Men selling sex in Cairo and Alexandria: perspectives on male sex work and AIDS in Egypt

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MEN SELLING SEX IN CAIRO AND ALEXANDRIA
PERSPECTIVES ON MALE SEX WORK
AND AIDS IN EGYPT

A thesis submitted by SOUAD ORHAN HUSEEIN HAMADA
to the Department of Sociology, Anthropology, Psychology & Egyptology

May 2008

In partial fulfillment of the requirements
For the Degree of Masters of Arts
In Sociology-Anthropology

Has been approved by

Dr. Helen Rizzo
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Acknowledgments

This research would not have been possible without the invaluable input and support received from many dedicated people. First and foremost I would like to extend my appreciation to all members of my Thesis Committee, Dr Helen Rizzo, Dr Elizabeth Coker and Dr Kevin Dwyer, who have provided their guidance in all stages of preparing this research and for supervising it. I thank them all for their valuable suggestions, constructive comments and keen interest to follow and advise throughout the research. Special thanks should also be extended to Mr. Ahmed El-Missiry, my brother in law and friend, who took on his shoulders the responsibility for conducting some of the research interviews in Alexandria at a time when accessing informants was a real challenge. I greatly acknowledge his hard work, dedication and support.

Most of all, I am greatly indebted to the respondents and interviewees who availed their time and revealed useful and personal information about their life experiences and their hardships and expanded our understanding of the situations of male sex workers in Egypt and the necessity to intervene on their behalf as part of responding to AIDS in the country.
ABSTRACT

The American University in Cairo

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Under the supervision of Dr Helen Rizzo, Dr Elizabeth Coker, Dr Kevin Dwyer

A qualitative approach was used to study the etiology of male sex work in Egypt and report on issues related to sexual identity, sociodemographic characteristics, and work and HIV contexts of male sex workers. Seven male sex workers aged between 17 and 37 were interviewed in Cairo and Alexandria.

This preliminary, exploratory study suggests the existence of a strong relationship between childhood sexual abuse and later involvement in sex work. Other secondary factors driving some youth into sex work include poverty, inadequate salaries, unemployment, low education levels and other types of childhood maltreatment including physical, emotional and psychological abuse and neglect. In this study, sex workers mainly identified themselves following the "feminine vs. masculine" pattern where sexuality is defined according to the domination by or reception of the penis in the sex act. Only one identified himself as 'gay'. Different modalities of sex work were reported ranging between street sex work and arrangement of sex through friends and regular clients by mobile phones. However, most informants refused to consider sex work an occupation and preferred to call it a "source of income". As for HIV risks, nearly all informants underestimated their vulnerability to HIV. Although all reported condom use, most of them were inconsistent on it and attributed it to particular types of partners and sexual acts.
The study fairly confirms that the subjective meanings male sex workers relate to the act of having sex, their typologies of clients and the way they interact with clients are all issues that inform their safer sex behaviours. It emphasizes the strong need for programmes to address the vulnerability of Egyptian male sex workers to sexual health, financial and psychological problems, and homophobia. Such programmes can be tailored as part of wider interventions targeting men who have sex with men in general.

**Key Words:** Male Sex Workers, Sexual Identity, HIV, AIDS, risk, Egypt
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<tr>
<td>AIDS</td>
<td>Acquired Immuno Deficiency Syndrome</td>
</tr>
<tr>
<td>HIV</td>
<td>Human Immuno Deficiency Virus</td>
</tr>
<tr>
<td>IEC</td>
<td>Information, Education and Communication</td>
</tr>
<tr>
<td>NGO</td>
<td>Non Governmental Organization</td>
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<tr>
<td>STIs</td>
<td>Sexually Transmitted Infections</td>
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<tr>
<td>VCT</td>
<td>Voluntary Counseling and Testing</td>
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1.1 Introduction

Whether officially recognized or not, male sex work occurs in all societies and the Egyptian society is no exception. Male sex work is attributed to the convergence of a demand for homosexual sex on one hand, and an existent supply on the other. This demand is not limited to Egyptians. Evidence shows that among tourists entering the country, there are many men who seek to purchase male-to-male sex from young Egyptians. As such, the practice is more noticeable in cities frequented by tourists, including Cairo and Alexandria.¹²

Male sex work in Egypt is an issue that has for long been treated with silence and denial. Reasons for this denial could relate to the Egyptian context which is strongly masculine and highly attached to its religious values and principles, which forbid both homosexuality and prostitution.³ In recent years, however, there has been some recognition of the existence of male-to-male sex in Egypt. Yet this recognition is charged with disapproval and severe social stigma, which are very obvious in the ways Egyptian authorities have been handling the issue of same sex relations with persecution starting from the year 2001. In May 2001, the government arrested and detained some 60 men who have sex with men who were on board of the Queen Boat in Cairo, informally known as a hang-out for gay men. The arrests accompanied increased state surveillance of Egyptian gay men interacting through websites and chat-rooms, and a significant number of gay men were later arrested through entrapment by police via gay chat-rooms, in addition to being identified by informants. Of the original 52 who were imprisoned, 21 were found guilty of ‘habitual debauchery’ and sentenced to terms of one to two years.⁴ A more recent crackdown on men who have sex

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¹ For further discussion see El-Gawhary, K. (1995). Sex Tourism in Cairo. Middle East Report, 196, Tourism and the Business of Pleasure, Sep-Oct, pp.26-27. In his article, El-Gawhary discusses the 'revitalization of the prostitution business' by Gulf men every year in Cairo. While mainly addressing female prostitution in the city, El-Gawhary points to the solicitation, by pimps, of Egyptian men in downtown Cairo.’
² In interviews conducted for this paper, some informants confirmed that their clients include Arabs who help flourish their business in the summer.
³ Sherif, B. The Encyclopedia of Sex; Egypt [ Ahttp://www2.hu-berlin.de/sexology/IES/egypt.html].
with men started in October 2007 with a series of arbitrary arrests of men suspected of homosexuality following the incarceration of two such men who were involved in an altercation on the streets of Cairo because one of them confessed to being HIV-positive.  

Talking about male sex work hence entails breaking various taboos including not only homosexual desires but also male prostitution. Yet being bold to speak out about these taboo subjects and practices is necessary to respond to the AIDS epidemic. It has been clearly demonstrated worldwide that men and women involved in commercial sex work are more vulnerable than the general population to HIV infection due to their propensity towards risk-taking behaviours such as substance abuse and unprotected sexual practices. Within any society, it is possible that a subset of sex workers practicing unprotected sex with multiple partners could act as a core group for transmitting HIV and other sexually transmitted infections (STIs). Their clients may subsequently transmit the infection to sexual partners outside the sex trade and to other sex workers. The extent of this sexual mixing will impact the spread of HIV and other STIs in the general population.  

A good understanding of the nature of the sex industry and the characteristics and experiences of sex workers is thus essential to guide appropriate interventions for HIV prevention and treatment among these populations and would eventually reduce rates of infection in the community at large.

1. 2 Objectives

Considering that the topic of male sex work has never been specifically studied in Egypt before, and as there are no explicit sexual behavioral information available to indicate how Egyptian male sex workers are at risk of HIV infection, this research aimed to serve as a pilot formative study in this regard. Through this


research, I tried to explore the conditions that make male sex work a favourable option for some Egyptian youth, listened to the sex work experience and needs of these youth, as well as tried to assess whether these individuals are at risk of HIV. My objectives were guided by a general interest in gaining a rich and complex understanding of male sex work, particularly from the perspectives of the male sex workers themselves and obtaining culturally specific information about their values, opinions, behaviors and social contexts. They were also guided by a concern over the vulnerability of these groups to HIV.

Questions that this research attempted to answer were:

1. What are the sociodemographic characteristics of male sex workers in Egypt, and what are the factors that make male sex work a favourable option for some Egyptian youth?
2. How do Egyptian male sex workers identify themselves sexually and how this identification is socially constructed?
3. What are the sex work experience and HIV risk contexts of the group of male sex workers found by this research? Specifically, what type of sex work they are involved in; length of time they were engaged in this activity; income generated; clients' profiles; contact and work venues; type of sexual activities practiced; knowledge and behaviour related to HIV and STIs, drug use, and interactions and negotiation of safe sex with clients.

1.3 Literature Review

1.3.1 Literature on Sex Work in Egypt

Although a growing body of literature has emerged in the West over the last two decades, providing a profile of the male sex worker, explanations of factors associated with paid sex between men, and focus on AIDS related knowledge and practices among these populations, such literature is hardly available, with the exception of Morocco and Tunisia,7,8 in the Arab region. As far as Egypt, no such research has ever

been conducted and references to these populations were made in very few studies with the exception of one focusing on the lives of street children in Cairo,\(^9\) and two other AIDS-related studies addressing men who have sex with men.\(^{10}\) The objectives of the study focusing on street children were to explore the reasons that drive children into the streets as well as understand the relationships, systems and opportunities provided by the streets which enable them to survive in it. The study was based on in-depth interviews with both male and female street children and covered the period from 1994 until 1998. Findings of the study demonstrated that survival in the streets required children to be involved in several types of illegal activities including robbery, prostitution and drugs selling. Leaving homes and going into the streets was the result of overlapping circumstances and factors related to the family (absence of the father, family disintegration, sexual and physical abuse, etc); the educational system in school (quitting schools either because of family financial hardships or failure of the school system to meet the needs of the children); the system of craft workshops (abuse from employer, poor health conditions, low payment) as well as the culture of folk neighbourhoods (encouragement and influence from neighbours and friends). More to the point, the study found that 27.6% of the 134 interviewed males engaged in prostitution, the majority of whom had male clienteles.\(^{11}\)

Regarding the second study, it addressed the HIV-related knowledge, attitudes and practices of 53 fairly well educated men who have sex with men and was conducted in 1994. Thirty percent of the studied sample was married and 44 percent were bisexually active; 20 percent were male sex workers and 67

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\(^9\) UNICEF (1994). *Children beyond the Boundaries of Protection; An In-depth Study on Street Children in Greater Cairo.*


\(^11\) UNICEF, op.cit.
percent reported having more than five male partners concurrently. However, only 21 percent ever used condoms.\textsuperscript{12}

As for the third study, which is the most recent, it was a bio behavioral surveillance survey that aims at establishing a second-generation HIV surveillance system in Egypt among most-at-risk populations over time. This study was finalized by the Ministry of Health and Population and the international organization Family Health International, and funded by the United States Agency for International Development. The first round of field work was conducted between May and August 2006 in Cairo and Alexandria and tracked four target groups: street children, female sex workers, men who have sex with men and injecting drug users. That round found that among the male street children (n=408) who were sexually active in the previous 12 months, 14.9% engaged in commercial sex and the percent of those who reported having used condoms at least once with a commercial sex partner was 12%. Knowledge of HIV and AIDS was low as well as knowledge about the male condom, with most sexually active street children reporting unprotected sex. Knowledge of STIs was also low, and some street children reported to have had STIs.\textsuperscript{13}

Among the studied group of men who have sex with men (n=267), approximately 42% of them were engaged in commercial sex. Although more than three quarters had heard of male condoms, very few used them in the last sexual encounter and only 9.2% used them during the last commercial sex encounter. More than three quarters had heard of STIs and almost all heard about HIV and AIDS, with the majority being able to identify the means of transmission. Yet more importantly, the study indicated that Egypt may be witnessing a concentrated epidemic among men who have sex with men with an HIV prevalence of 6.2% among the sample of 267.\textsuperscript{14}

\textsuperscript{12}El-Sayed, N., et al., op.cit.
\textsuperscript{13}The National AIDS Programme et al., op.cit.
\textsuperscript{14}Ibid.
1.3.2 Literature on Homosexuality in Egypt

While acknowledging that clients of male sex workers could also be women, the focus of this thesis was only on the homosexual type of male sex work and hence it is impossible to discuss male sex work without discussing the issue of homosexuality in Egypt.

