is threefold. Firstly, to give an overview of the development of the theories of human sexuality, and secondly, to define and contextualise prostitution. Finally, an overview of HIV/AIDS is given. These three concepts sexuality, prostitution and HIV/AIDS are interrelated, yet it is important to separate them in order to prepare the way for an integrated analysis and discussion.

SEXUALITY

The earliest notions and discourse on sexuality in Western thought, were formulated largely from religious perspectives (Gagnon and Parker, 1995:3, Laumann and Gagnon, 1995:184, ARHN/WGSB, 1995:1). In the last decades of the eighteenth century we find that the ideological boundary between approved and disapproved sexuality was demarcated by religious based 'moral-intense' distinctions such as between good and evil, virtue and sin, and the spiritual and the animal (Laumann and Gagnon, 1995:183).

In the mid-eighteenth century, ideas about sexuality that were not entirely based in religious doctrine, began to emerge and the discourse of sexuality became increasingly the domain of the medical fraternity (Gagnon and Parker, 1995:3-4) preceding what Foucault (in Gagnon and Parker, 1995:4) called "...the rising tide of 'scientific' sexual discourse in the nineteenth century". The moral-intense distinctions of good/evil, virtue/sin and spiritual/unnatural, espoused by religious discourse on human
sexuality, gradually gave way to physical and mental health distinctions such as healthy/perverse, mature/immature and normal/abnormal (Laumann and Gagnon, 1995:183).

Despite human sexuality becoming increasingly the terrain of medical theorising, there was no inherent conflict between the medical and religious approaches. Both Christianity, the dominant Western religious doctrine, and medicine viewed sexuality first in terms of "instincts" (Laumann and Gagnon, 1995:185) and then as "... a universal physiological drive, rooted in our shared biology" (ARHN/WGSB, 1995:1).

The fact that human sexuality was considered to be rooted in biological factors, i.e. a purely natural phenomenon, also lead to the widespread belief that all human sex drives are fixed and inherent, and that sexual identities were dictated by nature (Weeks, 1995:33; Laumann and Gagnon, 1995:186). Of primary importance, however, is the fact that sexuality was defined and presented exclusively in terms of reproduction, and thus by necessity, penetrative and heterosexual within the socially acceptable institution of marriage (Gagnon and Parker, 1995:4).

At the end of the nineteenth century, the discourse of human sexuality was increasingly becoming the domain of a new collection of "liberated thinkers " who are considered to be the front-runners of modern "sexology" (Gagnon and Parker, 1995:3,5). What then was sexology and in what way did it differ from the previously biological or medical driven discourses on human sexuality?
Sexology was, at its inception, "...the revolutionary attempt of a relatively small number of researchers and activists to bring sexuality under the control of what was then understood as 'science'..." (Gagnon and Parker, 1995:3). Until the advent of sexology, human sexuality was viewed largely from a medical point of view, which was based on 'quasi-empirical doctrines' and identical with the lifestyles espoused by religious doctrine. Sexology, in contrast, was the attempt to theorise, predict and impact on human sexuality discourse, based on empirical, i.e. 'scientific', research data.

Clinical interviews and life histories were the two primary research methods in the initial stage of the growth and development of sexology (1890-1930). These were supplemented by survey questionnaires and fieldwork (1940-1960). During the 1960's and 1970's, other methods, such as laboratory observation and experimentation, were added to the repertoire of data-generating methods employed by sexologists. Ethnographic approaches increasingly became influential in the later part of the 1970's (Gagnon and Parker, 1995:6). Important to note, however, is that no one single discipline came to dominate the terrain, and the roles for explaining human sexuality increasingly became dispersed over a wide spectrum of social scientists, biologists, physicians, religious leaders, politicians and agents of the state (Gagnon and Parker, 1995:6)

What were the common beliefs that held together such a diverse field of interest and explanation regarding human sexuality? Gagnon and Parker (1995:7) list the six salient features of sexological thought, starting with the assertion that sexologists were in agreement that sex was an extremely powerful, natural force that existed in opposition to civilisation, culture or society. The primary sex drive was considered to be embedded
in the individual who thus formed the obvious basis and focus of investigation. Furthermore, there was implicit agreement that there are fundamental differences between the sexuality of men and the sexuality of women. Theories of sexuality were also normatively dominated by men's sexuality and by heterosexual images and practices. There was an assumption that science was capable of producing unbiased interpretations of sexuality, which, if generally understood and applied, would result in human betterment. Finally, positivist scientific knowledge was viewed as both transcultural and trans-historical.

To conclude, sexologists were firmly committed to a positivist mode of collection and interpretation of data, and as a result, sexuality was explained in terms of instincts and drives. Fixed categories such as heterosexual, homosexual, masculinity, femininity and maternity were deemed to carry universal meaning (Gagnon and Parker, 1995:7; Vance, 1996:4). In addition, sexuality, being seen as biologically determined and scientifically approached, was considered to be measurable and analysable in accord with the basic precepts of a positivist science of human behaviour (ARHN/WGSB, 1995:1).

It is against the background of positivist models of behaviour that we view the rise of a new critical perspective which provided a sharp departure from positivist theorising about social life, including sexuality (Gagnon and Parker, 1995:8). What happened to prompt the paradigm shift from positivism to the new critical perspective, and what did this new critical perspective entail, particularly in the arena of human sexuality?
Gagnon and Parker (1995:8) ascribe the emergence of a new critical perspective in sexuality studies to a larger crisis within the social sciences. Social scientists within sex research, and activist groups whose interests were impacted upon by the positivist paradigm, increasingly questioned the explanations offered by the contemporary adherence to the 'scientific' generation and interpretation of data, and the inherent determinism which accompanied the fixed categories it espoused.

The origin of the new critical perspective in social scientific research, including studies in human sexuality, is largely to be found in the influence of the North American tradition of symbolic interactionism. In the studies of human sexuality, what started as critical questioning of the prevailing positivist paradigm, developed into an alternative reformulated body of knowledge about human sexuality which emphasised "...the culturally and historically specific character of the study of sexual conduct..." and that "...sexuality was not based on internal drives, but was elicited in specific historical and social circumstances" (Gagnon and Parker, 1995:8). This new critical perspective developed into what is now referred to as social constructionism (Gagnon and Parker, 1995:8).

In addition to academic questioning of the positivist interpretation of human sexuality, activism in the emergent fields of feminist studies and lesbian and gay studies contributed to challenging sexological convention (ARHN/WGSB, 1995:2; Parker and Gagnon, 1995:8; Vance, 1991:876; Weston, 1993:341). Feminist scholarship and activism undertook the project of rethinking gender, which, as Vance (1991:876) noted, "...had a revolutionary impact on what is (considered) natural", such as, for example, women's inevitable subordination. In other fields, the impetus for the development of
construction theory arose from, among others, issues that emerged in the examination of male homosexuality in nineteenth-century Europe and America. At question was the sexological convention of fixed categories and relationships between sexuality and identity, paving the way for a paradigm shift in the way sexuality was interpreted (Vance, 1991:876; Weston, 1993:).

The intellectual history of social construction theory is complex and is drawn from developments in several intellectual strands such as: social interactionism, labelling theory, deviance in sociology, social history, labour studies, women's and gender studies, Marxist theory and cross-cultural work on sexuality (Vance, 1991:876). The term social construction is used in diverse ways and social constructionists differ in their views of what might be constructed. When discussing human sexuality, social constructionists adopt the view that "...physically identical sexual acts may have varying social significance and subjective meanings depending on how they are defined and understood in different cultures and historical periods" (Vance, 1991:878; Gilles and Parker, 1993:1). Sexual activity and sexuality is thus understood as socially constituted and constructed, and as such a "...highly specific product of our social relations rather than simply a universal consequence of our shared biology" (ARHNWGSB, 1995:2).

Concomitantly, social construction theorists propose that patterns of sexual conduct in a culture are locally derived, and that "...there is no innate sexual instinct or drive" (Laumann and Gagnon, 1995:187,188). In addition, social construction theorists also postulate that individuals acquire, through a process of socialisation that "...lasts from birth to death, patterns of sexual conduct that are appropriate to that culture" (Laumann and Gagnon 1995:188).
The final and crucial assumption underlying social construction theories is that individuals do not simply comply with, and act upon, the images of sexuality and sexual conduct with which they are presented during the process of acculturation. It is argued that as people get older, "...they make individual adaptations to what is originally provided by the culture" (Laumann and Gagnon, 1995:188).

When sexuality and sexual conduct are viewed within the parameters of social construction theory, we find that allowance is made for a process whereby individuals improvise around cultural scenarios, and in the process of social action create a changed sexual culture for the society. The dynamic process required for changing sexual culture, however, does not solely rest on the activities of individual actors. Diverse role players in this process include the mass media, religious leaders, educators, researchers etc., thus necessitating a focus not only on the incidence of particular individual attitudes and practices, but also on the social and cultural context in which sexual activity is shaped and constituted (Gagnon and Parker, 1995:10; Laumann and Gagnon, 1995:188).

An important consequence of the shift away from positivist theorising, is that the focus of investigation turned from the biological individual to "...the social and cultural systems that shape and structure the context in which sexual interactions take place and acquire specific meaning for specific social actors" (ARHN/WGSB, 1995:8). Shifting the focus away from the biological individual as an atomised unit, to investigating the context within which humans exist and interact, paved the way for a variety of new ways
of approaching human sex and sexuality under the umbrella of social constructionist thought.

The brief overview of theoretical development in sexuality studies highlighted two issues. Firstly, that the trends in thinking about human sexuality reflected a wider transformation in the social sciences, and secondly, that no single discipline came to dominate the investigation and explanation of human sexuality.

As a social anthropologist, the question, which I ask, is where did social anthropology stand amidst these paradigm shifts? Vance (1991:875) offers a concise analysis of the role of social anthropology and comments in the introduction that "...anthropology as a field had been far from courageous or even adequate in its investigation of sexuality", a view shared by other social anthropologists and social scientists (Preston-Whyte et al, 1996:1; Parker, 1990:1; Gilles and Parker, 1993:3, Weston, 1993:340-341).

To understand why social anthropology had been "inadequate in its investigation of sexuality" as Vance (1991:875) noted, we have to turn to a sketch of the historical view held in social anthropology regarding sexuality and sex. Weston (1993:339), doing a review of lesbian and gay studies in anthropology, for example, comments that, throughout the first half of this century, "... most allusions by anthropologists to homosexual behaviour remained as veiled in ambiguity and as couched in judgement as were references to homosexuality in the dominant discourse of the surrounding society".
During the time when views and research on sex in the social sciences changed from the religious and medical quasi-scientific approaches to positivist science and ultimately, to social construction, views on sex and sexuality in social anthropology remained, as Vance points out (1991:878), "...remarkably consistent". What then was the dominant but 'remarkably consistent' social anthropological view on sexuality and sex?

Vance (1991:878) refers to the prevailing theoretical paradigm in social anthropology during the period 1920-1990 as the "cultural influence model". This model placed a 'dichotomous' emphasis on: a) the role of culture and learning in shaping sexual behaviour and attitudes, and b) the assumption that sexuality was universal and also biologically determined (author's emphasis).

Based on, and to account for, the variation in cross-cultural findings, social anthropologists applying the cultural influence model held the belief that culture, which is learnt, either encouraged or discouraged the various sexual activities which people were capable of. Weston (1993:341), reviewing studies in homosexuality, for example, remarks that anthropologists such as Mead and Benedict did not dispute the conceptualisation of homosexuality as a matter of individual drive or temperament, but, importantly, that they saw some societies as better prepared than others to accommodate this variance.

Yet, despite the influence of culture on sexual behaviour, social anthropologists, like the majority of social scientists involved in sex studies, assumed and often explicitly stated, that "...the bedrock of sexuality was universal and biologically determined"
All humans were believed to have been born with a sex 'drive' or an 'impulse', which, although considered to be shaped by culture, was very powerful and sometimes exceeded social regulation.

The core anthropological assumption of sexuality, however, was centred on the concept of reproduction (Vance, 1991:878; 1996:3). "Real sex" was considered to be penetrative and heterosexual, within the socially sanctioned institution of marriage. All other alternatives, both heterosexual and homosexual, were considered to be "variations".

Of crucial importance, however, is that social anthropologists applying the cultural influence model to their analysis of sex and sexuality, believed, or took for granted, that sexual acts carried constant and universal significance in terms of sexual identity and subjective meaning (Vance, 1991:879; Weston, 1993:339-340). For example, same gender sex was assumed to be considered as homosexuality in both industrialised and non-industrialised societies, and, equally important, it was also assumed that homosexuality would be viewed as a 'variation' on the correct form of sex and sexuality which was, by definition, heterosexual, penetrative and anchored in reproduction.

Despite its long-standing tradition in social anthropology, the cultural influence model, as applied to sex and sexuality related research by social anthropologists, was flawed. Firstly, there was the biological determinism, which was reflected in the

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1 Note, for example, how Malinowski (1962:16-17) argues that prostitution "...provides an easy satisfaction for the sexual appetite to unmarried men and to those who for some reason cannot cohabit with their wives", concluding that prostitution "...constitutes an institution complementary to marriage".
assumption that sexuality was universal and biologically determined, manifesting in 'drives' and 'impulses'. An implication of this biologised component of the cultural influence model was that sex and sexuality was considered to be 'fixed' and unchangeable. Vance (1991:8798) remarks that despite social anthropology's challenge to the natural and universalised status of many domains, it has largely excluded sexuality from its endeavour of suggesting that human actions have been, and continue to be, subject to historical and cultural forces and thus to change.

Secondly, sexuality itself, assumed to be anchored in reproduction, remained an unexamined construct. Social anthropologists investigating sexuality often ignored non-reproductive behaviour when investigating sexuality, focusing only on reproduction, marriage and family organisation (see for example Mead, 1961 in Vance, 1991:878; and Malinowski, 1962). This 'reproduction' concept of human sexuality was, however, not confined to social anthropologists. Rather, it was a widespread assumption also held by other social scientists who had an interest in human sexuality (Vance, 1991:878).

Thirdly, the theoretical foundations underpinning these views of sexuality were left unexamined (Vance, 1991:878). Social anthropologists analysed and interpreted their studies based on their own Western views of sexuality, assuming that: a) behaviour was the same in all societies and b) that the meaning of the behaviour was the same in all societies (Weston, 1993:339-340). The meanings social anthropologists attached to sexuality and sexual acts were what Vance (1991:879) refers to as "curiously ethnocentric" since most of the social anthropologists were "...observers from a twentieth century, complex, industrial society", imposing their (European/Western)
social meanings and prejudices on sexual actions in societies where the same activities could have had a different meaning.

Despite the shortcomings of the cultural influence model, social anthropologist's findings of variation in sexual activities nonetheless called into question prevailing notions about the 'inevitability' or 'naturalness' of European and American sexual norms and behaviour, thereby undercutting more mechanistic theories of sexual behaviour.

Where does social anthropology stand today in relation to sexuality and sex research? To start with, social anthropologists are now in the process of discovering, or as Vance (1991) so eloquently puts it, 'rediscovering' sexuality. Unlike their predecessors, social anthropologists now openly focus on and investigate sex and sexuality, breaking away from the historical prevailing cultural view that sexuality is not an entirely legitimate area of study (Vance, 1991:875, Weston, 1993:339-340). Despite sexuality increasingly being considered as a legitimate area of study, Vance (1991:875) reminds us that social construction theory has yet to be felt fully, not only in the area of sexuality studies, but also in mainstream social anthropology.

An important question to ask is: how does the social anthropologist studying sexuality apply social construction theory? Vance (1991:879) suggests that "...a social construction approach to sexuality would examine the range of behaviour, ideology, and subjective meaning among and within human groups, and would view the body, its functions, and sensations as potentials (and limits) which are incorporated and mediated by culture". Weston (1993:341) similarly notes that anthropologists argue that
"...specific cultural contexts shaped the forms, interpretations, and occasions of sexual behaviour.

What Vance and Weston thus advocated, is a comprehensive holistic approach to sexuality, taking into consideration the individual, the intercultural diversity in the meanings the individual attaches to sex and sexuality, as well as the context within which the individual operates.

A major emphasis of applying social construction theory in anthropological studies then, is to avoid projecting Western notions, or the 'universality' of concepts, in terms of fixed identities (for example, homosexual, heterosexual, feminine and masculine and even gender) onto non-Western societies... Most importantly, however, social anthropologists applying social construction theory, need to distinguish between sexual identity and sexual behaviour² whilst taking into account the context and meaning within which the identities and behaviours operate and interact (Weston, 1993:347). Besnier (1994, 1997) sets outstanding examples of integrating social construction theory with ethnography in his studies of gender liminality. What he did was to "... explore the ethnographic diversity of transgendered identities within a single society, the complex interweaving of symbolic and material forces in defining these identities, and the power of stereotyping in the lives of those who are the target of the process" (1997:5).

² The distinction between identity and behaviour will be discussed in more detail in chapters 4, 5 and 6.
It was, however, Richard Parker's remarkable monograph, "Bodies, Pleasures and Passion" (1991), which pioneered and captured the holism and social construction approach which Vance (1991), Weston (1993) and others had advocated for contemporary social anthropological research on sexuality. Parker (1991:1) introduces his work by situating it within the framework of the social and historical construction of sexual diversity in Brazilian culture. As a departure point, he argues that in any complex society, it is inaccurate to speak of a single, unified system of sexual meanings. As an alternative, he proposes that "sexual meanings in complex societies are best thought of in terms of multiple subsystems".

Multiple subsystems of sexual meaning offer what Parker (1991:2) describes as "...frames of reference, culturally constituted perspectives or vantage points" which individuals can draw upon in building up and interpreting their sexual experiences. Only once the social anthropologist understands these multiple subsystems can an individual understand the constitution of meaningful sexual realities in the society being studied.

The final question is: how does the social anthropologist understand the multiple subsystems of sexual meaning in a society? Parker (1991:5) suggests that we "...must look not merely to the similarities, the patterns of cultural cohesion, that exist between these highly diverse configurations, but also to the crucial differences which separate them - the logical and emotional contradictions which flow from them". In addition, Parker (1991:172) stresses the need to focus on the possibilities and choices that are opened up, by social and cultural systems, to the women and men who make their way within their sexual universe, rather than placing emphasis on uniformity or conformity.
PROSTITUTION

Having briefly outlined developments in theories of human sexuality, it is time to turn our attention to prostitution. Throughout history, sexual activities, such as prostitution, which did not conform to the reproduction definition, were considered first to be immoral (religion), then unnatural (medical). Later, when the focus on human sexuality started changing from the medical to behavioural models of explanation (positivism), they were also seen as perverted and deviant (Vance, 1996:2; Moulder, 1993:14; West and De Villiers, 1992).

A salient feature of the historical perspectives on prostitution, which will become clear, is that it was approached, formulated, and largely mediated within the parameters of 'Western' or 'European' sexual constructs. This means that there was a general belief that the complex behaviours we refer to, when we speak of prostitution, were viewed in the same negative and moralistic way in all societies and cultures. However, as the literature has shown, the Western concept of prostitution, with its associated meaning and stigma, does not have cross-cultural application and relevance (De Zalduondo and Bernard, 1995:157; Preston-Whyte, 1996:1; ARHN/WGSB, 1995:3). In South Africa, however, prostitution is still considered to be immoral and condemned by a large proportion of the population (Schurink, 1993:133-135). In addition, prostitution is a criminal offence in terms of Section 20(1)(aA) of the Sexual Offences Act No 23 of 1957. Enforcement of this law, as Schurink (OpCit) and Legget (1998:23) have shown, is selectively enforced, leaving South Africa's position on sex work somewhere between prohibition and decriminalisation.
When we talk about prostitution, what are we talking about? Prostitution has
generally been defined and understood, in its most elementary form, as "...the exchange
of women's or men's sexual services for payment" (Seymour-Smith, 1986:235; Schurink,
1993:3; Gilles and Parker, 1993:5). West and De Villiers, researching male prostitution
from a criminological perspective, similarly offers an operational definition which
espouses the view that "...a prostitute or sex worker is defined as one who proffers
personal sexual services to a variety of customers chosen primarily for what they are
prepared to pay" (1992:XV).

One of the earlier and more comprehensive definitions offered by Benjamin and
Masters (in Schurink, 1993:4-5) identified five major elements in defining prostitution.
Prostitution involves a person who sells sexual services, receives direct payment, to
many clients. The buyer/seller relationship is transient and fleeting, and the
buyer/seller relationship is anonymous and impersonal.

Following Benjamin and Masters' identification of elements of prostitution,
Schurink (1993:5) proposes a working definition of prostitution which reads as follows:
"....a prostitute is regarded as any person who gains his or her livelihood partly or wholly
by undiscriminatingly, without affection, exchanging sexual and/or non-sexual activities
(e.g. listening to someone's problems, going out with someone or acting as someone's
regular girl-or boyfriend) for money or for accommodation, food or other valuable
articles".

Schurink's definition hinges largely on the 'sex-for-material-gain nexus' which,
according to criticism, acknowledges only the capital or value aspect of prostitution, a
common shortcoming in defining prostitution (Caldwell et al., 1989:219; De Zalduondo and Bernard, 1995:158; Moulder, 1993:13; Seymour-Smith, 1986:235). Altman (1995:103), for example, encapsulates this criticism by noting that "... in all but the most rigid of societies the relationship between money and sex is complex and fluid, and the demarcation of prostitution correspondingly vague".

The paradigm shift in the social sciences and related fields from positivism to social construction meant that the focus changed from the individual to the social arena. Into play now come issues such as sexual identities, sexual cultures and sexual communities (see ARHN/WGSB 1995; Laumann and Gagnon, 1995:). The questions are now: does the definition of prostitution adapt to the new theoretical perspective, and can a social construction approach add to, or change, conventional definitions and commonly held views of prostitution?

From a social construction point of view, prostitution has to be viewed in a historical and social perspective, and not as the unrelated and isolated sexual activities of atomised individuals. Gagnon and Parker (1995:11) remark that the social construction approach - which places emphasis on the social organisation of sexual interaction, on the contexts within which sexual practices occur, and on the complex relations between meaning and power in the constitution of sexual experience - has shifted attention from sexual behaviour, to the cultural rules which organise it.

As has been noted earlier, prostitution has historically been viewed as immoral, then unnatural and, more recently, as a perversion (De Zalduondo and Bernard, 1995:158; Moulder, 1993:14; Vance, 1996:2; West and De Villiers, 1992). All these
constructs have in common the stigmatisation of prostitution. Yet, social scientists using the social construction approach have raised questions about firstly, the universal application of the meaning of the concept 'prostitution', and secondly, the universal application of the stigma which Western and European constructs place upon prostitution (Preston-Whyte et al, 1996:1, de Zalduondo and Bernard, 1995:158).

The social construction approach places special emphasis on analysing the local or indigenous categories and systems of classification that structure and defines sexual experience in different social and cultural contexts. What has transpired is that many of the key categories and classifications used in Western and European societies to describe sexual life are, in fact, far from universal and that, on the contrary, "...categories as diverse as 'homosexuality, 'prostitution' or even 'masculinity' and 'femininity' may be altogether absent" (Gagnon and Parker, 1995:11). In addition, categories such as prostitution which are viewed as deviant and are stigmatised, are not necessarily viewed in a negative way in societies other than those of Europe and the Western world.

Having provided a theoretical background to the study of sexuality and prostitution, it is appropriate, at this point, to reflect on what prostitution means in this study. Being mindful of the confusion and problems surrounding the definition of prostitution, I choose to return to the basic definition as proposed by Benjamin and Masters (in Schurink, 1993:4-5) which proposes that prostitution is, in its most elementary form, the exchange of sexual services for cash.
Returning to this 'flawed' definition of prostitution hinging on the "sex-for-material-gain-nexus" presented this research with considerable tension. On the one hand there were the social constructionist theoretical guidelines for the interpretation of prostitution that seeks to contextualise prostitution on a macro scale, and downplay the 'sex-for-sale' aspect. On the other hand, as will become clear in chapters 5 and 6, there was the view that the prostitutes themselves held on prostitution in general, which emphasised almost exclusively the material gain for sexual service aspect.

Despite the criticism and caution of scholars such as Altman (1995:235); Caldwell et al, (1989:219); De Zalduondo and Bernard (1995:158); Moulder, (1993:13); and Seymour-Smith, (1986:235) against viewing prostitution exclusively as sex for sale, the data in this research suggests that prostitution remains primarily an economic transaction where sex is the commodity and material gain the reason why prostitutes offer their sexual services.

Viewing prostitution as a transaction does, however, not prevent one from contextualizing prostitution within a wider social context, acknowledging the moral condemnation, or lack thereof, in different societies, and that the meaning of prostitution may vary considerably from one society to another. Yet, despite all the variations and different opinions about where and how prostitution fits in within the wider social context, there is a need to acknowledge that prostitution remains rooted in, and defined within, the 'sex-for-material-gain-nexus'.
HIV/AIDS

Having dealt with the theoretical approach to human sexuality and defining prostitution, it is now to HIV/AIDS that we turn. It is important to understand, from the onset, that there is a difference between HIV and AIDS.

Acquired Immunodeficiency Syndrome (AIDS) is a viral infection causing a severe depression of the immune system, resulting in the development of life-threatening, often unusual, infections and/or malignancies. AIDS is caused by a lentivirus within the retrovirus group called Human Immunodeficiency Virus (HIV) which has been isolated in multiple body fluids including blood, semen, urine, breast milk, saliva, cerebrospinal fluid, tears and vaginal secretions (Rodway and Wright, 1988:16; Tavanyar, 1992:36). The only body fluids, however, considered capable of passing on HIV are infected blood, semen, vaginal secretion and perhaps breast milk (Tavanyar, 1992:75). Currently, the major route of HIV transmission is through sexual contact (Crewe, 1992:3).

It is important to distinguish between people who are HIV+ and those who have AIDS (Crewe, 1992:7). Once a person has been infected with HIV, the person is referred to as being HIV-positive (HIV+). A person who is HIV+ remains healthy but, as noted above, can infect others. Once a person who is HIV+ shows the development of opportunistic infections and becomes ill, indicating a severely weakened immune system, only then does the person have "full-blown" AIDS which is a medical condition considered to be 'terminal'-leading to death (Crewe, 1992:3; Tavanyar, 1992:45-47).
The epidemiological course of the HIV/AIDS epidemic sweeping across the globe has been well-documented (Crewe, 1992; Green, 1994; Shilts, 1987; Tavanyar, 1992). The epidemic did not arise full grown from the biological landscape all of a sudden, as Shilts (1987:xxi) reminds us, rather, it had been festering throughout past decades. The year 1980 represents a turning point when the first of several gay men in the United States of America, Denmark and France started manifesting, and were diagnosed with, symptoms of what later became known as Acquired Immune Deficiency Syndrome (Shilts, 1987:49). On 5 June 1981, the first medical report was tabled, indicating the spread of a previously unheard of infectious disease in the USA.

From the onset, HIV/AIDS has been associated with stigma, initially viewed as a disease of homosexual men, and attributed to their "...prevailing life-style of drugs, discos, and anonymous sex" (Crewe, 1992:11; Herdt and Lindenbaum, 1992:4; Levine, 1992:187; Shilts, 1987:80,108,154,311; Terto, 1996:2). As the epidemic started spreading, HIV/AIDS came to be known as "gay cancer" or "gay pneumonia" because many of the gay men who were infected started showing signs of dark purple lesions which were identified as Kaposi sarcoma, a rare form of harmless skin cancer, and/or died of Pneumocystis carinii, a previously non-lethal form of pneumonia (Shilts, 1987:94). Soon, HIV/AIDS was called "the gay plague" (Crewe, 1992:11). Later, when it became apparent that a transmittable agent was responsible for neutralising an infected person's immunity, HIV/AIDS became known by the acronym GRID, derived from the term Gay Related Immune Deficiency which scientists had given to the new syndrome they were faced with (Shilts, 1987:97,121; Tavanyar, 1992:14).
Evidence soon indicated that the infectious agent was not spreading exclusively among homosexual men in the USA and other developed countries through sexual transmission. HIV was also found among haemophiliacs (blood transfusion), in the Haitian population (ritual scarring and sexual transmission), in intravenous drugs users (shared needles), as well as amongst prisoners and prostitutes (sexual transmission), and babies (mother-to-child transmission) (Shilts, 1987:127-171). Acknowledgement that the spreading disease was no longer confined to homosexual men came on 27 July 1982, at a meeting of scientists and US government officials in Washington, D.C. when "... somebody finally suggested the name that stuck: Acquired Immune Deficiency Syndrome" or AIDS (Shilts:1987:171).

In industrialised or 'developed' countries where AIDS is well established, HIV transmission has occurred primarily through male homosexual intercourse and blood-to-blood contact through shared needles amongst intravenous drug users. In scientific literature, this pattern of spread which is prevalent in the West is called Pattern 1 (Crewe, 1992:21; Green, 1994:7). However, the pattern of HIV transmission and the manifestation of the disease in developing countries such as in those Africa, and in particular sub-Saharan Africa, is different from those found in the developed countries (Crewe, 1992:21). The spread of HIV infection in these regions results mainly from heterosexual contact, transmission from mother to child during pregnancy, or from blood transfusion. In scientific literature, this pattern of spread is known as Pattern II (Crewe, 1992:21; Green, 1994:1,7,8).

In an attempt to explain why the patterns of heterosexual transmission between Pattern I and Pattern II are so "strikingly different", Green (1994:7,9) proposes that some
possible factors could include: the high prevalence of other STD's in Africa, the non-
circumcision of males, the use of vaginal tightening agents in some areas of Africa
which often contain abrasives or vaginal irritants, and having multiple sexual partners.
However, it is important to recognise that every country affected by HIV has its own
pattern of the epidemic, shaped by the local circumstances of the population groups in
which the virus emerges. This is not to suggest that HIV is a different disease in different
countries; rather the pattern of its transmission is profoundly influenced by the particular
local social context (Crewe, 1992:23).

In South Africa for example, we have, in Crewe's words (1992:19), "the worst of
both worlds". AIDS statistics since 1982 show the emergence of both the patterns of
developed and developing countries side by side (Green, 1994:9). The HIV/AIDS
epidemic has affected homosexuals and bisexuals, as well as heterosexuals, men,
women and children, black and white. Yet, as pointed out by Odendaal and Kruger,
(1990:608) as well as Crewe (1992:19,58), the major growth point of the epidemic is
now considered to be among urban heterosexuals of both sexes and predominantly, but
not exclusively, in the black population (See Appendix D).

The outbreak of HIV/AIDS resulted in prostitutes worldwide, together with gay
men and intra-venous drug users, being subjected to numerous epidemiological studies.
The view was that prostitutes were more vulnerable to HIV/AIDS infection than the
average person by nature of their profession and, concomitantly, served as a vector or
conduit for transmitting HIV/AIDS (Choi and Coates, 1994:1376; Crewe, 1992:37;
Elifson et al, 1993:79; Gilles and Parker, 1993:2; Morse et al, 1991:535-539; Parker,
By bringing prostitution and HIV/AIDS together, the common elements they shared in the popular imagination were highlighted, focusing on images of multiple sex, dangerous or 'risky' sex, payment for sex - all, according to Preston-Whyte et al (1996:1), "...activities feared to threaten social life as typified in those widespread icons of 'correct' sexual life, heterosexual love, fidelity, marriage and now, of course, health and survival itself". West and De Villiers (1992:ix) similarly noted that "...popular images of the male prostitute are confused and contradictory, poorly informed and often more concerned with moral condemnation than humane understanding" aggravated by the media linkage of the sex trade with the AIDS epidemic that encouraged "moral panic".

INTERGRATING THE CONCEPTS: SEXUALITY, PROSTITUTION AND HIV/AIDS

The initial response to AIDS was purely epidemiological by nature, focusing largely on the frequency and nature of sexual behaviour, and unquestioningly embracing positivist categories and assumptions regarding sexuality (ARHN/WGSB, 1995:18; Bolton, 1992:128; Levine, 1992:187,188; Tan, 1995:95; Treicher, 1992:66; Vance, 1991:880). However, as the relationship between sexual conduct and HIV infection became apparent, and the global dimensions of the epidemic began to emerge, a fundamental lack of understanding of sexuality and sexual conduct cross-culturally became increasingly evident (Gagnon and Parker, 1995:10; Vance, 1991:880). In addition, it also became obvious that if sex research was to make a contribution to the fight against HIV/AIDS, it would have to focus not only on the incidence of particular attitudes and practices, but, as social constructionists had

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3 See also Shilts, 1991.
proposed, "... on the social and cultural contexts in which sexual activity is shaped and constituted" (Gagnon and Parker, 1995:10; Levine, 1992:196).

Crucial to understanding sexuality then is to understand that sexual activity is foremost a social transaction in which pairs of actors mutually shape each other’s conduct. In keeping with the social constructionist approach, Aggleton (1996:6) argues for the need to focus on "...the context within which sexual behaviour becomes meaningful, as well as the meanings people bring to bear upon their sexual encounters". Laumann and Gagnon (1995:195) and others such as Bolton (1992:147,151) similarly remind us that HIV transmission occurs as a result of specific sexual acts. These acts do not take place in a vacuum, but within the context of a sexual encounter which "...always involve some sort of negotiation between or among the participants, each of whom brings to the encounter his own past experiences, his cognitive structure, his emotional needs".

In addition, there remains a need to look further, and in particular, to turn to the social arena and investigate the range of sexual behaviours, ideologies and subjective meanings among and within prostitute groups (Gilles and Parker, 1993:1). Gagnon and Parker (1995:11) similarly proposed a shift of attention from sexual behaviour, in and of itself, to focus on, among other issues, the relations of power and social inequality within which sexual behaviour takes place, and on the cultural rules that organise it. It is within this context that this study sets out to investigate prostitution in Durban, bearing in mind that prostitution in this study reflects an emphasis on the economic transaction aspect.
CHAPTER TWO: METHODOLOGY

A basic tenet of research is that the research problem(s) and question(s) determine the methodology employed. The research problem(s) and question(s) as well as the aim and objectives, as formulated in the introductory chapter, thus need to be restated to facilitate a discussion of the methodology employed in this research and the limitations thereof.

Issues dealt with in this chapter are the considerations and the selection of research sites, entry into the field and how field relationships were secured and maintained. In addition, I will discuss the techniques applied in the data gathering process and finally, reflect on ethical considerations and the personal implications research into male prostitution has had for me.

RESEARCH PROBLEMS, QUESTIONS, AIMS AND OBJECTIVES

A review of the literature, based largely on studies done in Western cities and countries, reveals that both male and female prostitution is regarded as a 'high risk' category for the transmission of HIV (Choi and Coates, 1994:1376; Coutinho, 1988:207; Crewe, 1992:37; Eifison et al., 1993:79; Gilles and Parker, 1993:2; McKeganey and Bloor, 1990:275; Morse et al., 1991:535-539; Parker, 1990:1; Plant, 1990, 25; Shilts, 1987:131,132; Morgan Thomas et al., 1989:148, Tomlinson et al, 1990:360; West and De Villiers, 1992 ix). Furthermore, those men and women who operate in the 'informal'
sector, i.e. streetwalkers, are considered to be more at risk of HIV infection than their counterparts in the 'formal' sector who work in agencies, brothels etc.¹

The reasons for the high prevalence of HIV amongst prostitutes are varied². Unprotected sex, the use of drugs, and in particular intravenous drug use, as well as the unequal power relations between prostitutes and their clients are considered to be major factors contributing to the high rate of infection among prostitutes. However, as noted earlier, the studies on which these findings are based, had been undertaken largely in developed Western countries. Considering the immense cultural diversity in South Africa, as well as the diversity found amongst the research participants, it is not possible to apply models of interpretation of prostitution based on Western concepts unquestioningly in the South African context.

The major question in this research is whether male street-prostitutes in Durban are as exposed to the risk of HIV infection by virtue of their involvement in the commercial sex trade, as are their counterparts in Western cities. In addition, there is a need to establish whether it is necessary to consider an HIV intervention program aimed specifically at the male street prostitute population in Durban?

The aim of this research was to gain an in-depth understanding of male street prostitution as it occurred in Durban. The majority of studies done on male street prostitution had been based on surveys, blood samples and other quantitative indicators which does not contribute much to understanding the environment in which HIV

¹ See chapter 3 for a description of 'formal' and 'informal' prostitution.
² The reasons for the high prevalence of HIV amongst prostitutes are discussed in detail in chapter 6.
transmission takes place. The research objective is thus to generate sufficient in-depth data about the environment in which HIV transmission is likely to occur among male street prostitutes in Durban so as to facilitate an informed discussion around a possible HIV/AIDS intervention program. Of importance to note, as mentioned in the introduction, is that the research design did not make provision for the study of clients. Any understanding of male street prostitution in Durban will be greatly enhanced by knowledge about the clients of the prostitutes, and such data will be invaluable in the design of appropriate HIV intervention programs.

**METHODOLOGICAL FRAMEWORK**

Despite being trained as a social anthropologist, I did decided to employ participant observation as the principle method of enquiry. Considering the research problems, questions, aims and objectives, the literature reviewed indicated that, despite it's shortcomings, participant observation remains an important method of enquiry in dealing with investigations of such sensitive nature. Participant observation is considered to be particularly suited for gaining an in-depth understanding of the activities, knowledge, attitudes and perceptions of hidden populations (also referred to as 'deviance' and 'deviant populations' in some of the earlier, politically still incorrect, literature).

What is meant when discussing participant observation as a method of enquiry? The most basic tenet, as Seymour-Smith (1986:215) noted, is Malinowskian in that participant observation requires: “...extended periods of fieldwork in which the anthropologist should attempt to immerse him or herself in the daily life of the people
studied, thus minimising the interfering effect of his or her presence and permitting a full appreciation of the cultural meanings and the social structure of the group with all its functional interrelations between customs and beliefs, which at first sight appear inexplicable and incoherent."

Whereas the functional definition of participant observation embraces the ideal, reality often necessitates adaptation when the limitations of this method of enquiry present themselves in a particular setting. I was aware of the possible limitations of participant observation, as a method of enquiry for this research, from the onset. The obvious question, as will be discussed later, was "how far" to participate? I decided to allow those limitation to emerge as the research progressed and then to deal with them. Improvising and adapting the research method and strategy on an ongoing basis resulted in a dynamism that guided the general direction of the research, occasionally into areas that I had not initially contemplated. Examples of the limitations of participant observation, and measures of adaptation that were necessitated, will be introduced and discussed where appropriate in this chapter.

DOING FIELDWORK

My fieldwork is best described as a continuous series of stages. Firstly, there was the preparation stage, which consisted of a review of relevant literature and an assessment of possible research sites. Introducing myself to the potential research participants and establishing co-operation was the next major stage, which preceded the collection of data. Throughout the preparation and subsequent period of fieldwork, I was
faced with ethical considerations and issues that held personal implications for me. These are discussed in this chapter.