One of the most cited articles on homosexuality in Middle Eastern countries and Egypt is Bruce Dunne's article on "Power and Sexuality in the Middle East". In this article, Dunne argues that although male-to-male sex has always been regarded as a ‘deviant’ sexual practice against ‘real’ heterosexual masculinity during Islamic history, male-to-male sex has continued to exist. He refers to Everett Rowson's findings that in medieval Islamic societies, sexuality was defined in accordance with the domination by or reception of the penis in the sex act. Furthermore, one's position in the social hierarchy determined his/her sexual role. According to Rowson, sex involving penetration took place between "dominant, free adult men and subordinate social inferiors: wives, concubines, boys, prostitutes (male and female) and slaves (male and female). What was at stake was not mutuality between partners but the adult male's achievement of pleasure through domination." Male prostitutes were viewed as submitting to penetration for material gain rather than pleasure; and boys could be penetrated without losing their potential masculinity since they were not yet men. In this sense, it was incomprehensible for an adult male to take pleasure in a subordinate sexual role by submitting to penetration, and it was only attributed to pathology. Sex with boys or male prostitutes made men "sinners," but did not undermine their public position as men. Men who were effeminate and who voluntarily behaved in public as women (mukhannaths) gave up their claims to be members in the "dominant male order" and lost their respectability [as men]. Men maintaining a dominant public persona while privately submissive threatened assumptions of male dominance and were vulnerable

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17 Dunne, B. op.cit., p.10.
to challenge. Nevertheless, and although unacceptable, egalitarian homosexual relations between adult males existed where men of equal rank alternated active and passive sexual roles. ¹⁸

Dunne claims that the current situation of male-to-male sex in Egypt has not changed much from this medieval pattern. Sexual relations, whether heterosexual or homosexual, continue to be patterned as relations of power, class and age and reemphasize rigid gender roles. Such a framework rejects the notion of love, equality and public disclosure in male-to-male sexual relations. The below paragraph from Dunn affirms these facts:

“In early 1993, news of President Clinton’s proposal to end the US military’s ban on service by homosexuals prompted a young Egyptian man in Cairo, eager to practice his English, to ask me why the president wanted “to ruin the American army” by admitting “those who are not men or women.” When asked if “those” would include a married man who also liked to have sex with adolescent boys, he unhesitatingly answered “no.” For this Egyptian, a Western “homosexual” was not readily comprehensible as a man or a woman, while a man who had sex with both women and boys was simply doing what men do. It is not the existence of same-sex sexual relations that is new but their association with essentialist sexual identities rather than hierarchies of age, class or status.” ¹⁹

What this paragraph also highlights is that the identity terms 'homosexual', 'heterosexual' and 'bisexual' have different or little meaning in the Egyptian culture. They simply describe categories of people in an essentialist manner, as if a person is always one or the other, even though this is not necessarily the case. Furthermore, as noted by Dunne, Egyptian men who are "active" in sexual relations with other men are not considered homosexual. Their sexual domination of other men may even confer them a status of hyper-masculinity. ²⁰

¹⁸Ibid.
More recent discussions of homosexuality in Egypt were prompted by the 2001 Queen Boat event. Until that event, Egypt's government had held a discreet stance against male-to-male sex and quietly tolerated public activity by this community. Furthermore, there is no clause in any Egyptian law outlawing sex between the same gender. There is only the General Penalties Law of 1973 which "prohibits engagement of unmarried individuals in sexual intercourse" and does not identify the gender of the offenders. Accordingly, analysis published at that time suggested that the real motives behind the government's action were to divert public attention from the economic recession and the government's liquidity crisis that existed at the time, as well as to present an image of itself as the guardian of public virtue, and thus deflate the Islamist opposition movement that started to gain public support.

It is always useful to refer back to the Queen Boat case, as the discourses and writings that this incident had triggered provide some insight about how homosexuality, in its Western sense, is approached within the Egyptian context. The punishment of homosexuality, for which there is no law in Egypt, has been viewed as an act to reproduce Egyptian national identity and culture, which was threatened by the behaviour of the defendants in the Queen Boat case. The term "perverts" was used throughout the case to describe the arrested men and "perversion" was considered an attack on values and beliefs. The values and beliefs defended by politicians and the media were concerned with the sexual and moral behaviour of individuals. The media attacked the defendants for practicing ‘perverted activities’, such as holding same-sex marriage ceremonies and having group sex, which were condemned as a form of ‘devil worshipping’ and were thus represented as an attack on religious values.

23 Pratt, N., op.cit., p. 140.
24 Ibid., p. 139.
Given that homosexuality is prohibited within Islam, which plays an important role in national identification processes within Egypt and which represents a marker of national difference from the West, behaviours that deviated from religious norms were regarded as un-Egyptian. In this context, we found the chief prosecutor in his opening statement of the Queen Boast case stating that ‘Western nations accept and tolerate what Islam considers a crime’. Furthermore, in an indication of the class nature of the issue, Egypt’s business elite were also blamed for promoting homosexuality by adopting ‘foreign’ lifestyles and turning their back on Egyptian culture.

The representations of homosexuality as a Western cultural norm during the case have been asserted on two assumptions. First, that gay sexuality is ‘un-Egyptian’. Second, that gay sexuality is ‘un-manly’. Such attitudes were illustrated by the treatment the gay men received after arrest. Men were identified as gay based upon their appearance as ‘un-Egyptian/un-manly’. It was reported by different detainees that the police officers would ask them to show their underwear. Since most male underwear in Egypt is plain white, men whose underwears were colored were taken as gay. Likewise, men with long hair and tattoos were identified as gay. In an implication that 'real' Egyptian men do not dress in ‘un-Egyptian’/’foreign’ way, detainees wearing the latest Western fashions were deemed effeminate by police officers and were the most subjected to abuse. In contrast, 'masculine'-looking men were not subjected to the same brutal and humiliating treatment experienced by the effeminate ones, and they maybe had a shorter prison sentence. Detainees were also forced to undergo examinations by forensic experts for evidence of anal sex, and they were made to confess whether they are active or passive.

Similar measures were again inflicted on men who have sex with men during the latest arrests that started in October 2007. However, these arrests did not just represent an attack against men who have sex with

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26 Pratt, N., op.cit., p. 140.

27 Ibid.
men but against people testing HIV positive, an issue that has provoked the international community and government and led 117 international human rights organizations, including Human Rights Watch and Amnesty International, to condemn Egypt's breaches of human rights.\textsuperscript{28} These arrests began when two men engaged in a scuffle in central Cairo were incarcerated by the Morality Police when one of them confessed to being HIV-positive. Both men had been beaten when refusing to sign confessions written by the police and were forcibly subjected to anal examinations to "prove" that they had engaged in homosexual conduct. Two more men were arrested when police found their photographs and contact numbers in the wallets of those detained and further arrests were made in November when police raided the flat of one of those being held. Later arrests brought to 12 the number of men arrested in the campaign against men who have sex with men. All arrested men were violently treated and humiliated, charged with homosexual conduct, forced to undertake HIV tests, and those testing positive were isolated and chained to beds in a Cairo hospital. A prosecutor reportedly told one of the men who was living with HIV: "People like you should be burnt alive. You do not deserve to live." \textsuperscript{29} Four HIV-positive men who were convicted of being homosexual were later sentenced to three years imprisonment followed by three years of close police supervision.\textsuperscript{30}

\textbf{1.4 Theoretical Framework}

In Western research literature, different theories have been proposed to explain sex work. Explanations have been given at three levels; the individual level, the cultural level and the structural level. Unfortunately however, development of theories on this area has largely continued on a gender bias, with no sufficient concern for men involved in prostitution as sex workers. Except for theories focusing on the individual level, other theories dealing with sex work at the cultural and the structural levels have been


formulated to mainly account for the prostitution of women given that there are many more women in prostitution than men.

1.4.1 Theorizing at the Individual Level

Theoretical approaches addressing the individual level focus on the experiences of individual women and men who sell sex and how their family background and history including socioeconomic status, educational and work related issues and psychological determinants explain why they entered in the sex trade. For some theories, ending up in sex work could be a result of childhood neglect, sexual, physical or emotional abuse, drug use and abusive lovers that force people into sex work.  

Within available literature addressing the individual level, a salient research topic is the relationship between childhood sexual, physical and emotional abuse and subsequent involvement in sex work. One example of this research is a Canadian study by Earls and David (1990), conducting interviews with male and female “prostitutes” and “non-prostitutes” to compare early family abuse and sexual experiences. Their findings suggested an association between sexual interaction with a family member and involvement in prostitution. “Based on our results, it would thus seem that the probability of entering prostitution may be closely related to leaving home at an early age, having a history of sexual abuse, and, in the case of males, having homosexual preferences”.  