**Setting the scene for data collection**

Preparing for the field consisted largely of searching and reviewing the available literature. Unfortunately, insufficient descriptive literature on male street prostitution in Durban exists to provide an idea of the arena I had to enter to do fieldwork. The majority of articles dealing with male prostitution, and in particular street prostitution, focused entirely on quantitative data, biased in favour of bio-medical interpretation which had limited application for this research project. It was, however, possible to identify potential areas of enquiry. For example, several studies indicated that prostitutes have a higher than average rate of HIV infection, which points to unsafe sexual practices. What was not mentioned, however, was how the prostitutes contracted the infection. Although not stated explicitly, the general expected link of transmission was thought to be client-prostitute based.

In addition to doing a literature survey and review, I took my first tentative steps to identify locations and occasions where it would be possible to make contact with male street prostitutes. Once again I was directed by the literature. According to Gilles et al (1992:2) male prostitution, in certain cultures "...often occurs in parallel with the gay male cruising and cottaging scene in which men have brief, explicitly sexual contacts with other men in public toilets, the back rooms of certain bars, side streets, waste ground or secluded, usually urban sites".
Taking my cue from Gilles' (1992:2) observation, the first step was to make several cursory visits to well known gay bars and clubs in Durban for numerous discussions with patrons. Various sites were identified by gay men as venues where casual sex with other men may be procured and by Gilles' definition, these were all potential venues for investigation. The task was daunting. Yet, only two venues, South Beach and Beachwood, were positively identified by gay men as places where the services of male prostitutes could be found (Appendix E). South Beach was 'well known' for the preponderance of male prostitutes operating there regularly and exclusively, making it the 'obvious site' for conducting the research. Beachwood, the other venue where male prostitutes were reputed to ply their trade occasionally, was not such an exclusive area for commercial sex as the 'obvious site' at South Beach. Beachwood was seen to be more of a 'sex oasis' for gay men where they could meet other men for brief, explicitly sexual contact (Appendix E).

Having tentatively identified research sites, the next important part of preparing for entry into the field was to notify the relevant authorities, in this case the Narcotic Bureau of the South African Police Service, of my proposed fieldwork. Bearing in mind that research into hidden populations and sensitive issues, such as male street prostitution, pose very real physical danger and threat to the researcher (Lee: 1993:9-10), both my supervisor and I thought would it be wise to introduce me to the authorities to assess the degree of physical danger I may encounter. It would also afford me the opportunity to get a first-hand view of how the authorities approach and deal with prostitution, an illegal activity. More importantly, an introduction would enable me to ascertain areas (geographical) that the authorities knew where venues where male prostitutes could be contacted.
Identifying and selecting the research sites

Having identified potential sites for investigation, it was time identify those venues where male street prostitutes actually operated. I had no blueprint for identifying prostitutes amongst the other men who were at a venue seeking casual sex for no payment. At the end of the research I still have no such blueprint, but I have learnt to look for tell-tale signs which became more apparent after a period of time spent systematically observing the terrain and the actions of individuals.

The first venue I decided to visit was what gay men in Durban call “Queens Walk”, or South Beach as I will refer to it. The information available to me at the time pointed to this venue as the most likely area where I would be assured of being able to observe and meet male street prostitutes. It was a wise decision, since the activities of the prostitutes were more public here than any of the other reputed and actual venues (See Chapter 3 for more detailed information).

I had to spend several evenings observing the South Beach area from a strategic distance before I could start identifying recurrent behaviour patterns amongst some of the men who frequented the area. These patterns, described and discussed in full in Chapter 3, indicated to me that male prostitutes were indeed operating at South Beach. I made no attempt at this stage to make contact with them since I still had to go on a reconnoitre of the other potential venues. Only once I had sufficient indicators of which venues would be suitable as research sites, could I actively engage in the next planned stage, that is, entering the field and making contact with potential research participants.
Exploring these sites meant sitting in my vehicle for hours on end, watching, and trying to gauge if there were any visible activities, such as 'cruising' men trying to establish contact with other men that would lead to a sexual encounter). Only once I had observed some form of cruising, could that particular venue be put on a list of venues that had potential for male prostitute activities. Of the eleven venues initially considered possible research sites, only five were selected. At the remaining six venues, there was not enough cruising activity to warrant a closer investigation for possible prostitution activities.

Of the five venues, three were on the beachfront, one in a shopping complex (the toilets) and another the public toilets in the city centre. I spent many awkward hours (during the day) at these toilets, both at the shopping complex and the city centre. I started my investigation by taking up a position outside the toilet entrance from where I could observe all the people (men) who entered the toilets. At neither of the sites could I identify people who returned repeatedly - a characteristic of possible cruising.

Not being able to identify any regulars from observation only, the next phase was to enter the toilet area to try and establish whether any cruising was taking place inside. This part of the research was the most uncomfortable. Somehow it did not feel right to be loitering around in toilets and I soon ran out of ideas about how to keep a vigil without attracting any undue attention to my presence. For most of the time, I sat in one of the cubicles with the door fractionally ajar, looking at the men at the urinal to see if anyone was trying to establish eye contact with another. In addition, I would stand in the corner of the urinal and pretend to urinate, looking about to see what the other men are
doing. A last alternative was to wash my hands and observe what was going on behind me by looking into the mirror. Never have my hands been as clean as those two weeks I spent in the toilets!

I observed some degree of cruising in the toilets, but this was very unobtrusive and not as overt as at other better-known venues such as the bars, the clubs and the three beachfront sites. I came to the conclusion that there was insufficient indication that male prostitutes were operating at the toilets and thus eliminated these two venues as possible research sites. Later discussions with some of the research participants confirmed that male prostitutes seldom, if ever, visit these toilets with the intent to procure money for their sexual services.

Thus, through systematically visiting potential research venues it was possible to conclude that the three venues: South Beach, North Beach and Beachwood, were the most viable research sites (Appendix E). Unfortunately Beachwood, which is a secluded beach situated approximately 11 kilometres north of the inner city, has a history of violence directed at gay men which included two murders in recent years (see Chapter 3). Considering the safety factor and following, amongst others, the advice from the head of the Narcotic Bureau during our meeting prior to the start of the fieldwork, it was decided not to include Beachwood as a site for this research.

A note of clarification is, however, called for here. It is not intended to speculate or propose that it was the male prostitutes who were responsible for the violence against gay men who occasionally cruise at Beachwood. Acts of robbery, and break-ins to the vehicles of fishermen also occur. As such, it is possible to argue, as Lee does
(1993:10), that the researcher could face "anonymous danger" when she or he "...is exposed to otherwise avoidable danger simply from having to be in a dangerous setting for the research to be carried out". All three of the remaining possible research sites were to some degree, a 'dangerous setting'; Beachwood however more so than South and North Beaches.

Having identified South Beach positively as a research site, it was time to turn my focus to the North Beach site. This was well known amongst gay men as a venue to meet other men for brief explicit sexual encounters, yet, there was no indication or 'rumour' of prostitutes operating there. However, because of the high frequency with which gay men engaged in cruising at North Beach, it was also highly possible that prostitutes would be operating there if one considers Gilles' (1992:2) suggestion that male prostitution, in certain cultures "...often occurs in parallel with the gay male cruising and cottaging scene". In addition, Beachwood, a well-known cruising venue in the past, was reputed to have male prostitutes operating there occasionally; thus, it was not inconceivable that prostitutes would also be likely to operate at North Beach. The only question that remained to be answered was whether prostitutes actually did operate there.

Whereas it was possible to sit and observe the male prostitutes establishing contact with potential clients at South Beach, the same did not apply to North Beach. The difference in spatial layout between the two venues necessitated a different approach, as will be discussed in Chapter 3. Suffice to include for the record that confirmation of male prostitute activities at North Beach came from some of the research participants at South Beach, only after I had entered the field.
**Entering the field**

Having positively identified South Beach as a primary research site, and North Beach as a potential site, it was time to enter the field. Entry into a "hidden" population such as that of people engaged in prostitution, which is punishable by law and stigmatised in South Africa, proved to be more difficult and problematic than I had expected. At the time, very few ethnographies dealing with male prostitution existed which could have provided me with guidelines for entering the field and might have helped me avoid certain pitfalls which presented themselves. The only noteworthy qualitative study done in South Africa by 1994, i.e. Schurink et al (1993), provided pointers for entering the field, but provided very little discussion on methodology and the related problems one could anticipate.

According to Schurink (1993:9), various strategies for gaining entry into hidden populations and recruiting research participants have been developed and successfully used. These strategies vary from "...acting as a normal member of a deviant (sic) subculture or criminal group, by establishing contact with officially processed individuals (e.g. incarcerated prostitutes), advertising for volunteers in the media, offering a desired service to deviant (sic) people, word of mouth referrals and snowball sampling, to frequenting hangouts".

Ethical considerations negated acting as a member of the population to be studied, as a possible strategy to enter the field. The AASA (1987:3) guidelines on relations with research participants, and in particular obtaining informed consent
(section 3(ii)), clearly states that "...enquiry should be based as far as possible on the freely given informed consent of research participants". Pretending to be a male prostitute would have been a deception, which is morally and ethically unacceptable, and practically impossible to maintain over a long period of fieldwork.

A strategy to gain entry into the field that I did consider, as suggested by Schurink et al (1993:9), was to try and establish contact with men generally referred to by Schurink as "officially processed individuals", i.e., prostitutes who had been incarcerated. During the exploratory visit my supervisor and I had paid to the officer commanding the Narcotic Bureau, the possibility was raised of putting me in contact with a member of the unit, who would assist me in meeting some of the male prostitutes when and if they were arrested. This was agreed upon and I received a telephone call from the Narcotic Bureau member with whom I would liaise, several days after the meeting. He gave me the telephone number of a man who had been arrested for running a massage parlour from his flat. The Narcotic Bureau member told me that the person was awaiting my call and I wasted no time in calling him and setting up a time for an interview. Within two days I had another introduction to a man who was charged with prostitution, this time a streetwalker and a "repeat offender", according to the member of the Narcotic Bureau. I had two interviews with him, after which he failed to respond to any of my telephone calls.

Apart from these meetings, I had no other contact with the Narcotic Bureau and no more introductions either. The reason for this severance of communication I did and still do not know. What I do now know in retrospect, however, is that if I had established a more substantial working relationship with the Narcotic Bureau, it could possibly have
adversely effected and ultimately jeopardised the research, an issue dealt with later under a discussion of ethical issues.

There is no denying that using the strategy of building up contact with "officially processed individuals" (Schurink et al, 1993:9-10) might have its advantages, such as it being safer for a researcher than having to try to obtain the co-operation of prostitutes in unsavoury places and at irregular hours. However, for in-depth research into hidden populations, where the researcher has to spend a long period of time in the field and stay in close contact with the research participants, and where the issues investigated are of a secretive and sensitive nature, official sanction from the law enforcement authorities would have been suspect. Thus, whereas establishing contact with previously incarcerated members of the population as a means of entering the field might seem to afford an easy and safe option, the long-term risk to any subsequent trust-relationship between the researcher and the research participants would seriously be impaired and ethically suspect.

Advertising for volunteers in the media, as a strategy to enter the field, was another option I considered. The intention was to place an advert in the classified column of the daily newspapers and I even rented a post office box in anticipation of all the replies I was envisaging. Schurink (1993:10) went one step further and also involved a radio station in his recruitment drive.

The idea to advertise for research participants was, however, shelved and eventually abandoned for two reasons. Firstly, I should have placed the adverts prior to commencing with the phase of identifying research sites for it to have been successful
as a strategy to enter the field. In the research design, placing the advert was indeed scheduled, to take place prior to identifying possible research sites. However, once I had started exploratory visits to the gay bars and clubs and visiting all the potential sites, I became so engrossed in what I was doing that I did not take the time to sit back and see whether my research schedule was intact and operating according to plan. Such are the realities of fieldwork.

The idea of using adverts placed in the media, either the newspapers or radio, as a strategy to enter the field was abandoned when it became apparent to me in the early stage of the fieldwork, that this option would have drawn a limited response from the prostitutes. Not all of the prostitutes who participated in this research could read, and those that could read hardly ever reported reading newspapers. In addition, I would only have placed adverts in the English newspapers that are predominantly read by white people. Not placing the advert in a newspaper which has an exclusive Zulu speaking readership, would largely have excluded those research participants operating at North Beach, since it transpired as the research progressed, that they were more inclined to read the Zulu newspaper than the English ones. Also, very few of the prostitutes reported listening to the radio since the majority had no fixed abode and limited, if any access to radios. However, using media adverts as a strategy to enter the field when studying hidden populations could have value and contribute towards the researcher gaining entry into the field as it did for Schurink (1993:10). The only proviso is that the advertising should be done before entering the field and consideration should be given to cultural specifics of the target population.
What options and/or strategies to enter the field were then left? According to the list of strategies Schurink (1993:9-11) suggested and employed himself, the only feasible alternative I had was to 'frequent the hangout(s)'. So it was. What does it entail to 'frequent the hangout(s)'? Essentially, entering the field and making contact through this strategy means that the researcher would apply "...the same tactics a prospective client would use when desiring to make contact with commercial sex workers" (Schurink, 1993:10).

During the selection of the research sites, I had observed the broad patterns which prostitutes and potential clients went through (see Chapter 3). At South Beach, men who sought the service of prostitutes would drive past the place where the prostitutes stood and 'advertised' their availability. The prospective client would then drive past a second or even a third time before stopping his vehicle. The prostitute would then approach the potential client and enter into negotiations with him. If they reached an agreement, the prostitute would get into the car and leave with the client.

This pattern of making contact thus had to be emulated as Schurink (1993:10) suggested, and did. He would "...drive up and down the street or block a few times and wait for prostitutes to initiate contact". He would then "...listen as they spelled out details such as price, places and services available, after which he would inform them that he was not a prospective client but a researcher wishing to study the sex industry" (Schurink, 1993:10). Schurink found this strategy for entering the field to be highly

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³ At North Beach, as will be discussed in more detail, it was far more difficult to observe possible patterns of initiated contact between the male street prostitutes and their (potential) clients, than at South Beach.
successful since he mentions that the majority of the commercial sex workers included in his study were recruited in this way. I similarly found this strategy to be helpful.

**Entering the field at South Beach**

My first evening of frequenting the South Beach 'hangout' followed very much the same sequence as Schurink's. I drove up and down the promenade past the area marked 'G' on the South Beach map (Appendix F) where the prostitutes usually stood. Unlike the majority of the customers who usually stop in the areas 'M1-M4', I decided to stop at the area marked 'X'. No sooner had I stopped than young man who had been standing at what is referred to as the 'Centrepoint' (marked 'G') approached me.

His opening line became one of a handful of sociable queries with which I became familiar as the research progressed. Prostitutes who were direct would usually ask if I wanted 'company' or whether I was looking for 'business'. Others would first ask what the time was, whether I had a cigarette for them, or if I was new in town and looking for some 'fun'.

My replies to these approaches varied, but generally followed the same response as that of Schurink (1993:10); i.e. simply letting the conversation flow until the prostitutes directly offered sex for money. Only then would I, after refusing the offer, tell them that I was doing research and ask them whether we could talk for a while. On the first evening, not a single prostitute stayed for a talk. I resigned myself to the fact that entering the field is not something a researcher could expect to accomplish successfully overnight and decided to take the next best option and do observation. Previously, I had
observed the activities at South Beach from a discreet distance. Now, moving into the
field, I relocated my observation post (marked 'X'), right into the heart of the arena.
Parked there, I was in the position to observe virtually everything that happened at
South Beach from the safety and comfort of my vehicle. It also made my continued
presence known to the prostitutes who operated there.

**Entering the field at North Beach**

Entering the field at North Beach (Appendix G) required a variation on the same
theme of South Beach. In Chapter 3, I offer a detailed description of the differences
between the two venues. The way prostitutes and clients made contact and negotiated
sex for money constitutes one such difference between the two venues. The prostitutes
at North Beach usually approached the individual they had identified as a potential
client, and initiated some form of sociable conversation. As will transpire in Chapter 3,
the clients themselves hardly ever actively and overtly sought to make contact with the
prostitutes, as they do at South Beach.

As noted before, it was the research participants at South Beach who pointed out
to me, once I had secured their co-operation, that there were, indeed, prostitutes
operating at North Beach. It was, however, up to me to go and find out who, what,
where, when and why. Unlike at South Beach, I could not rely on observation alone from
my vehicle to give me some indication of the sequence followed by prospective clients
and prostitutes. This was because the cloakrooms were situated between the car park
and the area where men cruise, obscuring the view. I thus had to physically move into
the arena of activity and find the answers from inside.
I expected to be able to 'observe' with ease which actions and behaviours pointed towards prostitution. It soon became apparent that a different ethos operated at North Beach compared with South Beach. At North Beach, cruising, or men seeking casual explicit sex with other men, was the primary objective of the men who were there. At South Beach, a man seeking a brief explicit sexual encounter with another man was aware of the fact that he would have to pay for the encounter. At North Beach, it was not expected that the sexual contact would have to be paid for. This crucial difference is discussed in Chapter 3.

Whereas I had initially sat in my vehicle observing and making notes at South Beach, I could not do the same at North Beach. I entered the arena of activity without any visible sign of 'doing research', i.e., no note taking, no dictaphone, no questionnaires etc. At first, I spent hours at night sitting on the various canopy-covered benches (marked 'H1-H4'), observing the area, getting an idea of the terrain and what happened where.

Whilst I was attempting to establish the broad cruising patterns, I was repeatedly approached by some of the men at North Beach, seeking a casual sexual encounter. I was also approached by some of the prostitutes operating there, although I was at first unaware that they were prostitutes. The description and discussion of the modus operandi of the prostitutes at South and North Beach is dealt with in Chapter 3. Suffice to say here that I was, unknowingly, displaying the behavioural traits by which prostitutes at North Beach identified potential clients, and on that basis, they approached me. The traits prostitutes looked for in a potential customer were: a) a
single man who stayed in the arena of activity for a long time and who b) did not secure a sex partner after a lengthy period of being in the arena of activity, and finally, who c) was prepared to engage in conversation with them.

This last mentioned criterion may not seem significant until one recognises that the majority of men who went to North beach to seek casual sex were, like the men who went to South beach to seek commercial sex, white. The prostitutes who operated at South Beach are predominantly white, but the prostitutes who operated at North Beach are predominantly black.

Taking a holistic perspective, the historical racial divisions, which permeated South African society and still affect society, today, were, and still are, prevalent within the Durban gay community. At the time of the fieldwork, black men were still not publicly considered to be suitable sexual partners for white gay men, and the relatively low number of gay ‘mixed couples’, i.e. of different racial origins, testify to this racial prejudice. Bearing this prejudice in mind, many of the potential clients (white men) whom the black prostitutes approached with a sociable comment or request, responded in such a way as to make it clear to the prostitutes that their company was not required. Hence, the white man who was prepared to talk to the black prostitute was more likely to be a potential client than those who were not prepared to talk to them.

Establishing and securing co-operation

Establishing contact and securing co-operation differed once again between the two venues. As later discussions with research respondents at both the research sites
revealed, I was initially considered to be a threat to them. The reasons for this varied. Some of the respondents suspected me of being an undercover policeman. Others initially thought that I was a male prostitute who had the intention of taking away some of their customers. Others were simply confused by my presence, whilst at least one was convinced that I was a pervert trying to get sex from them (the prostitutes) without paying.

I was unaware of the precise nature of the distrust that awaited me when I entered the field and started attempting to establish contact with the prostitutes. At South Beach, I spent the first two or three weeks doing observation from my vehicle. My 'obvious' note taking confused and alternatively confirmed the suspicions that I was a police officer and my occasional use of a dictaphone during this time compounded the situation. The prostitutes could only see that I was talking into a small dark object from a distance, they could not see that I was talking into a dictaphone. This lead to the misconception that I was talking on a two-way radio system such as used by the police force.

Breaking through the barriers of suspicion and distrust was not easy and there was nothing I could do to prove that their fears were unfounded. In the end it was time which eroded the obstacles and allayed their fears, since my presence did not result in increased prosecution and I did not try to "steal the customers", as one respondent put it. Neither did I attempt to engage in any sexual acts whether for payment or not. Nothing in my behaviour could thus confirm or validate their suspicions.
After some time spent observing from my vehicle at South beach, I decided that it was time to make contact with the prostitutes. They had all, at one stage or another, approached me whilst I was sitting in my vehicle, wanting to know whether I wanted sex and whether I was prepared to pay for it. I declined and explained to them my reason for being there, i.e. to do research on male street prostitution and HIV/AIDS. They were all thus informed, right from the start that I was doing research.

I started approaching the prostitutes after observing that as the morning hours went by, less and less prostitutes were to be found at South Beach, and concomitantly, fewer potential clients would be driving by. I reasoned that the prostitutes might find it easier to talk to me when there were no other people in the vicinity. The very first prostitute I approached at South Beach was also the one who, at the time of my observations, arrived first and usually left last (see case study 001, Chapter 4). We spent a congenial couple of minutes making light conversation, sharing a cigarette (my last one) before I said goodbye and left the field for the evening. I was overjoyed because the ice had been broken.

As the research progressed, I found it increasingly easy to approach the prostitutes at all hours of the night, not waiting until the last one remained in the early hours of the morning. I remained, however, wary of approaching them at times when there were many clients in the area for fear of interfering with their opportunities to generate an income. In addition, at such 'busy' times it would have been easier for them to reject my attempts to strike up conversation. Establishing contact thus took time since I had to carefully assess whether my attempts would constitute undue intrusion or not. A lot depended on the timing of the informal and unstructured 'conversational' interviews.
At North Beach I did not approach the prostitutes, they approached me. Establishing contact thus depended entirely on them. As noted in my account here of entering the field at North Beach, my willingness to engage in light social conversation led those prostitutes, who initially considered me to be a potential client, to talk to me. Only after we had exhausted the options of polite conversation would either the prostitute ask whether I was there looking for sex, or I would ask whether he usually had sex there (at North Beach). Once the conversation had touched on the subject of sex, the way was paved to discuss in more detail the reason for my presence there, and I could see how far I could progress in asking and getting some agreement on the man’s participation in the research.

The majority of the prostitutes at both research sites readily agreed to talk to me about their lives and in many instances, were eager to do so. Not all my questions were always answered, but repeated contact with the majority ensured that I could ask them the same questions again and again, often reformulated. Whilst I asked many question, I also had to answer many, even those of a very personal nature. Considering that I wanted their answers, I had no option but to reciprocate.

Building a relationship of co-operation with those who participated in the study was, however, made difficult because it required time that was not always available. There was a high turnover of participants and, in some cases, a new arrival on the scene would move on to another destination after a day or two. Under such circumstances the best I could hope for was a once-off ‘conversational’ interview. Yet, I also encountered repeated contact with several prostitutes who spent the largest part of
the fieldwork period plying their trade at the research sites. With these participants, I managed to secure sufficient co-operation to allow me to compile a series of case studies (Chapters 4 and 5).

I do not know whether co-operation can be equated with trust. Consequently, I do not know whether I had engaged a relationship of trust with my research participants. At no time during the fieldwork did I ever discuss the concept of trust or refer to trust in my relationship with any of the respondents. Thus, if I should lay claim to having had their trust, I would be assuming it.

However, several events might point towards the existence, in varying degrees, of trusting relationships between the research participants and myself. For example, some of the key participants invited me to see where they stayed, and one introduced me to his girlfriend who was also a prostitute. Others trusted me enough to use drugs in my presence. From the onset I had made it clear to the prostitutes with whom I had established contact that I was bound by ethical codes of research conduct to protect their confidentiality (AASA, 1987:3). A final pointer indicating some measure of trust between the respondents and myself, was the way they answered questions of an intense personal and intimate nature.

Trust, however, is a bi-directional issue, and whereas I can only assume that the respondents trusted me, there is no doubt that I too displayed trust to the respondents. For example, there was the question of my physical safety. I often had to drive one of the participants who were nervous about being interviewed at the research sites, to another place. At such times I was physically at his mercy. Considering that one or more
of the prostitutes who operated at the research sites could have been involved in the murders of men seeking casual sex, going for a drive in order to interview them was a real risk. However, I had to trust whomever I was with, there was not much choice.

In as much as I trusted the respondents with my physical safety, I also trusted them to give me accurate information. Without accurate field data, none of the discussion and analysis of research problems and questions would have any value. To ensure that the answers were accurate, I repeated the questions at different times during different interviews, and correlated their answers with those given previously. In addition, I also offered the respondents my understanding of the answers they had given me over a period of time and asked them to confirm, correct or simply comment on my understanding. These feedback 'checking' sessions usually elicited more discussion on the issue which greatly enhanced my understanding of the data available and afforded me the opportunity of adjusting my understanding as the fieldwork progressed.

Collecting data

Collecting fieldwork data commenced the very first evening I walked into a gay bar with the intent of asking patrons where I could contact male street prostitutes. In addition, observation at various possible research sites prior to entering the field also added to my growing database. An example of such observation was recording which men were at South Beach regularly, both those on foot and those in cars. Not knowing names I simply noted and indexed observable characteristics of individuals such as their dress, approximate height, colour of hair, etc.
As for the potential clients driving by in their vehicles, I drew up an index of the model of the vehicle, the model, colour and registration number and the times when they arrived at the research site. Through such systematic observation it gradually became possible to identify individuals who were in the field regularly (both prostitutes and potential clients). Focusing the observation on those individuals who featured with regularity assisted me in noting frequent recurrent behaviour and interaction patterns between the prostitutes, as well as between the prostitutes and their potential clients.

Once the focus of the research had shifted to generating more in-depth data within the research settings, observation became a secondary mechanism for data collection. With the shift of focus and research environment, data was collected primarily through the use of informal, unstructured 'conversational' interviews. Using an aide memoir, the time honoured stalwart mechanism of anthropological enquiry, I systematically asked questions that related to the key issues I was investigating. As the research progressed, it was possible to proceed with constructing profiles of the respondents, and index these under the common aide memoir headings in each case study.

The interviews were conducted at different places, both within and outside the two research sites. At South beach, the majority of the interviews were conducted inside my vehicle at the research site, whereas at North Beach, I conducted the majority of the interviews away from the research site. Why the difference? At South Beach, prostitution is far more overt and visible than at North Beach and the research

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4 Keeping an index of the vehicle registration numbers and other identifying details of possible clients raised a confidentiality issue that is discussed in more detail later.
participants did not seem to be uncomfortable being interviewed in public on site. On the other hand, the prostitutes at North beach frequently requested that we "go talk somewhere else". Since I always had to consider my physical safety, I always decided where we should go, ensuring that there were other people, at least within calling distance, should my respondent have threatened me. Many times, I simply drove around the city with the respondent, talking and asking questions.

At the beginning of the fieldwork, I requested permission from the respondents at both the sites to tape record our conversations. However, the overwhelming resistance I encountered left me no with option but to reconsider using a dictaphone and to rely largely on note taking. Whereas note taking at South Beach was relatively easy since the vehicle was stationary, the same cannot be said for interviewing the North beach respondents whilst driving. Practice did not make perfect in my case, but I soon became adept at remembering key aspects of our conversation, which I then noted in my field notes soon after taking the respondent back to the research site. Fortunately, having repeat contacts afforded me the opportunity to update the information gathered previously, ensuring that the end picture was as clear as possible.

Apart from gathering field-data through the interviews and observations, whilst continuing with an ongoing-literature review, I also explored alternative sources of information such as perusing the popular media (printed and audio-visual). From radio talk shows, television documentary programs and newspaper articles, it was possible to gauge how prostitution was viewed, presented and influenced by mainstream opinion.
An integral part of my study of male street prostitution was considering the relationship between prostitution and the HIV/AIDS epidemic. Valuable information was forthcoming through attending and presenting preliminary findings at three seminars aimed particularly at discussing prostitution in Durban and KwaZulu-Natal. In addition, lengthy discussions with internationally acknowledged researchers in the fields of human sexuality, prostitution and HIV/AIDS, further enhanced my data and contributed immensely to my understanding of prostitution.

Through my involvement in the activities of agencies and institutions which are actively involved in sexual health education, I also gained a better understanding of HIV/AIDS and how prostitution affects and is affected by the spread of the disease. In Durban, I advised ATIC (the AIDS Training and Information Centre), an agency of the City Health Department, on possible approaches to HIV/AIDS intervention in the local gay community.

In addition, I also worked as a volunteer with the Aids Foundation of South Africa (Durban branch) in such diverse fields as fund-raising, and assisting people dying of AIDS to gain admittance to hospice institutions in Durban. My association with the AIDS foundation gave me the necessary macro perspective, which was absolutely vital to my understanding and contextualisation of HIV/AIDS, and to a lesser degree, of prostitution.

1) Consultative Medical Research Council Seminar, 8 August, 1994, held in Durban to explore the range of prostitution as it occurs in Durban with the view to co-ordinating possible future HIV intervention.
2) Consultative Medical Research Council Seminar, 25 May, 1995, held in Durban to explore the range of prostitution in KwaZulu Natal with the view to co-ordinating possible future HIV intervention.
3) Consultative ATICC & AMREF Seminar, 14 August, 1995, held in Pietermaritzburg to discuss sex work in the Natal Midlands.
To "sample" or not

I must make it absolutely clear that I made active effort to draw a 'sample' from the total population of male street prostitutes in Durban. I simply approached as many male street prostitutes as I could, and had to be content with the relationships I managed to build up with those willing to participate in the research. There was no way I could 'select' who would be approached and who not, since there was only a small number of male street prostitutes operating at the two sites at any given time. Also, gaining their confidence was no easy matter resulting in further 'self-selection' on their part.

Prior to entry into the field, I had planned to use networking as a means of getting more participants involved in the research. Networking, also known as 'snowball sampling' and more recently 'multiplicity sampling' is thought to have "considerable potential for the sampling of rare populations" (Lee, 1993:65) and that it is ubiquitous in the study of hidden populations because it often represents the only way of gathering a sample. As I was to find out as the research progressed, networking did not provide me with the means to increase the number of participants as I had expected. The reason only became evident later on during the fieldwork.

For networking to be successful, "the inclusion of additional sample elements depends on the social ties between members of the study population, as well as on the links which exist between them and the wider population" (Lee, 1993:66). In this study, networking was not successful because, as the data started to reflect, those individuals who participated in the research were very often unattached individuals, constantly on
the move and with little, if any, ongoing or meaningful contact with other prostitutes and/or other members of society. The absence of a 'referral chain' thus rendered networking inappropriate as a method of increasing the number of research participants.

All the participants were contacted at the two primary research areas which means that the sampling method employed was what is referred to as 'outcropping', a metaphor taken by Weber from geology "to refer to the opportunistic exploitation of data points which are readily available" (Lee, 1993:69). Outcropping, in essence, means to find a specific area or site where members of the population who are to be studied congregate, and then to study them at the location.

Methodological limitations and fieldwork problems

i) The issue of 'community'

Doing fieldwork has been defined as "...research undertaken by the anthropologist in a given ethnographic area or community" (Seymour-Smith, 1986:117). The concept of community, however, has a range of meanings in Social Anthropology and sociology. A community, in it's broadest sense, "...may refer to any group of persons united by a community of interests" (Seymour-Smith, 1986:46). In it's more limited anthropological and sociological sense, community is restricted to mean "...a local community, generally fairly small-scale and often described as 'traditional' or 'closed' " (Seymour-Smith, 1986:46). In addition, community could further be described as being identified by virtue of "...face to face personal relations in a small-scale social network or residential settlement" (Seymour-Smith, 1986:46).
The first methodological issue I had to grapple with was to define whether I was going to study a community or a number of individuals who share a common interest and engage in the above mentioned "face to face personal relations". Insufficient and contradicting literature existed, yet there was strong indications that my initial idea of studying the 'male street prostitute community' might have to be revised. The concept of 'community' as defined in the paragraph above, proved to be a problematic starting point that I had to deal with before entering the field.

It was problematic because any concept of community as a residential settlement was out of the question when attempting to apply it to male street prostitution as it occurs in Durban, since the prostitutes did not all stay in close proximity. They only came into contact with each other by virtue of gathering at the same venue to ply their trade. As such, the concept of a prostitute community would have to be formulated more along the line of 'community' meaning "...face to face personal relations in a small-scale social network." (Seymour-Smith, 1986:46). Available literature dealing with ethnographic research into male street prostitution, however, presents conflicting views on the issue of whether networks exist between male street prostitutes or not. This is a very important point to consider since, by implication, a lack of networks would negate the concept of a male street prostitute community.

Comparative ethnographic studies, with the exception of the Cape Town study by Moulder (1993), have drawn on research populations from a wide range of countries and these concomitantly reflect different cultural influences. Yet, no attempt has been made to discuss the concept of a male prostitute community or to describe forms of
networks. Is it then appropriate to assume that the lack of discussion is due to the absence of such networks or communities?

Although Moulder (1993) does not attempt any analysis or comment on the issue of whether prostitutes constitute some form of community or not, it is possible to deduce from his description of male prostitution in Cape Town that networks, albeit limited, do exist. For example, he wrote that "some individuals would organise with others a particular evening that sex work would take place, sometimes well in advance" (1993:31, 51-52). Another comment Moulder (1993:43-44) makes is that the prostitutes occasionally talked about others, divulging information indicating that they know a lot about each other. In addition, he refers to the prostitutes sharing their drugs and occasionally food and drinks, and elsewhere describes how some share accommodation (1993:46-47).

Being faced with contradictory possibilities, it became evident that the question of whether it is possible to contextualise and talk of male street prostitution in terms of 'community' would only be answered once the fieldwork has proceeded sufficiently to make an informed opinion. As the fieldwork progressed, it became apparent that there was no noticeable community when referring to male street prostitution in Durban. The social anthropological ideal is for the researcher to go on extended periods of fieldwork in which he or she "...should attempt to immerse him or herself in the daily life of the people studied, thus minimising the interfering effect of his or her presence and permitting a full appreciation of the cultural meanings and social structure of the group" (Seymour-Smith, 1986:216).
Not having an identifiable community geographically circumscribed, meant that I could not go and live within the community I was studying, as the ideal would have it. Not being able to stay within the community researched inevitably meant that the data generated was done over staggered periods of time rather than on a continuous basis. In the process, many opportunities were lost to gather information that would otherwise have been included to broaden the picture available to the researcher.

In the current study, I had to compensate for the discontinuity in data gathering through participant observation by spending much more time in the field than had been made provision for, repeatedly asking the same directed questions to check and cross-check against previous data. Thus, whilst the inability to stay in the community studied presented this study with a major methodological limitation, sufficient in-depth data was forthcoming to warrant having employed participant observation as the primary methodological technique for this research.

ii) Limits to (participant) observation

Inasmuch as the methodology used in this research is referred to as participant-observation, the reality dictated that there were limited avenues of participation open to me. Not participating in the activities of the respondents, i.e. living a life on the street, actively engaging in prostitution myself, or being present whilst they engage in sexual acts with clients, forced me to rely solely on the respondents for data and an understanding of prostitution. What's more, there were limited ways of corroborating the validity of their reports or my understanding.
Another problem with employing (participant) observation as methodology for this research, and any other research into hidden populations, was the potential threat to my personal safety that I had to face constantly. Yancey and Rainwater (in Lee, 1993:10) distinguish between two types of physical danger facing the researcher when doing research on sensitive topics, the "presentational" and the "anonymous". Presentational danger arises when "the researcher's presence or action evoke aggression, hostility or violence from those within the setting". Anonymous danger arise "simply from having to be in a dangerous setting for the research to be carried out" (Lee, 1993:10).

During the fieldwork period of this research I was exposed to both presentational and anonymous danger. The presentational danger, which was hardly ever overt, came in the form of some of the prostitutes initially opposing my presence at the research sites. I was seen as a potential threat to them, particularly so since some viewed me as an undercover law enforcement officer. However, my continued presence over a long period of time without incurring undue police harassment allayed this suspicion. An off-duty policeman who was well known to the prostitutes at South Beach also harassed me. This incident, witnessed by the prostitutes finally dispelled any misgivings they had regarding my intentions.

Fortunately, the presentational danger I faced was largely non-violent, with the exception of one of the key informants at North Beach who occasionally showed signs of hostility and aggression towards me and the other prostitutes who operated there. He would usually apologise the next time we saw each other and blame his behaviour on alcohol and drugs (or the lack thereof), but I did become very wary of him after he
threatened me directly with physical violence one evening when he was desperate for money.

As for facing anonymous danger, the research sites were both situated in areas where murders, mugging and robberies had taken place whilst the research was in progress. Due to having to extend my fieldwork to compensate for the staggered data collection, my extended presence at these sites meant extended exposure to such dangers. I too eventually became part of the statistics when I was assaulted and mugged at North beach one morning whilst doing fieldwork and was relieved of my watch, wallet, shoes and shirt at knifepoint. I consider myself fortunate to be alive and unharmed, others were not so lucky.

Despite the dangers involved in doing participant-observation when researching hidden populations and sensitive topics, the depth and quality of the data gathered does somehow compensate for the risk. Other researchers in the field (Schurink, 1993; Moulder, 1993; Bloor et al, 1990; Pleak and Meyer-Bahlburg, 1990) circumvented these dangers by working in pairs which provides the most effective solution to the direct dangers facing the researcher.

Unfortunately, the research grant available to me was hardly sufficient to pay for the University fees and there was no way I could afford to pay somebody to go into the field with me. I would not, however, in retrospect, go back into such a field again if I do not have somebody with me to minimise the dangers that present themselves, both in the presentational and anonymous sense.
**ETHICAL ISSUES**

One of the ethical issues I had to deal with was the AASA directive (1987:4) of "fair return for assistance" where we as Social Anthropologists are urged not to exploit research participants, and to reward them for their help and services. Despite a constant request for money "to help out a bit" I seldom acceded to the request. Various reasons prompted me not to give out money whilst doing research. First and foremost, I could not afford 'interview fees' considering that I had eighteen months of fieldwork where I would make contact with and 'interview' at least one respondent per day.

Secondly, giving money to the respondents could have been perceived as informal payment for the interview that would have brought with it a host of complications. For instance, there would be doubt whether they were parting with information for the sake of the money and thus have said things they thought the researcher might want to hear. In addition, I also reasoned that if I gave money to one, all the others would find out and expect the same. Also, if I had given money to one respondent once, he might have expected money every time we talked (read 'interview'). Considering the complications that thus could have arisen, I decided to circumvent the possible negative impact that giving money to the respondents might have had by being consistent in not giving money to anyone.

Whenever I asked a respondent for consent to include him in the research, I made it clear that I was not in a position to offer him an interview fee, and I acknowledged that he would be losing valuable time by being with me when he could be earning money. None of the respondents, however, objected or even requested a
formal interview fee. Where and when it was possible, I tried to give payment in kind. I inevitably shared my midnight lunch with whomever I was talking to (interviewing) and occasionally I would take the respondent with me to a nearby roadhouse and order some soft drinks and cigarettes (the latter were always in high demand amongst the prostitutes). In addition, I often gave them lifts home and, on occasion, paid for some of the respondents who were destitute, for overnight accommodation at a youth hostel when the weather was extremely foul.

Another ethical issue I had to take into consideration whilst in the field was "protecting the physical, social and psychological well-being of those who participate in the study and to safeguard their rights, interests sensitivities and privacy" (AASA, 1987:2). Considering that prostitution is illegal in South Africa, research into male prostitution carried with it the potential to compromise the anonymity of the research participants. It was no secret that male prostitutes operated South Beach, and many members of the gay community, and police, would be able to identify individuals as male prostitutes by virtue of where they stand or sit, their body language etc (see Chapter 3). Despite members of the public and the police being able to 'identify' an individual as a male prostitute, there was no 'proof'. However, once a male prostitute had been interviewed that situation changed and proof then existed in the form of my field notes.

Another issue of concern to me, during the initial phase of the research, was the register that I had kept detailing the model, colour and registration numbers of vehicles that were frequently observed in the research area. I did not ask the permission of the owners, whom I suspected were potential clients, and the potential for a breach of confidentiality existed should the police have gained access to the register. The register,
which did not form part of my fieldnotes, was destroyed after I had made successful contact with the research respondents, and relied on them to indicate to me who the potential clients were. The register had no further purpose.

Following the comment on "Legal and administrative constraints" in the AASA (1987:2) ethical guide pamphlet, my concern was that my field notes could, theoretically, have been requested by the police in the prosecution of suspected male prostitutes who operated at the two venues studied. Legally, I had no power to resist such a request and my supervisor and I therefore decided to visit the head of the police unit dealing with prostitution and other activities such as narcotics, to discuss non-interference in my research by their department. I am indebted to the head of this unit for honouring their undertaking not to intrude in my research process, since it enabled me to assure the research participants, truthfully, that the notes and information generated by the research would not find their way into the hands of the police and lead to their exposure.

Another confidentiality issue I had to face, as mentioned earlier in this chapter, was using research respondents whom the local police had put me in contact with. This way of recruiting research participants certainly does have advantages, but the potential also existed for compromising the integrity of this research. The other research participants could have suspected collusion between myself and the police services if it had been known that I had included, in Schurink's (1993:9) mentioned "officially processed individuals", and thus have refused to continue their participation for fear of exposure. In addition, the inclusion of research participants who were introduced by the police also cast a doubt about the "volunteer" nature of their participation. There was no
way to be sure whether they were participating under duress, which I might have been unaware of.

However, despite my earlier misgivings about the added ethical constraints associated with doing research on sensitive issues such as male prostitution, I did not perceive the fieldwork as particularly problematic and stressful from an ethical point of view. Considering the expectations of researchers as Bolton (1992), with regard to the degree of participation which is ideally required of a researcher in the field of sex research, my fieldwork was comparatively mild and devoid of the exotic, if not the erotic.

How then, one could ask, if I did not experience what male prostitution is about through intense participation, do I answer the question of reliability and validity? Both are important factors to bear in mind when determining the ultimate ethical consideration - that of representing data to colleagues, respondents and the public at large. I do not know the answer to this question, and I seriously doubt if there is one.

**Personal and emotional implications of fieldwork**

Bearing in mind the final comment on ethical considerations (AASA, 1987:8) that "research can never be entirely objective" but that Anthropologists should nevertheless "strive for objectivity and be open about known barriers" and be "careful to state any significant limitations on their findings and interpretations", I have included a sub-heading dealing with the personal and emotional implications of doing my fieldwork. The reason for doing so is that constraints and ethical issues do not only arise from
structural and 'outside factors', but also from the world-view which the researcher takes with him or herself when entering the field.

Since the object of study was male prostitution, the first question I had to ask myself before entering the field was simple and straightforward: what bias do I harbour? Having been brought up in an Afrikaner home in the Northern part of the country, my world-view was shaped largely by the governing 'Christian-National' social principles, mores and values of the time. Within this perspective, prostitution, as with all other forms of social 'deviance' (e.g. drug use, alternative sexual orientation, alternative religion, etc.) was seen as 'evil', an agent of 'moral decay' and inevitably, part of the Communist plot to take over the country! Until the time I left school, I shared this view.

Exposure to a bigger world than the narrow provincial strip I had grown up in, brought with it exposure to the realities of the world which did not conform to my world-view. My journey of discovery had begun. A journey which I am still engaged in and probably will be for the rest of my life. Having confronted some of the fundamental tenets of my upbringing, my life and world-view altered and I comfortably slipped into a life of that very same 'deviance' I had earlier believed is 'unhealthy'. The turning point was an awareness and acceptance of my own sexual orientation which was socially unacceptable at the time, today a little less so.

Venturing into an alternative sexual orientated sub-culture exposed me not only to a different lifestyle but I also met other people who had, compared to me, a very liberal view on sex and sexuality. I learnt more about sex than I had ever thought possible, through participation, pornography and discussions with other members of the
gay community. It was the early 1980's, sex was liberating and AIDS merely an issue which affected American and European gay men.

During this process of sexual discovery, I inevitably got to know more about prostitution, but still remained morally critical of the individuals who were involved, either as prostitute or client. Despite the liberated view on sex shared by most, if not all of the members of the gay community in South Africa, male prostitution was still viewed negatively and I was no exception.

The view I had held of male prostitutes when entering the field was one of people who were largely dishonest, dangerous and dirty. My judgement was based on the stories heard over the years from other members of the gay community, what I had read in the popular media and the chance encounters I had had with one or two male prostitutes in the past. The literature review I had done prior to entering the field did not change my attitude, since most of the information was epidemiological in nature and not conducive to trying to form some idea of what male prostitutes were like. It was the male prostitutes themselves that altered my understanding of their activities, feelings, fears, aspirations and despair.

There was no single moment that I can recall when I transcended the limitations of my prejudice and bias into the realm of understanding and empathy. The process was gradual but is by no means complete because I still harbour some prejudice. It is still a matter of 'them' and 'me', and there still exists a divide between us. What the research did was provide me with a bridge where we could at least meet halfway. There was never a question of either party passing over to the other side.
Lest the reader be left with a rosier picture than is warranted, let me add, in conclusion, that the fieldwork was done at some cost to me. Not living in the community being studied, and being divorced from my home-life, meant that I had to live two desynchronised lives. The male prostitutes operated largely at night, from sunset to sunrise and I had to be in the field at these times. I went home when other people were going to work. This was a greater adjustment than I had anticipated.

At home, I was subjected to the demands of ‘normal hours’ whilst trying to snatch some sleep. That is, keeping the household functioning, getting used to and renovating a newly bought home, and providing for quality time to spend with my partner and our pets which forms the nucleus of my daily existence, security and affection. In addition, I had to liaise with my supervisor during ‘normal hours’. I thus constantly had to switch between ‘normal hours’ and ‘field hours’. In the process, my sense of order and routine was severely tested and tried, and I started to feel like a refugee, being ‘betwixt and between’. This ‘being in limbo’ extended into my social life which was turned upside-down and it felt at times as if I was losing touch with reality.

Finally, investigating the arena of male prostitution brought me into daily contact with tales of poverty, hopelessness, despair and desperation. In the long run, my ability to remain positive amidst such a barrage of negativity became severely eroded. My outlook on life gradually became gloomier and laughter became a luxury in which I seldom had the opportunity to indulge in. It is only now, in retrospect that I see how the input and support I got from my partner, supervisor and friends steered me clear of gazing too deeply into my depressing research navel.
Conclusion

My experience of fieldwork during this research validated my decision to apply (limited) participant observation as method of gathering data, despite its limitations. Participant observation allowed me to familiarise myself intimately with the arena within which male street prostitutes plied their trade. In addition, doing (limited) participant observation over an extended period of time, and conducting numerous ethnographic interviews with the respondents, gave me the opportunity to gain an in-depth understanding of the lives of the prostitutes, their views on life, and the physical and emotional environment in which they eked out a survival living. It is to the physical arena in which male prostitutes in Durban plied their trade during the fieldwork that we turn to now for description and discussion.
CHAPTER THREE: THE RESEARCH FIELD

In this chapter a description is given of the research field in which the male street prostitutes in Durban operated. A comparison is drawn between the two research sites, describing and discussing the spatial layout, number of prostitutes that operated there during the fieldwork and their activity times. In addition, I discuss issues such as the racial composition at the sites, the language and terminology used by the prostitutes, the social interaction amongst the prostitutes as well as the sexual exchange with clients.

Categorising male prostitution is no easy task. Those involved in the study of male prostitution, both in South Africa and overseas, delineate the profession into either two or three categories. Those proponents of the three level typology, such as Schurink et al (1993:4) describe the three categories as: i) "non exclusive, independent prostitutes" who engage in 'street walking', hanging around clubs and bars and other similar entertainment venues and who accept all paying customers, (ii) "exclusive, independent prostitutes" who work independently from home and/or other upmarket sites and limit their sexual services to a small and exclusive clientele, (iii) "non exclusive, organisational prostitutes" who work in and for brothels, escort agencies and massage parlours.

Those who follow the two-level typology, as do West and De Villiers (1992:XVII), propose that "...the first group, which we have called street workers ... utilise face-to-face encounters with clients in public places such as cruising areas, arcades, theatres,
bookstores featuring erotica and gay bars. The second group, basically off-street workers, they refer to as "call men", a term that includes 'erotic masseurs', and supposed 'models' and escorts". The latter category can be subdivided into those who work for agencies and those who are self employed but make contact with clients by arrangement and not by chance. This categorisation combines Schurink's second and third categories.

I have found the three-level typology which draws a distinction between a) informal street workers, or Schurink's 'non exclusive independent prostitutes, b) informal 'call men', and c) 'formal sector sex workers', to be useful. Both the first two categories fall within the sphere of the informal economy, whereas the third category is part of the formal economy. The focus of this study is, however, exclusively on the informal street trade in sex, with particular emphasis on how it occurred in Durban. It must be stressed that all three levels of male prostitution proposed in the above discussion occur in Durban, with the 'call men' who operate from cell phones and fixed abodes but independent of escort agency, a recent rising phenomenon on the male commercial sex work scene.

THE 'GEOGRAPHY' OF MALE STREET PROSTITUTION IN DURBAN

Durban is both a major commercial port in South Africa and a popular holiday destination for both local and international tourists (Appendix H). Fanning out from the harbour and beachfront area, the port, tourist and inner city areas are encircled by suburbs that were historically inhabited by white citizens. Outside these predominately
white suburban areas, follow Indian and black suburbs, industrial and semi-industrial areas, and increasingly dispersed in between them, informal settlements.

Both male and female prostitution in Durban range from the 'formal' to the 'informal', from 'full-time' to 'part-time', from the 'obvious' to the 'discreet'. The idiom in which prostitutes in Durban is discussed is, according to Preston-Whyte et al (1996:4), usually western and gendered, focussing on the 'red light district' of the Point area that links the harbour with the popular tourist orientated Beach front area, known as the 'Golden Mile'. Research in the Durban, however, has shown prostitution to take place in suburban as well as industrial areas. Mindful of the fact that prostitution in Durban is diverse and widespread, this research, however, has focussed only on male street prostitution as it occurred in the Beachfront area, at two sites situated at the uppermost and lowermost reaches of the Golden Mile (Appendix E).

Several places in Durban were mentioned by a newspaper report (Sunday Times, October 8, 1996) as venues where prostitutes were reputed to operate. Of the eight mentioned venues, two were areas confirmed by this study where a high density, relatively speaking, of male street prostitutes were to be found operating consistently, and one venue where a relatively low density of male street prostitutes operated occasionally.

The first of the two principal venues was often referred to as "101", but was also known as "Queens Walk" and/or "The Wall" in the gay community, henceforth to be referred to as "South Beach". The second venue was "Battery Beach" and the adjacent "Snake Park" area, collectively referred to as "North Beach" in this study. The third site,
"Virginia Beach", was known in the gay community and amongst the male street prostitutes as "Beachwood", and had the most erratic and sparse density of prostitutes operating, of the three areas (Appendix E).

As noted in the previous chapter, of the three sites, only North Beach and South Beach were selected as research sites. Beachwood had a history of violence directed at gay men and was considered to be too dangerous to include in this study.

**Historical rise and fall of sex oasis popularity**

The history of male street prostitution in Durban has not been recorded or documented before. However, discussions with numerous long time members of the gay community revealed that the emergence of an openly male street prostitution scene is a phenomenon which can be traced back approximately some ten to fifteen years (mid 80's). There is no denial that male prostitution has been an ongoing feature of gay life, but with the difference that it was very subtle and, unlike now, not very public.

By the mid 1970's, Beachwood was firmly established as a sex oasis where men would go to meet other men for explicit sexual contact. Male prostitutes frequented the area discreetly but seldom "offended the other men" who went cruising there. In the beginning of the 1980's, more and more men who sought sexual contact with other men started going to South Beach at night and North Beach by day, bringing the core of the sex oasis to the periphery of the vibrant tourist orientated beach-front. Two reasons were most likely to have facilitated the emergence of these two alternative sex oases. Firstly, as Beachwood became increasingly known as a man-to-man sex oasis, more
and more incidents of 'gay-bashing' started to take place and after a few murders in the area, of known gay men, Beachwood was considered too dangerous to go to at night.

Another reason for the emergence of North Beach and South Beach as alternative sex oases to Beachwood, was that male homosexuality started to become more visible and more gay men entered the open social arena than before. They were not only more visible than previous generations of gay men but also more liberated, despite the repressive state laws that governed homosexual behaviour. Cruising at North Beach and South Beach became a statement that made the presence of homosexuals known.

Whereas South Beach became known as a cruising area at night, North Beach on the other hand emerged as a predominantly daytime sex oasis. By the mid 1980's, however, North Beach became increasingly popular as both a daytime and night-time sex oasis. The reason for the loss of interest in South Beach as a sex oasis amongst gay men has been attributed to the arrival, inconspicuous at first, and then more overt, of male street prostitutes.

**COMPARISON: SOUTH BEACH AND NORTH BEACH**

Despite both South and North Beach having been known as sex oases where men made explicit sexual contact with other men, and both having provided a venue where male street prostitutes operated, there were other similarities and differences between these two principal venues which allow for description and discussion.
Briefly, key similarities between the two sites were: a) both sites were situated in the open at the two opposite sides of Durban’s “Golden Mile”, the premier holiday area of the city, and both sites are adjacent to the beach (Appendix E), b) during fieldwork, a maximum of only three to four prostitutes operated at any given time, c) working hours were between sunset (16h00) and early morning (04h00), and d) the prostitutes were all aged between 18 and 32 years.

Key differences between the two sites were:

a) the prostitute population was more stable and static at North Beach, whereas at South Beach there was a high turnover of prostitutes,
b) the South Beach prostitutes were almost exclusively white, whereas the population at North Beach were largely, but not exclusively black,
c) the prostitutes at South Beach were largely Afrikaans speaking, whereas the majority of prostitutes at North Beach spoke Zulu,
d) the prostitutes at North Beach had a higher level of social interaction with each other than their South Beach counterparts,
e) the prostitutes at South Beach approached and negotiated their services with their clients directly and openly, whilst those at North Beach were far more subtle and indirect,
f) South Beach clients were ‘regulars’, whereas clients at North Beach could be considered to have been ‘accidental’ (see later text for description and discussion),
g) fees for similar sex acts were higher at South Beach than at North Beach,
h) the respondents at South Beach generated more money than those at North Beach.
One of the major differences between the two venues, however, was that South Beach was generally well known as a venue where the services of male prostitutes could be procured. In addition, both prostitutes and their clients shared an understanding, based on the regularity of the contact between them, of the intention and sequence followed to initiate contact. At North Beach, such an understanding did not appear to be shared by prostitutes and clients since it was not known as a venue where prostitutes usually operated. Men did not, as a rule, go to North Beach if they wanted to procure the service of a prostitute, they went there to meet other men for casual sex that did not (intentionally) involve the exchange of money.

Unlike South Beach, where the prostitutes sat or stood and waited for the client to come to them as suppliers of a service, their North Beach counterparts, as suppliers of a sexual service, had to actively generate a demand. We thus have an interesting diversity in the style of approaching the negotiation and supply of sexual services with clients, which highlighted, as became apparent, that male street prostitution is not homogenous in Durban.

The physical environment

i) Spatial layout

Of South Beach, Reynolds (1993:116) writes, in an anthology of lesbian and gay writing from South Africa, that ".... on the southernmost end of the Marine Parade just before the breakwater at the entrance to the harbour lies a wide stretch of grass under
palms, edged by a rough stone wall. 'Queen's Walk' or 'The Wall' as it is known, is a pleasant moonlit promenade popular with lovers, strollers and children. But The Wall has another secret life, secret meanings. It is a kind of Masonic handshake, a secret territory in the face of the oblivious majority. Its existence is communicated as though by instinct alone, drawing men to the edge of the sea.”

The total area known as 'Queens Walk' or simply 'The Wall' covers approximately 200 m² at the most southern end of the lower Marine Parade. The majority of activities centred around the 'Centrepoint' or 'Showcase' marked 'G' on the map (Appendix F) where the prostitutes stood and 'advertised' their availability, and watched the cars as they drove by for signs which would indicate that the driver might be a client. The area was well lit at night.

North Beach, like South Beach, was a peripheral venue, situated at the northern most end of the Marine Parade. The area covered approximately 400 m² of terrain, and consisted of ablution buildings (locked at night) outside which the prostitutes sat (marked 'B', Appendix G), watching men cruising up and down in front of the canopy covered benches (marked 'H1-H4'). On the southern side of the ablution block was an open lawn where men cruised (marked 'F') and still further south, a dark beach (marked 'B1') where men had sex with other men.

ii) Number of operating male prostitutes

The number of male street prostitutes that operated at South Beach fluctuated constantly. Several evenings were recorded when there were no prostitutes operating in
the area. When prostitutes did operate at the research sites, numbers fluctuated, largely according to the day of the week, the time of the month and the seasons. Friday, Saturday and Sunday were considered the 'best' days by the prostitutes for securing clients, particularly during month-ends.

Whereas fluctuation according to time of the week and the month was largely due to the availability of potential clients, the seasonal fluctuation was the opposite. During the late autumn to early spring, South Beach played host to a moderate influx of homeless people from Johannesburg and Cape Town, who sought relief from the extreme winter weather conditions there. At these times, there were more male street prostitutes operating at South Beach than at other times. In addition, some male prostitutes from Johannesburg came to Durban during December when many tourists, particularly from Gauteng, arrived for the annual Christmas holiday.

There was thus no 'total population' of male street prostitutes operating in Durban since they constituted a continuous shifting population. Out of a possible approximately thirty candidates, a total of twenty one (confirmed) male prostitutes were observed and recorded over the 24 month period of fieldwork at South Beach. Sixteen of the prostitutes who operated there were contacted more than once, with ten of the participants having been contacted several times. Four of the respondents eventually became 'key informants' with whom I had built up considerable rapport during the fieldwork.

In contrast, the prostitute population at North Beach was smaller, and more static, than at South Beach. During the periods of fieldwork, thirteen prostitutes were
observed and/or contacted, and multiple contact was made with eight respondents. Three of the eight research participants became key participants. Unlike South Beach, where the number of prostitutes fluctuated, the population at North Beach was more static. In addition, those prostitutes who migrated from Johannesburg and Cape Town were not found to operate at North Beach, only at South Beach.

iii) Activity times

The male street prostitutes at South Beach usually made their presence known soon after sundown by taking up a position at the 'Centrepoint' (marked 'G', Appendix F) the most well lit part of the total area. Here they stood around or alternatively sat on the short pavement pillars that lined this particular section of the Marine Parade, striking up brief conversation with others who arrived before starting to rove around the area, eyes fixed on and following the cars that drove by.

Not all the prostitutes started work at the same time and they had no 'set' trading times. Sunset usually signalled the start of the evening's activities but often, particularly in summer, the area would still be well patronised by people out on a family picnic at this time. The prostitutes then kept roving around the area or congregated at the bus stop (marked 'M4') rather than sitting or standing around at the 'Centrepoint'. By 20h00-21h00 the area was usually deserted except for the prostitutes and potential clients, as well as the occasional destitute person who would be scouring the rubbish bins for food that had been discarded.
The time to go home or move elsewhere, as was the time of starting the evening activities, was a highly individual decision. Those who had made enough money for the evening usually left while those remaining behind needed more money and occasionally stayed at South Beach until sunrise.

Besides financial considerations, the prostitutes took several factors into consideration when deciding how much time they spent at South Beach. Some of the considerations they mentioned were travelling arrangements (for those who did not stay within walking distance and had no transport), the weather conditions and the projected availability of clients estimated according to the day of the week, time of the month and the season. Most of the prostitutes 'predicted' at the beginning of the evening's activities how high they thought the demand for their services would be that evening, and were very often correct in their predictions.

Similar to South Beach, there were no fixed trading hours at North Beach. The only significant difference was that the prostitutes at North Beach were found occasionally to operate during the day as well. The majority of prostitutes, however, like their South Beach counterparts, worked between approximately 18h00 and 04h00.

**Characteristics of the prostitutes**

1) Age

As with the numbers and working hours, the average age of the male street prostitutes fluctuated. Overall, the reported ages ranged between eighteen (suspected
to be sixteen) and thirty-two. They were thus a predominantly young population, in keeping with the preferences of gay men who wish to have sex with young men. The prostitutes operating at North Beach claimed to be similarly aged between twenty and twenty-nine.

ii) Racial composition

The racial composition at South Beach was fairly homogenous, with the majority of prostitutes observed and contacted being white. Of the twenty-one confirmed male prostitutes observed and/or contacted at South Beach, only two Indian and one coloured prostitute operated at South Beach during my fieldwork. Unlike the white prostitutes who operated at South Beach exclusively, the Indian and coloured prostitutes had occasionally also operated at North Beach.

The reason for the virtually all-white male street prostitute population at South Beach was because any black male who was perceived or suspected to be a prostitute was met with overt hostility by the white prostitutes when he entered the area. The white prostitutes explained to me that the black prostitutes were chased away because they caused 'problems', meaning that they, the black prostitutes, were giving the prostitutes at South Beach in general a 'bad name'. According to several of the white prostitutes operating at South Beach, the occasional black man who had operated there in the past had no intention of supplying a male client with a sexual service for payment. They were allegedly intent on 'robbing' their clients, often accompanied by violence. Another related reason given why black men were not welcomed at South Beach was because, according to one of the respondents, the clients “don't want blacks here”. None objected
to the presence of the Indian and coloured prostitutes, although one of the white
prostitutes did refer to them as a 'cooie' and a 'caypee' respectively, both terms
generally considered to be derogatory and insulting¹.

Similar to South Beach, the racial composition of the prostitutes at North Beach
was fairly homogenous. The difference being that those at North Beach were
predominantly black as opposed to the predominantly white population at South Beach.
The homogeneity of the prostitute population at North Beach was not, as far as could be
ascertained, the result of an active effort to restrict prostitutes of a different race from
operating there, as at South Beach. Rather, the white prostitutes did not operate at
North Beach because the majority of clients who wanted to procure the service of a
prostitute went to South Beach. In addition, the white prostitutes did not believe that it
would be physically safe to be at North Beach in the early hours of the morning, a
concern they did not seem to have at South Beach.

iii) Language and terminology

More than half of the male street prostitutes contacted at South Beach were
Afrikaans speaking. All of them could speak English to some degree and usually started
their conversation with a potential client in English. From the accounts of the prostitutes,
it became evident that the majority of their clients were English speaking.

¹ The term 'cooie' has historically been used in South Africa to refer to indentured Indian labourers who worked
in the sugar cane fields of KwaZulu Natal in the nineteenth century. The term 'caypee' refer to people of mixed
blood, i.e. having parents of different race groups (European, Malayan and African), who became known,
historically, as Cape Coloureds.
The terminology or slang used by the male prostitutes, which sets them apart as a sub-culture, was limited. Clients were called "steamers" and the prostitutes referred to themselves as "rents". Members of the South African Police Service were referred to as "boere" (Afrikaans) or "pigs". The terms used for the transaction that took place between the prostitutes and their clients varied. Some of the respondents referred to it as "making a deal", others as "doing business" and one referred to his activities as "keeping them (clients) company".

At North Beach, all the prostitutes could speak English to some degree but the majority were Zulu speaking. One was Swazi speaking and one was Sotho speaking. Three of the eight prostitutes with whom I had considerable contact could understand Afrikaans to some degree, and often engaged me in elementary conversations in Afrikaans.

The 'terminology' used at North Beach was not as distinctly discernible as at South Beach, nor was slang used as at South Beach. Rather, the terms used were commonly used words and terms. For example, some of the prostitutes referred to clients as "friends" and having sex with them was referred to as "playing", "having fun" or "making love". This difference in the use of terminology is in keeping with the distinctive character of each research site.

For the record, it might be useful to briefly mention Zulu terminology related to homosexuality and prostitution as the research respondents explained it to me. As in many of the other South African communities, both these categories are frowned upon and disapproved of in strong terms amongst Zulu people. Despite this disapproval, both
homosexuality and prostitution exist, and have been awarded tacit acknowledgement in terminology. Prostitutes, both male and female, are called abaqwayizi (plural) meaning somebody who “sells his/her body on the road”. Homosexual men are referred to as izistabane (plural).

Within the category of izistabane, a differentiation is made between: a) those who are temporarily involved in a homosexual relationship as a means to an end, b) those who involve themselves in homosexual activities for explicit financial reward and gain, and finally, c) the homosexual who leads a homosexual lifestyle.

The first category is largely applicable to a younger man in the service of an older male who does not have his wife with him. He uses the domestic and sexual services of the younger male on a non-permanent but long term basis. The younger male usually stays in this relationship to amass the finances necessary to secure bride-wealth. Once he has paid his bride-wealth and marries, the relationship is terminated and the younger man, who has since become an adult, is likely to take a young man as sexual and domestic partner in turn. The younger males are referred to as ‘uthanda ukuba nomufazi’ translating to mean a man “who likes to be like a woman”.

The second category is that of ‘uyathanda ukumusiza’ translates to mean, “liking to please”. This term was used by one of my respondents to refer to himself and other male prostitutes who provide a sexual service to men for financial reward. The final category is ‘bayathandana’, translating to “liking to live/be that way”. This term is used

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2 See Moodie (1987) for a comprehensive discussion on the relationship between migrant work and male sexuality on the South African gold mines.
for a homosexual man who engages in sexual liaisons with another man based solely on emotional and sexual preference, without any direct or indirect financial reward being a consideration.

iv) Interaction with other male prostitutes

As noted already, the interaction between the male street prostitutes at South Beach highlighted the individualism of the profession as it occurred in Durban. Large-scale socialisation between the prostitutes during and after 'working hours' was virtually non-existent. Apart from the occasional shared cigarette, or sheltering from the rain at the bus stop (marked 'M4', Appendix F), they kept to themselves most of the time, roving around the car park or sitting at the 'Centrepoint' (marked 'G'). Conversation, when it took place, usually centred on trivial gossip about other prostitutes or discussing clients. In addition, they would talk about the police and the treatment meted out to them, their girl friends and what they dreamed of doing once they stopped their prostitution activities.

None of the research participants indicated that they saw the presence of other male prostitutes in the area as competition. When asked how they felt about having to compete for the attention of the potential clients, the majority answered that they did not mind, and added that the presence of other prostitutes in the area gave them a sense of security. Others were very philosophical about the element of competition and said that the client would choose whom he wanted, and no amount of competition between the prostitutes themselves would make any difference. Despite their claim to not mind competition, it is possible to argue that the racial intolerance of the white respondents at
South Beach to black male prostitutes operating in 'their' area, could be construed as a mechanism of eliminating competition.

The opposite of competition, namely solidarity, did not seem to be an obvious feature of male street prostitution at South Beach either. As noted earlier, the prostitutes operated individually and they had, for instance, no 'pimps' to whom they had to hand over their hard-earned money or call upon for protection. Solidarity did, however, feature when, for instance, a prostitute had had a bad experience with a customer. He then alerted the others to the problem lest they should encounter a similar situation. Solidarity also became evident in the face of police harassment and prosecution. The prostitutes would congregate together, discuss and condemn the harassment and offer moral support to the recipient of the unwanted attention. No one mentioned ever physically resisting police harassment.

The male prostitutes at North Beach, like their South Beach counterparts, did not display many outward signs of a cohesive unit. They too operated individually, and none of them worked for, or with, pimps. Nor were any encountered who operated together as a team. Similar to South Beach, the prostitutes at North Beach interacted briefly with each other, often sitting together at the 'Centrepoint' (marked 'XX', Appendix F) sharing a cigarette and making conversation. They talked mostly about the same things as the prostitutes at South Beach. The foremost issues that dominated their conversation usually oscillated between the hardship of life they experienced and their dreams of finding employment. They also discussed different clients as well as tactics they used to ensure they generated some income.
The major, and very important, difference in the social interaction between the two populations, was that the prostitutes at North Beach maintained a high level of contact with each other outside of their ‘work’. Some of the prostitutes often slept together in the bushes adjacent to the research site to increase their collective security, and occasionally pooled resources to buy food, alcohol and drugs such as ‘dagga’ (cannabis, marijuana). It can thus be argued that the respondents at North Beach started forming what could be termed the nucleus of a ‘community’.

Characteristics of clients

Four clients of male street prostitutes were contacted. The research design did not provide for study of clients, and the informal contacts I had had with them were purely by chance, of short duration and of little value to the research. The data generated is very limited and no attempt can be made to sketch a broad picture or ‘profile’ of the clients of male street prostitutes. Apart from the accidental direct contact with the clients, I relied on the male street prostitutes themselves to provide me with profiles of their clients.

One of the questions that came to mind, when considering clients of male prostitutes, was ‘who are they’? None of the four respondents were married but the prostitutes themselves occasionally mentioned that married men picked them up. The four respondents, as well as the majority of the other clients, were, according to the prostitutes (and observed) single, middle-aged men and largely gay. Subsequent discussions with long-standing members of the gay community confirmed that they were aware that many of their friends and acquaintances used the services of male
prostitutes. It is, however, a practice generally not admitted and frowned upon in the gay community.

The clients observed and/or contacted during the fieldwork were all white men, with the exception of one Indian man. One possible reason for this became apparent with fieldwork. The majority of the male prostitutes at South Beach refused to provide sexual services for black, Indian or coloured men, despite the urgency of having to generate much needed money. According to some of the research participants they had been approached by Indian men but seldom if ever by a black or coloured man. They all claimed to have declined such offers simply because they would not have sexual contact with a non-white man. One respondent said that "it's like ... bad enough to have to do it (sex) with men, I don't think I can do it with a black guy, not even if he paid me a lot of money". One of the respondents added that he knew of some others who had on occasion gone with Indian customers.

In my experience, clients of male street prostitutes did not drive expensive luxury motors as is often reported in the popular media. If their vehicles were any indication of their relative wealth and status, then it can be said that the majority of the clients were in the middle-class and middle-income category. It appeared from conversation and gossip in the gay community, that those individuals who were wealthy and well known for employing the services of male prostitutes, preferred to use the services of male prostitutes who advertised in the local daily newspapers. These services were much more expensive than those offered by male street prostitutes but preferred by clients who could afford it because, as one interviewee in a gay bar remarked, "... you get a better looking boy, it's relatively safe if you compare it to the risks of picking up a rent
number at The Wall, and it’s more relaxed, more as if the situation is under your control”.

A final comment on the clients at South Beach is that they were largely ‘regulars’ and well known to the prostitutes. Systematic observation also revealed that the clients, or potential clients, formed a relatively small population who were involved in a large proportion of the overall paid sexual encounters. It was this relatively small core source of demand for the sexual services of male street prostitutes, more than anything else, which determined the size of the male street prostitution population in Durban. Clients seldom showed preference for a specific prostitute and usually looked out for a ‘new’ face. This client preference thus resulted in newcomers soon finding themselves out of demand once the majority of the limited regular customers had made use of their services once or twice. The longer the prostitute stayed in Durban the more difficult it became to secure clients, eventually leading to the prostitute leaving Durban for Johannesburg or Cape Town where he would again be a ‘new’ face, and, concomitantly, be in demand for a while.

Clients of prostitutes at North Beach, on the other hand, differed markedly from their South Beach counterparts. Those clients who went to South Beach did so knowing that the men at ‘The Wall’ were likely to be prostitutes. Thus, by virtue of going there, they declared their intention to pay for sex. The clients at North Beach, however, did not go with the intention of paying for sex. They simply went to secure casual sexual contact with another man. It was only once they started cruising, and became the target of one of the prostitutes, that the potential existed for converting from one seeking casual sexual contact to one who eventually had commercial sexual contact.
As I spent more time in the field, it became easier to observe the prostitutes initiating contact and going to the dark beach (marked 'B1', Appendix G) where men have sex with other men. It was then possible to deduce the success rate of the prostitutes, and to form some idea of who their clients were. Discussions with the prostitutes revealed that there were no 'regular' customers apart from one elderly man with whom I had several short discussions. The majority of the men who did go to the dark beach with the prostitutes were, however, like the clients of the prostitutes at South Beach, middle-aged and white. It is not possible to speculate about the income and/or status groups of clients at North Beach since no clients were contacted.

A final comment on clients at North Beach is that not all of them willingly and knowingly entered into an agreement with the prostitute to pay for sex. As will be seen in the description of the *modus operandi* followed by some of the prostitutes when they initiated contact, the (potential) client was often unaware that he would be asked for money until after they had had sex.

**The sexual exchange**

The sexual exchange between male street prostitutes and clients consists of a series of processes that culminates in the exchange of sex for money. Areas focused on is the ways in which prostitutes and clients initiate contact, how sexual services were negotiated for payment, what price structure exists, and finally, where the sexual act takes place. Once again, several differences were noted between the two research sites that have significance for any future HIV/AIDS intervention initiative.
i) Initiating contact

At South Beach, the 'Centrepoint' (marked 'G', Appendix F) was the prime spot to stand as it was at the junction of the three roads which set the parameters of the area where male street prostitutes and their clients met. The 'Centrepoint' juts out into the street and it was not possible to drive by without noticing a person or persons standing or sitting there. In addition, the 'Centrepoint' was also well lit and prospective clients driving by got a good opportunity to look at who was available.

Other than sitting or standing at the 'Centrepoint', the prostitutes also roamed around in the car parks (marked 'C; D; K; L; N and O'), up and down the promenade (marked 'B; F; I; and J'), or in the 'Loading Zones' (marked 'M1; M2 and M3). The prostitutes used these three different areas at different times depending on whether there were prospective clients around, and if so, whether they were driving around or parked in the car park.

If a prostitute was sitting or standing at the 'Centrepoint' and a car drove by, the prostitute would look to see whether or not it was a single man or not. They all stressed that it was more likely that a single man in a car would be a prospective client, than two men, or any other combination of men and women and/or children. If the driver was a single man, the prostitutes would look fixedly at him as he drove by, and on the alert for any non-verbal communication cue (eye contact, a slight lift of the hand on the steering wheel, or a smile). This would signal the start of what could turn out to be an opportunity
to make money. If the driver of the car was not a man on his own, the prostitute would look distinctly disinterested.

Should making contact fail the first time a potential client drove by, the prostitutes would remain at the 'Centrepoint' and wait to see whether he returned. Those who had been walking around in the car parks moved closer to the streets (and the illumination of the street lamps) to ensure that they were noticed by the driver. The prospective clients usually drove by two or three times to get a better look at a specific individual amongst those he had seen. Alternatively, they parked in one of the four car parks (marked 'K; L; N and O') adjacent to the observation point.

What happened next varied. In some instances, a potential client made a decision whilst driving around and then indicated to the prostitute of his choice to go to the 'Loading Zone' (marked 'M1-M4'). In other instances those prostitutes who received some non-verbal cues would indicate to the driver to go to the 'Loading Zone'. When the potential client, who invariably had to double park, and the prostitute met at the designated area, the prostitute either went to the driver's side and engaged in a brief conversation with the man, or alternatively, got into the front passenger seat of the car.

The decision to approach the potential client by either going to the driver's side or getting into the car immediately, depended, according to the respondents, on how well they knew the person. With known 'regular' clients, the prostitute was more likely to get into the car immediately, but if he was unknown or not yet considered a 'regular', then the prostitute was more likely to approach the driver's side first.
If a potential client parked in the car park, he was open to approach by any of the prostitutes in the area. Without exception, potential clients who parked there were approached from the driver’s side when the prostitute attempted to initiate a conversation. When initiating a conversation, male street prostitutes, as mentioned by Luckenbill (Schurink et al., 1993:31), usually opened the conversation with a “sociable query”. This could take the form of a request for a cigarette, or asking what the time was (despite the fact that most of them wore watches). During this opening gambit, the prostitute had a brief moment or two to evaluate the situation before he took a decision to pursue his interest in the potential client. Likewise, the client had the same opportunity. When either the prostitute and/or the client decided to continue, the prostitute then usually asked the client whether he was ‘waiting for someone’ or perhaps whether he was looking for ‘company’. Depending on the answer of the client, the transaction would either proceed or not.

The scenario at North Beach was, however, totally different. To describe the way prostitutes initiated contact with potential clients, it is necessary to briefly describe the ‘cruising scene’ at North Beach. Firstly, as mentioned earlier, men went to North Beach with the intention to meet other men for casual sexual contact. To do so, they parked their cars in the car parks (marked ‘M1-M6’, Appendix G) and started walking up and down in front of the canopy covered benches (marked ‘H1-H4’). Alternatively, they went to the open cruising area (marked ‘F’). Those walking up and down then looked at each other trying to make eye contact with the preferred person. If two men decided to approach each other they usually introduced themselves briefly and then went to the dark beach (marked ‘B1’) where they engaged in sexual activities.
Within this context of readily available casual sex, male prostitutes had to create a demand for their services in direct competition with the free sex that was the norm at North Beach. This was not an easy task. Initiating contact did not follow such a clearly observable sequence as it did at South Beach.

The prostitutes did not attempt to make contact with all men at random. Yet all men who went to North Beach were considered to be potential clients by the prostitutes. How did they then discern between whom would be interested in their services and who not? Once a man seeking casual sex arrived at North Beach, he inevitably passed by the 'Centrepoint' (marked 'XX', Appendix G) as this was the major access route between the car parks (marked 'M1-M6'), the canopy-covered benches (marked 'H1-H4') and the open cruising area (marked 'F'). From the moment he entered the cruising areas (marked 'F or H1-H4') he was observed by the prostitute.

The prostitutes did not approach men who were cruising a targeted sex partner or who had been targeted as a sex partner by another man. It was men who were cruising in general that were considered by the prostitutes to be possible clients. Those cruising in general usually spent more time in the cruising area than those who were cruising a specific person. As he walked up and down the cruising area, the prospective client (unaware of this status) had to notice the prostitute, as the latter had by this time strategically started moving around, ensuring that his path crossed with that of the potential client.