In another study conducted in New York City, from December 1999 through October 2000, among 10 young men who have sex with men and who are involved in street prostitution, Lankenau and others


studied how these young men "accumulated various knowledge and skills throughout their childhood and adolescence, and later entered into careers in the street economy as homeless sex workers." To describe these experiences, the researchers formulated the concepts of "street capital" and "street competencies". Street capital refers to the "latent knowledge gained through observations and experiences within a family or household, though tied to drug use, sexual activity, criminal behaviour, and housing contingencies, that enable a youth to develop survival skills in the street economy". As for street competencies, they are "practical actions and skills that emerge from the accumulation of street capital, and include buying and selling drugs, (and) commodifying sexual activity". They "enable young people to survive in the street economy, and develop through embeddedness in a social network among other street youth".

In explaining the early exposure of the studied youth to street capital, the researchers demonstrated that all of the young men interviewed went through certain living situations before turning 10 years old that paved the way for careers in the street economy including prostitution. First, they were born into typically poor or working class households, and their parents or caretakers held jobs with ties to either the formal or informal economies. Second, they all experienced considerable fluidity in their relationships with caretakers, where some had parents who were separated or divorced, while others had new caretakers entering the house such as boyfriends, step fathers and foster parents. Third, the boys often moved to and from diverse housing situations to visit parents, to stay with new foster families, or to escape abusive parents. The recurrent movement to new housing locations, or as the researchers called it, new "consecutive housing", might have caused problems for developing "peer relationships and maintaining consistency in schools". Boys growing up in households with unstable caretakers also commonly experienced illicit drug use or alcohol abuse by parents, caretakers, or older siblings. For many boys, consecutive housing were also associated with early sexual experiences whether consensual or forced, a situation that was likely to provide early awareness of sex. By the age of 10, each of the boys started

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34 Ibid., p. 11.
35 Ibid., p.11.
36 Ibid.
accumulating considerable amount of street capital through being exposed to homelessness, drug use, or sex, which "foreshadowed pathways into the street economy during their teenage years.\textsuperscript{37}

One of the first locations in which these young men were found to begin translating their street capital into competencies and develop social networks (including gangs) seeking economic survival, were public institutions such as schools and foster care. The experiences of boys in schools often reflected their troubles at home, where some had to quit school as a result of the difficulties witnessed throughout childhood in terms of caretaker fluidity and consecutive housing. In foster care, several young people became more socially isolated and more focused on individual survival. According to the researchers, the critical point in the translation of street capital into street competencies was homelessness. Some youth turned into sex work to afford for housing.\textsuperscript{38}

In this study researchers also found that it was in the early teens that the boys began developing competencies in the areas of sexual exchanges and drug use and sale. During this time, sexual activity increased for the boys, sometimes driven by involvement in the street economy, and older sexual partners were often sources of drugs. As such, "the elements of work, money, alcohol, drugs and sexual encounters gained increasing proximity and interrelationship, and formed the basis for a kind of practical logic to later inform the cohesion of street career." What the study concluded in brief, was that the diverse types of street capital and street competencies accumulated throughout childhood and adolescence combined into street careers such as sex work, "not only made sense to the youth, but also formed the basis for a pragmatic way of surviving on the streets".\textsuperscript{39}

\textsuperscript{37}Ibid., p.12.
\textsuperscript{38} Ibid., p. 14.
\textsuperscript{39} Ibid., p.p15-17.
In a more recent study on the association between childhood maltreatment and sex work, Stoltz et al. (2007) recruited 361 youth between September 2005 and June 2006 to explore the relationship between five types of childhood maltreatment – sexual abuse, emotional abuse, physical abuse, emotional neglect and physical neglect - and subsequent involvement in sex work among drug-using street involved youth. After controlling for socio-demographic variables, two types of childhood maltreatment, sexual abuse and emotional abuse, were found to be independently associated with sex work. A possible explanation suggested for the connection between childhood sexual abuse and later involvement in sex work may be that children, who are sexually abused, or "victimized", develop psychologically and emotionally in ways that make them vulnerable to continuing sexual predation. Equally, childhood sexual abuse may lead to a propensity in the victim toward risk-taking behaviors (drug abuse, running away from home) that in turn create situations in which sex for survival is one of few remaining choices.

For emotional abuse, it was defined as "acts of omission and commission committed by parent figures, which are judged to be psychologically damaging on the basis of a combination of community standards and professional expertise". Emotional and psychological effects of emotional abuse include depression, low self-esteem, suicidality, anxiety, personality disorders, poor body image, sexual dysfunction and compromised physical health. If combined together, these effects would create a vicious circle for many young people with inadequate coping skills and resources for the high-risk situations they may find themselves within, thereby increasing their dependence on strategies such as selling sex for survival. "This in turn would compound risks for which they are poorly equipped, perpetuating downward spiral from which it is difficult to break free without external intervention."  

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41 Ibid., p. 5.
42 Ibid., p. 5.
Other studies focusing on young males involved in sex work have also confirmed that when compared to control groups, male sex workers had witnessed more physical and sexual abuse while growing up. Male sex workers had experienced "more violence between parents, more drug and alcohol use among family members, and were more likely to identify male partners as their first sexual experience." 43

Additional literature further illustrated some characteristics that are unique to male prostitution. For example, it has been found that many young males involved in prostitution exhibited homosexual preferences. Moreover, many young males involved in sex work had run away from home because of antihomosexual/ homophobic sentiments in mainstream society and that they were essentially ridiculed and ostracized for their homosexual preferences.44

Lastly, some research has discovered a close association between sex work and drug use, where it has been argued that sex hustling by injection drug-using men who have sex with men is motivated by their need to cover the costs of their drug habits.45

1.4.2 Theorizing at the Cultural Level

Answering the question of why prostitution exists at a cultural level, some theories focus on how cultural stereotypes of men and women and sexuality makes it possible for men to buy sex from women and for women to accept using their bodies and sexualities as commodities. In these theories, prostitution is seen as an area of society which is very much linked to gender, and what men and women do is seen as things that are culturally constructed and not only a consequence of biological differences. In other words, the roles

44 Ibid.
culturally available for men and women constrain what they can do with their lives and how they relate to one another.

These ideas have been largely developed by feminist scholars for whom prostitution has occupied a significant position at the intersection of their debates about the relationship between power, sex, sexuality and work. Nevertheless, much of the ideological work on prostitution has been motivated by the radical feminists' antiprostitution political agenda and their ideas remain quite popular.

Radical feminism views prostitution as the "quintessential form of male domination over women - the epitome of women's subordination, degradation, and victimization." There perspective has been called an essentialist perspective because its claims sweep to be applicable to all times, all societies and all types of prostitution.

According to the radical feminists' view, as expressed by lawyer Catharine MacKinnon and antipornography theorist Andrea Dworkin, a prostitute does not act according to her free will or choice, but is rather a victim of oppression and coercion in both its most subtle and direct forms. Radical feminism maintains that prostitution "reinforces and perpetuates the objectification, subordination, and exploitation of women. They view a prostitute as a human being who has been reduced to a piece of merchandise, and regard prostitution as an exploitative relationship in which the customer is interested only in the prostitute's services and not her personally. They regard men as universally believing myths about their sexuality. Two of these myths are: (1) "that men require more sex than women and (2) that men are the genetically stronger sex and accordingly should be the dominant partners in relationships with women."

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48 Ibid.  
49 Ibid.  
radical feminists, the conviction of a man that he has no choice other than to react to his sexual needs results in a "self-validating tautology of belief" based on the notion that his aggressive behaviours are associated with his inherited traits. For radical feminists, the source of men’s sexuality is thus partly deriving from the culture and not only from biology. In this sense, prostitution in a man's experience only reinforces his "self-serving belief in the primacy of his sexuality". In her Application of Feminist Legal Theory to Women's Lives, D. Kelly Weisberg describes this process as follows: “According to the radical feminist view, men are socialized to have sexual desires and to feel entitled to have those desires met, whereas women are socialized to meet those desires and to internalize accepted definitions of femininity and sexual objectification.”

It has been argued that the logical standards of radical feminists are predicated on politics rather than precise theory. They have also been criticized for overemphasizing or globalizing concepts such as degradation, and for making sweeping claims that are not supported by empirical studies. However, radical feminists tend to compensate for this by making statements of high credibility. One of these statements is that human sexuality derives essentially from culture rather than from biology, an idea that resonates and is consistent with contemporary biological theories which emphasize the role of culture rather than genetics in viewing the evolution of human societies.

As noted earlier, these feminists' approaches exclude male prostitutes from their theorizing about the existence of sex work. However, their approaches guide us towards considering how the experiences and ideas of men involved in sex work could be shaped by culturally prescribed gender roles available for men and women in the Egyptian society. These culturally defined roles could be affecting what they do with their lives and how they relate to other men, women and clients.

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51 Ibid.
1.4.3 Theorizing at the Structural Level

To deal with the question of prostitution from a structural level, one may need to concentrate on how an unequal distribution of material goods and rights impacts the opportunities of different categories of people in society. In simple terms, disparity in income and power indicate who can choose or decide freely on what to do with their lives and who cannot. A person born into a poor family is more likely to sell sex than a person born in a well off family. To have money and power in a society is also to have power over others, and purchasing sex can be viewed as one way of taking advantage of inequality.

To understand sex work structurally, one may look at the theoretical approach that considers prostitution as an industry or as a market in which different players are involved. For such an approach, there are three main players involved in sex work. These include the sex workers, the clients, and the pimps or the various participants who benefit economically from the industry including the organized crime groups. For this approach, sex work exists primarily because there is a demand for it and this demand will always be present because men believe it is legitimate to pay to satisfy their sexual needs. Sex work will also continue to exist because it is a lucrative industry and serves essential economic interests. For example, in some countries in Asia, "sexual tourism is an economic sector which generates, either directly or indirectly, numerous jobs and considerable income."

Furthermore, in countries where sex work is legalized, such as the Netherlands and Germany, significant income is generated from taxing sex workers and brothels and selling permits to the latter.

A major drive to sex work according to this framework is poverty. A relationship is believed to exist between low economic status and involvement in sex work. In this regard, factors that when combined together force people into sex work include unemployment, poor education, limited availability of jobs and


56 Ibid.p.5.
inadequate salaries. The absence of a social security net further contributes to the problem, making sex work the only available mean for some people to ensure theirs and their families' survival. Young people who run away and have no access to income are driven to sex work.\(^{57}\)

In addressing male sex work in Egypt, this research draws on all three levels of analysis. Although the focus was on the individual circumstances driving some young people into sex work, attention was also given to the ways in which cultural and social variables in Egypt influence the experiences and understandings of these subjects as well as their interactions with clients. Recommendations for possible interventions will be considered at all levels of analysis.