After a while, the prostitute approached the potential client, similar to their South Beach counterparts, with a 'sociable query'. This sociable query was most often a
request for a cigarette. If the potential client was seated on one of the canopy covered benches (marked 'H1-H3'), the prostitute usually stood around for a second or two, depending on whether he received a friendly and encouraging response to his query or not. He then either walked away slowly or took up a seat next to the potential client and engaged in light general conversation.

ii) Negotiating sexual service for payment

At South Beach, negotiating what sexual services were available at what costs started as soon as the client and the prostitute indicated a mutual interest in what each had to offer the other. Those who approached the clients at the 'Loading Zone' (marked 'M1-M4', Appendix F) briefly enquired whether he wanted 'something' or alternatively whether he was interested in 'some company'. The prostitutes did not start with a sociable query as they did in the car parks, since stopping at the 'Loading Zone' signalled an implied shared understanding between prostitute and client.

Those who approached cars parked in the car parks usually started negotiating sexual service for payment once both they and the client had agreed on the exchange of sex for payment. Negotiating what sexual acts were required and at what price usually took place before the prostitute got into the car. In contrast, those who approached a client in the 'Loading Zone' usually negotiated these issues after they had entered the car.

According both to my own observations and the reports of research participants at South Beach, there were no rules when it came to opening the actual negotiations. In
some instances, the prostitute reported taking the lead by asking the person what types of sex acts he enjoyed. At other times, it was the client who asked the prostitute how much he charged and what sexual activities he was prepared to engage in. During this aspect of the negotiation, both the client and the prostitute indicated to each other the limits of the range of sexual activities in which they were prepared to engage.

Once the prostitute and the client had came to an agreement regarding what sexual activities would be exchanged for what reward, one of two things happened. In most instances, and particularly if the client was unknown, the prostitute asked for payment up-front. Alternatively they proceeded and had sex before the client paid (see Chapter 6 for a comprehensive discussion).

The venue at which the sex took place varied. The most commonly reported places were in the client's car at dark and deserted areas (for example, isolated beaches, parks and dimly lit alleys). Other places were occasionally the home of the client or a hotel room. As far as could be ascertained, none of the prostitutes at South Beach had a fixed venue (room, flat, home, etc.) where they took their clients for sex regularly.

The sexual activities the prostitutes and their clients engaged in also varied. The activity most often reported by the prostitutes was mutual masturbation. Other activities included allowing the client to perform oral sex on the prostitute, the prostitute performing oral sex on the client and the prostitutes being the insertive partners in anal penetrative sex. Of all the prostitutes interviewed at South Beach, only two said that they were prepared to be the passive or receptive partner in anal penetrative sex. None of
the respondents reported having engaged in any 'unconventional' man-to-man sex such as S&M, rimming, scatting, watersports, fisting, role-playing, dressing up or sex where multiple partners were involved such as 'three-somes' or orgies (see glossary).

Unlike their South Beach counterparts, the prostitutes at North Beach seldom attempted to secure a client immediately after making successful contact. Very often they sat down and had a conversation with a potential client without referring to sex whatsoever. No particular topics dominated these conversations and the prostitutes usually left it largely to the client to take the lead. Sometimes the prostitutes simply thanked the potential client for the cigarette and conversation and walked away. The reason the prostitutes did this was because, as one of the respondents summed it up, "...he (the client) wants it (sex) that is why he is here. But if he does not want it enough, he doesn’t talk about it. I wait, later he will talk about it and then I know he wants it enough. Then we can talk about it if he is interested..."

Negotiations, or at least an introduction to sex commenced when a potential client and a prostitute started talking about sex. Unlike at South Beach, where negotiating what sex would be exchanged for what price was usually done before the sex acts took place, negotiating the same issues at North Beach was seldom as clear cut and mutually understood. In addition, there was often no noteworthy negotiation taking place at all between prostitutes and potential clients at North Beach before they had sex.

Why was there a difference between South Beach and North Beach regarding negotiating money for sex? The majority of the North Beach respondents indicated that
they did not want to tell a prospective client that they exchanged sex for money before they had secured a sexual arousal in him because they feared "chasing him away". After sufficient sex talk, where both the potential client and the prostitute had had an opportunity to make their desires and sexual preferences known, either the potential client or the prostitute proposed that they go to the dark beach where men had sex with men (marked 'B1', Appendix G). At this stage the potential client was usually still unaware that he would have to pay for the sexual engagement.

On the rare occasions when the prostitute did tell the potential client that he would be expected to pay some money, no price was fixed. The prostitutes usually left it to the client to decide how much money he would pay, but they did give indicators such as hints that they needed 'X amount' for a taxi to go home. As a rule, these 'taxi fares' were hugely exaggerated and as such were just a smoke screen for the real message, i.e. that sex costs X amount. There was, however, seldom, if ever, an explicit agreement that the client would pay a specified amount for a specified act or sequence of acts.

With the odd exception, the prostitutes and their clients at North Beach had sex on the beach (marked 'B1', Appendix G). Other venues included a park nearby, or one of several isolated parking areas further north along the coast. None of the prostitutes ever reported having gone to the home of their clients, and only one had been taken to a hotel room by a foreigner.

The sexual acts that the prostitutes at North Beach were prepared to engage in did not differ from their South Beach counterparts. All the respondents declared themselves willing to engage in sexual acts such as masturbation, being both the active
and/or passive partner in oral sex and being the active partner only in insertive anal sex. None reported having engaged in any other form of sex with clients and the majority of the prostitutes were unaware of 'non-conventional' man-to-man sex acts. In fact, most were horrified when I explained to them what these sex acts entailed.

The prostitutes at both the research sites reported using condoms consistently when they engaged in anal sex with their clients. The prostitutes at South Beach said that they always insisted on the use of condoms when engaging in anal sex, and that the 'regular' clients were aware of the fact that the prostitutes expected of them to provide the condoms. The prostitutes at North Beach also relied on their clients to supply the condoms and reported, like the prostitutes at South Beach, that they would not engage in anal sex without condoms. The attitude of prostitutes towards anal sex and condom use will be discussed in more detail in the case studies (Chapters 4 and 5).

iii) Price structure and payment

There were no uniform prices for specific sex acts amongst the prostitutes at South Beach. For instance, prices quoted for masturbation ranged from R30-00 to R50-00 and for oral sex from R40-00 to R60-00. Anal sex, with the prostitute being the insertive partner, ranged between R80-00 to R150-00. The two prostitutes who did engage in anal sex as the passive partners both charged R100-00. The use, or non-use, of condoms reportedly did not alter the price.

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3 No methods were available to validate these self reported actions, a major methodological limitation.
In addition to different prostitutes charging different prices for the same act, some prostitutes varied the prices they asked for specific sexual acts on different occasions. As a rule, the prostitutes were not open to price bargaining, particularly not during the early evening. Some, however, did lower their prices as they became more desperate to generate at least some money for the evening, even if it was less than what they had estimated or expected. It was, however, seldom that prostitutes lowered their price as a direct result of bargaining with the client.

A final comment on prices at South Beach. The prostitutes did not accept anything other than cash as payment. Also included in the agreement was the tacit understanding between the client and the prostitute that the client would take the prostitute back to South Beach after they had had sex and the money had changed hands. When asked how often clients reneged on their agreements and refused to pay or provide transport back to South Beach, only two research participants indicated that they had had problems with clients not paying in the past year or so. If a client, however, attempted to cheat, the prostitutes were reasonably capable of convincing them to abide by the agreement. Persuasion techniques included refusing to get out of the car, threatening to “cause a scene”, threatening the client with violence or snatching something valuable from the client and using the item as a bargaining chip or selling it at a pawn shop the following day.

From listening to stories that clients had to tell (and stories told about clients), it became evident that prostitutes reneged on their agreements far more frequently than clients did. Many a woeful tale has done the gossip round in the gay community about some person getting “cleaned out by a rent”, usually someone who had taken a street
walking prostitute home. Occasionally one also heard of a person who had been beaten up by a prostitute. Of the four clients who have been included in this study, two indicated that they had been on the receiving end of violence by prostitutes. The one client was robbed of his wallet and watch, whilst the other one was beaten and his car radio stolen. The latter had, on that particular occasion, made use of the services of two prostitutes simultaneously. None of these cases were reported to the police.

In contrast to South Beach, no price structure existed at North Beach. This was due to the particular dynamics involved in securing a client at North Beach. In many cases, the prostitutes did not even give an idea of a price that they would consider for a specific act. In general, they did not differentiate between sex acts, and applied a flat rate for sex. The prostitutes could, at best, only hope that their hints, of needing a specific amount of money for a taxi, would be sufficient to indicate to the client, what amount was considered appropriate. However, in the end, the clients paid what he wanted to, if he paid at all.

At North Beach, payment, when it occurred, usually took place after the client and the prostitute had had sex on the beach. If the client did not offer to pay, the prostitute would remind him that he (the prostitute) needed money to get home. If the client did not show a willingness to pay, the prostitute would insist on some form of payment, often reducing his demand to "small change" or 'silver money’. Some of the prostitutes mentioned accepting items of clothing in return for sex although this was not a common practice. One prostitute had, on one occasion, extended credit to one particular client who occasionally made use of his services and did not always have
money with him. A take-away meal was considered partial payment by one of the respondents although he added that he would then be happy with "silver money".

When a client paid a prostitute, it was usually on the beach where they had had sex (marked 'B1', Appendix G). However, in some instances, the client did not have money with him since he had not expected to pay for sex at North Beach. In such instances the prostitutes would accompany them to their cars where they would then hang around waiting to be paid.

When asked what happened if a client did not want to pay, the respondents reported employing a similar variety of tactics as their South Beach counterparts. One option was to start creating a loud verbal argument with the client on the beach if there were other couples, something most clients preferred to avoid. Very often the beach was deserted and the prostitute would then threaten the client with violence if he did not pay. The prostitute would follow those clients who said that they had no money with them to their cars and one instance was recorded where the prostitute actually got into the car with the client and refused to get out before being paid. Another respondent reported once going with a client to an autobank to withdraw money for payment which they had, incidentally, agreed to prior to having sex.

Those clients who refused to pay outright were threatened with reprisal at a later stage. The client was usually told that his face was now "known", and that all the other prostitutes would be on the lookout for him in future. The prostitute would also add that should the client in future be so foolish as to wander onto the beach alone in the dark, he might be hurt by the aggrieved prostitute, or one of the others, as an act of
retaliation. The prostitutes reported that this was a very effective way of persuading clients to pay.

When asked how many of the respondents had actually used violence against a client that had not paid, three admitted that they, occasionally, had had to resort to hitting clients who refused to pay. None of these three respondents had a history of negotiating a price for sex with the clients prior to sex taking place. One could then assume that in these three instances, the clients were unaware that they were going to have to pay for sex which they considered, according to the norm of cruising, to be a consensual act of mutual sexual gratification.

It is worth noting that the income generated by the prostitutes at North Beach was considerably lower than that at South Beach. The clients at North Beach paid as little as R10-00 for sex, and the highest amount recorded was R40-00, whereas at South Beach, price for sex generally ranged between R50-00 and R150-00. The prostitutes at South Beach also had a higher per capita contact rate with clients than their North Beach counterparts.

Although the prostitutes at South Beach generated more income than the prostitutes at North Beach, male street prostitution in Durban was not lucrative or well paying. On average, the participants at South Beach generated between approximately R 50,00 and R 100,00 per night, and up to R 300,00 on an exceptionally good night. In stark contrast, though, the average income of the North Beach respondent varied between R 20,00 and R40,00, and up to R 100,00 on an exceptionally good evening.
Conclusion

The major fundamental difference between prostitution at the two venues was that at South Beach, the supply (male prostitutes) and demand (clients) met in a mutually understood milieu, and the process of making contact adhered to a sequence of established precedents. At North Beach, in contrast, prostitution centred on the skilful creation of a demand for the service which was on offer in direct competition to the prevailing norms of the homosexual sub-culture, where cruising meant seeking casual sexual contact and not necessarily or intentionally, contact of a commercial sexual nature.

What became clear during the period of research is that the male street prostitutes entered into unequal relationships with clients at both South and North Beach. In all the instances, it was the prostitutes who were more in need of generating income than what the clients needed to have sexual satisfaction. The prostitutes thus had far less bargaining power than the clients had, and as illustrated in the discussion on the sexual exchange at North Beach, the prostitutes often had no bargaining power at all, being totally reliant on the willingness of their clients to pay for the sexual encounter. I return to this point later in the thesis.

Having described and commented on the activities which characterised male street prostitution in Durban during the time of fieldwork, I now turn to a description of the actors involved and focus on their life histories before discussing the sexual activities the male street prostitutes and their clients engaged in.
CHAPTER FOUR: CASE STUDIES - SOUTH BEACH

(NB: ALL NAMES HAVE BEEN CHANGED TO PROTECT THE IDENTITY OF THE RESEARCH PARTICIPANTS)

This chapter deals with in-depth case studies of six research participants drawn from South Beach. Organising the field data revealed that the case studies lend themselves to a description of the following areas: (a) childhood, school years and adolescence, (b) employment history, (c) entry into prostitution, (d) sexual orientation, (e) HIV/AIDS awareness and condom use, (f) daily routine and social life, and (g) their future expectations.

Within each of these categories, a host of different but related information has been grouped. This means that issues dealt with, and discussed, in one case study might not be mirrored in another. Generally, however, these case studies give us a representative window into the lives of the research participants.

CASE STUDIES

Case SB 001 - Edward

Edward was a twenty-three-year-old, white, Afrikaans speaking man who operated at South Beach during the first few months of the fieldwork. I first met him shortly after the research started, but it was only several weeks later that he started to respond more readily to my efforts to make conversation. Initially, it transpired, he
mistrusted me and was under the impression that I was an undercover policeman because my hair was cut short. We built up a good rapport and he readily participated in the research on several occasions, even inviting me to his flat to meet his girlfriend.

Edward was born and grew up in Bezuidenhout Valley, a lower-income, white suburb on the eastern side of Johannesburg (Appendix H). He had an elder brother and sister and two younger sisters. His father was a factory worker between periods of unemployment who never secured permanent employment. He spoke bitterly of their family having to rely on welfare handouts for food and clothing, and even more bitterly about the uncontrolled drinking of his parents. Domestic violence and heavy beatings were the order of the day for both the mother and the children.

At the age of eleven, Edward and his two younger sisters were removed from their parents by social workers and placed in a foster home. Edward ran away to nearby Hillbrow in Johannesburg where he lived on the streets for a couple of days. He was picked up by the police and returned to his home, placed in foster care again and once more ran off to Hillbrow. Soon after his twelfth birthday he was sent to an Industrial School for boys who were 'poorly adjusted' to society.

Edward remained at this school until he was sixteen. In the four years he spent there he acquired several formal skills, amongst them rudimentary instruction in technical fields such as plumbing, panel-beating, painting and carpentry. Instruction in man-to-man sexual activities, drug use and abuse, use of brute force to attain goals and fluency in lies and deceit were informal skills imparted by his peers.
After having left the Industrial School, Edward returned to his parental home and enrolled at a local Technical High School. The adjustment proved to be difficult and he found himself expelled, after three months, for having impregnated a girl from a neighbouring school, for playing truant and for getting into fistfights after smoking cannabis on the school premises. Edward decided to quit school permanently and to report for military conscription duty.

With nine months to wait before going to the army, Edward found casual employment at a panel-beater. In January 1989 he reported for military service and was posted to the Technical Services corps where he received standard instruction in warfare and diesel mechanics. During the first six months of military service, Edward was caught smoking cannabis on several occasions and spent a considerable time in the detention barracks in Pretoria during his year of service.

In December 1989 Edward completed his service and spent a month on holiday in Durban before returning to Johannesburg. During the first part of 1990 he tried in vain to secure employment in Johannesburg and decided to move to Cape Town. He arrived there in the middle of winter and found himself destitute in a city he did not know. Employment opportunities were non-existent and Edward resorted to petty crime to stay alive. A three month prison sentence, for breaking into cars, brought him into contact with a range of other law offenders, and Edward learnt some alternative ways to survive.

Among the range of survival skills that were open to Edward, prostitution sounded the most lucrative. When I asked him why he made this decision he
mentioned that he was no stranger to same-gender sex having being exposed to it at the Industrial school since the age of twelve. In addition, he believed that prostitution would generate 'easy money'. Upon his release he headed straight for Graaf's Pools, a well-known sex oasis for gay men in Cape Town, and secured his first client the very same afternoon. Edward remembered that specific day very clearly. It was the day he turned twenty.

Prostitution did initially generate 'easy money' for Edward, but he soon found that it was not sufficient to sustain his lifestyle and habits. He resumed his life of petty crime in addition to earning money from prostitution, often stealing from customers. In the December of 1991, almost six months after his release from prison, Edward was back, sentenced for a year on charges that related to house-breaking and being in possession of stolen goods and drugs (cannabis and Mandrax).

After his release in 1992, Edward left Cape Town and returned to Johannesburg where he resorted to prostitution for a living once more. He also met a girl who earned her money through prostitution and they started living together in Hillbrow, moving down to Durban in the winter of 1993. They stayed together in a one bed-roomed flat on the Esplanade that they shared with another young man who was also involved in street prostitution (case SB 002, Philip). Edward mentioned that he and his girlfriend would probably move back to Johannesburg, since the demand for male prostitutes in Durban was not as high as it was in Johannesburg and Cape Town, making it difficult to generate sufficient income to cover his living expenses.
Despite engaging in sexual activities with male clients, Edward, like the majority of the male street prostitutes operating at South Beach, is heterosexual. He remembered from early days that sex was a daily part of life, his mother and father not always having been discreet when they had sexual intercourse. His own sexual awakening was accelerated when he went to the Industrial School at the age of twelve. His first sexual experience was a brutal initiation ceremony where two senior boys sodomised him. His involvement in sexual activities gradually shifted from being the recipient of the sexual attention of another, mostly older pupil, to actively seeking out sexual encounters with other, mostly younger boys. He never had any form of emotional relationship with the boys he had sex with and considered it (same-gender sex) to be "normal for boys in a place like that".

The range of sexual activities Edward engaged in whilst in the Industrial school ranged from masturbation, oral sex, anal sex and occasionally, to group sex. He was both the active and passive partner depending on whom he had sex with. When he returned home after his four years at the Industrial school, he engaged in several casual sexual relationships with girls in the area. One became pregnant and this contributed to his expulsion from the school.

Edward's first same-gender sexual contact since leaving the Industrial School came when he was imprisoned in Cape Town in 1991. Lessons learnt at school helped him to avoided being raped on one or two occasions. Since his entry into prostitution he has had same-gender sexual contact only when he was paid for it. The range of sexual activities he was prepared to engage in was limited to actively masturbating a client or performing oral sex on him. He did not want clients to masturbate him or
practice oral sex on him. Anal sex, either as the insertive or the receptive partner, was also unacceptable to him.

Edward was very knowledgeable about HIV and AIDS. When I asked him how it was that he knew so much about HIV/AIDS he replied that it is a topic often discussed between him and his girlfriend, who is a street prostitute as well. In addition, Edward had read about HIV/AIDS in the popular media and had had counselling when he went for an HIV blood test in Johannesburg.

Condom use was not high on Edward's priority list with either his clients or with his girlfriend. He was of the opinion that the sex acts he engaged in with his male clients did not put him at risk of HIV infection. In particular, Edward dismissed the claim that unprotected oral sex is a high risk sexual activity because he reportedly did not allow clients to ejaculate in his mouth and thus did not swallow the semen.

Edward did not use condoms when he had sex with his girlfriend because he did not see the necessity of doing so. He reasoned that since they both practised safe sex with their clients, and were in a monogamous relationship, the use of condoms were an inconvenience. He conceded that he would use a condom if he were to have casual sex with a woman, other than his girlfriend, as a precaution against HIV and other STD infections.

When asked about his daily activities, Edward sketched a life without a discernible daily routine. He woke up in the morning at whatever hour he wished, largely depending on what time he returned from South Beach. Since his girlfriend was
also a streetwalking prostitute, they tried to synchronise their time so that they were at home together as much as possible.

Days were spent doing the household chores required in their sparsely furnished flat and shopping occasionally. Both Edward and his girlfriend used alcohol and cannabis daily and spent most of their time listening to music, reading or simply lounging around in the flat. They seldom went out to social activities such as cinema, pubs or live music venues since, as Edward remarked, "...when you work all night, day after day, then the last thing you want to do when you take a break is go back into that nightlife".

Another reason Edward mentioned as to why he and his girlfriend did not go out socialising, was that they worked and slept at hours when other people did the opposite, and, therefore, did not get much opportunity to meet other people on a social level. In addition, money was perpetually scarce and was rather used for take-away food, liquor, tobacco and cannabis, which they consumed in their flat.

Both Edward and his girlfriend started their evening's work as soon as the sun had set. They usually left their flat together, and occasionally met each other at a popular beachfront roadhouse during the course of the evening or at the bar from where Edward's girlfriend regularly solicited for clients. It was at this bar where Edward and his girlfriend usually met in the early hours of the morning when it was time to go home.
Edward had broken off all contact with his family, yet he often remarked that he is considering paying them a visit as soon as he had returned to Johannesburg. Apart from the occasional comments about how he wished he had had a conventional job, Edward never spoke of the future or any future plans he might have had. The two or three times I tried to raise the subject he simply stated that the future was not something he wanted to think about. He added that he lived "for today" and that "tomorrow will take care of itself".

Edward did, however, mention that he and his girlfriend intended to move to either Johannesburg or Cape Town. The reason for this proposed move, according to Edward, was that 'business' was perceived to be 'better' there, an indication that he was intent on pursuing his prostitution activities for the foreseeable future. Beyond that did not seem to be of immediate concern to him.

Case SB 002 - Philip

Philip was approximately twenty years old, white and Afrikaans speaking. I was introduced to him by Edward (case SB 001) with whom he was staying at the time. He was the most evasive of all the respondents and hardly answered my questions in more than one sentence at a time.

It was difficult to piece together a reasonably accurate account of Philip's childhood, school years and adolescence since he was not always consistent in his answers. He mentioned, for example, on several occasions that he was twenty, twenty one or eighteen and that he grew up in Johannesburg, Cape Town and Bloemfontein
He was consistent in his account of family life, which he sketched as one characterised by poverty and hardship. His father had abandoned them when he first went to school, and he had not had any contact with him since then. His mother never remarried but had a succession of live-in lovers, sometimes with children, sometimes without.

Philip left home, at that stage Germiston, a working class suburb of Johannesburg, at the age of seventeen. He had just completed his standard eight and could not tolerate his situation at home anymore (he did not elaborate on what the circumstances were). He headed for Johannesburg to seek employment and stayed with a friend of his who shared a flat with two girls.

Johannesburg did not offer the employment opportunities Philip had hoped for and he found himself increasingly having to rely on his friend for support. The two girls who were sharing the flat were both employed by an escort agency and upon their suggestion, and recommendation, Philip applied at several escort agencies for employment. All of the applications were turned down with the exception of one. Philip was offered a part-time position as a masseur at an escort agency that provided both male and female escorts and masseurs to the male and occasional female clients. He was then, upon accepting the offer, given a one-hour training course in ‘massaging’.

Philip claimed to have had no sexual contact with men prior to his employment at the escort agency and was unaware of what was required of him. Only after he was ‘booked’ by his first client did the agency manager tell him that he was to perform a sexual massage for a regular male client. When Philip asked the manager what it
entailed, the manager told him that he was required to give the client a "pelvic massage", i.e. eroticise the massage, concentrating on suggestive massage strokes in the vicinity of the client's pelvis. He was further instructed to encourage the client to get an erection, fondling and touching his genitals and then to engage in whatever sex activities the client required. Finally, he was given four condoms, a tube of KY (a water based lubricant), and a towel, told to have a shower and go, naked, into the cubicle where the client would be waiting. Philip was however unable to perform receptive anal sex as the client had requested, and was told by the agency manager to leave if he could not satisfy the clients.

Philip left the escort agency soon after he started work because of this inability to perform to the satisfaction of the clients, particularly when he was requested to be the passive partner in anal sex. He once more started looking for work but was again unsuccessful. As a last resort, he went to the Johannesburg railway station where, as he had heard from another young man working at the escort agency, that it was possible to procure a client by offering sex for sale. There, at the station, Philip was able to negotiate with clients what sex acts he was prepared to engage in, and managed to secure clients with increasing frequency as he became more adept at negotiations with them.

Soon after Philip started working the railway station area in Johannesburg, he met Edward who had been on the prostitution scene for a year or two. It was Edward who taught him the finer points of street prostitution and offered him some protection whilst on the street. When Edward and his girlfriend decided to move to Durban, Philip decided to move with them.
Similar to Edward, Philip was adamant that for pleasure, he only slept (had sex) with women. He had sex with men only for the money. He added that he hardly ever got an erection when he was involved in a sex act with a man. Like Edward, Philip also had a limited repertoire of sexual services that he offered clients. He tried to restrict the sexual activities to masturbating a client or performing oral sex on him. He seldom allowed a client to masturbate him or perform oral sex on him, since men did not sexually arouse him. He had only once allowed a client to penetrate him in anogenital sex, but added that, because it had hurt too much, had he decided that he would not engage in such an act again, despite the high price clients were reputedly prepared to pay for anogenital sex.

His private sex life was virtually non-existent. Philip ascribed his lack of sexual liaisons to the irregular hours he worked, not going to popular night-clubs and bars where potential sexual partners could be found, and the constraints of not having his own apartment where he could have sex with a woman in privacy. In addition, he also said that he was "tired of sex, it's just sex, sex, sex every night and one gets tired of it, ... and then you don't want to have sex anymore when you are finished here (South Beach)".

When asked about HIV/AIDS, Philip showed a reasonable degree of knowledge of HIV and AIDS. His major source of information was discussions other prostitutes, and in particular, Edward (case SB 001) and Edward's girl friend. He was well aware of the various routes of HIV transmission within the man-to-man sexual
environment, and equally aware of the risks involved in having unprotected sex with casual sex partners (non-paying, female).

Philip, similar to Edward, was of the opinion that the sex acts he engaged in with clients held no risk of HIV transmission for him or his clients, and condoms were thus not necessary. He was unsure about the danger associated with oral sex, and emphasised that he did not allow clients to ejaculate in his mouth, thus circumventing the need to use condoms when performing oral sex on a client. Philip did not show much concern about contracting other sexually transmitted diseases through oral sex. He stressed that he has never had any sexually transmitted disease and that he was "clean", referring to his own personal hygiene.

By his own admittance, Philip did not have much sexual contact with casual sex partners (females), but when he did, he made sure to use condoms which he bought from a nearby mini-supermarket. When asked about the use of condoms available from the City Health Department, Philip emphasised that he would never trust condoms supplied by the government because he had heard too many accounts of how the condoms had burst or tore during sexual intercourse. Finally, he was of the opinion that no prophylactic barrier was necessary when engaging in oral sex with females since he did not believe that it is possible to be infected by HIV/AIDS that way.

When asked about his daily life, it became apparent that Philip's daily routine was very similar to that of Edward's described earlier, with whom he was sharing accommodation. He also used liquor, tobacco and cannabis regularly and spent most of his days sleeping or simply lounging around in the flat with Edward and Edward's
girlfriend. He usually went to South Beach at the same time as Edward, but stayed there much longer. The reason for this was twofold. Firstly, he stayed longer in the hope that he would be able to procure another client before going home, and secondly, to give Edward and his girlfriend some time together in private.

Philip still has occasional telephone contact with his mother but has not visited her for some time. He cited lack of money for transport as the major reason for not visiting his family in Johannesburg. In addition, in as much as Philip wants to go home, he is hesitant to do so for fear of his mother finding out exactly how he earns a living since he has led her to believe that he has secured employment in Durban on a fishing boat.

Philip had no idea of what to expect of the future and did not seem to be very concerned about it either. He did mention once or twice that he would probably seek more formal employment in the years to come when he got too old to operate successfully in the male prostitution field. In the interim he was content with his life and his means of generating income, and did not foresee a dramatic change in the status quo in the immediate future. He mentioned though, his intention to relocating back to Johannesburg with Edward and his girlfriend in the near future.

Case SB 003 - Paul

Paul, who was twenty two years old and Afrikaans speaking, was the most friendly of all the research participants, quietly going about his own way, never
pestering me for cigarettes or money, and always willing to answer my questions with a sincerity that made me believe him. In addition, he had been the most consistent in his answers and overall contributed much to my understanding of the male street prostitution scene as it occurred in Durban and, to some extent, Johannesburg.

Paul was born and grew up in Vanderbijlpark, the heartland of heavy industry south of Johannesburg, where his father was employed as a fitter and turner at Iscor, a parastatal steel producer. His mother devoted her time to keeping the house and raising the four children. Paul, the youngest of the four, spent his childhood years reasonably sheltered, secure, happy and carefree. He spoke of loving parents, and never experienced poverty or hunger as a child. Apart from the usual and expected domestic arguments, Paul was never subjected to domestic violence, abuse or battering as were so many of the other respondents.

Paul attended both primary and secondary school in Vanderbijlpark, and wrote, and passed, his matric exams at the end of 1989. He never had an interest in school and did not make any effort to obtain high grades. By his own admission, Paul who was slender of build, hated going to school. He was the subject of peer ridicule for not displaying an interest in sport or other male-orientated extra mural activities, and displaying effeminate mannerisms. Paul yearned to take piano lessons and loved working in the house with his mother doing domestic chores. Where possible, he avoided other boys of his age and preferred to form friendships with girls where possible. He nevertheless attended school dutifully except when he was ill and could not go to school.
After leaving school, Paul decided to avoid doing military service and, with the blessing and financial assistance of his parents, moved to Cape Town. He managed to secure employment at a supermarket as a cashier and stayed in a boarding house for several months. Paul was retrenched in mid-1990, but then found employment as a security guard. He was, however, fired when the company found out that he had lied about completing his military service. At this stage, the military police had tracked him down and he was taken to Pretoria to appear in court for not reporting for military service. He was sentenced to three months in prison and upon release, had to report for military service. He never did.

It was in prison that Paul was first introduced to male prostitution as a way of earning money after meeting an inmate who was jailed for prostitution. Upon his release, Paul headed for Johannesburg and applied for employment at several escort agencies. None of his applications were successful and Paul decided to venture into the arena of street prostitution. He made enquiries in the gay community and quickly found out where male street prostitutes operated. He entered the scene at Joubert Park, an area that was well known for male street prostitute activities in Johannesburg.

Paul’s first night turned out to be a nightmare. He was beaten up by his first client, who was under the influence of alcohol and cocaine, and left stranded in one of the suburbs of Johannesburg where the client lived. Paul tried in vain to get back to the city centre but was hopelessly lost. Later that same evening he was picked up and arrested by the police on charges of vagrancy. He spent the rest of the night in the Hillbrow police cells and remembered it as an ordeal. The following morning he was reprimanded by the police and discharged.
Paul then decided to go to the railway station where he became reasonably successful in securing clients and managed to survive on his income. Like some of the other male prostitutes who operated there, he stayed in a cheap Hillbrow hotel room which he rented on a daily basis and where he occasionally took his clients for sex.

In 1993, after his third arrest for prostitution in Johannesburg, Paul decided to move to Durban. He had saved some money that enabled him to make the move with confidence. In Durban he stayed in a single room (communal ablution) which he rented on a daily basis from a low-budget hotel in the Point area, close to South Beach. As he had done in Johannesburg, he took some of his clients to his room, but only when it was absolutely necessary.

Paul was the only respondent who was gay (i.e. homosexual) and had been aware of his sexual and emotional attraction to men since childhood. He became sexually active whilst still at high school and had had an ongoing emotional and sexual relationship with an older, married man who had stayed in the same neighbourhood at the time.

Paul’s homosexuality had been a decisive factor in his decision not to do military service and subsequent move to Cape Town. Whilst staying in Cape Town, Paul had several casual sexual and emotional relationships with men, but never settled down into a secure and committed relationship. Since his imprisonment, Paul had not had any committed relationship(s) and remained unattached at the time of the research. He emphasised that he had had no desire to fall in love or to settle down,
preferring to restrict the only sexual contact he had with men who paid him. Not only did he earn money through such sex acts, but his sexual needs were also fulfilled. Concomitantly, he said that he had no desire to have more sex than what he was having already.

Paul engaged in the widest range of sexual acts with clients of all the respondents at South Beach. He had a preference for being the passive partner in anogenital sex but did, if a client requested it, engage in anogenital sex as the active partner. He took both the active and passive roles in oral sex but, but indicated that he preferred to be the active partner since he enjoyed it more than being the passive partner. Masturbation, however, was the sex act he most often engaged in with clients. In the past, with lovers and casual sex partners, Paul enjoyed having anal sex, with masturbation and oral sex considered to be foreplay.

Paul was the most knowledgeable of all the South Beach respondents regarding HIV and AIDS. He acquired most of his information in the gay scene, and read gay publications, which regularly contain articles dealing with HIV/AIDS, as often as he could.

Being gay, Paul engaged in similar acts with both his clients and casual sex partners, and reported always, without exception, practising safe sex. He was the only participant in this research who used, or insisted on his sex partner (client or lover) using, double condoms and water-based lubricants when he engaged in anogenital sex. He was aware of the risk unprotected oral sex held, and accurately identified sores or open wounds in the mouth of the active partner as potential routes for HIV
infection if the passive partner is HIV+. He was sure of his HIV- status (blood test in Johannesburg three months prior to moving to Durban) and of the opinion that his sex partners (clients or lovers) were thus not at risk of being infected with HIV/AIDS.

Paul was one of the few male street prostitutes, involved in this study, who operated at both South- and North Beach and occasionally at Beachwood as well. He started as soon as he woke up in the afternoon, and usually went to North Beach first. During the course of the early evening he would then go to South Beach where he stayed until he decided to go home.

He occasionally went to the gay night-clubs or bars but did not solicit from these premises, as did other street prostitutes. He ate only once a day, usually take-away food and spent very little of his money other than on accommodation and food. He did not use any drugs and would occasionally have a beer if a client offered him one but would seldom, if ever, buy one.

Paul preferred to live a solitary life, going for long walks on the beach if he had the time and was reluctant to make friends, particularly with the other male street prostitutes. He very often remarked that he did not trust the other male street prostitutes who operated there at South Beach and seldom socialised with them.

Paul, of all the research respondents, probably had the best idea of what wanted the future to hold for him. He was studiously saving the money he earned through prostitution and had plans to start his own business one day. He often talked of buying a food cart to sell hot-dogs or other food, and of moving into an apartment
one day. He planned, however, to stay on the prostitution scene for a few more years to increase his savings. Paul added that he would probably go to Cape Town, or even back to Johannesburg, because the earning potential for male street prostitutes in Durban was minimal compared to the other two cities.

Case SB 004 - Winston

Winston, an eighteen-year old Indian man, was one of the research respondents who participated in the research most frequently. His accounts, however, were often contradictory and it was difficult to assess to what extent the information he gave had been truthful. Despite the drawback of the discrepancies in accounts, his participation provided a continuous insight into 'a day in the life of a male street prostitute'. Above all, amongst all the respondents, he showed me the most human face of a hidden population that thus far had been unknown to me.

Winston's report on his childhood was fragmented and incomplete in many areas. I am still unsure how many brothers and/or sisters he had, but they grew up in Phoenix, Durban, where he was born (Appendix I). He revealed very little about his childhood years except to say that "... it (childhood) was normal, just like everybody else's around us".

It transpired from our numerous discussions that he came from a poor but relatively happy family. His parents were both in their fifties, devout Hindu's and unemployed. Domestic violence was not a feature of his childhood years, neither was
he subjected to physical or verbal abuse apart from the occasional reprimand or hiding for being naughty.

He had attended a local primary school and had failed one year. When I met him for the first time he claimed to be eighteen years old and due to start his standard nine year at a high school in Phoenix, which he had attended since standard six. He was, at that stage, contemplating leaving school.

Being still at school, Winston had no employment history. He always relied on his parents for pocket money and to take care of his needs until he entered into 'part-time' prostitution shortly before the fieldwork commenced (He progressed to full-time prostitution mid-way through my period in the field). When asked about his entry into prostitution, Winston mentioned that a school friend of his, also a part-time street prostitute, had told him that he could make "lots of money" if he was prepared to have sex with men. Initially he did not like the idea and opted rather to be a 'parking attendant', showing motorists where parking was available on the busy beachfront. He soon found that the occasional tip he got for his efforts was not the answer to his financial predicament. One evening, after drinking some liquor and smoking cannabis, he went to South Beach with his friend to "check out the scene".

Winston did not make a lot of money the first evening, contrary to his expectation. He did, however, get a taste for making money and decided to try again the next weekend. He ascribed his initial lack of success in making a lot of money to his ignorance of sexual activities that involved two men, and his inability to negotiate, and get, the amount of money he expected for the sex he performed.
Winston was a professed heterosexual and claimed a history of exclusive sexual liaisons with women. He had his first sexual encounter with a girl when he went to high-school, but added that he did not have sex with girls "all that often". When I met him he had just entered into a new relationship with a girl in Chatsworth whom he did not see much of, and with whom he had not yet established a sexual relationship.

His first experience of sex with a man was on the first evening he went to South Beach. His only client that evening required of Winston only to masturbate him and wanted to masturbate Winston too. Winston, however, failed to get an erection but nevertheless got paid R30-00 for his service. He had since started physically enjoying sex with men, and readily got an erection and "always" had an orgasm. He, however, never actively explored the possibility of securing another male as a sex partner other than for money.

Winston participated in mutual masturbation, oral sex and "once or twice " in anal sex as the insertive partner. He refused to be the receptive partner in anal sex and did not really enjoy performing oral sex on a client. He still claimed to prefer having sex with women but had actually seldom engaged in sex with women during the period of fieldwork. The reasons for not pursuing an active sexual and love life with women, according to Winston, were varied but centred largely on his unsettled life-style, not having a permanent home and constantly not having money to entertain prospective love or sex partners. In addition, as will be discussed later, Winston increasingly spent his free time in the company of gay men who respectively offered him occasional accommodation, companionship and food.
Winstons' knowledge and awareness of HIV/AIDS was very rudimentary and limited when he first entered the prostitution scene. Having lived a sheltered life as a schoolboy, he relied on the informal sexual information that he pieced together from his friends. During the period of fieldwork his knowledge and awareness increased rapidly and dramatically. Once again, he relied on peer education, in this case the other prostitutes at South Beach. In addition, Winston also learnt about HIV/AIDS through his negotiations and sexual interaction with clients. As he became more comfortable with me during fieldwork, he increasingly asked my views on HIV/AIDS and it was a privilege for me to be able to ensure that he received correct and informed answers to his questions.

As Winstons' knowledge and awareness of HIV/AIDS increased, so did his concern about sex acts he had engaged in soon after he entered the prostitution scene, which could have exposed him to HIV infection. I suggested he went to ATIC (AIDS Training and Information Council) for counselling and possibly a blood test for HIV, but he declined, saying that he would rather not know his HIV status. He did, however, agree that safe sex was the only way of protecting himself, his clients and his lovers, and tried to engage in low-risk activities only with his clients.

As noted earlier, Winston did not have many sexual contacts with casual sex partners (women) during the period of fieldwork. The sexual encounters he had had with girls prior to entering prostitution were all without the use of condoms, but he reported using condoms when he had sex with women since.
Winston had no real daily routine since his daily circumstances changed considerably during the fieldwork period. When we met, he told me that he was living with his parents and was attending school. Street prostitution was at that stage a part-time occupation but he gradually moved into full time prostitution, forsaking school and, at one time, his home.

Winston said that he could not continue with his education because his family could not afford the fees involved. In addition, a recent wedding of an elder sister with the accompanying dowry had plunged the family further into debt and poverty. The lack of money was also cited as a reason for leaving home. He claimed not to be able to afford the necessary transport fees to commute between South Beach and his home, and thus had decided to just "hang around". During this time, being destitute, Winston relied on the goodwill of clients to accommodate him. This, however, seldom happened and he spent many days sleeping on the beach or at any peaceful, shady spot that he could find.

As Winston became more adept at negotiating and getting the required fee for the required services, he could once more afford to go home, which he did on an irregular basis. He told his parents that he was earning money as a "parking attendant" on the beachfront in order to explain why he had money. It also provided a reason as to why he only came home occasionally.

Almost six months after I had met Winston, he stopped coming to South Beach for approximately two months. When he eventually returned he told me that his
parents had died soon after each other from an illness which he did not specify. He was thus, in his own words, "homeless".

After a month or two back on the street, Winston decided to broaden his operational area to include the gay bars and clubs which were all centred in the nearby Durban Point area. Although these venues were not virgin territory for male prostitutes, they were also known to be very difficult places to find customers. Winston soon found that he had to create a demand for his services in the clubs and bars.

In many ways, Winston adopted a style of negotiating sex for sale similar to those prostitutes operating at North Beach when soliciting in the bars. He only negotiated the sexual exchange for money once he has nurtured the client's sexual interest in him. He sold roses at the bars on the evenings when the clubs were not open, where, apart from earning a meagre additional income, he had sufficient time, under the guise of selling flowers, to determine the likelihood of finding a patron who might be a potential client. He also found that the probability of securing a client at the bars and clubs was made easier as it got nearer to closing time in the early morning hours. He attributed it to the amount of alcohol potential clients had consumed by then, as well as to their urgency, almost desperation, to find a sex partner.

Moving between the gay bars, clubs and both South and North beach, Winston's social life became increasingly absorbed by, and intertwined with, the gay community and culture. He hardly ever had contact with earlier friends and family, and spent most of his 'free time in the company of gay men. He stressed, however, that it was all for the sake of money, despite the fact that he enjoyed their company.
He found occasional accommodation with a client, but remained destitute after
the death of his parents. He relied on the goodwill of some friends and past clients with
whom he had retained contact for food, a place to sleep and to have a bath. The
circumstances in which Winston found himself have had a very negative effect on his
world-view. As the fieldwork progressed, he became increasingly despondent about his
lack of security, a home, companionship and above all, money.

Like so many of his fellow street prostitutes, Winston had a fatalistic approach
to the future. He intended continuing his prostitution activities for as long as he could
make sufficient money. He balked at the idea of taking up employment in the formal
sex industry saying that he preferred to keep the money he made for himself. He
realised, too, that his lack of education, formal occupational training and employment
experience negated against meaningful future employment possibilities.

In as much as he was fatalistic, believing that “what will happen will happen”, he
often expressed the wish that he could meet a man who was rich enough to keep him. I
asked whether that meant that he wanted to enter into a homosexual relationship? He
said no, what he had in mind was someone with whom he could have a long-term
sexual relationship in exchange for a home, food and money. Winston, however, did
not envision it as a sexually monogamous relationship, nor one based on affection. He
simply wished for a protracted ‘sex-for-payment-and-other-benefits’ relationship, where
he had security, food, a home..., all the things usually taken for granted by those more
fortunate than him..
Case SB 005 - John

John was twenty-two years old and Afrikaans speaking. He had arrived from Johannesburg, three months before I had met him, looking for better employment opportunities. He operated at South Beach regularly during the period of fieldwork and became one of my key research participants. He often discussed the other prostitutes operating there, with me, and seemed to be very well informed about them.

When John spoke of his childhood years, he did so with a certain sadness. He was separated from his mother and father, after their divorce, as a toddler and grew up with his maternal aunt for several years. John resented that his mother "threw him away" but said that he could not blame her because she had had many mouths to feed. When it was time to go to high school, John returned to his mother's home in Johannesburg (Appendix H). She had married a man with four children. John himself had three brothers and two sisters. The household now consisted of his mother, stepfather and ten children. Life at home proved to be a difficult adaptation for John and he frequently became involved in arguments with his stepfather and stepbrothers and stepsisters. At the age of sixteen, after having failed to complete standard eight, John decided to leave home.¹

After leaving school, John headed for Johannesburg in search of employment. None of his applications were successful and he realised that his lack of education

¹ Some weeks before moving down to Durban, John attempted to return home after four years but was chased away by his step-father. He has had no regular contact with his family since then, except for an occasional phone-call to his mother.
made it unlikely that he would succeed. He survived on doing handy-man jobs, but found that it became increasingly difficult to make ends meet.

It was during this time that he started a relationship with a girl who became the mother of his two children. As menial jobs became increasingly scarce, John had to rely more and more on the meagre income his girlfriend earned as a cashier. The lack of finances proved to be too much of a strain on their relationship and the girl decided to move back to her parents who stayed in Krugersdorp.

John left Johannesburg and moved to Durban to seek employment soon after he had broken-up with his girlfriend. He worked as a bouncer at a beachfront club but was fired after three weeks because he was late for work. He did not find any other employment and returned to Johannesburg again where he stayed with two homosexual men who were in a long-term relationship. He had met them "by chance" at the Johannesburg station after he arrived by train from Durban. They invited him to their flat where they provided him with liquor, food and a place to sleep. In exchange, he had to participate in limited three-way sex. The arrangement suited John for he was initially required only to watch the two of them having sex and this did not make him feel too uncomfortable. As the arrangement became more of a long-term one, John became more and more involved in his hosts' sexual activities.

After an argument with the two men, however, John was evicted from the flat and found himself on the street. John's hosts had once told him that men could find other men for commercial sex at the station, and so, destitute, he headed for the station and entered into his first direct sex for money act. He soon got to know the
other prostitutes operating there and learnt about the area at Joubert Park where male
street prostitutes also plied their trade. It was there, at Joubert Park, where John had
his first brush with the long arm of the law.

Having been charged with soliciting, John, unable to pay the fine, was
sentenced to a short period of time in prison. Upon his release he returned to
prostitution, but initially avoided Joubert Park. Necessity, however, propelled him back
to Joubert Park where more money was to be made and he was arrested again, jailed
again and released once more.

John’s third attempt to return to the prostitution scene at Joubert Park was,
however, foiled by a prison services officer who "kept the guys (ex-prison inmates) off
the block". The officer was tasked with preventing male prostitutes, who had recently
been released from prison, from re-entering the prostitution scene. He did this by going
to Joubert Park at night where he relentlessly tried to talk them out of their decision to
take up prostitution again. He often threatened to call the police and have them
arrested if they did not co-operate. His tactics seemed to have had little effect on
John’s decision to maintain his prostitution activities. John had simply decided to move
to Durban and continue here. That was when I met him.

John described himself as ‘straight’ (heterosexual), and said that he “definitely
preferred women” for sex. He also mentioned that he had “never had a problem” with
man-to-man but that it was not his preference. He had been sexually active since his
teens but had never had sex with boys. He had had numerous sexual relationships
with girls and had stayed with the mother of his two children for three years. He did,
however, have no intention of getting married because, as he put it, "it (marriage) would interfere with my life". He enjoyed being single and independent, having the freedom to do as he wanted.

During the period of fieldwork, John had claimed, on two occasions, that he was involved with two different girls. The first woman was an older "Belgian nurse" who allowed him to stay in her flat whilst she was on a mission to Mozambique. He had a brief sexual relationship with her but left soon after she returned from Mozambique. The reason given, was that she was very demanding (sexually) and that she tired him out. He found it difficult to keep her and his clients sexually satisfied. The other girl John stayed with, was a stripper at a club in town that catered predominantly for sailors. Their relationship, which was based purely on sexual attraction, did not last long and John was out on the streets once more.

John's professed heterosexuality could go some way in explaining why he engaged in limited sex acts with his clients. By what was now already a fairly discernible pattern amongst the street prostitutes at South Beach, he restricted sexual contact with clients to masturbation and occasional oral sex, and did not participate in anal sex, either as the penetrative or receiving partner.

John had a reasonably accurate knowledge and awareness of HIV/AIDS, gleaned from the popular media and peers. He was of the opinion that there was "no chance of getting AIDS" as a result of his involvement in commercial sex work because he did not engage in high-risk sexual activities with his clients. He was sceptical about the potential for HIV transmission through oral sex and claimed, like so many other
respondents, that he did not allow a client to ejaculate in his mouth, and thus, did not swallow semen.

He did not practice safe sex with his casual sex partners or lover consistently. John reported ‘always’ using condoms when he has sex with a woman for the first time, but this hardly ever continues during subsequent sexual encounters. When I asked him why he stopped using condoms he replied that he sometimes ‘forgets’, or that he just did not have condoms with him at the time. John added that when he engaged in unprotected sexual intercourse with a woman, he preferred not to ejaculate in her vagina but rather in her mouth, between her thighs or between her breasts. This way, he argued, the woman did not feel she was at any possible risk of HIV infection, and he had peace of mind that she would not fall pregnant.

John’s self-reported day-to-day life varied considerably during the period of fieldwork. At times he would find accommodation and at other times he would be destitute, sleeping on beaches and under trees. There were no regularities or routines that he adhered to, and no single person or persons who gave a sense of stability to his life. John was of the opinion that his unsettled life was to blame for not having a meaningful relationship.

John found himself spending more and more time at South Beach as the cost of life increased, in order to generate sufficient income to survive. He also found that it became increasingly difficult to secure clients. One reason he gave was that the clients preferred to “take one of the new boys”. He had been operating at South Beach for two
years at the end of the fieldwork and had decided, at that stage, to start operating at the new gay clubs that were opening in the Point area in addition to South Beach.

The erratic income John earned through prostitution was spent on food, cigarettes, alcohol, gay club entrance fees, and he also contributed to costs if he was staying with someone. Occasionally he bought clothes or shoes, only to sell them again later when he needed money.

During my fieldwork, John actively pursued his quest for employment when he had an opportunity. He applied, amongst others, for a position as a bouncer at a nightclub in the CBD, as a painter at a local construction company and as a barman at a gay bar. None of these applications were successful and left John, whose hopes had been raised every time, disillusioned. It was after the rejection of his application as a barman that John remarked bitterly that the only way open for him would be to start robbing people if he could not earn a salary the honest way.

Going back to Johannesburg was another option that John had considered once or twice. However, the unpleasant association he had with the city made it unlikely that he would return there soon. Cape Town was also mentioned on occasion as a destination, but practical considerations, such as the costs of travel, made it no more than a suggestion.

When I asked him if he had considered ceasing his prostitution activities he said he would, but only if he had an alternative form of employment. For the
foreseeable future, however, he would continue with prostitution, since it was his only source of income.

**Case SB 006 - Fred**

After eighteen months of fieldwork, I met Fred, a thirty-two year old, Indian man, whom I had observed for several evenings before we made contact. A sudden rainstorm brought him charging for the relatively dry haven that my vehicle offered, and so started his participation in the research. He was the most unsuccessful of all the participants at South Beach because he was ignorant of how to secure a client and hesitant to engage in sexual acts with men.

We rarely had the opportunity to discuss Fred's childhood and school years. As far as I could ascertain, he was born and raised in a segregated Indian suburb in Johannesburg, where he attended the local primary and high school respectively (Appendix H). His father was an artisan who brought home a pay packet every week and his mother was a busy housewife. Fred mentioned having a brother and two sisters, all of them older than himself.

After completing standard ten (grade 12) in 1981, Fred secured employment at a security firm. He earned a modest salary, sufficient to provide for all his needs. In 1987 he married a girl he had known since high school and settled down. His happiness was, however, shattered when he was retrenched just before Christmas in 1989. Fred managed to secure employment at another security firm, but it turned out to be short-lived, as the firm went bankrupt. In 1990, Fred found employment as a
security guard at a gymnasium. However, his salary was far lower than what he had earned previously. His wife sought employment as well, but was not successful. The lack of money, according to Fred, was the major cause of his marriage gradually breaking down.

Fred's entry into prostitution had a long run-up. He had befriended a gay man who was a colleague of his at one of the security firms who also lived in Johannesburg. As arguments about the lack of money increased between Fred and his wife, his friendship with the colleague became more firm. Yet, as Fred emphasised, "purely platonic". Fred's wife however did not believe that the friendship was of a platonic nature and publicly accused him of having a sexual relationship with the man. This allegation shattered his standing in the community, despite his denials, and his wife's family closed ranks behind her. He left his home disgraced with nowhere to go. Fred also lost his job at the gymnasium soon after breaking up with his wife because he was constantly late for work, seldom wore clean or ironed clothes and simply, in his own words, "did not care anymore".

His friendship with the gay man, despite being the source of his misery, also proved to be a lifeline. He occasionally provided Fred with accommodation, meals and laundry facilities, yet never asked him for sexual favours in return. One day this friend introduced Fred to another young man who was a prostitute operating at Joubert Park. The young man in turn introduced Fred to the prostitution scene some time later, but Fred did not really want to get involved. He said it was the need for money that eventually led him to enter into prostitution.
He had only been on the street for a short while when he decided to move to Durban. Two factors led to this decision. Firstly, his lack of success as a street prostitute made the rumours about how lucrative job opportunities in Durban were, very appealing. Secondly, he knew people in Durban who would be able to accommodate him whilst he sought employment. Despite having good references from his first two employers, Fred failed to secure employment in the security industry in Durban. In addition, the family he was staying with did not have much money and he came under increasing pressure to contribute towards his accommodation.

Whilst in Johannesburg, Fred had heard from the other prostitutes about the scene in Durban. Once again driven by the need for money, he decided to go to South Beach. He managed to secure a client late on his first evening and earned R30-00 for masturbating him. He returned again the following evening and regularly from then on, for the next two months.

Fred claims never to have had sexual contact of any kind with another male before his entry into male prostitution. His sexual preference was strictly heterosexual and he argued that his lack of sexual arousal when performing a sex act on another man was proof of that. He emphasised that he never had an erection or an orgasm except when he had sex with a woman.

Because of his lack of sexual arousal whilst having sex with a man, Fred only masturbated his clients. He allowed clients to fondle him if they insisted, but said that the clients lost interest when he failed to get the desired erection. He never performed oral sex on a man, neither did he engage in anal sex, either as the insertive or
receptive partner. He stressed that he had no intention of engaging in such acts. He occasionally allowed clients to perform oral sex on him but, as when they tried to masturbate him, they lost interest because of his lack of arousal.

Since his separation from his wife he had not had sex with another woman because he still loved her and did not want to be unfaithful to her. Fred often expressed the desire to reconcile with his wife but did not know if it would ever happen. Apart from the fact that his wife was angry with him, his involvement in male prostitution lay heavily on his mind and he did not know whether he should tell her or not, if he ever had the opportunity to talk to her again.

Fred and I did not discuss HIV/AIDS in much detail. Through perusal of the popular printed media, Fred acquired awareness of HIV/AIDS and how it was transmitted through sexual contact with both men and women. He was however unaware that unprotected oral sex could facilitate the transmission of HIV/AIDS, but added that he was not concerned about the danger of oral sex because he did not engage in it with his clients. Fred did not engage in anal sex with men either, and had had no sexual relationships with women other than his wife. He thus, had had no history of engaging in high-risk sexual behaviour, and was not overly concerned about being infected with HIV either.

Fred spent most of his time moving between South Beach at night and other areas rumoured to provide opportunities for male prostitutes during the early hours of the morning. He seldom had any luck at these alternative venues, and suspected that the other (white) prostitutes at South Beach had lied to him, in order to get him away
from "their" territory. Depending on whether he had enough money or not, Fred went to Chatsworth and got some sleep, had a bath and went back to South Beach soon after sunset. If he did not have enough money for transport, he stayed at South Beach and slept wherever he could.

When Fred had money to spend, other than paying for accommodation, food and transport, he bought cigarettes and liquor. He claimed not to use cannabis or other drugs, yet, one of the other participants told me that Fred occasionally sold cannabis there at South Beach and that the police were "keeping an eye on him". The same respondent also mentioned that "he (Fred) smokes (dagga) like a chimney".

Social activities did not feature high on Fred's list of priorities. Not only did he not have money to spend going to cinemas or night clubs etc., but he also expressed no desire to go out, saying that he would rather keep the money to return to Johannesburg when the time was right. He also added that he did not think it would be appropriate for him, strictly speaking still a married man, to be going out for the evening without his wife.

Fred's burning ambition was to return to Johannesburg to reconcile with his wife, find employment and live a 'happy ever after life'. The realities staring him in the face, however, indicated that his dream might remain just that. He was painfully aware that every day that passed with him being unemployed diminished his chances of employment, as he would have to tell untruths about the period of time he had been unemployed. Fred was the most unsuccessful of all the participants and hardly earned enough money to pay for board and lodging. To fulfil his dream of returning to
Johannesburg, Fred realised that he would have to save enough money to travel there and resume his responsibilities as breadwinner after he had patched up his strained relationship with his wife.

The last time I saw and spoke to Fred he was preparing to go back to Johannesburg, despite the fact that he had no money to get there. The people he had been staying with had evicted him from their home because he could not afford to contribute to the household anymore.

A life on the streets of Durban was not a prospect Fred enjoyed and he was of the opinion that Johannesburg would offer better employment opportunities than Durban. If all else failed, he added, "at least there is still Joubert Park". Indications are then that Fred intended continuing his prostitution activities in the foreseeable future should he fail to secure employment.

**Discussion**

The case studies presented here are reasonably representative of the similarities and differences which were observed across diverse categories within the male street prostitute population operating at South Beach. The data of the other male street prostitutes who had operated at South Beach, and had participated in this research but had not been included in this selection of case studies, followed these broad similarities with a few notable exceptions. Several of the themes introduced in this chapter will be linked in chapters 5 and 6, and in particular, those that holds implications for HIV/AIDS transmission and intervention.
As noted, the respondents at South Beach were predominantly young, white, and Afrikaans speaking men, who came from dysfunctional family backgrounds. The majority grew up in working class environments, mainly in the Gauteng province, and did not consider themselves to be Durbanites. Interestingly, very few young men who grew up in Durban and environment were involved in prostitution at South Beach (as opposed to those operating at North Beach).

The majority of the South Beach respondents had limited or no employment history other than commercial sex work, and, as will be discussed in more detail later, entered into prostitution because of economic necessity. Their introduction to prostitution had, in most cases, been preceded by either time spent in Juvenile rehabilitation centres or correctional institutions, indicating a history of conflict with the law and society.

In keeping with studies done elsewhere (Elifson et al, 1993:79; Morse et al, 1991:537; Pleak and Meyer-Bahlburg, 1990:567; Rowe, 1994:42), the male street prostitutes who operated at South Beach were predominantly heterosexual. Some had ongoing sexual relationships with women who were in the commercial sex trade as well, whilst others opted for casual sexual relationships only. All of them drew distinct differences between their working and private sexual lives, the former associated with money, the latter with emotions.

When compared to the following chapter, which provides mirror case-studies drawn from the North Beach respondents, it becomes apparent that the prostitutes who
operated at South Beach during the fieldwork, displayed a higher level of AIDS/HIV awareness than their North Beach counterparts, and reported a consistent higher rate of condom use with clients. Of concern, however, was the prostitutes' reported infrequent and inconsistent condom use with their casual sexual partners and lovers (discussed in chapter 6).

The majority of the male prostitute operating at South Beach were homeless, whilst a few had semi-permanent accommodation arrangements. Those who were homeless often slept and lived out of doors, constantly exposed to the elements of nature. The lack of security associated with being homeless, as well as the lack of basic facilities such as all-hour access to ablutions and a soft bed to sleep on, contributed significantly to the despair and despondency the respondents often displayed. Aspects of daily life, which are so often taken for granted, become major problems for the destitute young men. Maintaining personal hygiene when homeless, for example, was a constant source of concern to the respondents. Not only did not the lack of facilities to maintain their personal hygiene impact negatively on their self-esteem, but they were also acutely aware that unpleasant body odours could impact negatively on their ability to secure clients.

Sufficient nourishment is another problem the male street prostitutes had to grapple with continuously. Regular and nutritious meals were not a feature of their daily lives, and hunger often a demon breathing over their shoulders. Take-away food was the respondents only alternative, when they could afford it, considering that they had no facilities to cook raw ingredients. The fact that the respondents by and large had followed an unhealthy diet, lacking in sufficient nutrition to boost and maintain
healthy immune systems was, however, of little concern to them. They were more concerned about earning enough money to buy food, any food, as long as it stilled the hunger pangs.

Most of the prostitutes who plied their trade at South Beach were fatalistic about their future, living from day to day. They were all acutely aware that each day passing by in the commercial sex industry decreased their employability in more conventional fields of employment. Yet, none possessed the resources to terminate their involvement in prostitution and shift towards conventional employment. Their lack of employable skills, insufficient levels of education and unproved employment histories are all factors working against their chances of securing employment in a country where unemployment is particularly prevalent. In addition, being white males, they are also hindered by the macro social moves towards implementing affirmative action in the workplace, which favours people from previously disadvantaged communities. Faced with realities such as these, it came as no surprise to note that the respondents hardly ever talked about the future. For them, the present in itself was depressing and daunting enough, and a happy future a luxury they dared not dream about.

**Meaning**

With the exception of Paul and one or two of the other participants, all the other respondents strongly disliked their involvement in the commercial sex industry, and in particular, engaging in sexual activities with men when they were heterosexual. They were well aware of the social stigma society attaches to prostitution, and not very open about their profession when interacting with other people. None of the respondents
indicated that their family and relatives were aware of their involvement in commercial sex.

Why then, it can be asked, did they enter into male prostitution? Why do they not explore alternative avenues of generating income, and why did the majority indicate that they intended continuing with their commercial sex work? The answer, I believe, does not lie in the realm of social meaning attached to prostitution, nor does it lie in the way(s) the prostitutes view their lives and involvement in prostitution. The answer, as suggested by this research, firmly indicates that prostitution is rooted within the ambit of economic considerations. In this regard, I am guided by the concept of understanding prostitution as part of a 'survival strategy' (Preston-Whyte et al., 1996:1) where, from the perspective of the sex worker, prostitution "is about surviving poverty".

There is a commonly held perception that prostitutes generate vast sums of money, a fallacy that had contributed to many of the respondents entering into prostitution. However, the reputed wealth potential was not the major consideration for the respondents at the time of their entry into prostitution. What was of concern to them at that particular point in time, was a pressing need to generate some income, a need that transcended, for some, their heterosexual aversion to sex with other men. It was also a need that was stronger than the social stigma and criminal implications of entering the arena of prostitution. For many respondents, their entry into prostitution was regarded as one of the last options open to them. The circumstances leading up to their entry into prostitution differed, yet, all the respondents indicated that they had exhausted all other avenues of earning money before deciding to enter the arena of commercial sex work.
In the same way that economic considerations underpinned the respondents' entry into prostitution, economic considerations remained the driving force behind their continued involvement in commercial sex. The majority of the respondents had assumed the modus operandii of those who preceded them, such as, for example, being assertive in their dealings with clients to ensure receiving payment for their services, and, in doing so, identified themselves prostitutes, plying their trade as it had been done for years and generations. Their objectives are largely short-term based, to secure the next client, to generate enough money for food, cigarettes, alcohol and other drugs, to survive one more night.

Finally, economic necessity is also at the heart of the long-term decision of the majority of the prostitutes to remain involved in commercial sex work. Very few of the respondents generated enough money to both survive and accumulate sufficient funds to sustain a transition from commercial sex work to another form of generating income. For the majority, commercial sex work provided them with barely sufficient means to survive on a day-to-day basis, keeping them trapped in a vicious cycle of negative economic options from which escape appears to be virtually impossible without outside assistance.

Amidst the negativity, desperation and despondency the prostitutes had to deal with on a daily basis, and struggling to survive physically, mentally and emotionally in a world of social hostility and stigma, prostitutes are also constantly under threat of HIV/AIDS infection. The issue of HIV/AIDS and prostitution is one of the important issues addressed in this thesis, and after a presentation of case studies from the North
Beach respondents in the following chapter, the discussion will focus on the relationship between HIV/AIDS and male street prostitution as it occurred in Durban.
CHAPTER FIVE: CASE STUDIES - NORTH BEACH

(NB: ALL NAMES HAVE BEEN CHANGED TO PROTECT THE IDENTITY OF THE RESEARCH PARTICIPANTS)

As in Chapter 4, this chapter will deal with six selected in-depth case studies, drawn from the participants at the North Beach research site. Once again, broad patterns were discernible across the case studies, while similarities and differences between the North Beach and South Beach case studies also presented themselves, allowing for further analysis and discussion towards the end of this chapter.

CASE STUDIES

Case NB 001 - Charles

Charles was a thirty-one year old, articulate, black man. He was the first respondent I encountered and made contact with at North Beach. When I arrived there for the first time, several men were cruising, and Charles was standing in a well-lit part of the cruising area with a magazine in his hand. He did not read the magazine, but stood looking intently at everyone who passed him by. I was not aware that he was a male prostitute, but found it odd to come across a black man cruising at a (largely 'white') gay sex oasis. Only after several visits did Charles and I strike up a conversation, and then he revealed that he had sex with men for money. Prostitution, however, was not Charles' sole source of income, as I later learnt, but an important supplement to his monthly income.
Charles was born near a settlement called Big Bend in the neighbouring Kingdom of Swaziland, where he lived in the homestead of his maternal grandparents for the first few years of his life (Appendix H). His father was a migrant labourer on the Witwatersrand, working in a gold mine, and his mother a domestic servant in Mbabane, the capital of Swaziland. When he was of school-going age he went to stay with some of his father's relatives in the vicinity of Pongola where he attended a nearby "farm school" (Appendix H). Charles described his childhood days as "normal" and "happy", and he fondly remembered tending to the cattle and having the freedom of the open veldt where he played and grew up with his friends and relatives.

At the age of nineteen Charles had completed standard eight and decided to leave school, a decision he has regretted ever since. He returned briefly to his grandparents in Swaziland to seek employment but failed to find any. During this time he met a girl with whom he became sexually involved for a brief period of time. After he had returned to Pongola he heard that she was pregnant and he became the father of a baby girl. Charles then decided to go to Johannesburg to find employment that would enable him to afford lobola or bridewealth to marry the mother of his child. I asked him if he loved her and he said no, but that he wanted to marry her because "that is the way it must be done".

Johannesburg did not offer the opportunities Charles had hoped for. He found, at the best of times, casual employment but the income was barely enough to provide for his immediate needs let alone save up for bridewealth. He gradually lost contact with his
family and friends as he found himself drawn deeper and deeper into metropolitan life, learning the skills of survival in an environment far removed from his carefree youth.

After having rekindled his kinship network, he moved down to Durban in 1991 where he stayed with various family members for periods of time. Once more, he had to settle for menial casual employment opportunities until he got a permanent job working in a small grocer shop. He was responsible for cleaning and packing the racks. The remuneration, although a steady source of income, remained insufficient for him to survive on. To save costs, he shares a two bedroom flat in Albert Park, a residential area consisting of numerous apartment blocks close to the central business district, with five other men (Appendix E).

Charles entered the prostitution scene in Johannesburg a couple of months before he moved down to Durban. At that stage he was unemployed and homeless. When asked who introduced him to it, he replied that he was not introduced to male prostitution. He had heard about men who were prepared to pay other men for sexual acts from various people in Johannesburg, but had never believed that it was true.

One evening, just before Christmas in 1990, he happened to be at the Johannesburg station. He, unbeknown to himself at the time, was in the particular area that was well known as a gay ‘sex oasis’ where the services of male prostitutes could be procured. He was approached by a middle-aged, white man who asked him if he wanted to go to the toilet with him. The man added that he would give him money, but did not tell Charles why he would do so. In the toilets the man beckoned Charles into a cubicle and, after closing the door, asked Charles to masturbate him. It was then that the man
said that he would give him money and offered Charles a R10-00 note. He accepted the money and has entered into occasional bouts of prostitution ever since. It was in Johannesburg too, that Charles heard that it was possible to earn money in Durban through prostitution. This knowledge, in addition to the prospects of using his rekindled family ties, persuaded him to move to Durban.

The first night he went out in Durban, he went to South Beach but was told to leave by "the white men who were there". A young Indian man who was walking around in the area suggested he go to North Beach which he did. He has not gone back to South Beach to sell sex since then. Occasionally he would go to Beachwood but since he had no transport to travel that far, he preferred to go to North Beach when he needed to generate some income.

I asked Charles when he had had his first sexual experience. He said it was while he was still at high school, with a girl who was in the same class as himself. When I asked him whether he had ever engaged in sex with men or boys, he replied that as children he and some of his friends used to masturbate together, but had not done so since he went to high school. His sexual contact had remained exclusively heterosexual until he entered into prostitution.

At the time of the fieldwork, he engaged in casual sexual contact with different women who also stayed in Albert Park (when the opportunity arose), but he did not have a steady 'girlfriend'. Occasionally, a young woman from Swaziland (not the mother of his daughter) came to visit for a few days and stayed with him in the flat. They had an ongoing sexual relationship but he did not consider her to be his 'girlfriend' either.
I asked him if he engaged in sexual acts with men other than for financial gain and he said no, he preferred women. He did not always get an erection when he rendered a sexual service to a client but occasionally reached an orgasm, which he admitted he enjoyed. He did, however, tell me that he thought of women and of having sex with them when he was with a client. In addition, he usually carried a copy of a pornographic magazine with him when he went to North Beach, because looking at the pictures of naked women in sexually provocative positions stimulated him sufficiently to get an erection when he needed one.

Charles engaged in masturbation and oral sex as both active and/or passive partner, and anogenital sex as the insertive partner, with clients. He did not engage in anal sex as the receptive partner saying that "...a man (heterosexual) can not do that, only if you are stabane (homosexual)".¹

Charles was aware that HIV is sexually transmitted, and reported using condoms consistently when he engaged in anal sex, as the insertive partner, with a client. He did, however, not use a double condom, neither did he use any additional lubrication other than his own saliva. Charles found it hard to believe that HIV could be transmitted during oral sex.

Charles frequently engaged in casual sex with women and reported not using condoms consistently largely because he said he was too "shy" and because he was

¹ The association between the being receptive partner in anal sex and being homosexual, was widely held amongst the respondents at North Beach.
'embarrassed. However, if his casual sex partner suggested or insisted that he used a condom he happily complied. He did not use condoms with the young woman from Swaziland with whom he had had an ongoing sexual relationship. When asked why, Charles replied that using a condom with a girl he knows is "a problem" because he feared that she would suspect him of having a "sickness". Charles added that Zulu men are not supposed to wear condoms when having sex with women because it is not congruent with Zulu "culture", and using condoms will result in women losing respect for men.

Charles's daily routine was, in his own words "... just like everybody else. I get up early in the morning to start work at seven o'clock and I come home maybe after seven o'clock in the evening. Then I must help to cook food and do my washing and clean the flat. Then I go to sleep because the work is hard and I am tired".

Occasionally Charles would go to a local pub and have a beer, but not very often as he could not afford it. He listened to the radio at home at night and went for walks in the park as often as he could. I asked him why he enjoyed walking in the park, and he replied that the flat was a bit small when everybody was there and then he needed to get out. He also said that he liked the park because there were big trees under which to sit and think. The park was also the place where he could meet women for casual sex.

Once a month, on a weekend when he was not working, Charles visited relatives who resided in the Durban area. He usually stayed over for a night or two. Occasionally he went back to the Pongola area, but only for a specific family occasion such as an
umzebenzi, where sacrificial contact with the family ancestors prescribes the presence of the men of the family.

Charles' future expectations were modest. A steady job that paid enough money to live decently, perhaps a less crowded apartment and a car was what he said he wished for. He felt his lack of education was an inhibiting factor in realising his dreams. Without the necessary educational qualifications he, rightly, regarded his chances of securing better employment as a diminishing possibility. He singled out a return to some form of full-time schooling, to complete his matric, as the most essential step he could take to secure a better future for himself. Yet, he was also aware that it was not possible to do this without sufficient money to sustain himself.

He said that he was looking around for better paid employment but did not have much spare time to do so. He supplemented his steady income with occasional bouts of prostitution, but insisted that he only did so when he was desperately in need of money, for example, if he needed to go to "the farm" (Pongola) or when there was no money for food near the end of the month when he got paid.

He did not see himself being involved in prostitution indefinitely and regarded it as a temporary way of generating much needed income. He believed that he would be able to disengage from prostitution permanently once he secured better paid employment. Yet, Charles had no idea how to go about getting out of prostitution and making the transition to alternative methods of generating income. He often asked me if I knew of anybody who would employ him. As with the others, I never did.
Case NB 002 - Andrew

Andrew, who was twenty-six years old, became one of the key respondents at North Beach. Whilst observing the activities at North Beach during the pilot study, I had noticed him once or twice going into bushes in front of the car park, followed by a man. They would both emerge after a short while (3-5 minutes). We eventually met one evening after I had watched him for almost four hours (and two trips to the bushes). He only spoke broken English and our first conversation was riddled with misunderstandings. With time it was, however, possible to build up a good understanding of what he was saying, and his information proved to be invaluable in the long run.

It was very difficult, initially, to get Andrew to understand that I was not interested in being a client. I had to explain to him repeatedly that I was doing research. That did not, however, deter him from trying every now and then to coax me into the bushes or onto the beach to exchange sex for money. He even offered me “credit”, (i.e. to have sex now and pay later), or to have sex in exchange for clothes.

As Andrew got to know me better, he gradually stopped trying to entice me into the bushes, and I could get on with finding out more about his life. He grew up near KwaDukuza (Stanger), as one of seven children and did not divulge much about his childhood days, except to say that he was the third youngest (Appendix H). He had three older sisters and one older brother as well as two younger brothers. His youngest brother had recently died as the result of being caught in crossfire at a taxi rank in Stanger. His (late) father had worked on a sugar farm in the vicinity, and his mother...
stayed at home raising children and tending to the household. Andrew hardly ever spoke about his childhood, but mentioned once or twice that it was not entirely an unhappy one. Money was, however, scarce and poverty had been a constant family companion since his earliest childhood days. He knew hunger and had learnt early in his life to get by on what he could.

Andrew's educational history goes no further than standard four. By his own admission, he was "not very clever" at school. In addition, he had attended school only when there was sufficient money available. At the age of sixteen, he decided to give up any further attempt at education, without having completed standard five.

Employment opportunities that came Andrew's way after leaving school were restricted to menial manual labour on the sugar farms in the vicinity of his parental home. In 1989, soon after his twenty-first birthday, he decided to head for Durban to seek employment. He failed to get a job and returned home. In September 1991, not having been able to secure any form of employment in his home area, Andrew decided to move to Durban permanently, despite not having any form of employment to sustain him.

He spent many months in Durban walking from home to home seeking, unsuccessfully, any form of employment. During this time, he lived from the contents of dirt bins and slept wherever he could, mostly at the railway station. He soon learnt that there were showers on the beachfront and North Beach happened to be the closest, directly accessible beachfront area from the station.
It was there at North Beach, whilst having a shower that Andrew met another black man whom he befriended. This new friend who was also destitute, survived by selling sex to men at North Beach at night and sleeping in the adjacent bushes by day. Andrew initially recoiled from the idea and resisted entering into prostitution. He maintained his quest for employment and continued living from dustbin to dustbin.

It was his exposure to winter in 1992 which prompted Andrew to reconsider the possibility of selling sex to afford at least hot food and perhaps some form of shelter. Andrew soon found that his ignorance regarding man to man sex, and his lack of experience in negotiating payment for sex, left him worse off than ever before. His first couple of contacts resulted in him not being able to perform sexual acts to the satisfaction of his clients and, in addition, he was left empty pocketed since he did not demand money before or after the sex act. He expected that the men whom he went with would automatically pay him for sex. He had been unaware that North Beach was a sex oasis where men sought casual sexual contact with other men, and that as a prostitute, he would have to create and nurture a demand for the commercial sexual service he had to offer.

Despite the initial setbacks, Andrew quickly learnt how to survive in this new environment by befriending the other prostitutes who operated there. He gave up trying to find employment and spent most of his nights at North Beach trying to generate some income. In addition, he also started sleeping in the bushes close by since it was difficult to sleep at the station during the day.
Prior to entering into prostitution, Andrew’s sexual contact was exclusively heterosexual. When asked whether he had had any form of sex with men or boys before, even during adolescence, he said no. He is the father of a five-year-old boy, the result of a brief sexual relationship he formed with a young girl in his home area. It was after the birth of the boy that Andrew decided to try and find employment in Durban the first time. He wanted to be able to support the mother of his child and start accumulating money to afford the customary bridewealth or lobola.

Whilst in Durban, Andrew engaged in occasional casual sex with women, but none of them developed into any form of relationship. When he returned home he resumed his relationship with the mother of his son and she became pregnant again, this time bearing a girl. It was at this point that Andrew decided to move to Durban permanently, leaving the mother and children in the care of one of his elder sisters. Having had no form of employment or accommodation, Andrew once more opted for sleeping at the station.

During the time he had spent sleeping at the station at night he had once again engaged in several casual sex encounters with women. He mentioned that he often had sex with some of the women who came from Zimbabwe. Since he started selling sex to men at North Beach and sleeping in the bushes, he has, however, hardly had any sexual contact with a woman. When he wanted to have sex with a woman, he went to the station with the intent to find a sexual partner.

Andrew said that he eventually enjoyed having sex with men, but did not have sex with men simply for physical pleasure. He did not have any preference for any
particular sexual acts with men, and the only reservation he had was that he would not allow a man to practise penetrative anal sex on him. The sexual acts he most often engaged in with men were masturbation and oral sex, in both instances as the active, passive or mutual partner. He seldom engaged in anal sex and when he did, he insisted on being the insertive partner.