1.4.4 Theorizing Sexual Negotiations between Sex Workers and Clients

Aside from theorizing about the etiology of sex work, studies on the social aspects of AIDS have highlighted the significance of "conceptualizing sex work as an interactive and open process" since safe sex takes place at the level of interaction between sexual partners.\(^{58}\) These studies have emphasized the conceptual importance of examining the 'negotiable' nature of sexual practices.\(^{59}\)

In research focusing on the safe sex negotiations of a group of male sex workers in Melbourne, Australia, in 1993, Browne and Minichiello applied interaction theory to show how subjective meanings impact negotiations between sexual partners and how sexual negotiations can be explored as "communication through which 'intentions and actions are negotiated through continuous verbal and non-verbal dialogues'\(^{60}\). Their analysis particularly focused on examining how the male sex workers' perceptions of self and clients influenced the types of interactions they had with their clients, and accordingly how

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\(^{57}\) Ibid., p.6.


\(^{60}\) Ibid., p.589.
processes of power and control were exercised within commercial sexual transactions. \(^6\) In conclusion, Browne and Minichiello found that there are four aspects of the male sex work experience that inform negotiations of safer commercial sex. These include, "the social meanings male sex workers attribute to having sex; their typologies of clients; the psychic contexts of male commercial sex; and safer sex interactions" \(^6\). The meanings sex workers associated with the act of having sex affected the ways in which they conducted themselves during sexual encounters and implemented safe sex practices. In this respect, the sex workers' definition of commercial sex as work enabled them to "separate work and personal sex and define work sex as 'not real sex', in which safe sex practices symbolized both the degree of self that is shared and protective work equipment." Different types of clients, as perceived by the sex workers, also posed different levels of risk to the safe sex practices of sex workers. It was also found that rather than negotiating safe sex, workers employed interactions modes that directed the encounter towards safe sex. \(^6\)

With the objective of assessing the HIV risk context of the studied population, this research has attempted to look into the ways in which male sex workers' sexual behaviours are affected by their interaction with their partners. To explore the interactive context of the sexual encounter, the study tried to explore the different social meanings male sex workers attributed to sexual encounters; their typologies of clients; the psychic contexts of commercial sex, which encompasses the internal and discursive dialogues engaged in by sex workers before, during and after sex; safer sex interactions, and how these four aspects impact negotiations of safer sex.

1.5 Methodology

The inclusion criteria for the selection of informants were *genetically male sex workers* currently exchanging sex with other men for money or other services. The study, which started in January and continued until March 2008, was conducted through qualitative, mainly open-ended, semi-structured in-

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\(^6\) Ibid, p. 599.
\(^6\) Ibid., p.589.
\(^6\) Ibid.
depth interviews. The initial plan was to interview 10 male sex workers from Cairo and to incorporate sex workers from different socio-economic strata. However, the series of police arrests targeting men who have sex with men continued during the months the research was being implemented and significantly affected my ability to reach the needed informants. While three interviews were conducted during the month of January, none took place during February as my key informant who introduced me to the subjects in Cairo had concerns related to police arrests and harassment. Only one sex worker refused to participate when requested by my key informant for fear of arrests and suspicion about the confidentiality of the data provided. However, his inclusion would not have made a big difference to the results of the study as I understood from my key informant that his experience was very similar to that of two of my informants. From my part, it would have also been unethical to try pushing for interviews that would endanger both my subjects and myself, so I decided to suspend interviews until the security situation relatively improved. As an alternative, I further sought for conducting interviews in Alexandria and through a friend managed to complete three interviews there in March. Informants in Alexandria demanded to be interviewed by a man and hence I had to explain the subject of my thesis to my male friend and train him on how to do in-depth interviews. I also managed to do one more interview in Cairo during March.

The sampling techniques used were purposive as well as snowball sampling. In purposive sampling, participants are grouped according to pre-selected criteria relevant to a particular research question and the sample sizes depend on the resources and time available, as well as the study's objectives.\(^6\) In this study, sex workers were grouped according to the role they adopt in sexual intercourse (penetrative, receptive, simultaneously penetrative and receptive); the type of sex work they are engaged in (mainly street sex work versus self employed); and the socioeconomic status (the very poor and the relatively well off). Due to the predetermined time set to finalize the writing of the thesis, I had to refuse conducting an interview with an additional subject when proposed by my key informant as this came during the period I was submitting my

thesis. Respondents in Cairo were originally accessed through an employee who works in a telephone central that often receives men who have sex with men coming to make phone calls. This employer introduced me to the first sex worker who later introduced me to the second respondent. With the help of the second respondent, my first informant connected me to the third subject, who from his part helped in bringing a fourth sex worker in his social network. The first respondent in Alexandria was reached through a female sex worker who knows a friend of my study colleague. Through the first informant in Alexandria the other two were identified. As such, snowballing comes as the second sampling method adopted in this study, where participants with who contact had already been made used their social networks to refer me to other people. This method is usually employed to find "hidden populations" or groups that are not easily accessible to researchers through other sampling methods, which was the situation with male sex workers in Egypt.65

In six of the cases, interviews were conducted in coffee shops and ranged in duration between two and two and half hours. Only one interview was conducted in the workshop of an informant and took four intermittent hours. In this later case, the interview was interrupted at different intervals when the informant needed to attend to his work obligations, a situation that made it relatively difficult to keep the discussion going and affected the depth of information provided.

For interviews conducted in Cairo, I initially met the subjects with my key informant at the telephone central and then we walked together to the coffee shops. In two such interviews, my key informant was present in the scene and was accompanied by another friend (another informant) who stayed with him until I finished my interviews. Although they sat in the same places I used for my interviews, I made sure they remained at some distance to avoid their influence on the discussions.

65 Ibid., p. 6.
The presence of my key informant around had always facilitated breaking the ice between me and my respondents. All respondents initially seemed worried and shy. However, with the comforting words of my key informant (I heard him telling informants statements like "she's very easy to deal with" and "you don't need to worry because of her"), and the friendly general discussions I had with the key informant and the respondents before starting any interview had greatly calmed them down and made them feel at ease.

I did not really sense that being a veiled female and of higher socioeconomic status had significantly affected my respondents' position from me or the quality of data they had imparted. However, these characteristics might have affected their choice of sexual terminologies used. Sometimes I felt they were trying to use terminologies that were not offensive, sometimes they apologized after stating some terms, and sometimes they got embarrassed when they stated some particular words like those referring to the penis, anal sex and so forth. Being veiled in Egypt does not necessarily indicate a high level of religiosity and it is very common for women in low income areas from which my respondents come to put on veils. I also refrained from making any aspect of religion an issue of discussion with my subjects. I knew about their religious affiliations from their names and from some comments they made but did not try to ask them directly about what their religions were or what they thought about religion (the only exception here was related to a late informal discussion I had with my key informant about what religion meant to him). To mitigate the impact of my higher socio-economic status on my subjects' position from me, I made sure to appear very simple in the way I dressed and avoided putting on any jewelry. I also tried as much as possible to use some of their common terminologies and adopt their style of talking. I believe I was successful in building rapport and trust with my subjects for at least two of them mentioned that they consider me like "their sister". I also believe that the fact that all informants I interviewed were considerably younger than me had made them take me seriously, an advantage I could not have achieved if I had interviewed informants from Alexandria. Respondents from Alexandria were around my age and older. They were more self confident and had stronger characters. As indicated by my colleague who
interviewed them, two were very masculine in their appearance and speech and seemed aggressive by nature (the two are members in a gang), characteristics that were clear in the way they talked and their general tone of voice. My colleague did succeed in building rapport with respondents and felt that they were quite open and frank with him. They further engaged with him in sociable discussions that were not related to the research and he believes that they would not have been that truthful with me if I had interviewed them. After all, it was based on their own request that a male undertook the interviews.

1.6 Research Limitations

While undertaken with the goal of providing absent information about the presence and context of male sex work in Egypt, this research, with its very small sample size, does not claim to make any generalizations, nor provide a complete picture of male sex work in Egypt. However, it does provide some insight into the situations of some Egyptian male sex workers and does incorporate the different types of sex workers I had planned to reach. The sample does not only include subjects from Cairo and Alexandria, but incorporates subjects who differ in terms of their socioeconomic background, type of sex work, and, more importantly, sexual identity.

1.7 Ethical Concerns and Protection of Subjects

As previously stated, the major ethical problem encountered in this research was endangering the subjects by exposing them publicly at a time when the environment was very tense and insecure because of police forces' attacks against men who have sex with men. In fact, three of my subjects were one day stopped in the street by security forces (who were mobilized in anticipation of a political demonstration), who harassed them verbally and took from them all the money they were carrying at the time as well as condoms and lubricants I had earlier provided them. After knowing about that incident I always tried to avoid conducting interviews at times when there was unrest in the streets, particularly on Thursdays, and I
did postpone one interview on seeing that there were many security guards near the place in which I was supposed to meet an informant. I always left it up to respondents to determine the suitable time to conduct the interviews.

Before proceeding with any interview, oral informed consent was obtained from the informant after the disclosure of the purpose of the study, its nature, its intended audiences and methods, as well as who will be reading the final report. Oral consent in this study was regarded as acceptable given that the loss of confidentiality is the primary risk and a signed consent form would be the only piece of identifying information for study participation. An explanation was given to all respondents that the study will cover private and sensitive issues and they were assured that they could refrain from answering any question and could end the interview whenever they wanted. Confidentiality was assured to all subjects and their real names have not been mentioned in the report neither were the names of venues where they work or meet each other. All subjects refused audio recording of the interviews for fear of confidentiality breach and hence data was recorded in the form of extensive field notes, which were expanded immediately after every interview.

On the issue of confidentiality, I further confirmed to the subjects that I was not to reveal anything I learn from one respondent to another when one of them asked me about what his friend had answered to one of the questions and another requested me not to tell his intimate friend about a secret he only confessed to me.

Building rapport with informants necessitated that I express my sympathy towards them, my concern over their health and my interest to help them by any means possible. In my interactions with informants I was always neutral and friendly, particularly with those I felt were scared and skeptical in the beginning of interviews.
Although I was initially determined not to give any financial compensation in exchange for the interviews, the fear the subjects had from being exposed as well as their fear from the police, made financial compensation a motive for them to come to the interviews. All participants from Cairo received 25 pounds as a reimbursement for the time taken away from other obligations and in compensation for the transportation they used for the sake of the interviews. They were also given condoms and KY lubricants. As for the three participants from Alexandria, two of them were paid 50 pounds based on the advice of the key informant and one refused to take money saying he had come to the interview out of curiosity. Other services offered were information about HIV and STIs and payment for the expenses related to the coffee shops' orders.

Furthermore, after this research had been finalized, I was contacted by my key informant who informed me that one of the subjects was to undergo an operation to cut off his finger and that they were collecting money for him. As they were in shortage of money, I met my key informant and contributed some money to enable his friend undergo the operation. Considering that this disabled subject had earlier demonstrated suicidal attempts and requested me to find him a job, I will be putting him in contact with a psychiatrist who can attend to his psychological needs and link him with an NGO that can provide him with a job opportunity.

1.8 Data Analysis

Data of this research was analyzed based on respondents' answers to questions related to topics specified in the annexed interview guide. The answers under each topic were analyzed separately and combined.

The next chapter analyzes the factors that led the interviewed informants to enter into sex work based on their personal statements and presents their socio demographic characteristics.
With the ultimate objectives of understanding the reasons that could drive some Egyptian youth into sex work and exploring possible characteristics of this population, this chapter presents the sociodemographic profile of the studied sample and discusses the factors that have contributed to their entry into sex work based on their own narrations.

2.1 Sociodemographic Profile of the Sex Workers

2.1.1 Age

The age of the seven informants ranged between 17 and 37. Those working mainly as street workers were significantly younger than those currently working as independent sex workers, contacting their clients through mobile phones.

2.1.2 Education

The educational level of informants varied noticeably. Two informants left school when they reached 5th primary and they can neither read nor write. One studied until preparatory. One has a high school certificate. One has a diploma in agriculture. One has a diploma in commerce, and one has a bachelor of arts.

2.1.3 Religion

Only one respondent was Christian while the other six were Muslims.

2.1.4 Place of Residence

Three of the informants from Cairo live in Bulak and one lives in Faisal. Two of the informants from Alexandria live in Lambrozo, a lower income, working class locality. The third informant from Alexandria refused to mention the exact place he lives in but stated that it is a "good place not a lower income neighbourhood".
2.1.5 Employment.

Two of the seven informants are currently unemployed. One informant works in a supermarket. One works as a mechanic. One works in a garage. One is a whitesmith who owns a workshop, and one owns a mini supermarket.

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Education Level</th>
<th>Religion</th>
<th>Place of residence</th>
<th>Employment</th>
<th>Income from basic jobs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seif</td>
<td>19</td>
<td>Continued education until 5th primary</td>
<td>Muslim</td>
<td>Bulak El Dakrour, Cairo</td>
<td>Unemployed</td>
<td></td>
</tr>
<tr>
<td>Karam</td>
<td>21</td>
<td>Continued school until 5th primary</td>
<td>Muslim</td>
<td>Bulak El Dakrour, Cairo</td>
<td>Unemployed</td>
<td></td>
</tr>
<tr>
<td>Salem</td>
<td>17</td>
<td>Diploma in agriculture</td>
<td>Muslim</td>
<td>Bulak, (the part in Bulak in which he resides is of a higher socio economic status compared to that of the other two informants residing in Bulak)</td>
<td>Works in a supermarket</td>
<td>150 L.E. per month</td>
</tr>
<tr>
<td>Taher</td>
<td>19</td>
<td>High school certificate</td>
<td>Muslim</td>
<td>Faisal, Cairo</td>
<td>Mechanic</td>
<td>150 L.E. per week</td>
</tr>
<tr>
<td>Shehab</td>
<td>29</td>
<td>Continued education until preparatory</td>
<td>Muslim</td>
<td>Lambrozo (a lower socio economic status locality), Alexandria</td>
<td>Works in a garage</td>
<td>Around 300 L.E. per month, or more or less</td>
</tr>
<tr>
<td>Aziz</td>
<td>31</td>
<td>Diploma in commerce</td>
<td>Christian</td>
<td>Lambrozo, Alexandria</td>
<td>Whitesmith and has his own workshop</td>
<td>Between 2000 – 3000 L.E. per month depending on the amount of work received</td>
</tr>
<tr>
<td>Bahgat</td>
<td>37</td>
<td>Bachelor of Arts</td>
<td>Muslim</td>
<td>Did not want to mention where he resides but said it is “in a good place” and not in a low income neighbourhood</td>
<td>Owns a small supermarket which he inherited from his father</td>
<td>Did not give any figures stating that it always differs from one month to another but mentioned that money he receives is sufficient for his family obligations.</td>
</tr>
</tbody>
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66 The names mentioned are just to identify the informants throughout all discussions and are not the real names.
2.1.6 Overall Financial Situation and other Sources of Income including from Sex Work

In terms of financial situation, the ones who are most disadvantaged are Seif and Karam. The only stable income that Seif receives on monthly basis are the 100 L.E. pension of his departed grandfather which all goes to medications for his paralyzed mother. He sometimes works as a construction worker and often does services to people in the neighbourhood such as buying vegetables and other requirements or cleaning the mosque carpets. From these services, he takes from the people whatever they give. In our first encounter he denied selling sex except once when he was in dire need of money and at that time he was paid 25 L.E. He later confessed that he recently sold sex again and was paid 30 L.E. and is arranging for another encounter in which he would be paid 50.67

Karam used to work as a whitesmith until he had a work-related accident that critically injured his right arm and hand. He is currently unemployed and sex work represents his main source of income, from which he could get 200 or 300 L.E. per month, though not consistently. Other sources of income include cleaning houses for people in the neighbourhood, which he is currently unable to perform due to the worsened situation of his hand and arm. From such services he used to get 15 or 20 L.E.

Salem's household depends mainly on the 750 L.E. monthly pension of his father, which cannot cover all financial obligations including payment for Salem's siblings' schools, universities and his family's debts. His income from sex work reaches 600 or 700 L.E. per month and in seasons where there are foreigners among clients it could reach 3000 and 4000 L.E.

Taher's father receives a pension of 240 L.E. per month, which is not enough to cover the needs of a family of eight. The money he receives from sex work is around 120 L.E per month.

67 Before conducting my first interview with Seif, I was told by the person who introduced me to him that he is a sex worker and he is known to receive payment for sex. So when Seif first denied his involvement in sex work I had to exclude him from my sample. However, when he confessed that he has started receiving money I decided to include him.
Aside from working in a garage to take care of cars and wash them, Shehab is also a member in a gang of seven. His gang is often recruited to rape and beat men in order to put them in humiliation and disgrace. In his terms, this is called "breaking the eye". For example, if a man wants to take revenge from a man he is angry with, or if a man knows that his sister is involved in a sexual affair with another man, the gang would be recruited to hurt the target. Payment for such activities could be in the form of money or drugs. Money received for beating a man until "breaking him" ranges between 100 and 300 L.E. If rape is included, the total amount reaches 1000 L.E. and the salary can always be negotiated depending on the situation of the persons asking for these services.

Aziz managed to open his own workshop from the money he gained from sex work and he is also one of the members of Shehab's gang. When the gang is paid to rape someone, it is Shehab and Aziz that do the raping, while the other five hold the victims for the other two.

Bahgat mentioned that he is relatively well off financially and the money he receives from his small supermarket is enough to pay for all family obligations.

2.1.7 Living Arrangements
None of the interviewed sex workers reported being homeless. Salem and Taher are living with their parents in apartments they own. Seif and Karam live with their mothers and other siblings in rented apartments. Shehab is living with his girlfriend in a studio he is renting, whereas both Aziz and Bahgat are living in apartments they own. Yet while Aziz is living alone, Bahgat is living with his wife and children.

2.1.8 Marital Status
Most of the informants are single and only Bahgat is married and has two boys and a girl. Aziz is currently engaged and Shehab plans to marry his girlfriend when his financial situation improves.
2.1.9 Number of Dependents

The issue of financial dependency varied greatly between the informants. Although Seif has four brothers and four sisters, none of them depends on him for financial support and none of them is supporting him either. The only person Seif tries to provide for is his paralyzed mother. Karam also is completely independent financially and does not get support from any of his five brothers who are all working and living with him in the same house. For Karam, "everyone in the family is responsible for himself and nobody helps the other". Karem sometimes gives his mother money when he feels she is in dire need but does not like doing it often as he considers this money as coming from an "improper way".

Salem contributes money to the whole household, which is composed of his parents, two sisters and one younger brother, and gives money to his retired father and mother "every now and then". Taher has no dependents but sometimes gives money to his mother and his retired father.

Shehab is financially responsible for his girl friend and used to support his mother and his three sisters before their marriage as the money brought by the father (who works as a porter), "was never enough". Aziz does not financially support anybody and said he does not support his parents because they are in no need. His father works as a public transportation driver in the morning and in the evening as a private driver for some people. As for Bahgat, his only dependents are his wife and three children. Both his father and mother died and his single sister is married and is financially dependent on her husband.

2.1.10 Social networks

While a number of informants stated that all people in their social networks are men who have sex with men, others said they have a wide social network given their jobs that allow them to mingle with different types of people.
In response to the question about identifying people in their social networks informants stated:

"All my friends are like me. We often walk together in the streets. But I have a friend who is always with me (he means Karam). We are one soul. We wear the same clothes, eat the same food, and sleep together. His family knows my family. We don't leave one another in goodness or in badness." Seif

"All my friends have to do with the system (he means all his friends have sex with men). They are too many to count. But they are not very personal friends. They don't know where I live or anything about me. I meet them in the street, we have fun together, but I never tell them about my secrets." Karam

"All my friends are kadaina (the receptive partners in sexual intercourse). I also know some women prostitutes who bring me men and I bring them men." Salem

"All my friends, except two, do not sleep with men…. I don't like walking with the kadaina so that people wouldn't think I am a kodiana like them. If you walk with the kadaina in the street you will be scandalized. People will say you're like them". Taher

"I have many friends ya basha from all types. Rich and poor and policemen… Policemen know that I am a gangster. But they don't know that I sleep with men or that I rape people". Shehab

"The people I know are many ya beh. In my work I run into many clients." Aziz

"I have many friends of different kinds. The supermarket makes me meet many people". Bahgat

2.1.11 Alcohol and Drug Use

Informants who reported using alcohol were Taher, Shehab, Aziz, and Bahgat. Those who reported using drugs were Shehab, who consumes Bango and Opium, and Aziz, who uses bango, hashish and opium. Karam had used bango only once when a client asked him to.
2.1.12 Sex Education

All informants stated that their knowledge about sex mainly came through friends or through watching pornographic movies. None of them had received any sexual education from school or from parents.