Sex with women for Andrew meant having vaginal intercourse. Mutual masturbation and/or any form of oral sex were hardly ever practised, and when it was, it was considered as part of foreplay only. In contrast, he considered any form of sexual activity with a man to be sex. Although defining all sex acts as sex, he sub-defines masturbation as "playing", oral sex as "sucking" and anal sex as "fucking".

Andrew seemed to have had the least HIV/AIDS awareness of all the participants at North Beach, unable to distinguish between HIV and AIDS, and confident that he can "see" when another person has AIDS. He was aware of the risk of HIV infection in unprotected anogenital sex, yet, he did not consistently use condoms when he engaged, as the insertive partner, in anogenital sex with his male clients. He said that he did not use condoms because the clients did not supply them, and he did not have money to buy condoms from a nearby convenience store. He never used condoms when engaging in oral sex with his clients because he, like Charles (case NB 001) did not believe that HIV is transmitted via this route. Andrew also reported hardly ever having used condoms in his casual sexual encounters with various women.
A final comment on Andrews' HIV and AIDS awareness, is that he firmly believed that traditional Zulu healers, both faith healers (sangoma) and herbalists (inyanga), had medicine to 'cure' a person infected with HIV and afflicted by AIDS.

Andrew's daily routine rarely varied. He spent most of his time at North Beach seeking men who would be prepared to pay for sex. When he got tired, he went into the adjacent bushes to sleep, whether it was day or night. He used the change rooms at North Beach during the day for his toilet and ablution needs, but lamented the fact that there was no hot water available, a little luxury he would have loved to indulge in every now and then. At night, when the change rooms were locked, he used the bushes on either side of North Beach for his toilet needs and the outside showers for washing.

Occasionally Andrew would set off for Beachwood, particularly if business at North Beach was slumping. He would then spend two or three days in succession there, similarly using the toilet facilities there and sleeping in the bushes. Since there were no showers at Beachwood, Andrew did not take a bath for the duration of his stay there. If he desperately needed to bath he went for a swim. He carried his blanket and all his worldly possessions with him in a plastic bag when he went to Beachwood, and when he stayed at North Beach; he hid it in the bush closeby.

Going to town and doing shopping were not high on Andrew's priority list since he invariably never had disposable income. The money he earned at North Beach was spent daily buying food, cigarettes and occasionally cannabis and/or beer. His occasional meals consisted largely of a half loaf of bread and a piece of barbecued chicken. When he had enough money, he would buy a Coke to wash down his meal.
Other items, which featured on his menu occasionally, were chips, meat pies and sometimes a piece of fish. When he had enough money, he splashed out on his favourite, a 'bunny-chow' (hollowed-out bread with a curry filling).

'After-hours' socialising was largely restricted, due to the odd hours that Andrew spent at North Beach. He knew all the other prostitutes who regularly operated at North Beach and they often slept together in the bush for safety reasons. At other times, he went to the station to find the company of a woman who was willing to have sex with him.

Andrew had not been home for many months and rarely spoke of his family. He had no desire to visit them and although he missed his children, he had not made contact with them or their mother since he had entered into prostitution. When asked why he did not maintain contact with them he replied that "it is better not to". He said that he did not want to lie to them about what he was doing to earn money. He added that he would not be able to explain to his family, and to the mother of his children, why he did not send home money as he had promised.

Andrew was so preoccupied with earning enough money to survive from day to day that he rarely considered what the future held for him. He would happily have accepted any form of employment, but found himself spending so much time trying to procure payment for sex, that he was left with no time to look for employment. He had not actively looked for employment since he had entered into prostitution.
Andrew did not intend renewing his relationship with the mother of his children, even if he did secure employment, because he enjoyed being able to go with any woman he fancied. He said that if he found employment he would send her money for the children, but did not want the children to stay with him even if he did have accommodation.

Asked whether he would terminate his prostitution activities were he to secure employment, he answered that he did not know. He would certainly consider it, but did not know whether he would be able to find employment that would generate sufficient income to allow him to survive independently of prostitution. Like Charles, Andrew also pinpointed his lack of education and vocational experience as the two most important obstacles that negated his chances of securing employment.

Case NB 003 - Simon

Bower's (1990:380) comment about prostitutes who "evolve elaborate lies and wishful fantasies about themselves" timeously served to caution me in my dealings with Simon. We only had two conversations and these did not provide highly significant or valuable data. What he had to say makes for interesting reading nevertheless. He was approximately twenty-seven years old, and claimed to have grown up in Malawi. He said that he spoke Swahili and Zulu fluently, yet, he conversed with me in some broken English which did not differ much from the English spoken by many Zulu people daily who, historically, have had sub-standard education.

2 During a visit to Malawi in 1990, I found the vast majority of rural people being able to speak English fluently and faultlessly, in stark contrast to Simons' relative poor command of English.
Apart from having said that he was born in Malawi, Simon divulged nothing of his early childhood years. He could read and write "a little bit" of English, which indicated that he had probably attended school. His account of his life, as he told it to me, started when he was "called by the fathers (ancestors)" to "help people". After having been trained as a "fortune teller" in Malawi and Swaziland, Simon adhered to "the pull of the fathers" which was his reason for moving from Malawi to South Africa, and to Durban in particular. The power of the ocean in Durban, according to Simon, is "very strong", hence his decision to "settle" here.

My question about whether he had engaged in any employment in the past was met with indignity. Simon stressed that he was "in the calling of the fathers" and that was his "job". He added that the mystic powers that he had at his disposal prevented him from taking up conventional employment, but did not elaborate.

Simon did not tell me how he entered into prostitution, and I did not ask since it was obvious to me that Simon did not present his activities as prostitution. He gave me an elaborate explanation of how he saw his sexual activities, which tied in with his account of his sexual history and orientation.

Due to his "calling by the fathers", Simons' sexuality was one best described as bisexual since he was sexually attracted to, and sexually involved with, both men and women. He had had several sexual liaisons with women prior to adhering to the call of the ancestors, and was the father of two children, from two different mothers.
He was, however, destined to remain single and unattached since his "powers" and his "callings" explicitly dictated that he was not allowed to have a permanent sexual, emotional and domestic relationship with a woman. Furthermore, he enjoyed sex with a woman "very much" but also said that it was "dangerous" for him because it interfered with his abilities and powers.

Simon ascribed his sexual attraction to men, to the requirement that he had to abstain from having an ongoing relationship with a woman. He said that because he was not allowed to have a woman permanently, he had to satisfy his sexual needs with men. He added that he enjoyed sex with men, but not as much as with women.

Sex with a man was, according to Simon, safer than sex with a woman, but not altogether safe. It appeared that sex with either a man or a woman was inherently dangerous to his vocation, but sex with men simply less damaging to his powers. When I asked Simon how he dealt with the dangers posed by having sex, he said that if he had sex with a woman, he had to go through a ritually prescribed process that would restore his powers. This included not eating food for days and a ritual slaughter of a chicken. In addition, he had to bathe in the sea three times a day, and burn candles at various stages of the process.

Dealing with the damage and dangers associated with sex with a man was less complicated, and this I believe is where the crux of Simons' explanation came in when describing his activities at North Beach. In order to purify himself and appease the "fathers", he had to "put some silver money on the burning candles" immediately or as soon as possible after the sex act, and then swim in the sea when the sun came up. The
longer he took to perform this ritual, the angrier the "fathers" would become and concomitantly, he would find that his "powers are not so strong anymore".

When I asked Simon what sex acts he engaged in with men, he said that because he enjoyed sex with women more, he just "played" (masturbated) with men. If they wanted to, they were allowed to perform oral sex on him and he occasionally performed oral sex on the men. He had engaged in anal sex as the insertive partner once, but stopped because it took his power away "too quickly". He had never been the receptive partner in anal sex, and when I asked him if he would consider it he said no because "it will make the fathers too much angry".

When asked where he had sex with men, Simon indicated towards the far right dark and dangerous beach, and not to the left where men usually went to. It also transpired that he only had sex with men at North Beach and nowhere else. When I asked him why he only had sex with men at North Beach, he replied that "this (North Beach) is the place where you can find a man for sex, not in town or in Umlazi".

Simon and I never discussed HIV/AIDS. The range of sexual activities he reportedly engaged in with clients did not differ from that of the other North Beach respondents, and it was possible to deduce that he faced similar risks of HIV infection as the other prostitutes did.

Like many of the other prostitutes at North Beach, Simon had no permanent address and slept in the bushes adjacent to North Beach. Occasionally he went to Umlazi where he stayed for short periods of time with people he knew, but said that he
did not like doing it too often because the people were "always asking too many questions".

During the day, Simon would often be found cleaning the men's cloakrooms at North Beach. It was Andrew who told me that Simon was employed to clean the cloakrooms. Andrew also mentioned that Simon was an "impimp", i.e., he informs police on issues pertaining to North Beach, and mentioned that he (Simon) was also a "skelm" (dishonest, crook). He was reputed to have displayed signs of violent behaviour towards clients on occasion, and to have extorted money from them through threats of violence and by threatening to go to the police to complain that he had been taken advantage of. None of these allegations had been witnessed.

Andrew also said that Simon smoked cannabis and drank alcohol regularly, but refused to share it with the other prostitutes operating there. This unwillingness to share convinced Andrew that Simon was "a bad rubbish" and added that the other prostitutes did not "like him very much" because he was in Andrew's words, "not like us". When I asked Andrew what he meant by that he said that, unlike the prostitutes who "helped" their 'friends' (clients) to be pleased, Simon was interested only in the people's money. The result, Andrew said, was that "all the people who come here.... think we are all skelms like him".

When I asked Andrew if he knew that Simon was like a sangoma (a traditional healer), he replied that he knew that, but that he was not afraid of Simons' powers because he did not believe that Simon was really a sangoma. Rather, he said, Simon was a 'skebenga' (crook) who only used the ruse of being a sangoma to get money from
the men who went to the beach with him for sex because they (the clients) would be "afraid" of Simon once he tells them that he is a sangoma and not refuse his request for money.

I never talked to Simon about his future plans and expectations. Suffice to say that he was still to be found at North Beach at the end of this fieldwork, which indicated that he would probably remain involved in prostitution.

Case NB 004 - Gregory

My meeting with Gregory, a twenty-six year old black man, was most unusual and probably the introduction I am least likely to forget. One evening, soon after arriving at North Beach, I ventured towards the dark beach where men have sex with men. By now I was familiar enough with the terrain to go to this beach to see if there was any activity. The following extract from my fieldnotes gives an account of the meeting:

"As I turned around I almost bumped into a man. He had obviously followed me without me being aware of it. He then asked me if I was looking for some company and the phrase had an almost familiar ring to it... I asked him what he meant and he asked if I wanted to 'play' with him. I then asked him what does he mean when he says 'play'. His smile flashed white as he put his hand on my crotch and squeezed it slightly.

I had no intention of 'playing' with him but I was also curious to find out more since this was the 'real thing' I was experiencing. In the back of
my mind I had already decided that he is a prostitute, likely one of the ‘small change’ operators. Yet, the dark beach was not the place to find out what I wanted to and I took him lightly by the arm and suggested we walk closer to the open cruising area where there is a wooden bench for us to sit on and have a cigarette. He followed.

Once we got to the bench I felt more comfortable and in command of the situation. After explaining to him the nature of my research I asked him what his name was and where he stayed. Soon after our conversation started, he admitted that he provided sex for money when I asked him.”

Gregory was well spoken and had a gentle manner of speech. Laughter came easily to him and he proved to be the easiest interviewee at North Beach. He seldom and infrequently came to North Beach, and only did so as a last option when he needed money desperately.

He was born in Umlazi, a black township south-east of Durban (Appendix I). There, in a typical ‘matchbox’ house he and six other children were raised. They barely survived on the income of his father, who was an employee of the city council’s roads department, and that of his mother, who worked as a domestic servant in Umbilo, a predominantly white, lower-income suburb in Durban (Appendix I). His grandmother also stayed with them and contributed part of her pension money to the household expenses. Gregory said that as a child he was very happy at home.
The school years were turbulent for Gregory. He was caught up in the relentless ongoing struggle for better education and in 1988, twenty years old with only a standard seven certificate, he decided to leave school. After leaving school Gregory started seeking employment. He was not successful and settled for casual employment as a gardener for two years. He then heard of an employment opportunity at a popular car wash in the affluent, historically white suburb of Durban North (Appendix I). He applied for the position and got it.

Gregory had moved into a flat in Albert park with two of his brothers and another man after securing employment at the car wash where he was still staying at the time of the fieldwork. In early 1993, after being arrested for possession of cannabis, Gregory lost his job and has since not been able to find any other employment, casual or permanent.

When I asked Gregory how he became involved in prostitution, he recounted that he was told about North Beach and the prostitution activities by a man who also stayed in Albert Park. With my probing, he revealed that the name of the man was Charles (case NB 001) and confirmed that this friend Charles came to North Beach occasionally.

The first night that he decided to go to North Beach, Charles, who instructed him on how to secure a client, accompanied him. Gregory did not manage to secure a client on his first night and decided to go back again the following evening. It was, however, only several weeks later that Gregory went back to North Beach because he had secured temporary employment as a gardener in Morningside.
Gregory's employment as a gardener did not last long, however, because he was fired for making sexual advances on the female domestic servant who worked for the same employer. Once more unemployed and without any money, Gregory decided to go to North Beach again to try to secure a client. He was successful in doing so and has since managed to secure a client every time he went to North Beach. Prostitution quickly became his sole source of income.

Like many of the other prostitutes who operated at North Beach, Gregory did not have a set price for his services. He usually left it up to the client to determine. In addition, Gregory did not tell his clients that he was expecting money for the sex prior to engaging in the acts. The two reasons he gave for this were, firstly, that he was afraid of a police "trap" and secondly, that he was afraid of "chasing the man away". He would, however, hint that he was short of money during the conversation, which formed part of the run-up to the sexual encounter. Only after the sex act had taken place, did he ask the man for some money.

Despite being highly successful in securing men as clients, the money they paid Gregory was minimal. He said that he usually got "small change", not like some of the other's who, he said, could get even as much as thirty Rand. The sex acts he was prepared to engage in were mutual masturbation, oral sex, and anal sex as the insertive partner. When asked if he would be the receptive partner in anal sex, Gregory emphatically said that he would not. His reason was, like that of other respondents, that only stabane allowed themselves to be penetrated by other men.
Gregory considered himself to be 'normal' i.e. heterosexual. He had had sex with a girl for the first time when he was still in primary school and had led a very active sex life right throughout his high school years. When I asked him whether he had ever had sex with another boy or man before he came to North Beach he said yes. Whilst in high school he occasionally participated in masturbation with some of his friends but stressed that they "never touched one another".

He had also engaged in sex once or twice with one of the men with whom he shared the flat. These occasions were usually during the day when his brothers were away at work and when he and the friend had smoked some cannabis and had had something alcoholic to drink. When I asked him what sex acts he and this friend participated in, he said that they usually masturbated together whilst looking at magazines which contained pictures of naked females.

Despite these occasional sexual experiences with the friend, Gregory maintained his sexual interest predominantly in women. He was unmarried but was the father of a three-year-old boy. He did not see the mother or the child because there was friction between them. His inability to pay maintenance was the major source of contention between them and her jealousy complicated matters even further.

Apart from the casual sex he engaged in with other women, Gregory also had an ongoing sexual relationship with a girl from Inanda, an African township to the northwest of Durban. He visited her at least once a month for a weekend and spent whatever money he could afford on buying her chocolates and perfume. Marriage was not a
thought he entertained, although he was of the opinion that the girl wanted to get married.

Gregory was reasonably well aware of HIV and AIDS, as well as the difference between HIV and AIDS. He identified unprotected anogenital sex with clients as a major route of HIV transmission, but did not know that double condoms and extra water-based lubrications were considered to make anogenital sex safer. He had ‘heard’ that oral sex posed a potential threat of HIV transmission, but was not sure how transmission was possible if the active partner did not swallow the semen of his passive partner (which I explained to him eventually).

Gregory was also reasonably aware of the risk of HIV infection posed by unprotected sex with casual (female) sexual partners. He did not use condoms at all prior to entering the prostitution scene, but said that, as he became more aware of HIV risks through his involvement with commercial sex work, he had started using condoms with women whom he had engaged in casual sexual contact.

Gregory reported consistently using a condom on the odd occasion when he engaged in anogenital sex with a client as the insertive partner, but did not use a double condom or extra lubrication. He did not use condoms when he engaged in oral sex because he did not let clients ejaculate in his mouth, and thus, saw no risk for HIV infection.

Despite prostitution with and its concomitant dangers and risks being Gregory’s sole source of income, he did not give up seeking employment and spent
most of his days walking the streets looking for a job. He was not particular about what job he was seeking, saying that “any job is better than what no job is, that is why I will doing anything, washing cars, gardening, painting, anything”.

Since both his brothers and the other flat mate were employed, Gregory was tasked with housekeeping in lieu of contributing cash to the household. Thus, when he was not out looking for work, he was occupied with cleaning the flat, doing the laundry and cooking the food. He said he did not have much time for himself and being chronically without disposable income, he seldom went out to places such as the cinema or other centres of entertainment.

Gregory was optimistic that he would find employment eventually. He was of the opinion that the recent change in government would result in new employment opportunities opening up for him and other black men and women. For this reason he continued to scrutinise the opportunities advertised in the newspapers and followed up on any hint of possible employment, often spending all last money on taxi fare. The last time I spoke to him he had still not secured employment, but mentioned following up on a lead he had.

Case NB 005 - lan

Ian was a twenty-four year old, black man, who entered the prostitution scene towards the end of the period of fieldwork. He spoke very limited English but, nevertheless, told me about some aspects of his life which contributed to the bigger picture that took shape as the research neared its end.
Ian was born in Umlazi where he grew up in a single parent home (Appendix I). His father had abandoned the family when he was still very young, and the family had to survive on the income earned by his mother who was employed as a live-in domestic servant in Durban, and the meagre pension of his maternal grandmother who was staying with them and raised the children in their mother’s absence. He had brothers and sisters but he could not remember how many.

He only went to school till he reached standard five when he was seventeen years old. A year later he was told by his eldest brother to leave home after finding employment as a pavement seller for an Indian who had a shop in Grey Street. Ian apparently did not contribute enough money towards the household. He then found accommodation in a room in the squatter camp in Cato Manor, which he shared with two other young, black men (Appendix I). He had to pay fifty Rand rental per month, which, apart from a space to sleep, included a bucket of water per day but nothing else.

Apart from street vending, Ian had no other work experience and was unemployed at the time we met. When I asked him why he was no longer employed as a street vendor for the Indian man, he replied that his employer had chased him away after he (Ian) was robbed of a day’s takings. With the little money Ian had had at his disposal he decided to use his expertise as a street vendor and start his own business.

Initially, Ian bought vegetables in bulk and then walked around the informal business areas, selling to the other vendors who were operating their pavement stalls there. Although he had moderate success, he found that he was making no progress
and was soon finding it difficult to meet his rental requirements. lan decided to switch
products and started buying cannabis which he divided in smaller portions and selling it
in small parcels. He then switched to buying and selling cigarettes and cold drinks, after
he was caught with a new batch of cannabis that he had bought. He managed to escape
but lost the cannabis and with it his entire capital outlay.

With money he borrowed from one of his brothers, lan then bought second hand
clothes in the Umlazi township and sold them to women from Mozambique and
Zimbabwe at the major railway station in Durban. This venture did not bring in much
money and so lan had to find another, more profitable way, to generate income.

It was chatter amongst the women at the station that led lan towards prostitution.
Whilst trying to sell clothes among these women, lan heard them talking about the men
who had sex with other men at North Beach and got paid for it. Rumours had it that
fabulous sums of money were paid for such sex and lan decided to venture to North
Beach to find out if what the women said was true.

Ian did not say much else about his entry into prostitution, except that he "was
not lucky the first night" because he had sex with a man and when they had finished the
man had just turned around and walked away without paying him anything. Ian did not
know what to do and was too scared to ask the man for money. He soon learnt from the
other prostitutes how to deal with such issues as negotiating and getting paid for sex.

Ian seldom came to North Beach because he did not always have money for
transport. In addition, he said that "business here is quiet, it is not good" and that he was
not making any money. When I asked lan how much he charged for sex, he said twenty Rand. For that amount, he engaged in masturbation, oral sex or anal sex as the insertive partner. He enjoyed the latter activity very much and had, on one occasion, had sex with another, non-paying, black man as the insertive partner.

Ian, in addition to taking cash for sexual services rendered, was also prepared to accept items of clothing which could be sold at the railway station, as payment. He told me that it was Andrew (Case NB 002) who had suggested to him that he accept clothes in payment if the client did not want to pay in cash.

The preferred item of clothing was shoes, because this was the item most readily bought by the women at the station. Denim jeans were another sought after item, but Ian had never been given any of these items. The only clothes he had ever got was a jersey, which he had decided to keep anyway.

Ian's sexual history showed his sexual contact to be largely heterosexual. He did not have an ongoing relationship with a woman, but had casual sex with women, when and where possible. As far as he knew he did not have any children, but he did not discount the possibility that he could have fathered a child or two in the past without being aware of it. He did not usually maintain contact with the women he had sex with.

Despite having a history of predominantly heterosexual sex, lan had also occasionally engaged in sex with boys and men since his early teens. Unlike many of his counterparts operating at North Beach, lan was sufficiently knowledgeable in man-
to-man-sex to have a fair idea of what was expected of him when he went with a client. Although he enjoyed sex with men, Ian still preferred to have sex with women.

Ian was very knowledgeable about HIV and AIDS and the transmission routes of infection. He often read about AIDS in magazines and listened to radio programmes dealing with HIV/AIDS on the local Zulu language based radio station (UkhosiFM). He reported recently having started using condoms with his casual (female) sex partners.

Ian also reported using condoms when he engaged in anal sex as the insertive partner, with clients. Similar to the other respondents at North Beach, Ian was not aware of the need for double condoms and extra lubrication to ensure that anogenital sex is safer. He was the only respondent at North Beach who reported using a condom when he engaged in oral sex, as the active partner, with a client, but did not insist on wearing a condom if he was the passive partner in oral sex. Ian's reason for insisting that his clients use a condom when he performed oral sex was to prevent the client's semen from entering his mouth since this made him (Ian) nauseous. He did not wear a condom when he was the receptive partner in oral sex (regardless if it is with a client, another male or female) because he enjoyed reaching an orgasm this way and was of the opinion that that condoms impinged on his physical pleasure.

In his 'private' life, the occasional sexual encounters (non-paying) Ian had had with other men was restricted to masturbation and being the passive partner in oral sex which pose little risk of HIV infection for him. Only once did he have anal sex, as the insertive partner, with another man who was not a client, and he could not remember if he had used a condom then. His casual sexual encounters with women usually occurred
when he had consumed alcohol and *dagga* (cannabis). He reported seldom using a condom in these encounters because he did not carry condoms with him at all times and was not going to let an opportunity to have sex pass by because he did not have a condom available. At other times, he "forgot", which he attributed to having used cannabis.

As noted earlier, Ian stayed in a room in the squatter camp which he shared with two other men. He had no bed and slept on an *icansi*, a traditional Zulu sleeping mat, and did his cooking outside over an open fire. He and his roommates cooked together sometimes after contributing to a communal meal, but at other times each one cooked for himself. Occasionally, a girlfriend of one of the roommates would come and visit and then she cooked for all of them and cleaned up the room.

His daily routine revolved largely around vending second hand clothes and occasionally selling cannabis in the squatter camp. He himself smoked cannabis and cigarettes but only took alcohol if it was offered to him, since it was too expensive for him to buy.

He hardly had time or money to spend on recreation, and spent most of his social time visiting with friends either in the squatter camp or in Umlazi. He also visited his home occasionally, but did not sleep over since he and his eldest brothers were still not feeling easy in each others' company. His mother occasionally gave him ten or twenty Rand on such a visit, which he felt very bad about because she was "also poor".
Ian's employability, as the case with the majority of the other respondents at North Beach, is minimal, a fact he was very aware of. He indicated that he intended to continue vending a variety of products in the absence of employment and dreamed of the day when he would own his own business, such as for example a shebeen (an informal tavern where alcohol is for sale). When I asked him if he would continue coming to North Beach he said that he would, but only if he really desperately needed money. Ian thus did not envisage entering prostitution on a full-time basis, merely using prostitution as one of various ways to survive.

**Case 006 - Mike**

Mike, a twenty-three year old, black man, was the only research participant I had met during the day and not, as usual, at night. He was wearing a bright yellow swimming costume and sauntered around on the lawn where the gay men were sunbathing. When I went to the cloakrooms to change before leaving for home he followed me and asked me for a cigarette. He then asked me what I was doing there at North Beach and I said I had come to sunbathe. He then enquired whether I was looking for someone to keep me company. I said no. I then asked him whether he was looking for some company, and he said yes he was, adding that he needed to get some money to afford the taxi fare to Vryheid, a town in north-west KwaZulu-Natal (Appendix H). The story had a very familiar ring to it.... I saw him again at North Beach later that evening whilst out on a field trip, and had the opportunity to interview him for the first time.

Mike was the youngest of three children, of the second wife of a farm labourer in the Vryheid district. He had attended a school on a neighbouring farm but had not
completed standard seven. His childhood years, Mike recalled, were spent in a ‘typical’ rural fashion. During school holidays the children would do menial work on the farm for which each household would get an extra bag of mielie-meel, but they also had time to hunt for rabbits and birds, and swim in the dam.

When Mike was fifteen, his father was involved in an accident on the farm and could not continue to work anymore. Mike then left school having only completed standard six and started to work as a labourer on the farm. When he was nineteen years old his father died, never having completely recovered from the accident which had left him physically disabled.

Soon after the funeral of their father, Mike’s eldest brother was killed by the sons of his father’s first, or senior, wife. The following day another of Mike’s brothers was attacked by the same half-brothers who had killed his eldest brother. That was when Mike’s mother gave him some of the money she had saved and urged him and his two sisters to flee to the home of their malume, the mother’s brother, who stayed near Empangeni.

Mike stayed in the home of his maternal uncle for close on two years trying unsuccessfully to find employment in either Empangeni or Richards Bay. He then decided to come to Durban to seek employment and, after a brief visit to his mother, headed for Inanda, an African residential area north-west of Durban, where he was temporarily accommodated by friends of his uncle (Appendix I). After several months of trying unsuccessfully to secure employment in Durban, Mike felt he had overstayed his
welcome with the people who were accommodating him and left to live a life on the streets, unemployed and destitute.

Apart from the time he had spent working on the farm where he was born and raised, Mike had no other employment experience. He has unsuccessfully tried to seek employment as a gardener, walking from house to house in the white suburbs of Durban. Failing to secure employment and driven by hunger, he started engaging in petty crime to stay alive, stealing any unguarded items of any value that he could find. These stolen items he then tried to sell amongst street vendors and to people at the taxi and bus ranks as well as at the railway station.

Mike’s introduction to prostitution was coincidental. Living on the streets, he used ablution facilities wherever he could. One of the venues he used was the facility at the beach adjacent to North Beach. It was separated from the beach by a densely overgrown sand dune. It was in these bushes where some of the male prostitutes, who operated at North Beach, often slept. Mike gradually became acquainted with one of them who told him about the prostitute activities there.

After the prostitute whom he befriended assured Mike that he would have to do nothing more than masturbate a man for money, Mike decided hesitantly to investigate. He said that at first he was “scared of the police”, but soon felt more at ease. The first man he had sex with paid him five Rand. He was unhappy about this amount because he had expected at least twenty Rand, a rate that he had been told by his friend he could expect. As with the case of Ian, Mike also accepted items of clothing upon his friend’s advice. The clothes he either wore, or sold at the “market” which was adjacent to
Berea station, a major commuter railway, bus and taxi centre on the periphery of the central business district.

Mike said that he had never had sex with a man before entering prostitution, but later mentioned that he had engaged in "playing and shaking" (masturbation) with some other boys of his own age whilst they were "still children". Like many of the other prostitutes, Mike also regarded sex as intercourse, largely with a woman. Having anal intercourse was equated with sex as well, but masturbation and oral sex, either with a male or a female was not.

He did not have an ongoing relationship with a woman and did not have the active, casual sex life that he used to have in the past. The fear of AIDS was one of the reasons why he had less sex with women. Another reason was that his activities at North Beach were sexually draining, as he was expected to have an erection and to reach an orgasm to satisfy the man he was with. He added that "they pay more" if he reached an orgasm, but that it left him not having any sex drive left to have sex with women. In addition, he hardly ever met women with whom he could have sex because he was staying in the bushes next to North Beach.

Mike was well aware of HIV and AIDS, largely because he had a relative who had died of AIDS. He knew that unprotected anal and vaginal sex constitute a risk for HIV infection but did not consider oral sex, with either a male or female, to be a high-risk sexual activity.
Mike claimed never to have engaged in anal sex with another male/client, but said that he would wear a condom if he ever were to engage in anal sex as the insertive partner. He did not picture himself ever being the receptive partner in anal sex. Since the death of his relative of AIDS, Mike became very cautious about unprotected sex with his casual female sex partners, and reportedly had less, and safer, sex than before.

Mike operated at all hours of the day and night, and slept when he wanted to. When he was not sleeping, he buried his blanket and plastic shopping bag, containing all his worldly possessions, in the sand among the bushes, and used the ablution and shower facilities at North Beach. During the night-time, when these facilities were locked, he used the outside showers at North Beach to wash, and the bushes separating the two beaches for ablution. He ate whenever he had money to buy some food. He still went out into the suburbs to steal items to sell if he did not have any success with his prostitution activities.

Like the majority of the other respondents, Mike did not socialise much with other people, particularly those who also stayed in the bushes. Many of them, according to Mike, were tsotsies (dishonest people who rob and assault other people). This was the reason why he buried his possessions; he did not trust them.

Mike seldom visited his acquaintances in Inanda and had not been home since he had moved to Durban. He said that he was trying to generate sufficient money to afford a taxi to go back to Vryheid to visit his mother, whose health he was concerned about. Saving up sufficient money was, however, difficult because he spent whatever he
could generate on food, cigarettes and cannabis. Occasionally he bought some brandy when he could afford it.

Mike looked to the future with apprehension, often saying that he did not know what he would do for his next meal, and that he would have to “rob someone” to make ends meet. He did not seem to be very successful at North Beach and increasingly resorted to petty crime towards the end of the fieldwork period until he simply faded from the scene altogether by the time the fieldwork ended³.

Discussion

The first important observation made at North Beach, was that the majority of the prostitutes who were plying their trade there, were young black Zulu speaking men. Despite the relative homogeneity of the population group, their life histories differed considerably. Many of the prostitutes who operated at North Beach were born and grew up in rural areas of KwaZulu-Natal, and some of them some had kin staying in or near Durban who afforded them a foothold in the city upon their arrival. Others were born and grew up in Durban and surrounding areas, yet, were also ‘homeless’ and often marginalised by their families.

The life histories of the prostitutes revealed that, as black people, they shared a similar level of poverty. The education system they were forced to enter was characterised by discrimination and low standards, relegating them to the status of second-class citizens. None of the respondents had obtained a matric certificate (Grade
and none had any vocational training to enhance their employability, a fate shared by many other young South Africans.

An overview of the North Beach field data revealed that there are two particularly discernible patterns in the way respondents were introduction to prostitution. Some had heard about the male prostitution activities at North Beach either through the extensive information network at the Durban station, whilst others were introduced to prostitution by meeting other prostitutes at North Beach who introduced them to the trade. What is of considerable significance, is that the respondents at North Beach, like their South Beach counterparts, entered into prostitution at a time in their lives when they were either destitute and/or in desperate economic need. Prostitution, with it's rumoured potential for generating vast sums of money, presented the respondents with a means of survival when faced with intolerably desperate situations.

Survival, however, means more than merely generating some meagre form of income, it also involves the physical and emotional survival of the respondents. One such mechanism of survival was the sense of 'community' shared amongst the respondents at North Beach. It primarily offered them a means of security to sleep safely, to have company and to pool resources in the preparation and sharing of food. Furthermore, the community formed by the respondents offered assistance to those who entered the profession for the first time, and allowed them all to participate in everyday social actions such as gossip, quarrelling and sharing leisure activities.

3 I later saw an identikit of him with a reward offered by the police for his arrest for housebreaking.
An important difference between the North Beach respondents and those operating at South Beach, is that the North Beach respondents were more likely to engage in prostitution on a 'part-time' basis, whereas South Beach respondents tended to ply their trade 'full-time'. This difference is significant as it reflects the meaning the respondents attached to their prostitution activities. The South Beach respondents who plied their trade full-time moulded their modus operandi on the Western model of prostitution, where the prostitute explicitly states that sexual service are available in exchange for money (which is usually demanded up-front). The 'professional' approach of the South Beach respondents resulted in them, on average, generating more income than their North Beach counterparts.

The North Beach respondents who plied their trade 'part-time', in contrast, adopted the modus operandi of providing the sexual service before mentioning, yet alone demanding, that money be paid in exchange. Their concomitant lower level of generating income, whilst supplying the same service as their South Beach counterparts, can not merely be attributed to the 'inability' of the prostitutes to negotiate with the client.

In Chapter 3, the data revealed that the prostitutes believed that they have a better chance of generating an income by asking for money afterward having had sex, since they had to compete with men who were offering sex purely for their own pleasure. If they were to have been up-front about an exchange of sex for money, the chances were high that the potential client would find another casual sex partner without having to pay for the encounter, and it would be akin to a 'lost sale' for the prostitute. In this
sense, their modus operandi of mentioning payment after sex is thus a rational response to the environment in which they have to generate an income.

The difference in the way which the respondents approached their activities correlated closely with the meaning they attached to their activities. The South Beach respondents acknowledged that they were prostitutes, operated in an identifiably structured way, and, most importantly, restricted their income generation activities to prostitution only. The North Beach respondents, in contrast, adopted a part-time approach to prostitution, and did not self-identify as prostitutes. For the North Beach respondents, prostitutes are considered to be women, and not men, who sell sex exclusively for a living. For the North Beach respondents, engaging in sex with men and then requesting, not demanding, money, was merely one of several informal income generating opportunities they used in their overall survival strategies.

The same relaxed approach the North Beach respondents took to prostitution and its place within their survival strategy, they carried through into the arena of sexual activities they were prepared to engage in with their clients. When compared to the rigid parameters of sexual activities set by the 'professional' prostitutes who operated at South Beach, the North Beach respondents were prepared to engage in a wider variety of sexual activities, on average, than their South Beach counterparts. In addition, the respondents at North Beach more readily admitted enjoying their sexual interaction with their clients and/or other males, despite the fact that all of them indicated a sexual preference for women. The majority of respondents at both the venues, however, indicated that they were not prepared to engage in anal sex as the receptive partner. Their reasons varied, but centred largely on the association between being the
receptive partner in anal sex, and being homosexual or the “female” partner in the sexual encounter. This dichotomization of sex role preferences by the respondents is by no means unique to Durban.

The case studies presented in this thesis highlights the fact that male street prostitution in Durban was not homogenous. The differences between the two research sites (Chapter 3) in spatial layout, characteristics of prostitutes and clients, as well as the way in which prostitutes and clients made contact and negotiated sex for payment, were carried through when looking at the differences in the life histories of the respondents at South Beach and North Beach.

In addition, and very important, the case studies showed a difference in the level of HIV/AIDS awareness and condom use among respondents of the two sites. The South Beach respondents were, on the whole, more informed and aware if HIV and AIDS than their North Beach counterparts. Yet, HIV/AIDS awareness does not necessarily imply that safer sex is the necessary result of possessing such awareness. Thus, a major concern of this study is the question whether male street prostitutes in studied Durban are at risk of HIV infection because of their involvement in commercial sex work. Based on a review of the literature as well as the findings of the research, we now move on to a discussion of the above question in the next chapter.

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CHAPTER SIX: MALE STREET PROSTITUTION AND HIV/AIDS

The main question dealt with in this chapter is whether male street prostitutes are at risk of HIV infection, firstly, as a result of their involvement in commercial sex work, and secondly, as a result of their sexual behaviour with their non-paying sex partners. I will draw on a review of the literature and integrate the findings with data generated by this study, to offer an assessment of the extent to which male street prostitutes in Durban risk HIV infection.

In common with similar studies elsewhere, the paying partners of male street prostitutes encountered in this study were invariably male. In addition, the prostitutes in Durban operated at established venues well known to homosexual men for the availability of commercial or casual sex. This appears to be much the same as found in studies of male street prostitution elsewhere (Elifson et al., 1993; Gilles and Parker, 1992; Moulder, 1993; Schurink 1993; West and De Villiers, 1992).

Despite these similarities, there are also differences, particularly in the range of sexual activities in which male street prostitutes are prepared to engage. Not only do differences occur between the findings of this research and other comparative studies, but significant differences were also found between the responses of the participants at the two sites studied. The differences between the two research sites, as well as the differences between this study and others done elsewhere suggests that the concept
'prostitution' is not universal, and does not necessarily involve a personal identity as homosexual.

As discussed in the first chapter, the actual transaction of sex-for-material-gain remains a constant identifiable characteristic of what is generally understood to be prostitution. However, the variation in the meaning associated with prostitution, the sexual behaviour(s) associated with it, and the way those who engage in prostitution identify themselves in relation to their sexual activities, indicates that cultural variation and influence are important considerations in analysis.

**Epidemiological indicators**

There has been some debate about the degree of risk of HIV infection to which street prostitutes, both male and female, are exposed. There is also debate about the relationship between prostitution and the spread of HIV/AIDS. Earlier epidemiological studies and reports, such as Coutinho (1988), McKeganey et al (1989) and Morgan Thomas et al (1989, 1990), doubted that there was a causal link between prostitution and the spread of HIV infection. However, the majority of studies done on the relationship between prostitution and the spread of HIV/AIDS, indicate that prostitution does serve as a bridge between so-called 'high risk sub-groups' of the population and society at large (Bloor et al, 1992:132; Caldwell, 1995:299; Choi and Coates, 1994:1376; Gilles and Parker, 1993:2; Elifson et al, 1993:79; McKeageaney et al, 1990:275; Morse et al, 1991:535,539, Pleak and Meyer-Bahlburg, 1990:583, Tomlinson, 1991:106). What transpires when the different reports are analysed, is that, as van den Hoek et al (1991:303) suggest, prostitution per se does not necessarily lead to the
spread of HIV. Rather, it is a combination of co-factors, of which the sexual encounter, which we refer to as the core activity of prostitution, is but one, which together assist in the spread of HIV.

Reported seroprevalence rates across male street prostitute populations vary, but the majority of studies consider these rates to be significantly higher than in the general male population. For example, Elifson et al (1993:82), drawing their sample from Georgia, Atlanta, found 29.4% of the male prostitutes to be HIV positive, and interpreted the rate to be "...alarmingly high". In the city of New Orleans, Morse et al (1991:536) recorded seroprevalence rates of 17.5% among male prostitutes, notably higher than the 12% recorded among female prostitutes.