2.1.13 Consideration of Sex Work as a Profession

Karam was the only respondent who identified sex work as his profession. All the others refused to consider it so and preferred to use terms like "source of money", or "source of income".

2.1.14 Sexual Preferences and Gender of Personal Sexual Partners

Although all informants are engaged in male-to-male sex, whether within or outside of the sex work context, this does not necessarily mean that they all prefer having sex with males rather than females, or that they are not involved in sexual relationships with females. The discussion on the sexuality and sexual identity of informants will be presented in more details and within a wider discussion in chapter three. However, since sexual preferences could be regarded as a sociodemographic characteristic, it would be useful to demonstrate, in short, the sexual preferences of participants as well as the gender of their personal sexual partners.

Karam, Taher and Bahgat, emphasized that they are sexually attracted only to men. However, while neither Karam nor Taher have personal sexual partners, Bahgat is married to a woman and has two children.

Although Seif prefers having sex with men, he does not mind getting married to a woman and stated that he has two girlfriends with whom he is sexually involved. Salem does not prefer men, yet he has never experienced sex with a female and does not have any personal sexual partners.

Shehab and Aziz are more attracted to women and for them sex with men is only attributed to money. For Shehab, he initially used to have sex with men when he was younger and when women were not available.
For Aziz, he currently has a fiancée but when he wants to have sex with women he resorts to female sex workers. When asked what their sexual preferences were, Shehab and Aziz stated:

"Women more but no problems. In the beginning of my life when I used to get aroused and there were no women I went to my school mates. Now when I am excited there is one staying with me"...Shehab.

"Women of course! But work with men brings a lot of money. I opened my workshop from this money. Why would a woman give me money? If she pointed to any man in the street he would run to her and give her money in addition." Aziz

2.2 Etiology of Male Sex Work

A number of key factors have been widely recognized as leading people into sex work. These include poverty\textsuperscript{68}, indebtedness, low education levels, mobility and migration, criminal coercion and humanitarian emergencies. Other factors include individual circumstances such as dysfunctional families, drug use dependency, and social and cultural factors such as rigidly defined gender roles and social marginalization.\textsuperscript{69}

Much of available literature providing explanations for the involvement of young men into sex work has particularly focused on the family background and history of young sex workers, including their socioeconomic circumstances, educational and work-related experiences, and psychological factors. Within this literature, a prominent topic of research has been the relationship between childhood sexual, physical and emotional abuse and subsequent entry into sex work.\textsuperscript{70}

\textsuperscript{68} ILO (2005). HIV/AIDS and Work in a Globalizing World. www.ilo.org/public/english/protection/trav/aids/publ/globalizing.pdf Although many governments have significantly reduced the proportion of the population living in poverty, the sex sector remains large in many countries.  

34
In this research, different combinations of factors, which do not apply equally to all respondents, were found to play a major role in driving the subjects into male sex work. These factors include the following.

2.2.1 First: Poverty and Its Repercussions

Worldwide, research on sex work has often found a relation between low economic status and involvement in sex work. Unemployment, poor education, insufficient availability of jobs and inadequate salaries are believed to be some of the factors, which compounded, pushes people into sex work.\(^71\)

In this study, at least one of these factors held true for each respondent. Most informants expressed inadequate salaries or the need for additional money as the driving factor for sex work. Two particular informants, namely Seif and Karam, are extremely poor and have great difficulties finding employment. Due to financial difficulties, Seif had to drop out of school when he was in fifth primary and the quality of education he received was obviously so low that he now can neither read nor write, which further limits his opportunities for employment. Seif's father died when he was a child and left the family with no money. His household currently depends on the 100 L.E. pension of his departed grandfather and he tries to get money sometimes through construction work and sometimes through providing minor services for other people with little payment.

Karam, who is the intimate friend of Seif, has very similar living conditions but has a longer experience in sex work. Like Seif, Karam dropped out of school when he was in fifth primary and he also cannot read or write. He started his work career in a shop that sold clothes and then worked as a whitesmith until he had an accident that critically injured his right arm and limited his ability to do any type of manual work. Both

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Karam and Seif stated clearly that poverty and unemployment were partly responsible for their engagement in sex work.

The other five informants – Salem, Taher, Shehab, Aziz and Bahgat, are relatively better off in terms of socio economic status. They are all currently employed and all reached higher education levels compared to the previous two. However, all, except Aziz and Bahgat, noted that money received from their original jobs are not enough to meet all their economic needs and financial obligations, a situation that makes sex work a valid source of income. Aziz and Bahgat were poor when they were younger and it was that poverty that made them agree to take money for sex from the start. However, their current financial status has improved and they are receiving sufficient funds from their basic jobs. Furthermore, they both drive their own cars.

From the statements of the informants:
"I and Karam are deprived of many beautiful things we wish to have. We want things and we can't get them because of money.... Things like clothes, things. I have searched a lot and couldn't find a job". Seif

"There are days when I don't have in my pocket except fifty piaster."  Karam

"I am paid 150 L.E. per month in the supermarket and my father's pension is 700 hundred L.E. This is not enough to pay for my siblings' schools, universities and for our debts."  Salem

"My salary is 150 L.E. per week. My father's pension is 240 L.E. per month. Of course this is not enough for a family of 8 people". Taher

"I worked to support my family. My father, my mother and my three sisters. I helped my sisters to get married. Now that they are married they don't need my assistance any more but I'm continuously bringing them things and gifts." Shehab
"Sex with men brings very good money. From this money I managed to open my own workshop". Aziz

2.2.2 Second: Child Abuse

Various types of childhood abuse or maltreatment are known to be associated with diverse adverse effects on health and social functioning. In this context, research has demonstrated that childhood abuse may be connected with subsequent entry into sex work.  

According to the World Report on Violence and Health and the 1999 WHO Consultation on Child Abuse Prevention, there are four types of child maltreatment:

- Physical abuse;
- Sexual abuse;
- Emotional and psychological abuse;
- Neglect.

Physical abuse of a child is defined as "the intentional use of physical force against a child that results in – or has a high likelihood of resulting in – harm for the child’s health, survival, development or dignity. This includes hitting, beating, kicking, shaking, biting, strangling, scalding, burning, poisoning and suffocating."  

Sexual abuse is defined as "the involvement of a child in sexual activity that he or she does not fully comprehend, is unable to give informed consent to, or for which the child is not developmentally prepared, or else that violates the laws or social taboos of society. Children can be sexually abused by both adults and other children who are – by virtue of their age or stage of development – in a position of responsibility, trust or power over the victim."

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74 Ibid.
Sexual abuse is further divided into three types; rape and molestation, pornography, and exposure to the sexual acts of others. Rape and molestation refer to the "carnal knowledge of a person, forcibly and/or against that person's will; or not forcibly or against the person's will where the victim is incapable of giving consent because of his/her temporary or permanent mental or physical incapacity". Pornography is the "the employment, use, persuasion, inducement, enticement, or coercion of any child to engage in, or assist any other persons to engage in, any sexually explicit conduct or simulation of such conduct for the purpose of producing a visual depiction of such conduct. Finally, exposure to the sexual acts of others refers to the intentional exposure of children to sexual acts performed by others (including those engaged in by parents, caregivers and others entrusted with the care and nurturance of children)."\(^75\)

Research has found that the association between childhood sexual abuse and subsequent involvement in sex work may be that children who are sexually victimized develop psychologically and emotionally in ways that make them vulnerable to continuing sexual predation. Equally, childhood sexual abuse may lead to a propensity in the victim toward risk-taking behaviors (drug abuse, running away from home) that in turn create situations in which sex for survival is one of few remaining choices\(^76\)

For **emotional and psychological** abuse, they involve "both isolated incidents, as well as a pattern of failure over time on the part of a parent or caregiver to provide a developmentally appropriate and supportive environment. Acts in this category may have a high probability of damaging the child’s physical or mental health, or its physical, mental, spiritual, moral or social development. Abuse of this type includes: the restriction of movement; patterns of belittling, blaming, threatening, frightening, discriminating against or ridiculing; and other non-physical forms of rejection or hostile treatment."\(^77\)

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Effects of emotional abuse include "depression, anxiety, suicidality, low-self esteem, personality disorders, poor body image, sexual dysfunction, and compromised physical health. These psychological effects may combine to create a vicious circle for many youth, wherein poor coping skills and resources are not adequate for the high-risk situations in which they find themselves, thereby increasing their dependence on strategies such as trading sex for survival". 78

As for neglect, it "includes both isolated incidents, as well as a pattern of failure over time on the part of a parent or other family member to provide for the development and well-being of the child – where the parent is in a position to do so – in one or more of the following areas: health, education, emotional development, nutrition, shelter and safe living conditions. The parents of neglected children are not necessarily poor."79

The health and social repercussions of child maltreatment are various. They include "major harm to the physical and mental health and development of victims" and could even lead to death and injury. Studies have also shown that subjection to maltreatment and other forms of violence during childhood is connected with risk factors and risk-taking behaviours later in life (including, among others, high risk sexual behaviours, drug and alcohol use).80

In this research, nearly all participants talked about their exposure to one or more of the above mentioned types of abuse when they were little children. In the following section, I will present the personal narrations of each participant indicating his initial experience of having sex with men, entry into sex work and history of child abuse. Based on these narrations, I will highlight the different types of abuse experienced by each respondent.