Cross-cultural studies comparing developed and developing countries reflected similar evidence of a high HIV-seroprevalence rate among male (and female) prostitute populations (Gilles and Parker, 1993:2, Parker, 1990:5). Pleak and Meyer-Bahlburg (1990:561), having reviewed a wide range of material, found that the majority of studies are in agreement that the HIV seroprevalence rate is higher among male prostitutes than in the general male population, concluding that male prostitutes can be considered to constitute an 'at risk' population or category.

As noted in previous chapters, the earliest response to the HIV/AIDS epidemic was epidemiological driven, based on the concept of 'risk categories'. However, the emphasis placed on social groups, e.g., homosexual men, prostitutes, intravenous drug users etc. as risk groups not only resulted in stigma and discrimination, but also posed problems for ethnographers (Herdt, 1992:4; Kane and Mason, 1992:200). This was
because risk categories were epidemiological defined, and are thus considered to be "rigid and insensitive" by social scientists, failing to explain the variation found in cross-cultural research and comparison. Levine’s discussion (1992:196) provides one example of the problems associated with defining and discussing the spread of HIV/AIDS in terms of risk categories. He provides insight into how the classification of homosexuals as a risk group for HIV/AIDS, at the onset of the pandemic, not only “foolishly ignored the diversity of erotic, residential, and drug use patterns among gay men”, but more importantly, "misdirected initial research efforts into the aetiology of the epidemic" (Levine, 1992:196).

Kane and Mason (1992:202-210) provide another example, showing through ethnographic research that there is variation in the degree of risk taken by intravenous drug users, which are also considered to be a so-called 'high risk group'. They argue that to lump all intravenous drug users together, as a 'high risk category', serves only to obscure the reality of the social context associated with risky behaviour within any given population.

Perhaps the greatest risk posed by using epidemiological concepts, such as 'at risk groups', is that the blanket application of risk categories and groups may result in increased stigmatisation and marginalisation of already marginalised groups (Herdt, 1992:7; Kane and Mason, 1992:220; Crewe, 1992:15). As social scientists, we are, however, sensitised to using potential value laden concepts such as 'risk category'. Such concepts can and have in the past served as a basis for discrimination. Within the context of HIV/AIDS, there exists a similar threat of discrimination and/or stigmatisation when using such words as, for example, 'risk-categories'.
Bearing in mind the potential which exists for stigmatisation and discrimination by viewing male street prostitutes as a 'risk category', questions nevertheless need to be asked and researched to provide a better understanding of: a) what the HIV related risk factors are which male street prostitutes face, and b) how the prostitutes themselves understand and respond to these factors.

**HIV/AIDS infection routes**

As mentioned in chapter 1, there are three confirmed ways in which a person can be infected with HIV/AIDS: through: a) sexual contact, b) blood contact (e.g. transfusions, open wounds exposed to infected blood, shared needles in intra-venous drug use), and c) mother to child (in utero and through breast milk) (Crewe, 1992:28; Tavanyar, 1992:76-88). For the purpose of this study, the focus will largely be on the spread of HIV/AIDS through sexual transmission whilst intra-venous drug use (IVDU) will also be examined.

According to Morse et al (1991:56), it is difficult to calculate the exact probability of HIV transmission associated with each type of sexual act, leading to many debates among health professionals and interest groups alike. For the purpose of this study, however, there are two acts that are thought to be more dangerous than others based on their potential for direct exchange of body fluids.
Firstly, there is common agreement that all penetrative anogenital intercourse must be regarded as unsafe because of the potential for the exchange of body fluids (semen and blood). Even 'protected' anal intercourse between men, where condoms are used, is considered a possible route for HIV/AIDS transmission because of the high rate of condom failure. This is largely due to their incorrect use as well as to the failure to use suitable water-based lubrication (Crewe, 1992:38-39; Hunt et al, 1991:723; McKeganey et al, 1990:283, Morgan Thomas et al, 1989:149; Tavanyar, 1992:78-81).

Secondly, despite much debate, fellatio, or oral sex, has been identified as a "possible risk" for HIV/AIDS transmission when a condom is not used. If fellatio takes place without a condom it is considered to be a "definite risk" for HIV/AIDS transmission, particularly if the active partner has a sore in his/her mouth and the passive partner is HIV+ (Crewe, 1996:38-39; McKeganey et al, 1990:289; Tavanyar, 1992:119).

Co-factors

Having noted the most prominent routes of HIV/AIDS transmission through sexual contact, it is time to consider some associated co-factors. Sexual transmission of HIV/AIDS occurs, as a result of specific sexual acts, but those acts do not take place in a vacuum. Rather, they occur in the context of a sexual encounter, and the dynamics of the sexual encounter may itself determine whether or not a risky behaviour had occurred (Bolton, 1992:147). Following a similar line of argument, Kane and Mason (1992:202-210) propose that through "...focusing on the interconnectedness of risky behaviours, and the ways that risky behaviours are integrated into social practice,
ethnographers may be able to account for the complex conditions and influences that underlie humanity's openness to HIV infection in different times and places.

Following the above guideline, two assessments have to be made in this study. Firstly what 'risky behaviours' do male street prostitutes in both this study and elsewhere engage in, and secondly, what identities and meanings are associated with those behaviours within both the international as well as the local South African context and, most importantly, how they are interconnected.

Bearing in mind that it is the type of behaviours rather than the number of sex partners which indicates the degree of exposure to HIV infection, we turn now to those behaviours considered to be risky within the discussion of male street prostitution. The case studies presented and discussed in chapters 4 and 5, was representative of the sexual activities that the male street prostitutes in Durban engaged in. Of the twenty-six participants who were interviewed on several occasions, only two (white) respondents at South Beach indicated that they were prepared to engage in anal sex as the receptive partner. The rest of the respondents were adamant that they did not engage in anal sex as the receptive partner. The two respondents who did engage in anal sex as the receptive partner were also the only two self-identified homosexuals. The remainder of the respondents declared themselves to be heterosexual, a very important determinant in what types of sexual activities in which they were prepared to engage. Other activities which the male street prostitutes engaged in where oral sex as both active and passive partners, and mutual masturbation. These activities, although of a homosexual nature, did not prevent the (heterosexual) prostitutes of engaging in them.
At this point, it is important to reflect briefly on the apparent conflict between heterosexual actors engaging in homosexual acts. What transpired during several discussions with the South Beach respondents who were adamant that they did not engage in anal sex as the receptive partner, was that being the receptive partner in anal sex was equated with being the 'female' partner in a homosexual situation. This the majority of the respondents found unacceptable at best and abhorrent at worst, and they believed that participation in such an act would reflect on their professed heterosexuality, of which I was often reminded during our conversations. Similarly, some of the North Beach respondents, who were almost all Zulu speaking, black men, replied that anal sex between men was "not our culture", whilst others said that it was "dirty" and something only engaged in by 'istabane', a derogative Zulu term for homosexuals.

Another reason why some of the South Beach respondents did not engage in receptive anal sex, was because they had been forced into being anal receptive partners in sexual incidents whilst they were either in an industrial school or in prison. They now have a negative association with receptive anogenital sex, and thus did not want to engage in it.

What was of interest, is that only being the receptive partner in anal sex was negatively equated with homosexuality. The other sexual activities that the male street prostitutes engaged in with their clients were not considered to threaten their own heterosexual identity. Here the prostitutes displayed a culturally determined set of identities in their arena of work, which allowed them to stand relatively indifferent toward the homosexual acts in which they participated. South African society at large equates homosexuality with anal sex, and vice versa. In addition, being the receptive partner in
anal sex is largely associated with femininity within the arena of homo-sex. Here Parker's' (1991) "multiple subsystem of meanings" prove to be a valuable concept in achieving an understanding of the meaning and identities male street prostitutes in Durban bring into the arena of commercial sex work. Considering the strong negative association the male street prostitutes in this study had with being the receptive partner in anal sex yet then readily engaged in other sexual acts with clients, which are by definition homosexual acts. It thus seems as if the male street prostitutes rejected sexual acts that threatened their masculinity rather than acts that reflected on their sexuality.

To summarise then, male street prostitutes in Durban did not often engage in anogenital sex with clients as receptive partners, because they equated such sex as homosexual activities. Alternatively, they resisted engaging in anal sex as receptive partners because of negative associations such as rape. However, anogenital sex as the insertive partner did occasionally take place, and as noted earlier, all penetrative anogenital sexual intercourse constitutes a potential route for HIV/AIDS transmission, even if a condom is used.

Fellatio is a sexual act more often engaged in between male street prostitutes and their clients, than anogenital sex. Most of the research participants who were prepared to engage in oral sex showed a preference for being the passive partner. However, they reported that it was usually the client who requested to be the passive partner. When asked why they preferred to be the passive partner in oral sex, some participants said that it involved the minimum effort from their side, whilst others remarked that it was "more pleasant to receive a 'blow-job' (fellatio) than to give one".
Others did not engage with clients, as active fellatio partners, for fear of the client ejaculating in their mouths.

Of the few research participants who preferred to be the active partner, some did so because they did not want the customer to touch their genitals, whilst others said that they failed to get an erection when a client tried to perform oral sex on them. All the respondents who performed fellatio on their clients indicated that they disliked clients ejaculating in their mouths and tried their best to avoid it.

There were several respondents, particularly amongst the South Beach participants, who said that they did not engage in any form of fellatio. This was because they viewed oral sex as a homosexual act, whilst others claimed that it made them physically nauseous.

A final comment on fellatio is that the field data indicates that the majority of the male street prostitutes, who participated in this study, engaged in oral sex. Fellatio without a condom, as noted earlier, is considered to be an HIV risk related sex act, particularly so if the active partner has sores in his mouth and the passive partner is HIV+ (Crewe, 1996:38-39; McKeeganey et al, 1990:289, Tavanyar, 1992:118). The field data, however, reflected that only a small number of the research respondents engaged in fellatio as active partners, thus, it is possible to suggest that only a small number of male street prostitutes who participated in this study, faced a some degree of risk of HIV infection through oral sex.
The sexual act most often engaged in by male street prostitutes and their clients, was masturbation. This often occurred, however, together with fellatio. The majority of the prostitutes selected masturbation of the client as their preferred sexual activity since it required the least physical input and commitment from their side. What is important, is that masturbation does not facilitate the transmission of HIV (Crewe, 1992:37, Tavanyar, 1992:116).

To consider the risk of sexual acts, it is not sufficient to merely identify the activities only, but also the use, or non-use, of condoms in these activities. Despite being aware of the risks involved (see Chapter 4 and 5), male street prostitutes in this study, and elsewhere, still engage in unprotected anogenital and oral sex. Why? There is no single answer. A perusal of the literature indicated that several interrelated issues might contribute to infrequent condom use between prostitutes and their clients. Much the same is true for the men in this study,

Carrier and Magaña (1992:248), for example, show that both the prostitute and the client can attribute infrequent condom use between clients and (female) prostitutes to fear of rejection. They argue that both the clients and the prostitutes reportedly believed the other partner would suspect them of having a sexually transmitted disease should they request or insist on the use of a condom. Such a suspicion could lead to the prostitute and/or the client preferring to go with another sex partner who is considered ‘safe’ because of the non-insistence on the use of condoms or other safer sex practices. For prostitutes, rejection by a customer could mean the difference between survival and/or desperation.
Another reason for infrequent condom use is simply because prostitutes do not carry condoms with them. This means that prostitutes have to rely on the client to supply the condoms. If the customer has no condoms with him and does not insist that the prostitute wear one during intercourse, the chances are high that the prostitute will decide to engage in unprotected sex rather than loose the potential income that could have been derived from the encounter.

The prostitutes who participated in this study gave a number of (unconvincing) reasons as to why they did not carry condoms with them. Firstly, access to condoms was difficult. As noted in Chapter 3, the participants in this study slept during the day and plied their trade during the night. They claimed that access to free condoms, distributed by institutions concerned with sexual health, was restricted to day-time office hours, and that the distribution points were far from their places of residence. Both factors limited their ability to get supplies.

Secondly, some prostitutes argued that responsibility for supplying condoms lay with the client. The rationale was that the client was the one who wanted sex sufficiently to pay for it and could thus afford to buy the condoms. Alternatively, they argued that the clients knew beforehand which sex acts they were going to request and it was their responsibility to "come prepared". Finally, the research respondents reported not carrying condoms with them because they could not afford it. Despite common belief, prostitutes do not generate vast sums of money through their profession, and the high retail costs of condoms in pharmacies, supermarkets and vending machines have to compete with other immediate short term needs such as provision of food, shelter and drugs.
The literature indicates the possibility that although prostitutes might be able to afford condoms, they do not want to carry them. This is because of the fear that condoms might be used as evidence against them if they were detained by law enforcement officers (Carrier and Magaña, 1992:248). This is considered to be particularly prominent in countries where prostitution is illegal. However, none of the research participants in this study gave any indication that they did not carry condoms with them for this reason.

Finally, self-reports from sex workers in a number of countries indicate that a substantial number of clients request "risky sex" (i.e. sex without a condom). Some clients offer financial inducement for such risky sexual services, whilst others resort to threats or violence (Crewe, 1992:37; Plant, 1990:26). However, none of the respondents in this study reported specific requests from clients for "risky sex". The majority, when asked if they would consider such a request, indicated that they would decline. Yet, some admitted to being prepared to consider such an offer provided the financial gain was "much more" than the average 'going price'.

Asked whether they would agree to a request for 'risky sex' should a client become threatening in his demand, not one of the research participants indicated that they would. On the contrary, they claimed that threats of violence would strengthen their resolve not to engage in sex acts that could put them at risk of HIV infection. Here, I believe we have a significant difference between male and female prostitution. Whereas female street prostitutes are very often at risk of physical coercion by their clients to comply with unsafe sex, and commented on in the literature extensively as an issue
rooted in gender relations, the same does not, in my opinion, apply for male street prostitutes. As noted earlier, the majority of the clients of male street prostitutes in Durban during the period of fieldwork, were gay men who do not, as a rule, commit acts of violence against other people. The male prostitutes, who were all reasonably muscular, did thus not have to fear, or deal with the threat of physical coercion nearly as often as their female counterparts reportedly had to.

Having discussed the various sexual activities that the male prostitutes engaged in with their clients, as well as the use of condoms, it is time to consider the use of drugs as a co-factor in assessing the level of risk with which male street prostitutes in Durban are faced. There seems to be some confusion in the literature regarding the relationship between prostitution, IVDU and other drug use, and HIV/AIDS. Studies such as that done by Darrow et al (1990:29,33) attempt to show conclusively that the risk for HIV infection among prostitutes increases with more frequent intravenous drug use involving shared needles. Others, such as Weatherburn (1992:129), however, argue that the causal link between drug use and unsafe sex has not been proven yet, only assumed.

Of particular relevance to prostitution, are findings which indicate that the combination of sharing needles during IVD use, and being the receptive partner in unprotected anal and/or vaginal sex, are considered to be significantly higher risk practices than either are alone (Caldwell, 1995:300; Elifson et al, 1993:79-82). However, whereas the use of intravenous drugs among male prostitutes, and in the general population, seems to be prevalent in industrialised countries, the same cannot be said for Durban (Taylor 1999:50). Only one of the research participants used intravenous
drugs, and he claimed not to share needles and disinfected his own 'equipment' (needles and syringe etc.) after each use.

Of particular relevance to this study is the findings that the use of both legalised drugs such as alcohol, as well as illegal, non-intravenous drugs such as cannabis (marijuana/dagga), cocaine and 'crack cocaine' may be linked with 'unsafe' sexual behaviours, although the use of the drugs by themselves is not associated with the transmission of HIV/AIDS (Crewe, 1992:39; Plant, 1990:26; Weatherburn, 1992:119). Available evidence generally supports the assertion that heavy drinking and the use of illicit drugs are commonplace among prostitutes, often preceding their contact with clients (Plant, 1990:26; Pleak and Meyer-Bahlburg, 1990:573; Morgan Thomas et al, 1990:268).

The significance of the relationship between drug use and/or abuse and HIV/AIDS is that the parties involved are subject to impaired judgement and are often not in a position to make rational decisions regarding safer-sex practices (Tavanyar, 1992:127). Alternatively they are susceptible to persuasion to engage in high-risk sex to secure a client in order to generate sufficient income to satisfy their addiction (Brener and Pauw, 1998:26).

The rate of drug use and abuse among the respondents in this study shows similarities with studies done elsewhere. Of the twenty-six respondents with whom multiple in-depth interviews were conducted, only one did not report using drugs. More than two-thirds reported taking alcohol regularly on a daily basis or as often as they could afford it. Seventeen of the twenty-six respondents smoked dagga (cannabis) daily.
and eleven of them often combined the dagga with mandrax (methaqualone tablet) to smoke what is known in South Africa as a 'white pipe'. Only one of the respondents reported using cocaine intermittently and then only if a client supplied it. This may be because the drug is prohibitively expensive. There were no reports of the use of 'crack cocaine' but if the situation in Cape Town is anything to go by (Brener and Pauw, 1998:26; Leggett, 1998:22), it may soon become an integral part of street prostitution in Durban.

Those respondents who used drugs often did so before they started work and occasionally, also used drugs at their places of work. In addition, many of them reported taking alcohol and other drugs with their clients. Of interest was the fact that most of the South Beach respondents reported having smelt alcohol on their client's breaths. They had assumed that clients often took alcohol before coming to procure sexual services. In contrast, not many of the North Beach participants could recall whether they had detected similar evidence of alcohol use among their clients.

The high incidence of drug use among the prostitutes, and the high incidence of reported alcohol use among the clients, suggests that the male street prostitutes in Durban and their clients, as the literature proposes, might be at risk of HIV infection because of not being able to make rational safe-sex decisions (Brener and Pauw, 1998:26; Plant, 1990:26; Pleak and Meyer-Bahlburg, 1990:573; Morgan Thomas et al, 1990:268)

Another factor, which, according to the literature, affects the level of HIV/AIDS risk male street prostitutes are faced with, is the concept of geographical transience.
Data, based on blood testing, and presented by Morse et al (1991:538), suggest that prostitutes who work in more than one city have higher HIV infection rates than those who are not mobile and work in only one city.

There seems, however, to be no single factor to explain this association between migrating prostitutes and a high prevalence of HIV/AIDS infection. Despite Morse's assertion (1991:538) that "...the precise consequences of the male prostitutes' transciency in terms of disease transmission is difficult to assess", several explanations have been forwarded. One explanation, proposed by Broring (1994a:29) who takes an economic perspective congruent with this study, is that "...if people (i.e. clients) from relatively high prevalence regions (i.e. cities/developed, more affluent areas) have unprotected sexual contacts with people (i.e. migrant prostitutes) from low prevalence regions (i.e. rural/underdeveloped, less affluent areas), this can increase the number of infections".

The major tenet of Brorings' argument is that vulnerable young men migrate from less affluent to more affluent areas "...in order to escape from a difficult economic situation or in order to find better working conditions" (Broring 1994a:30). This is a significant avenue of analysis since it leads us to a discussion of power relations between prostitutes and clients. As will be discussed later, the unequal power relations between prostitutes and their clients has direct relevance for the risk of HIV transmission, and might contribute towards an explanation of the relationship between migration and the risk of HIV infection.
 Whereas the abovementioned data presented by Broring (1994a; 1994b) is applicable to Europe in particular, similarities can be drawn with the situation in New Orleans (Morse et al, 1991), Rio de Janeiro (Parker, 1990), and, to some limited extent, with this study as well. As described and discussed in Chapter 3, North Beach had a relatively stable population during fieldwork compared to South Beach, which had a migrant population. The prostitutes who operated at South Beach regularly migrated between Durban and Johannesburg, and then from Johannesburg to Cape Town and back to Durban again on a continual basis.

This migrant pattern, similar to the findings of Broring (1994a), was largely based on economic considerations. Most of the respondents explained that "there is not much business here in Durban" and, therefore, they only stayed for a short time. Similarly, their sojourn in Cape Town was also for short periods of time since there were limited business opportunities and more "local" prostitutes, making competition fiercer. Johannesburg was considered by the majority of the migrating prostitutes to be the city where it was most likely to make the largest amounts of money.

The reasons for the high mobility among prostitutes are thus known to be related to economic factors, and are reflected in the findings of this study as well. It is, however, not possible to infer or conclude that male street prostitutes in Durban, who have worked in more that one city, had a higher HIV seroprevalence rate than those who worked in only one city, because no HIV blood test were done among the respondents. Yet, based on findings in the literature (Broring, 1994a; 1994b, Morse et al, 1991), where a link between migration and HIV has been identified, it is possible to argue that the same could apply to this study. This migration pattern presents complications for any
potential HIV intervention in Durban directed at male street prostitution, an issue that I will discuss in the concluding chapter of this thesis.

The final factor considered to have an influence on the association between the transmission of HIV/AIDS and prostitution, centres on the type of prostitution. Studies such as those done by Darrow et al (1990) and Plant (1990) cite epidemiological data indicating that sexually transmitted diseases, including HIV, are more frequently found among (female) prostitutes who are street-walkers, than those who practise prostitution within the 'formal' and regulated sector, such as brothel employees (Plant, 1990:27).

Why then, are street prostitutes considered to be more vulnerable to STD and HIV infection? Do they face more physical hardship and danger than their counterparts in formal and regulated employment? Brener and Pauw (1998:26-27) list various aspects of (female) street prostitution in Cape Town which they believe contribute to the vulnerability of street prostitutes. Firstly, they usually work alone and late at night, and, since sex work is a criminal offence in South Africa, street prostitutes often work in isolated and poorly lit places where they are less visible to law enforcers. These poorly lit places, however, make the street prostitutes particularly vulnerable to abuse by clients. In addition, the streetwalkers who work in isolation, do not have the protection of 'house rules' prohibiting unprotected sex (see also Plant,1990:27).

Since all the respondents who participated in this research plded their trade individually, without accounting to anybody else for their activities and the income generated through it, they too are considered to be operating in the informal 'streetwalker' sector of the commercial sex industry. As noted, the literature suggests
that female street prostitutes are at a higher risk of HIV/AIDS infection and physical abuse than their counterparts in the more regulated or formal sector. Does the same apply to male street prostitutes? To answer this very important question, it is necessary to consider the nature of the relations of power between prostitutes and clients, as it is within this arena that decisions are made about accepting clients and safer sex negotiated.

**Power relations**

A thread which runs through discussions of the various co-factors associated with the spread of HIV among male street prostitutes, is that they are inextricably interconnected, and that power relations between prostitutes and their clients, are important determinants when considering how the co-factors are interconnected.

The question is: how does power and its associated relations affect male street prostitutes and their clients? McKeganey et al (1990:284-286), for example, show how the difference between the way female and male prostitutes approach their clients in Glasgow, affects their ability to negotiate safe sexual activities. The female prostitutes negotiated the price and which sex services they provide in advance, and usually asked to be paid up-front, adopting a "managerial stance" within which it seems likely that they would be able to insist on condoms being worn" (McKeganey et al, 1990:285; Bloor et al, 1992:135). Male prostitutes in Glasgow, on the other hand, did not, as a rule ask for their money prior to the provision of sexual services. McKeganey et al (1990:286) thus point out that "...the relatively passive stance adopted by the rent boys, coupled with the
tendency to be provided with money after the event, makes it highly unlikely that they would be in a position to insist on the use of condoms".

On a cautionary note, whereas not insisting on payment up-front is construed as a sign of lack of power on behalf of the male prostitute, it is also possible that the male street prostitutes may have a reason for not doing so. Schurink (1993:32) quotes a research respondent as saying "...I don't take money up-front. The reason is because I want the client to feel relaxed and hopefully he will give me more than what I had asked for". This indicates that not asking for and/or insisting on payment up-front could not simply be assumed to be evidence of poor negotiation skills. Rather, not demanding money prior to the sex act could indeed be a technique to increase the income generated. Similarly, as shown in Chapter 3, the prostitutes at North Beach did not, as a rule, negotiate and ask for payment up-front. Their reasons varied; from the lack of negotiation skills, to a fear of police entrapment, to a fear of 'chasing away' a potential client. Like Schurink's respondent (1993:32), several of the North Beach respondents also reported that they did not ask for money up-front, hoping that the client will be generous in his payment, if he pays at all.

I am, however, convinced that the failure to negotiate the type of sexual activity and the price in advance can negatively effect the prostitute's ability to insist on safer sex. The research data in Chapter 3 reflects, for example, that the male prostitutes who operated at South Beach and who generally adopted a 'managerial approach' to negotiating with clients, managed to get paid more money for similar sex activities than their North Beach counterparts, who did not adopt such an approach. It is possible to argue that the inability of the prostitutes at North Beach to effectively manage their
negotiation of fundamentals such as the type of sex and the price, extends to an inability to resist a client who requests unsafe sex. If the prostitutes do not comply with the direction into which the client steers the sexual encounter, chances are that the client will simply attempt to find another sex partner. The opportunity for the prostitute to generate much needed income will thus be lost.

Other factors mentioned in the literature as contributing to the unequal power relations between prostitutes and their clients include: a) an age difference between male prostitutes and their clients, which makes it difficult for young men to adopt a directive role in their dealings with older clients, b) that male prostitutes usually have a short career, as compared to their female counterparts, and therefore are unlikely to have negotiating experience, and c) that prostitution is an illegal and stigmatised activity, which results in prostitutes engaging in covert encounters with clients. This inhibits the stipulation of safe sex (McKeganey et al., 1990:287).

The South Beach respondents in this study did not agree with the assertion that an age difference affects their ability to take a directive stance when negotiating with their clients. The male prostitutes at North Beach, as noted in Chapter 3, did not, as a rule, negotiate with clients up-front, and it was thus not possible to assess whether an age difference would have affected their negotiating skills or not.

The findings of this study does not corroborate the McKeganey (1990:287) assertion that the short period of time male street prostitutes are active in the commercial sex industry impacts negatively on their ability to negotiate with clients either. In Chapters 4 and 5, the case studies showed that prostitutes who enter the
commercial sex work scene, are often assisted by other, experienced male street prostitutes, in acquiring negotiation and other skills relevant to their trade.

The third assertion made by McKeganey et al (1990:287), that the stigma and illegal status of both male and female street prostitution result in covert sexual contact with clients conducive to HIV transmission, is in my opinion, a very important issue to consider. As noted in the discussion regarding the vulnerability of street prostitutes, they operated in isolated dimly lit places where they could escape the unwelcome attention of law enforcers. At the same time, however, they were also exposed to risks and dangers, such as violent clients. Prostitutes who were assaulted could hardly expect the police to assist them since they were engaged in an illegal activity. The illegal status of prostitution, and its implication for HIV intervention, is discussed in the next chapter. Suffice to note here that the illegal status of prostitution constitutes, in my opinion, one of the major reasons why male street prostitutes enter into unequal power relations with their clients.

What transpires throughout all the discussions regarding power relations between prostitutes and their clients, is that the need prostitutes have for money to either survive or satisfy a drug addiction ultimately leaves them at a disadvantage (Moulder, 1993:70). If the prostitute refuses a client, the client will simply find another prostitute. The prostitute, however, might not find another client and the opportunity for generating income might be lost. Hence, the scales of power is weighted in favour of the clients, and this is a crucial issue which the male street prostitutes had to grapple with daily in their dealings with clients.
To conclude, the literature showed that a variety of factors influence the power relationships which both male and female street prostitutes enter into with clients (Bloor et al, 1992, McKeeganey et al, 1990). These relationships are unequal, putting the prostitute at a disadvantage. However, the nature of the inequality between male street prostitutes and their male clients, differ from the nature of the power relationship between female street prostitutes and their male clients. The latter is dealt with, and rooted in, gender-relations, where the unequal power relationship between men and women are transferred into the realm of commercial sex work. This gender driven inequality characterising female street prostitution does, however, not apply to male street prostitution. Here, as noted, money and the illegal status of prostitution were the decisive factors that affected unequal power relationships between male street prostitutes and their clients in Durban.

**Where does the risk lie?**

Are male street prostitutes in Durban at risk of HIV/AIDS infection as a direct result of their involvement in commercial sex work? Taking into consideration the guidelines set out in the literature reviewed in this chapter and combining it with field data, it is possible to put forward an informed opinion on the question as to whether male street prostitutes in Durban are: a) at risk of contracting HIV/AIDS, and b) in a position to transmit the virus to clients.

As noted, not many of the prostitutes engaged in anogenital sex, which is considered to be an unsafe sex act. Those that did engage in anogenital sex, reported that they used condoms consistently. However, they did not use double condoms for
extra protection, neither did they consider additional lubrication as essential. Both these omissions could be interpreted as putting those prostitutes, who engaged in anogenital sex, at some degree of risk of HIV infection. Another factor that may have contributed to the possibility that male street prostitutes faced the risk of HIV infection, was that unprotected fellatio was practised.

In addition, the high frequency of drugs used by both prostitutes and their clients, indicated that there was the potential for lapsing into unsafe sex practises, despite the insistence of the respondents that they did not engage in unsafe sex whilst under the influence of drugs. Finally, the distinct patterns of migration, the culture of not carrying condoms, being exposed to the physical dangers of the street and the unequal power relations they entered into with clients, all contributed to situations where decisions to engage in unsafe sex might have been made.

**Non-paying sex partners**

In my opinion then, the male street prostitutes in Durban are at some risk of exposure to HIV infection as a direct result of their involvement in commercial sex work. It may, however, be that equal, if not greater, risk lies in their 'private' sexual and love relationships, rather than in their 'professional' lives. A very important aspect to bear in mind is that in Durban, as elsewhere, the majority of the male street prostitutes are heterosexual (Elifson et al, 1993:79; Morse et al, 1991:537; Pleak and Meyer-Bahlburg, 1990:567; Rowe, 1994:42).
In addition, being largely heterosexual, the majority of the male street prostitutes in Durban, as elsewhere, had non-commercial sexual relations with women ('lovers'). As suggested by the South Beach case studies (Chapter 4), these relationships between the male street prostitute and women were of a casual sexual nature or, in a few isolated cases, resulted in a semi-permanent sexual relationship with a local female prostitute with whom they shared accommodation (see also Morse et al., 1991:537; Elifson et al., 1993:79). The majority of the respondents at North Beach, as the case studies in Chapter 5 show, had casual sex with various women, whilst a few had both casual sex with various women whilst engaged in an ongoing relationship with a rural based woman (country 'wife').

Of particular significance are the findings of several other studies which conclude that both male and female prostitutes are more likely to be infected with HIV/AIDS and other STD's by their lovers, than by their clients (Choi and Coates, 1994:1377; Coutinho, 1988:207; Darrow et al., 1990:33; Elifson et al., 1993:79,82; Pleak and Meyer-Bahlburg, 1991:579; Tomlinson et al., 1990:361; ibid., 1991:106,). Why are prostitutes more at risk from HIV/AIDS infection by their lovers? The reasons vary, but the literature suggests that the core of the answer is to be found in the lack of, or inconsistent use of, condoms. The question one must ask then is: why do prostitutes generally not use condoms consistently, if at all, with their non-paying sex partners? The answer to this question also varies.

Some authors argue that the lack of condom use between prostitutes and their lovers denotes emotional significance, and the decision not to use condoms is often based on assumptions of, or need for, trust. Prostitutes in Rio de Janeiro, Glasgow and
Nottingham, for example, preferred not to use condoms with non-paying partners since they trusted their partners, and wanted to demonstrate this trust by not using condoms (Gilles and Parker, 1993:8-9, McKeeganey et al, 1990:281).

In addition, Gilles and Parker (1993:8) found that not using condoms is often seen as crucial to bonding or maintenance of relationships. In a similar vein, Tomlinson et al (1990:361), argue that prostitutes do not use condoms with their non-paying partners because it signifies the difference between 'work' and 'non-work'. The latter is often described as sex for pleasure or love. It is in the separation between sex in the 'public' and 'private' spheres of their lives that prostitutes protect their sense of self (Gilles and Parker,1993:9; Tomlinson et al, 1990:361).

Turning to the field data, of twenty-six research participants, twenty-three reported having sexual relations with women exclusively in their non-commercial sexual contacts, one reported having sexual contact with both females and males, and two had exclusive homosexual contact. As noted, non-commercial, sexual relationships between the majority of male street prostitutes at North Beach and females, were reported to be intermittent and mostly of a casual 'once-off' nature. However, some had an ongoing sexual relationship with a woman in a rural area who was often also the mother of their child(ren) born out of wedlock.

When asked about condom-use with their casual lovers, the majority of the research respondents indicated that they did not use condoms consistently, if at all. They cited lack of money to buy condoms, as one of the major reasons. Others replied that the opportunity for casual sex often arose unexpectedly and that they did not let the
opportunity pass simply because they did not have a condom with them. Yet others argued that if they were to use condoms their sex partner might suspect, incorrectly (as they always stressed), that they have "some sickness" and might then withdraw her consent for sex. Conversely, others argued that if a woman wanted them to use condoms then there has to be something "wrong with her", and they would then have declined to have sex with her. One respondent argued that he would not have sex with a woman who "looks" as if she had AIDS, remarking that he preferred big (fat) women because "it is the thin ones" who were more likely to have AIDS.

Those respondents who had ongoing relationships with rural based women, who were also the mothers of their child(ren), reported not using condoms at all. They only had occasional contact with these women, when they returned to their rural homes for a short period of time. The reasons for not using condoms varied little. One respondent expressed that it "is not the Zulu way" that a man should use a condom when having sex with his wife. Another did not want to use condoms because he was of the opinion that "the women on the farm (rural areas) do not know about this condom business". Another feared that his woman ('country wife' ?) would suspect him of "having other women" if he suddenly started introducing condoms into their relationship. None of these respondents reported being concerned about being infected with HIV by their 'country wives' because they believed that the women did not have sex with other men.

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1 This comment is congruent with the widespread use of the term 'Slim' in Africa to refer to AIDS, since inexplicable weight loss may be the first signal of HIV infection in countries, such as in Africa, "where diagnostic and treatment resources are scarce" (Tavanyar, 1992:48).
It has been brought to my attention that the men might not have used condoms with their country wives simply because of a lack of HIV/AIDS awareness. In addition, non-condom use could also be attributed to the general unwillingness to use condoms on the part of many black men in South Africa. Crewe (1992:1;39) ascribes this unwillingness to the "...previous rigorous campaigns by the apartheid state to lower black birth-rate...". The promotion of the use of condoms in these political campaigns resulted in a lot of scepticism amongst black men in South Africa about the use of condoms for safer sex and protection against HIV/AIDS.

The South Beach participants, both heterosexual and homosexual, reported a higher frequency of condom use with casual lovers than their North Beach counterparts. The majority of the respondents cited HIV prevention as the main reason for using condoms with casual lovers. However, many of these sexual contacts involved the use of drugs and, as noted earlier, the inability to make reasoned decisions about safer sex whilst being under the influence of drugs draws a huge question mark over the reported consistency and/or correct use of condoms during these encounters.

Four of the prostitutes, who operated at South Beach during the fieldwork, engaged in semi-permanent, monogamous, love relationships with local female prostitutes. These relationships, however, rarely lasted for more than two or three months before economic necessity compelled the male prostitute to re-locate to Johannesburg where business was more vibrant. Those respondents who did engage in such relationships with female prostitutes reported that they gradually stopped using condoms after they moved in with the women. When asked why, some replied that they
came to an agreement with the woman that there was no need to use condoms, since they both used condoms in their professional commercial sex life, and they were in a monogamous relationship with each other. Others said that not using condoms was a way of proving their trust and love for their partner. One respondent remarked that his girlfriend requested him not to use condoms since she had several clients daily who used condoms and claimed that the lubrication on the condoms caused a vaginal irritation.

All the South Beach respondents who were involved in a semi-permanent, sexual relationship with a female prostitute, without using condoms during intercourse, were in agreement that not using condoms was much more pleasurable, convenient and inexpensive. Yet they admitted that not using condoms sometimes caused them to be concerned, not because they feared HIV infection, but because they feared unwanted pregnancies. The question here is, how consistent were the female prostitutes' use of condoms with clients, and, how sure could they be that their lovers were monogamous?

Conclusion

The data then reflects that male street prostitutes studied in Durban had put themselves at considerable risk of HIV infection from their non-paying sex partners because of the inconsistent use of condoms during intercourse, similar to the findings of other studies done elsewhere (Choi and Coates, 1994:1377; Coutinho, 1988:207; Darrow et al, 1990:33; Elifson et al, 1993:79,82; Pleak and Meyer-Bahlburg, 1991:579; Tomlinson et al, 1990:361; ibid, 1991:106,).
In addition, as had been shown in this chapter, the male prostitutes who participated in this study, are at risk of HIV infection through their involvement in commercial sex work. The factors which lead to the risk of HIV infection in this population centres around: a) having multiple sex partners (clients) with whom they may engage in risky sexual acts (such as anogenital sex and fellatio without condoms), b) the frequent use of drugs which impact negatively on their ability to make reasoned judgement regarding unsafe sex practices, and c) the unequal power relations they enter into with clients, determined largely by their illegal status and their economic needs.

However, male prostitutes can, based on both a perusal of the literature and the findings of my study, be considered to be more at risk of HIV infection from their lovers and casual sex partners, than from their clients. This research suggests that the nature of the male street prostitutes' "work" does put them at risk of HIV infection, as does their personal, non-commercial sexual activities, with casual sex partners and lovers.
CHAPTER SEVEN: RECOMMENDATIONS

THE NEED FOR INTERVENTION

As noted in the previous chapter, the findings of this study suggest that male street prostitutes in Durban face considerable risk of exposure to HIV/AIDS infection. We now consider the need for HIV/AIDS intervention, and what form it should take. A two-level approach is advocated. Firstly, at a micro (grassroots) level, an argument is presented for a focus on sexual health education and vocational training, and secondly, a change in the legal status of prostitution on a macro level is called for.

Any question regarding the need for HIV intervention directed at male street prostitutes, should be viewed against a background provided by the rapid spread of HIV in South Africa, and KwaZulu Natal in particular (Appendix B and C). The statistics reveal that the epidemic is sweeping through the heterosexual community with rapidity, and in particular, the black community (Appendix D). The determinants of this epidemic, however, cannot be explained in terms of individual risk taking sexual behaviour only. The causal factors in this rapid spread of the epidemic are to be found in the poverty and deprivation experienced by most (black) South Africans, and The spread of HIV/AIDS in South Africa is fuelled by the migrant labour system (Preston-Whyte, 1992:4; Taylor, 1999:9). Yet, increasingly, all sub-groups and classes of South African society are being confronted with the ravages of HIV/AIDS.
The findings of this study, as well as of others, indicate that male street prostitutes, as one such sub-group, are: a) at some risk of HIV infection as a result of their involvement in commercial sex work, b) largely but not exclusively heterosexual, and c) more at risk of HIV infection from their non-paying sexual partners, than from their clients (Bloor et al, 1992:132; Caldwell, 1995:299; Choi and Coates, 1994:1376-7; Elifson et al, 1993:79,82; Gilles and Parker, 1993:2; Elifson et al, 1993:79; McKeeganey et al, 1990:275; Morse et al, 1991:535-539; Tomlinson et al, 1990:361; ibid., 1991:106).