79 WHO, Opcit, p.10.
80 Ibid., p.11
Seif: Describing his first sexual encounter Seif narrated the following: "I was little, exactly nine years old. My cousin had just come from conscription. He was in his house and told me to get him a shampoo. I went and got him the shampoo and when I entered I saw him naked and he took me in his arms. Nobody had ever taken me in his arms before. No brother, no one. He started kissing me on my neck and so on. I told him what are you doing? He said we did something unethical and I will tell your mother if you don't listen to what I'm telling you and come back at night. Since then, every time I went to him he hugged me and kissed me and I loved that. Until the gloomy day came, the day I will never forget. May God revenge from him for what he did to me. He wanted to do it with me and he injured me. I screamed. When I screamed, he looked at me and saw me sinking in blood so he left me. I told him if you want to tell my mother tell her, I'm not coming to you anymore. I left him and walked away. I was so tired. Pain underneath, couldn't sleep and couldn't walk. I was 12 or 13 then. After that, I met someone from the neighbourhood who told me what's wrong with you Seif and I told him what happened. That boy used to act strangely. He used to act like a woman and talk to boys as if they were girls. I always thought that was funny and I liked it. He took me to his home, gave me an antiseptic and introduced me to other people whom I started to meet. Kisses, hugs, we did sex between thighs and I was happy with the way...... I feel oppressed. I don't know why my cousin did that to me. Every time I see him I tell him may God revenge for me.

Describing his relationship with his family members Seif said, "I've never seen any kindness from anybody. My father died when I was a kid and I don't remember him. I'm deprived from a father. I have no father. No kindness from brothers or friends. My brothers are very cruel to me. My day is a day of misery and depression. Everyday there is shouting and beating. I thought of committing suicide two days ago... My life is getting worse and my brothers are always insulting me and disdainning me because I'm not working. I used to breed poultry and sell from them to get money but my brothers beat me because they didn't want poultry at home. They have no mercy and they do not leave God's mercy to come down."
Karam: Narrating his experience Karam said, "I feel that the situation I'm in now is because of my mother. I've always suspected that she is having affairs with men other than my father and I've always dreamt of her doing things (sex) with other men. I never talked about this to anybody. Not even my closest friend Seif who knows every little thing about me. These feelings started at a wedding I attended with my mother when I was a child. I don't remember how old I was. I was so small but I'm always remembering it. We were standing in the wedding and on those days my father was still alive. My mother used to care about herself and fixes her hair beautifully. She was standing and there was another man standing just behind her and I felt he was stuck to her. And at a later night I saw my mother and father having sex together and a mother should not make her son see something like that. I'm continuously seeing her in my dreams doing bad things with other men and I scream and when I come to talk to her I feel I'm unable to deal with her. I was recently accompanying her in a bus and I shouted hysterically at a man who was standing near her. I don't know what made me shout that much at the man."

When he was asked about how he started having sex with men and how he ended up into sex work he recited the following: "One summer we went to the beach, to Fayed. My brothers changed their clothes on the shore. I was dressed in the swimming suit but wanted to change my clothes in the room where people change their clothes. While going out of the room, there was a man sitting on a chair and he is the one who finished with me (meaning who raped him). I was around 13 years old. When I was going out of the door we bumped into each other. I went into the sea, he came after me. Whenever I went to any direction he followed me. In the afternoon I went with my brothers to buy fish and on coming back I found him in my face. I didn't talk to him and couldn't tell my brothers as I was afraid they would fight with him. I went into the sea and took the life jacket and went deep into the water. He came after me and turned me upside down and I couldn't reach the land so I had to cling to him. I told him what do you want? He said I want to know you. I told him let's go outside and then we can get introduced to each other he said I finally got you all alone. I told him what do you want from me? I found him taking me in his arms and kissing me. I
understood what he wanted and I told him no and scratched his neck and kept screaming for anybody to come and nobody came. By that time he had already finished with me and went away. I couldn't go into the water again. I was tired and felt pain and I couldn't tell my mother because I feared her knowing something like that about me. I went home and I was afraid and kept crying. My mother asked is there anything wrong with you? And I told her no. So she left me. I was terribly afraid. I used to go inside me room in the dark and cry alone. I was afraid that anybody in my family would know. Then after two days I went to the bus station. I was crying there and I met a guy who was a Kodiana (this term refers to the receptive partner in male-to-male sexual intercourse). He saw me crying in the station and asked why I was crying so I told him about everything. He said are you crying because of that? This is very normal. This is nothing. It happened with people who are better than you. He took me to his house and gave me his clothes to wear and took me to meet with a group of Arabs in a café. We laughed and joked together and then we went to where they were staying. He sent me to them and took money in exchange. They battered me. After I left the Arabs, my friend introduced me to other people and I came to learn that people can take money for selling sex so I started to do it. I thought I did it once and nobody knew anything. I can do it again and get money in exchange and benefit and that's it.

When asked about the type of relations he has with his family Karam stated, "My father was kind to me. He died four and a half years ago. My mother is so cruel and is always biased in favour of my other brothers. She doesn't treat me like her other sons. She prepares the meals to the others but when I come home she tells me go find your food and prepare it yourself. I don't stay at home except when I sleep at night. We also have no relations with any other relatives. I once saw my uncle by coincidence in the street after I was hospitalized for 45 days because of my accident. I had to take medications for my arm and I had no money. I showed my bill to my uncle, he handed me back the bill and left without saying any word. Everyone is on his own and nobody cares about anybody else.... My brothers often shout and make fun at me when they see me acting like a woman. I stand for a long time in front of the mirror, comb my hair and do house
chores like cooking and cleaning. They always tell me you should have been a girl but God did wrong and turned you into a boy.

**Salem:** When asked when the first time he had sex with a male was, Salem said, "*It was with the older brother of a friend. I was 12 years. He was kind to me and used to ask me if I needed money or anything. One day I went to my friend and I didn't find him. His brother was there alone. He showed me a film in which men were having sex with men and told me let's do like them so I tried. He told me not to be afraid and I always felt he was kind to me so I trusted him. Although it was painful I didn't mind because I trusted him and I knew he doesn't want to hurt me. I felt kindness with him. Later I told the story to another friend living in the neighbourhood who was also involved in this. He told me since you are in need of money why don't you go to (here he mentioned the name of a particular district in Cairo) where there are Saudis and do it in exchange for money. At that time I was introduced to everything and I saw the bad and the good.*"

Speaking about his relationship with his family Salem mainly pointed to the harshness of his father; "*My father is always cruel to me. I never received any kindness from him. He is gloomy and depressed all the time. He shouts and screams at us and makes people hear it. He is more kind to my little brother because he's little. He doesn't give me the kindness I need. He shouts at me when I 'm late or because of my style of dressing.*"

**Taher:** Regarding his initial experiences of male-to- male sex and sex work Taher stated: "*The first time I had sex was with a girl. Who dragged my legs into this (sex with men) were some friends. We used to sit and talk about sex and we liked watching movies and liked to try. I found that men are better than women. They have a clean way and they have better positions and when they love they love seriously. When they love a man they get attached to him. In the beginning, I used to try with girls then I tried men and liked them more. The first time I had sex with a man was at the age of 15. Then a friend told me that others do it*"
for money so why don't you do it too. It's like the pornographic films, the movies get sold and the actors get money."

Taher did not find anything to discuss in terms of the way he has been treated by his family. He said, "My relationship with my family has always been normal. There is nothing particular about it".

Shehab: When asked about his sexual experience he said, "We know everything when we are children. I used to see my father jumping on my mother while we were asleep. It's only one room and I enjoyed watching them while pretending to be asleep. In the beginning I used to talk about sex with my friends at school. We were in primary and we wanted to try. But we were kids, 8 years old. We wanted to try with each other. We couldn't let it in (he is referring to the penis) and we thought we did. When I became 13, I used to meet a girl and fuck her in her ass and I let it get inside and ejaculate... And when I got aroused and couldn't see her I did it with my other two friends. Then I left school and worked in the garage and it became known in the neighbourhood that I do everything (he meant having sexual relations with women, taking drugs, drinking alcohol). Then I joined a group who does everything, women, alcohol, drugs, and I used to do everything for the sake of money. Sometimes we're paid to break eyes through humiliating, beating, breaking bones and raping. Like if someone is annoyed with somebody else because he's involved with his sister or because he is acting to be more powerful, he would bring us to beat, rape and break the person he is annoyed with in order to humiliate him... My family knows that I am a gangster but they don't know that I rape people."

When asked how he started taking money for sex he said, "I was in a bar one night and we were enjoying ourselves. We were drunk and there was a group with me who started acting like khawalat (meaning acting like effeminate, receptive men). One of them was looking at me and got into coquetry and we didn't have women with us. We talked to each other and I knew he was a khawal and wanted to be fucked. I went with him outside the bar. He had a car and we went to a far away place and I fucked him there. When we came
back he gave me 20 pounds. I didn't know he was to give me money so I liked that and started going to the bar a lot. He introduced me to his friends and I started taking 20 pounds per time and through them I came to know many other khawalat."

In answering the question of whether he had ever been subjected to any type of abuse from his family he said, "My mother and father used to beat me. But this is normal. Any mother and father beat their children when they don't do what they desire. And I love my mother and my sisters so much."

Aziz: Answering a question related to his sexual experience Aziz stated, "I knew everything about sex from my friends when I was in preparatory. I used to work after school in a whitesmith's workshop. The first time (he had sex) was at the age of 12 with a colleague in the workshop and at school. My colleague used to be fucked by the owner of the workshop. I did it because I wanted to try it. I saw the workshop owner do it with my friend and I wanted to do like him. I used to penetrate my friend but didn't allow him to penetrate me because those who do that are khawalat and women and I'm a man. The owner of the workshop tried with me but I threatened him that I will tell my father if he did it with me. He couldn't fire me because I was good at my work and my father used to bring him clients. Later, I got to know Shehab and his group. And they used to do everything, raping men, fighting, taking drugs, everything. It's Shehab who introduced me to that path and he used to take me with him whenever he went to rape men because he couldn't do it alone".

Aziz never had any troubles with his family and he was always speaking well about them; "I love my family and they love me. They've always been very kind to me."