Consider, for example, the sexual networks linking some of the North Beach respondents with ‘rural wives’ (and it’s accompanying cultural guidelines and perceptions governing sexual relations between them), or consider the lack of condom use with non-paying sexual partners to prove love and trust, or to distinguish between work and pleasure. There is surely then sufficient reason to call for a closer look at the possibility of an HIV intervention program for male street prostitutes in Durban.

There is a strong likelihood that male street prostitutes are, as a result of their engagement in commercial sex, more at risk of HIV infection than other young heterosexual males in the general population, who engage in unsafe sex. For this reason, it may be argued that broad based public orientated education and condom promotion programs aimed at the general heterosexual population, would be insufficient to alert the male street prostitutes to the risks associated with the unsafe sex acts they engage in with their paying sex partners.

Conversely, an HIV/AIDS intervention and sexual health education program addressing only the commercial sex work sphere of the prostitutes’ sex lives will be equally insufficient. This is because, as noted in the previous chapter, the male street
prostitutes in this study were at risk of HIV/AIDS infection as a result of unsafe sex with both their paying and non-paying sexual partners. Any HIV/AIDS intervention and sexual health education program should thus be aimed at both the commercial and non-commercial sexual activities of male street prostitutes in an integrated fashion.

Having stated the need for an HIV/AIDS intervention and sexual health education program targeting the male street prostitutes in Durban, it must be stressed that there were only a relatively small number of male street prostitutes actively plying their trade in Durban during the period of fieldwork. There thus, seems to be little justification for a financially costly gender-specific sexual health programme focused exclusively on them. To ensure a cost-effective, non-gender specific HIV/AIDS program, such an initiative should ideally be directed at both male and female commercial sex workers within, at least, the area known as 'The Point', or, if possible, the greater Durban area (Appendix E).

It is true that male street prostitution differs from female prostitution in several aspects. However, these differences are not fundamental, but largely situational. Both male and female street prostitutes share several fundamental similarities such as, for example, facing the (varying) risks of HIV infection as a result of their involvement in commercial sex, operating under the constant threat of criminalisation, and a continual desperate need for money. Sufficient common ground arguably thus exists for an HIV intervention programme directed at all prostitutes operating in Durban. Within such a program, provision can be made to accommodate the needs of both male and female prostitutes, ideally in both the formal and informal sector of the sex work industry in Durban.
**Sexual Health education**

HIV/AIDS intervention targeting male street prostitutes, as part of a wider sexual health education program, should ideally run at two levels concurrently. Whereas the bulk of the intervention and sexual health education should be designed, planned, implemented and evaluated at grass-roots or micro level, there is a need for the intervention to be connected to similar outreach projects in other locations. Hence, a macro level component of intervention has to be incorporated in the overall program design.

On a macro level, intervention will have to focus on articulating with networks of sex work projects at global, regional, country and inter-city level. Appropriate networks are those that recognise commercial sex work as valid employment and the right of sex workers to determine their own careers (Twelfth World AIDS Conference, 1998:1). In addition to articulating with networks on a macro level, Broring (1994a:30) proposed that "... the most important aspect for (interventionist) projects is to find allies for the activities at local level", and asking questions such as "who has good contacts with the target group; who can support outreach activities; who can facilitate contacts with police forces, who can support political requests and who can give legal advice?"

On a local level, the core of an HIV intervention and sexual health education programme for 'hard-to-reach' populations, such as street prostitutes, should have, as it's focus, an action research project designed to: a) promote sexual health knowledge, b) encourage preventive behavioural skills, and c) increase access to and use of health
related services (Gilles at al, 1991:1; 1992:1). An example of a comprehensive HIV/AIDS and sexual health program currently in place in South Africa, is co-ordinated by the Sex Worker Education and Advocacy Taskforce (SWEAT) whose aim is to decrease the incidence of HIV infection and STD's amongst the sex working population through advocacy, education, counselling and support.

Perusal of the literature reveals that the first and foremost important requirement of any successful HIV/AIDS intervention program, is that the target groups of the intervention should be involved in the entire process. This includes involving the street prostitutes in the planning, the design, implementation, and finally, the evaluation of the intervention (Alexander, 1992:4; Broring, 1994b:14; Gilles and James, 1992:4; Gilles and James, 1993:5; Gilles and Parker, 1993:8, Plant, 1990:2,7; Pleak and Meyer-Bahlburg, 1990:538).

Another primary requirement for a successful HIV/AIDS intervention and sexual health education initiative, is that the project should be long-term based in design, and that the implementation and evaluation thereof be continuous and ongoing, rather than once off. In studies elsewhere, respondents in successful HIV intervention directed at male street prostitutes had expressed a need for continuing the contracts that had been established during the project (Broring, 1994b:17). In their evaluation of several intervention programmes, Choi and Coates (1994:1384) similarly observed that "...sustained interventions are more likely to lead to sustained behaviour change" and that interventions have to be "intense" because behaviour change is associated with the amount of intervention exposure.
Finally, and most importantly, for an HIV/AIDS intervention and sexual health education project to be successful, it needs to have access to sufficient financial resources, an accessible centre, and suitably qualified administration staff to provide a range of services. The major services offered by intervention projects, such as co-ordinated by SWEAT (1998) in Cape Town, and aimed at commercial sex workers are:

- Support and Counselling
- Crises intervention
- Referral service to outside resources
- Effective condom distribution to sex workers
- On site Safer Sex Education – HIV and STD workshops
- Monthly newsletter
- Information Line and Telephonic Counselling
- Nightly outreach by peer fieldworkers and professional support staff
- Easy to read pictorial/written guides to safer sex

**Intervention in Durban**

The brief model for an HIV/AIDS intervention and sexual health program sketched above now needs to be applied to Durban, and discussed in more detail. As noted, the core objectives of a HIV/AIDS intervention programme in Durban, or elsewhere, should ideally be to:

- address the risky commercial sexual activities which prostitutes engage in and have a degree of control over,
• address the need to encourage the prostitutes to adopt a more managerial or directive stance in their relationships with clients, thus enabling them to negotiate safer sex;

• co-ordinate and expand the availability of sexual health services to meet the particular needs of commercial sex workers and;


Several factors, however, need to be highlighted which could prove to be challenging obstacles to an HIV/AIDS intervention and sexual health education initiative aimed, not so much at commercial sex workers in general, but at male street prostitutes in particular. Firstly, the distinct migration pattern seen to be followed by the male street prostitutes who operated at South Beach could mean that they might move on to another city before they could be reached effectively by a specifically oriented sexual health outreach program. In addition, the cultural and racial differences between the two distinct male street prostitute populations in this study calls for careful consideration to avoid implementing a 'blanket' HIV/AIDS intervention programme which would not reach or effect all male street prostitutes who operate in Durban. Finally, the Sex Worker Education and Advocacy Taskforce (SWEAT, 1998) in Cape Town had found that limited education and language barriers, as well as the social, legal and cultural stigma and discrimination that sex workers have to cope with, hamper healthcare workers from reaching this hard to reach population. The same would, in my opinion, apply to Durban.
We are also reminded by Gilles and Parker (1993:9), that "...in HIV prevention, simplistic attempts to increase condom use in prostitutes which do not take account of emotional relationships and the personal power associated with a 'controlled' lack of condom use, are likely to have a limited impact on the AIDS pandemic or sexual health of the men and women who exchange sex for money, their clients and partners." Any proposed outreach program thus has to pay equal attention to the commercial and non-commercial sex life of the prostitutes, based on an understanding of the meanings attached to their relationships.

Bearing in mind the particular challenges mentioned above, as well as the guidelines set out for the implementation of a HIV/AIDS intervention and sexual health education program, the following framework is suggested:

- the project has to be **initiated**;
- the project has to be **set up**;
- the project content has to be **planned**;
- the project has to be **implemented**;
- and finally, the project has to be **evaluated**.

**Initiating the project**

Firstly, initiating the project will primarily entail identifying project co-ordinators. The primary function of the co-ordinators will be to do a detailed comparative study of several HIV/AIDS intervention and sexual health programs to ensure a thorough understanding of what is required. Once the co-ordinators are familiar with the task, they need to investigate possible support networks, and draw as much information and advice from them as possible. Another function of the co-
ordinator(s) will be to initiate contact with as many interest groups and individuals as possible, and establish, as far as possible, the foundations for as many ‘partnerships’ with, what Broring refers to as ‘allies’ (1994a:30).

Furthermore, and most importantly, the co-ordinators will have to identify potential participants from the target community, i.e., the male and female prostitutes, to assist in the proposed planning, implementation and evaluation of the project. As noted in the literature, sex workers play a crucial role in safer sex education, and peer education has proved be an essential component in successful sexual health education (Broring, 1994a:30; Broring, 1994b:14; Gilles et al, 1992:3; Gilles and James, 1993:1; Meyer-Bahlburg, 1990:538; Parker, in Bower, 1990:1; Plant, 1990:27, SWEAT, 1998:2). Engaging members of the target group in the planning, implementation and evaluation of the intervention initiative, will assist in avoiding the pitfall of implementing an HIV/AIDS intervention program that does not make provision for the cultural and racial diversity found amongst the members of the target group.

The question, however, is how to initiate engaging members of the target community, and who to target? What may be of interest here, is to investigate the concept of “opinion leader based outreach education”, identified as an essential motivating factor in populations that have reduced their risk behaviour, as for example, in gay communities world wide (Kirk et al:1991). The design model calls for identifying the opinion leaders of the target community, training them, and encouraging them, not only to disseminate HIV information in the target population, but also to assist with the recruiting and training of other key participants. Identifying
opinion leaders could prove to be difficult, and the services of a suitably qualified fieldworker might have to be enlisted to assist in researching this respect.

Finally, securing financial assistance and sponsorship is another important step in setting up the initiative. The co-ordinators will have to provide a detailed and well-researched proposal, detailed (projected) budgets and a framework for regular reports to the stakeholders. Advice and assistance from individuals and organisations in the field of HIV/AIDS intervention and sexual health education is of crucial importance in drawing up such a proposal and budget.

**Setting up the project**

Setting up the project will primarily consist of establishing a physical base, or venue, from which to launch and co-ordinate the project. The co-ordinators will have to secure suitable and accessible premises, apply for telephone lines, source office furniture and equipment, and deal with other logistic and organisational matters that may arise. The training of key participants (opinion leaders), crisis counsellors, and administrative staff will also have to be given high priority during this period of setting up the HIV/AIDS intervention and sexual health education project.

Another issue to deal with during this phase, is for the project co-ordinators to liaise with available public health institutions and services in Durban regarding the supply of condoms and lubricants. Male street prostitutes in particular, need access to sachets of water-based lubricants for anal sex since existing lubrication on condoms available is inadequate for the rigorous demands of anal sex (McKeganey et al,
In addition, the possibility of supplying Nonxyl-9 as suitable lubricant for female prostitutes also needs to be explored (Gilmour, 1996:1). Moreover, the existing public health service providers in Durban need to be consulted to investigate the possibility of setting up an epidemiological database to accommodate, among other, voluntary blood testing (if the latter is applicable and/or desirable) as well as assistance in the prevention and/or treatment of STD’s in the target group (if necessary).

Finally, the project co-ordinators should establish working relationships with organisations and interest groups in Johannesburg and Cape Town, concerned with HIV/AIDS intervention and commercial sex work. As noted in previous chapters, the male prostitutes who operated at South Beach had a history of migration between Durban, Cape Town and Johannesburg. To ensure that the mobility of the target population does not negatively impact on the intervention initiative, the program should be flexible. The co-operation and exchange of ideas and information with interest groups and colleagues in Johannesburg and Cape Town, also needs to be secured, particularly so because, as Broring (1994b:16) reminds us, trends in one city can often be observed in another city as well.

Planning and implementing the project

The planning of the project will have to progress according to the local needs identified by the co-ordinators during the preceding phases, and can not be prescribed here. As suggested in the guidelines laid out in this chapter, however, drawing up an action plan has to be done in consultation with members of the target
community, as well as all other interested individuals, stakeholders and/or organisations as and where appropriate.

The importance of involving members of the target community in the planning, cannot be emphasised enough, and can be illustrated by looking at the issue of safer-sex media. SWEAT (1998), for example, provide "easy to read pictorial/written guides" to safer sex, designed specifically for prostitutes and their clients. Considering that the purpose of intervention media is to bridge the gap between the target community and the outreach worker, it is important that the participants should be involved in the design of the material, ensuring that the messages are relevant and accessible. In addition, the translation of the media material into other languages, e.g. Zulu and Afrikaans, should ideally be done by prostitutes themselves according to, and based upon their own cultural backgrounds. Broring (1994b:12), for example, noted how material translated from English to Rumanian, regarding safer sex in homo-sexual encounters, "... had to be presented in a broader framework", otherwise the text would have been, in this instance, offensive to the reader and resulting in the prostitutes, who are addressed in the material, not reading it. The material should ideally then be pre-tested by individuals familiar with the target language AIDS related issues.

Finally, another important task to be undertaken during the planning phase of an intervention project, is to address the structuring of workshops. Ideally, the workshops should deal, among other, with the topics of condoms, safer sex media, safer sex workshops, one-on-one peer education, and group intervention. This cluster of topics form, what can be called, the 'core' of a HIV/AIDS intervention
initiative, and additional issues can be addressed as, and when, they arise. The important aspect to cover during this phase is to set up 'blue-prints' for structuring, presenting and evaluating workshops.

Evaluating the project

According to the Resolution drawn up by delegates at the Twelfth World AIDS Conference in Geneva (1998:1), research work into HIV prevention is seldom evaluated using effective epidemiological methods of evaluation. Researchers are urged to develop methods of evaluation that is based on sex worker perceptions of project successes\(^1\), and are urged to develop techniques for continual evaluation. Evaluation of the project might thus prove to be one of the more difficult aspects of the research to attend to. In this respect, the co-ordinators have to determine, from the onset of the initiative, what form(s) and or measurement technique(s) are to be applied during the intervention, based on wide-spread consultations with other organisations and role players involved in HIV/AIDS intervention and sexual health education.

Vocational Training

Chapters 4 and 5 showed that the life of the male street prostitutes is a difficult one, both physically and emotionally. They lead a life constantly in fear for their

\(^{1}\) Kelly et al (1991) found pre- and post-Intervention surveys in target groups to be effective instruments of gathering data to assist the evaluation of the project.
immediate safety, fear of being apprehended by law enforcement agencies, and the fear of not generating enough money to buy food for the day.

The majority of male street prostitutes in Durban live from day to day, seldom making plans for their future. Working all their available time to provide for their immediate needs situates them in a vicious circle from which they are unlikely to escape without some assistance. None of the respondents saw prostitution as a long-term solution despite not having many alternatives. They have relatively modest expectations and wishes, mostly only hoping for stable employment, and a steady income.

However, the majority of the respondents lacked sufficient education and vocational training to enable them to find employment, leaving them reliant on a system of living on short term methods of income generating. Poverty is the key word and the trap here, and selling sex their primary method of survival. For some of the respondents, prostitution was seen as one of several options within a broad range of possible informal sector activities to generate an income. Yet, for the majority of the respondents, most notably those who operated at South Beach, prostitution was the sole way of generating income.

All the respondents interviewed in this research agreed that they would rather generate an income through means other than selling sex, but acknowledged that their chances of securing alternative employment diminished more every day they spent walking the streets. The need for vocational training was identified by the majority of the respondents as an urgent first step towards securing alternative employment.
Despite vocational training not generally forming one of the major thrusts of existing HIV intervention programs, there is a need to offer realistic alternatives to prostitution as part of a holistic project (Broring, 1994b16). The suggestion is that any proposed HIV/AIDS intervention program aimed at commercial sex workers in Durban incorporate the possibility of vocational training as part of the project.

Legal status

An outreach based HIV/AIDS intervention program, as briefly outlined above, is directed at the sexual behaviour, both commercial and private, of prostitutes. The focus is thus directed largely at the individual. Yet, the individual does not operate within a vacuum and in isolation, but within a macro-level social environment. It is to this socially stigmatised, and physical dangerous environment, that we now turn as the second level of HIV intervention.

Power relations as primary issue

As noted in chapter 6, among the co-factors considered to facilitate and increase the risk of HIV infection, the illegal status of commercial sex work, and it's effect on the power relations between prostitutes and their clients, has been singled out as a significant contributing factor in the vulnerability of prostitutes to HIV infection. Studies done in risk behaviour of male street prostitutes associate unsafe sex with client control, and client control, as discussed in the previous chapter, has been shown to be embedded, among other, in the illegal nature of commercial sex work (Bloor, et al,
1992:131). Plant (1990:27) similarly noted that "... the most vulnerable (sex workers) appears to be men and women who work in isolation on the streets or who work in establishments which do not have 'house rules' prohibiting unprotected sex".

Thus, on a macro level, intervention should attempt to address the legal restrictions that largely determine the physical and social environment within which prostitutes operate, and over which they have little or no control, as this renders them particularly susceptible to engaging in risk-related sexual behaviour (Brener and Pauw, 1998:27; Leggett, 1998:23; McKeganey et al, 1990:284-286). Following the advise of Morgan Thomas et al (1989:149) that "...public health is not enhanced by attempts to curb prostitution, as historically these measures have been counterproductive by driving activities further ground", one of the most important measure that can be taken to address the imbalance of power between prostitutes and their clients, is to consider the options of decriminalisation and/or legalisation of prostitution.

Decriminalisation vs. Legalisation

International trend

In 1998, the United Nations labour organisation urged governments worldwide to officially recognise the booming sex industry and treat it like any other business. The International Labour Organisation (ILO) similarly called for recognition of the sex industry. Though stopping short of calling for the legalisation of prostitution, the ILO drew attention to the advantages of recognising prostitution as an economic sector for extending the taxation net to cover many of the lucrative
activities associated with it, and to formulate labour policies needed to deal with the people working in the sex industry (Kaban, 1998: 1). Despite the anticipated controversy caused to governments and people who believe that prostitution must be considered a crime, the ILO urged governments to apply labour regulations and standards for social protection where prostitution is recognised as legal work.

South Africa today

Any attempt to introduce debate on the legal status quo in South Africa is bound to be controversial (Schurink et al, 1993: 130). The perceived role of sex workers in the spread of HIV has revived popular and broad public calls for prohibition of prostitution (Gauteng Department of Safety and Security, 1997: 3; Leggett, 1998: 23; Schurink, 1993: 133-136). Prohibition (i.e. enforcement of the criminalisation of commercial sex work) would, however, most certainly increase the role which prostitution plays in the spread of HIV, since the illegal status of the industry already provides a major impediment to education and intervention campaigns and programmes (Leggett, 1998: 24; Morgan Thomas et al, 1989: 149; Schurink, 1993: 150).

Proceedings are underway to investigate the possibility of removing the criminal sanction from the arena of commercial sex in South Africa. However, not much progress has been made, with the exception of Gauteng province (Gauteng Department of Safety and Security, 1997; Leggett, 1998: 21). Amongst several of the resolutions adopted by the Gauteng task force investigating the decriminalisation of commercial sex work, there was agreement that: a) trafficking (trading) in human beings is unacceptable and requires criminal sanction, b) pimping be criminalised, c) sex workers be protected (and
should enjoy rights and freedoms as human beings and as workers); and, d) sex work be decriminalised (Gauteng Department of Safety and Security, 1997:4).

Sexual-health professionals and the prostitutes themselves are divided about whether to follow the route of decriminalisation or that of legalisation of commercial sex work in South Africa (Brener and Pauw, 1998:28; Gauteng Department of Safety and Security, 1997; Leggett, 1998:23; Oosthuizen, 1998:32; Schurink et al, 1993:143,146). Decriminalisation essentially means "...the laws be removed as criminal statutes and the public be educated to destigmatise the career/profession and policing services to be reoriented to stop acting as if prostitution was a victim crime" (Leggett, 1998: 23; Schurink et al, 1993:145-146). Legalisation, on the other hand, goes further than decriminalisation. It implies that controls such as registration, the right to collective bargaining (i.e. trade unionising), medical examinations and check-ups be legally installed (Leggett, 1998: 23; Schurink et al, 1993:146).

There is, however, broad consensus between sexual-health professionals and prostitutes, both in the literature as well as at grassroots level, that at least the decriminalisation of prostitution in South Africa is a necessary and urgent step, that needs to be taken as soon as possible (Brener and Pauw, 1998:28; Gauteng Department of Safety and Security, 1997:3; Leggett, 1998:23, Oosthuizen, 1998:32; Schurink, 1993:133-136). The Gauteng Department of Safety and Security Task Force (1997:7), for example, expressed the opinion that "...the process of democratising South African society and the principles enshrined in the Constitution lay a solid foundation for the decriminalisation of sex work", and propose that the time is appropriate to take this step.
Whereas there is broad agreement amongst sexual health care professionals and prostitutes about the necessity for decriminalisation of sex work, the idea of legalisation is more contentious. Schurink et al (1993:149-150), for example, do not commit themselves to legalisation as an option since "...the notion of control is seen as negative by many agents in and around the commercial sex profession". Brener and Pauw (1998:28) similarly argue that the majority of prostitutes do not see legalisation of commercial sex work as being in their best interest, as it could actually result in further criminalisation of sex work. This is because legalisation would entail special regulations for the sex industry, such as confining sex workers to red light districts or mandatory testing which they consider to be unrealistic and which would once again require police enforcement of a non-victim crime. The Gauteng Department of Safety and Security Task Team (1997) investigating the possible decriminalisation or legalisation of sex work similarly reject the legalisation (licensing and registering) of prostitutes. They conclude, in addition to the objections raised above, that legalisation would result in the disempowerment and stigmatisation of sex workers, and drive sex work into clandestine operation.

The question now, is how would a change in the legal status of commercial sex work impact on the male street prostitutes who had participated in this research? This thesis, first of all, supports the call for the immediate decriminalisation of commercial sex work, and secondly, supports further investigation into the potential for legalising commercial sex work, as there might be possible benefits for prostitutes to be derived from the latter option (Leggett, 1998:24; Oosthuizen, 1998:32).
The benefits for prostitutes derived from decriminalisation of sex work in South
Africa would, according to the Gauteng Department of Safety and Security Task Team
on commercial sex work (1997:8), be:

- advancing the process of democratising South Africa by affording sex workers their
  human rights;
- eradicating the stigmatisation (labelling) and marginalisation effects of
  criminalisation that allows for the exploitation and harassment of commercial sex
  workers;
- affording sex workers equal status before the law, equal protection and benefit of the
  law;
- giving sex workers control over their lives, a sense of autonomy, in both a personal
  and commercial capacity;
- protecting sex workers against crimes to which they are subjected by clientele and
  law enforcement agencies, and thus reducing ancillary crimes;
- facilitating the re-allocation of police resources in a cost-effective, efficient and
  effective way, enabling the police services to concentrate on policing serious and
  violent crime.

A perusal of the literature indicates that there is broad agreement with the benefits
listed above. In addition, and perhaps most importantly, it is also possible to argue that
the decriminalisation of sex work would result in more effective HIV intervention, since
sexual health education could then take place openly (Brener and Pauw, 1998:27;
Conclusion

The recommendations of this research focussed on the need for an HIV/AIDS intervention and sexual health education program, aimed at prostitutes, and in particular, male street prostitutes, in Durban. Such an initiative would require intervention at grass roots as well as at a macro level.

At grass-roots level, an intensive and sustained sexual health program needs to be implemented among commercial sex workers, with the co-operation and active support of the target group in all phases of the project. In addition, co-ordinators of the project need to establish a support network with other organisations and individuals concerned with sexual health education and commercial sex work.

At the macro level, HIV/AIDS intervention and sexual health education has to address the hostile physical and emotional environment in which the prostitutes have to operate. The illegal nature of commercial sex work leaves them very little option but to enter into unequal power relations with clients, exposing them to situations where they could be exposed to HIV infection through engaging in unsafe sex.

Decriminalisation of commercial sex work is seen as an urgent and necessary step for a HIV/AIDS intervention and sexual health education program directed at prostitutes to succeed, for the illegal status of the industry provides a major impediment to sexual health education programs. Legalisation, as another option, should remain open to debate and discussion.
CONCLUSION

HIV/AIDS in South Africa, and in KwaZulu Natal in particular, is spreading at an alarming rate. All possible avenues of transmission have to be identified and recommendations for intervention made. That is what this thesis had set out to do with specific reference to male street prostitution in Durban.

This research sought, unsuccessfully, to explore male street prostitution within the social constructionist theories of human sexuality. Sexuality, it transpired as the research findings were analysed, was not the framework within which the respondents made sense and derived meaning from their profession. As noted, the majority of the respondents were heterosexual, yet they engaged in homo-sexual acts with clients. It was economic considerations that defined their entry into, and continued involvement with, prostitution. Consequently, the meaning they attached to their profession is situated within a material framework, albeit at the level of survival, and it is within this framework that their profession made sense to them.

The study revealed that male street prostitutes operate from two venues on the Durban beachfront, divided along racial lines. The data revealed that male street prostitution is not homogenous, and that significant differences occurred when the activities of the respondents at the two sites are compared. The most salient difference between the respondents was that those who operated at the South Beach site, took a managerial approach to their interaction with clients, and were more generally more successful in securing paying clients than their North Beach counterparts.
The respondents at North Beach, however, readily engaged in communal open-air living which offered them a sense of security, unlike their South Beach counterparts who lived highly mobile, atomised and very lonely lives. Unlike the respondents at South Beach, those who operated at North beach did not have a pattern of migration to Johannesburg and Cape Town.

Through prolonged observation, (limited) participation and ethnographic interviews, a picture of young men desperately trying to survive, emerged. Marginalised, stigmatised and criminalised, the male street prostitutes faced danger on the streets daily. They often worried about where the next meal would come from, and were unsure where they find a place to sleep after spending night after night, without success, trying to secure a client and generate some income.

The case studies revealed that the majority of respondents in this research shared a life history of dysfunctional family backgrounds, and destabilised childhood years characterised by poverty, domestic violence and alcohol abuse. A significant proportion of the respondents had a history of conflict with the law (apart from their involvement in commercial sex work), and several had been in jail or juvenile reformatory institutions. Few had traceable employment histories, nor vocational training to enable them to break with prostitution and engage in alternative employment.

The major finding of this study is that male street prostitutes in Durban, as elsewhere, are as much at risk of HIV infection as a result of their involvement in commercial sex work, as they are at risk of infection as a result of their non-commercial
sexual activities. The danger of exposure to HIV infection within the commercial sphere of their sex lives can be ascribed to a lack of education about safer sex practices, lack of condoms and suitable lubricants for the rigorous demands of anal sex. In addition, street prostitutes, both male and female, risk the danger of exposure to HIV infection in their profession as a result of the structural unequal power relations between them and their clients, brought about by the illegal status of prostitution in South Africa.

The danger of HIV infection that the male street prostitutes in Durban faced as a result of their non-commercial sexual activities can largely be attributed to the non-use of condoms. The reasons for having unsafe and unprotected sex with their lovers and casual sex partners varied. For many, the non-use of condoms signified the division between their professional and private lives, whilst for others it was an expression of trust and affection. Some of the prostitutes, most notably the Zulu speaking respondents, did not use condoms with their female sex partners because of cultural convictions, whilst several of the respondents simply did not care to practise safer sex whilst under the influence of alcohol and/or drugs.

Considering the rapid spread of HIV/AIDS in South Africa, and in particular, the pandemic proportions experienced in Kwazulu Natal, all avenues of intervention need to be explored. This thesis culminates in recommending a framework for HIV/AIDS intervention and sexual health education in Durban, and calls for the decriminalisation of prostitution. Of vital importance now, is to undertake a mirror study of female prostitution in Durban, and to do a study of the clients of both male and female prostitutes.
Finally, it is now a matter for both health care providers and law makers, advocacy groups and other interest groups concerned with prostitution and HIV/AIDS to consider the consequences of retaining the status quo regarding prostitution, as opposed to engaging in a pro-active effort to decriminalise the sex industry and contribute to the general sexual health of prostitutes, their clients and their non-paying sexual partners. A multi-disciplinary approach and an engaged social science will contribute significantly to dealing with the medical and legal aspects of HIV/AIDS and prostitution within a social context, as well as assisting in the effort to combat the spread of HIV/AIDS in South Africa.


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http:www.walnet.org/csis/groups/nswp/conferences/geneva_resol.html


## Figure 1  Global distribution of HIV infection in 1997

<table>
<thead>
<tr>
<th>Area</th>
<th>Number of HIV infected people</th>
<th>Percentage of Global HIV population</th>
</tr>
</thead>
<tbody>
<tr>
<td>North America</td>
<td>860 000</td>
<td>2.81%</td>
</tr>
<tr>
<td>Western Europe</td>
<td>480 000</td>
<td>1.57%</td>
</tr>
<tr>
<td>Eastern Europe and Central Asia</td>
<td>190 000</td>
<td>0.62%</td>
</tr>
<tr>
<td>South and South East Asia</td>
<td>5 800 000</td>
<td>18.97%</td>
</tr>
<tr>
<td>East Asia and the Pacific</td>
<td>420 000</td>
<td>1.37%</td>
</tr>
<tr>
<td>Australia and New Zealand</td>
<td>12 000</td>
<td>0.04%</td>
</tr>
<tr>
<td><strong>Sub-Saharan Africa</strong></td>
<td><strong>21 000 000</strong></td>
<td><strong>68.67%</strong></td>
</tr>
<tr>
<td>North Africa and the Middle East</td>
<td>210 000</td>
<td>0.69%</td>
</tr>
<tr>
<td>Caribbean</td>
<td>310 000</td>
<td>1.01%</td>
</tr>
<tr>
<td>Latin America</td>
<td>1 300 000</td>
<td>4.25%</td>
</tr>
<tr>
<td><strong>TOTAL:</strong></td>
<td><strong>30 582 000</strong></td>
<td><strong>100.00%</strong></td>
</tr>
</tbody>
</table>

Source: Taylor, 1999:48
## Figure 2 National antenatal HIV prevalence percentage

<table>
<thead>
<tr>
<th>Year</th>
<th>Seroprevalence</th>
</tr>
</thead>
<tbody>
<tr>
<td>1990 (1) (3)</td>
<td>0.76%</td>
</tr>
<tr>
<td>1991 (1) (3)</td>
<td>1.49%</td>
</tr>
<tr>
<td>1992 (1) (3)</td>
<td>2.69%</td>
</tr>
<tr>
<td>1993 (1) (3)</td>
<td>4.69%</td>
</tr>
<tr>
<td>1994 (1) (3)</td>
<td>7.57%</td>
</tr>
<tr>
<td>1995 (1)</td>
<td>10.44%</td>
</tr>
<tr>
<td>1996 (1)</td>
<td>14.07%</td>
</tr>
<tr>
<td>1997 (2)</td>
<td>16.00%</td>
</tr>
<tr>
<td>1998 (2)</td>
<td>22.80%</td>
</tr>
<tr>
<td>1999 (2)</td>
<td>*23.50%</td>
</tr>
<tr>
<td>2000 (2)</td>
<td>*25.00%</td>
</tr>
</tbody>
</table>

Source: 1) Taylor, 1999:50  
2) Economic Research Unit, University of Natal, Durban  
3) Wilkins, 1996:10  
* Projected figures, Economic Research Unit, University of Natal, Durban
### NATIONAL GEOGRAPHICAL ANTENATAL DISTRIBUTION OF HIV IN SOUTH AFRICA

#### Figure 3: Geographical antenatal distribution of HIV seroprevalence

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Western Cape</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>1.20</td>
<td>1.70</td>
<td>3.10</td>
<td>6.30</td>
<td>5.20</td>
</tr>
<tr>
<td>Eastern Cape</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>4.50</td>
<td>6.00</td>
<td>8.10</td>
<td>12.60</td>
<td>15.90</td>
</tr>
<tr>
<td>Northern Cape</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>1.83</td>
<td>5.30</td>
<td>6.50</td>
<td>8.60</td>
<td>9.90</td>
</tr>
<tr>
<td>Freestate</td>
<td>0.60</td>
<td>1.50</td>
<td>2.90</td>
<td>4.10</td>
<td>9.20</td>
<td>11.00</td>
<td>17.50</td>
<td>19.60</td>
<td>22.80</td>
</tr>
<tr>
<td>Kwazulu Natal</td>
<td>1.60</td>
<td>2.90</td>
<td>4.80</td>
<td>9.60</td>
<td>14.40</td>
<td>18.20</td>
<td>19.90</td>
<td>26.90</td>
<td>32.50</td>
</tr>
<tr>
<td>Mpumalanga (E-Tvl)</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>12.10</td>
<td>16.20</td>
<td>15.80</td>
<td>22.60</td>
<td>30.00</td>
</tr>
<tr>
<td>Northern Province</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>3.00</td>
<td>4.90</td>
<td>8.00</td>
<td>8.20</td>
<td>11.50</td>
</tr>
<tr>
<td>Gauteng</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>6.40</td>
<td>12.00</td>
<td>15.50</td>
<td>17.10</td>
<td>22.50</td>
</tr>
<tr>
<td>North West</td>
<td>-</td>
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<td>-</td>
<td>-</td>
<td>6.70</td>
<td>8.30</td>
<td>25.10</td>
<td>18.10</td>
<td>21.30</td>
</tr>
<tr>
<td>South Africa</td>
<td>0.80</td>
<td>1.40</td>
<td>2.40</td>
<td>4.30</td>
<td>7.60</td>
<td>10.40</td>
<td>14.12</td>
<td>16.10</td>
<td>22.80</td>
</tr>
</tbody>
</table>

Source:  
1) Taylor, 1999:51  
2) Economic Research Unit, University of Natal, Durban  
3) Wilkins, 1996:10
# APPENDIX D

## NATIONAL HIV DISTRIBUTION BY RACE IN SOUTH AFRICA

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
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<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1990</td>
<td>32</td>
<td>6</td>
<td>84</td>
<td>58</td>
<td>31</td>
<td>0</td>
<td>758</td>
<td>758</td>
</tr>
<tr>
<td>1991</td>
<td>69</td>
<td>17</td>
<td>76</td>
<td>22</td>
<td>27</td>
<td>34</td>
<td>1515</td>
<td>1893</td>
</tr>
<tr>
<td>1992</td>
<td>98</td>
<td>10</td>
<td>53</td>
<td>0</td>
<td>100</td>
<td>104</td>
<td>2880</td>
<td>4416</td>
</tr>
<tr>
<td>1993</td>
<td>39</td>
<td>21</td>
<td>32</td>
<td>161</td>
<td>2981</td>
<td>568</td>
<td>4362</td>
<td>6117</td>
</tr>
<tr>
<td>1994</td>
<td>107</td>
<td>12</td>
<td>206</td>
<td>139</td>
<td>240</td>
<td>401</td>
<td>7310</td>
<td>9524</td>
</tr>
<tr>
<td>1995</td>
<td>120</td>
<td>13</td>
<td>220</td>
<td>0</td>
<td>266</td>
<td>636</td>
<td>8772</td>
<td>13684</td>
</tr>
<tr>
<td>1996</td>
<td>127</td>
<td>82</td>
<td>313</td>
<td>196</td>
<td>329</td>
<td>719</td>
<td>7796</td>
<td>12719</td>
</tr>
</tbody>
</table>

Source: Taylor, 1999:53
APPENDIX E

Map 1: DURBAN BEACH-FRONT AND CENTRAL BUSINESS DISTRICT
Map 2: SOUTH BEACH RESEARCH SITE AND SURROUNDING AREA

A) Point Road  
B) Far right beat  
C) Carpark  
D) Carpark  
E) Residential Areas  
F) Near right beat  
G) Centrepoint (‘Showcase’)  
H) Island  
I) Near left beat  
J) Far left beat  
K) Carpark  
L) Carpark  
M1-3) ‘Loading zones’  
M4) Bus shelter  
N) Carpark  
O) Carpark  
P) Addington Hospital  
Q) Carpark  
X) Observation point  
Q) Point police station
APPENDIX G

Map 3: NORTH BEACH RESEARCH SITE AND SURROUNDING AREA

A) Ocean
B) Semi-dark beach
C) Fenced off dune
D) Blue Waters Hotel
E) Bushes
F) Canopy covered benches
G) Blue Waters Hotel Parking lot
H1-4) Canopy covered benches
I) Cloak rooms
J) Huge palm tree
K) Open-air showers
L) Kiosk
M1-3) Parking areas
N) Lifesavers club
XX) 'Showcase'

B1) Dark beach where men have sex
B2) Semi-dark beach
B3) Well lit beach
B4) Semi-dark beach
B5) Dark and dangerous isolated beach
APPENDIX H

Map 4: TOWNS, PROVINCES AND NEIGHBOURING STATES OF SOUTH AFRICA
APPENDIX I

Map 5: GREATER DURBAN METROPOLITAN AREA
APPENDIX J

GLOSSARY

Dagga - a name widely used for cannabis, also known as ‘Zol’ or ‘dope’.

Fisting - using the fist to penetrate a sex partners' anus.

Icansi - Zulu term for a flat thin grass sleeping mat.

Inyanga - Zulu term for a traditional healer using indigenous plant material only. KY - a commercial brand water soluble jelly, used as a lubricant during sex.

Lobola - a Zulu term used to describe a complex African cultural process of offering cattle and other material goods as a form of bridewealth exchange.

Malume - Zulu word for the mother's brother.

Orgy - a term to describe a sexual encounter involving many people.

Rimming - using the tongue to touch or lick the anus of the sex partner.

Sangoma - Zulu term for a traditional healer who heals through both medication (animal and plant matter) and divination.

Scat - sexual activity involving human faeces.

S&M - Sadoism and Masoism, where one sex partner is in bondage and the other inflicts pain as part of the sex act.

Shebeen - a word widely used amongst black people in South Africa for an informal tavern in a township, informal settlement or other residential area, where alcohol is sold.

Skelm - Afrikaans word widely used and understood amongst the different language population groups to describe a dishonest person who lies, steals and cheats, a crook.

Skebenga - Zulu word to describe a dishonest person who lies, steals and cheats, a crook, skelm, a tsotsi.

Stabane - Zulu term for a homosexual male.

Three-some - a term to describe the sexual involvement of three persons together.

Tsotsi - a widely understood term in South Africa to refer to a dishonest person who steal, tell lies and cheat, a crook, a skelm, a skebenga.

Umzebenzi - Zulu term to denote a patriarchal cultural determined ritual where the ancestors are contacted and appeased through the slaughter of an animal or bird. During such ceremonies, the males of the family play a pivotal role in the proceedings.

Watersport - where one, or both sex partners, urinate on each other.