Bahgat: Describing his sexual experiences Bahgat stated, "When I was a child I enjoyed playing with girls more, but girls treated me badly. They didn't want to play with me and used to beat me telling me not to come and play with them. I loved to put on make up. My mother and sister used to help me put it up and
laugh at me. The first time (he had sex) was by force. The son of our neighbours did it with me by force. I was 10 years old and he was 14. After that my neighbour went on threatening to tell the boys in the street. So I accepted so that he wouldn't tell anybody. When I grew a bit older, when I became 14, I stopped fearing him and told him if you want to do that with me I will also do it with you (here he means being the penetrator and not the receiver). He refused and so did I. When he threatened me again I told him tell them about it and I will also say that I'm doing it with you. We stayed like that for some time without anything and then he accepted that I do it with him (that Bahgat penetrates him)...In the beginning, I didn't do it for money. One day I was out having a walk alone in El-Maamoura (a place in Alexandria), and I saw a group of boys who had a car and were drunk. They were three. I was standing and they were in their car. They started joking with me and directing the car lights at my face. We talked together and then they invited me to dinner in Kentucky. After that, they left and sat in the car to drink beer and sensed that I could have to do with the system (meaning have sex with men) like them. Then we went to the house of one of them and they started to examine me. They kept touching each other and having fun and when they saw that I wasn't shocked and didn't mind what they were doing they started to flirt with me too and asked if I've to do with the system and I said yes. They said maaly (receiver) or mashwi (penetrator)? I didn't understand the language then. I told them what do you mean? They laughed at me and said this guy is new and doesn't know the language. They said we mean do you take or give. I told them I do both. They said then you are maali and mashwi and I started with them. On that day, they didn't give me money but they invited me to dinner and bought me beer. After that, they went on giving me gifts. Because I was needy at that time, they used to give me clothes, watches and money. Through them I came to know other people and then I was introduced to the rest of the group. I knew Shehab and Aziz in a party of group sex.”

In terms of his relationship with his family, he did mention that they used to beat him as a child when he did something wrong but considered that to be normal and happening in every family. For him, "It is the
usual. My parents used to beat me when I was a child but that was because I didn't listen to what they said.

2.2.3 Discussion

It is clear from the above narrations that sexual abuse was the most common type of abuse experienced by the subjects during childhood. Seif was molested and raped by his cousin. Karam was raped by a stranger and exposed to the sexual acts of his parents, which affected his psychological development and his feelings and attitudes towards his mother. Salem was seduced and molested by his brother's friend. Taher was influenced by his friends and by his exposure to pornographic movies which fed his young age desire to experiment his sexuality and imitate what he sees. Shehab was exposed to the sexual acts of his parents at a very early age, which led him to try experimenting with his male school mates and later get involved with men whenever women were not available. He did mention that his parents did not want him to see their sexual encounters and always did it on the assumption that he was asleep. In fact, he stated that his father, who is a porter, beat him once when he saw him watching them. However, it was not possible to avoid such experiences since the whole family was living in one room, a situation that is very common among low class families in Egypt. Aziz witnessed the sexual involvement of his employer with his colleague at work and wanted to imitate them, whereas Bahgat was subjected to rape by his neighbour.

These examples not only confirm the strong relationship between child sexual abuse and adult sex work but could also confirm the existence of a relationship between childhood sexual abuse and male-to-male sex as far as this sample is concerned. In this respect, it could further be highlighted that all informants who were raped and molested by older males, including Seif, Karam, Salem and Bahgat grew up to take the feminine role in sexual intercourse and identify themselves with the "kadaina" (those who are the receptive partners in the male-to-male sexual encounter). On the other hand, those who were not subjected to rape, including Taher, Shehab and Aziz insist on being regarded as "baraghla" (those who adopt the male role in
the sexual encounter by being the active partners), clearly looked at the kadaina as inferior to them, and fiercely denied any involvement in receptive sex, noting that those who do it are women or *khawalat* while they are "real" men. If these facts could suggest anything, it is that there might be a relationship between subjection to rape in early childhood and later identification with one of the two dominant identities of men who have sex with men in Egypt. However, this question is beyond the scope of this study.

Physical, emotional and psychological abuse and neglect on the part of family and relatives appeared clearly in the narratives of Seif, Karam, and Salem. Seif described the brutality, hostility and ridicule he has continuously been receiving from his brothers and Karam talked about the cruelty and discrimination of his mother and the neglect of everybody in his family. Salem spoke about the bad temper, hostility and discrimination he is experiencing with his father. In fact, all three informants referred to their need for love, compassion and kindness as reasons for having sex with men sex with men.

"To me, sex is related to love and feelings of deprivation. I want to feel that I'm held in safe arms." Seif

"Some men, when they hug me I feel kindness. I don't feel I am afraid from anything." Karam

Seif and Karam further mentioned that they were physically abused and maltreated by teachers in school.

"I left school because I hated it. I hated it because Mr. Abdul Rahman used to beat us and in the cold winter punish us by removing our clothes and making us shiver in the cold and hit us on the backs of our hands." Karam.

"One reason I left school was because there was no money for me to continue my education and because we were always beaten and treated badly there." Seif

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81 During the time I was doing my fieldwork, Karam had a serious squabble with his mother, which affected his injured hand and caused the loss of a lot of blood and a subsequent collapse and hospitalization for 10 days. The person who moved Karam to the hospital and took care of him for the whole stay was his friend Seif. None of his brothers visited him and the mother came only once to the hospital and did not enter into his room to see him. She met Seif and asked him about Karam then left.
The other informants talked about physical punishment from their parents but did not give it a high value. For them, beating or hitting a child was the norm for punishment and should not necessarily be considered as maltreatment on the part of the family.

The lack of emotional support provided by parents or family is also clear in the fact that none of the informants who were raped was able to mention it to any family member. They all feared from the reaction and favoured to suffer the consequences silently and on their own, a situation that might have resulted in peer seduction into sex work.

The symptoms of emotional abuse and distress, or may be self stigma, showed on Karam and Seif, who seemed to have low levels of self esteem, and a level of suicidality. In our discussion related to HIV and his concern over his health, Karam said that he does not care if he dies as for him death was better than his suffering. Karam attempted to commit suicide three times, twice by taking pills and once by trying to burn himself. When asked why he tried to put an end to his life, he said "for someone doing something like this (he meant having sex with men) and with nobody that cares about him, death is better."

Seif has also been thinking of suicide during the time I was doing my fieldwork for the same reasons mentioned by his friend Karam. Seif laments his poverty and sometimes laments having sex with men. He plainly explained that he does not know how to identify himself sexually and that having sex with men is causing him and identity complex. This takes us to a discussion focusing on how informants in this study identified themselves sexually and how their sexual preferences did or did not match with their sexual behaviours. These topics will be addressed in details in the next chapter, which will then move to present the sex work experience of respondents.

82 Despite of their many frustrations and grievances Seif and Karam always appeared and acted cheerfully when we went out together. They were always laughing and joking and making funny comments about men they were attracted to in the streets.
3.1 Sexual Identity

3.1.1 Sexual Behaviour and Sexual Identity as Social Constructs

Despite the fact that men have sex with other men for a variety of reasons, the terms used to describe them often refer to what they do rather than why they do it. Such terms represent social constructs. They represent the way in which societies conceive sexual behaviour and social relations. In western countries like North America and much of Europe, sexual behaviour is defined based on the sex of one's partner. Preferring one's own sex is to be homosexual, preferring the opposite sex is to be heterosexual and to have preferences to both sexes is to be bisexual. To be "gay" is to be homosexual and to demand similar legal and social rights like the rest of the society and to be "queer" is to assert that Western society oppresses both heterosexuals and homosexuals. However, in many other parts of the world, including the Middle East, sexual identity (who one is) and sexual behaviour (what one does) are often defined in relation to whether one penetrates or is penetrated.83

Western research has shown that indigenous identities and relational patterns linked with male-to-male sex are various, diverse and widespread. They tend to fall along several coordinates, the main ones being age status (elder male with younger male) and gender status (feminine vs. masculine). The gender status pattern is globally more common than others and is "typically one in which preferentially homosexual males, usually feminized or transgender, have sex with other ‘real’ men whose sexual preferences are irrelevant." Although highly diverse, the gender presentations falling within this pattern mostly "reflect and reinforce the bipolar gender and associated sexual norms of masculine vs. feminine, active vs. passive."84 It is this pattern that has dominated Middle Eastern countries including Egypt as previously elaborated.

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Definitions of sexual behaviour are thus supposed to echo definitions of sexual identity or gender-the social roles expected from men and women. In this context, preference for the passive receptive role in a sexual relationship is often connected with femininity, such as dressing like women and speaking and adopting manners associated with women—although it should be noted that not all effeminate men like to be penetrated.85

Research has also found that sexual behaviour is not necessarily the same as sexual desire or preference. Some men who prefer to have sex with other men never do it, while some who want to have sex with women are involved in sex with men. Likewise, sexual activity is not the same as sexual identity. Men who are highly feminine may take the penetrative role in sexual intercourse, while men who appear to be the active partner may take the feminine role and enjoy being penetrated. Furthermore, sometimes the taboos of the society are so strong that men would not admit even to themselves their true preferences.86

In this study, the way sex workers identified themselves sexually, their sexual desires and their sexual behaviours were all investigated in an attempt to confirm whether they define their sexual identity and behaviour in connection to whether they penetrate or are penetrated.

3.1.2 Sexual Identity, Behaviours and Desires of Egyptian Sex Workers

In this study, the sex workers did define themselves sexually following the "feminine vs. masculine" pattern where sexuality is defined in accordance with the domination by or reception of the penis in the sex act. In Cairo, the man who takes the penetrative role in sexual intercourse is called "Barghal" and the one who takes the receptive role is called "Kodiana". In Alexandria, the "Barghal" is also called "Mosmar" (nail), or "Mashwi" (grilled), while the "Kodiana" is also called "Fisha" (plug), or "Maakly" (fried) or

86 Ibid., p. 6.
"Dezendoa" (hammered). As for the man who is both active and passive at the same time, he is called "Carbona" or "Mushtarak".

According to all informants, a man who is a kodiana is not regarded as effeminate just because he is the active partner in the sexual relationship, but also because he adopts feminine mannerisms in speech, in ways of walking, ways of gesturing and in doing other activities such as shaving body hair. The Kadaina also call themselves with female names.

Seif, Karam and Salem identified themselves as "Kadaina" (plural of kodiana). Karam stated that he feels like a woman and has always loved to act like women even before he got raped: "I like speaking and acting like women and I like changing my voice to sound like a woman's voice. I always liked to do house chores, put make up, and shave my body hair. I always liked that even before I was assaulted. I psychologically feel I'm a woman".

Taher, Shehab and Aziz identified themselves as "Baraghla" (plural of barghal), while Bahgat identified himself as a "Karbona" or "Moshtarak". More importantly, Bahgat preferred to identify himself with the Western term of "gay". Being relatively well educated and interested in reading, he knows about the gay movement in the West and knows that he could be identified as gay. As he indicated: "I know that there are people outside who live like that and they have rights. And if I were living outside, I wouldn't have got married".

The identification Bahgat gave to himself as "gay" demonstrates that local patterns have also undergone some change by exposure to other cultures, particularly to western European cultures where the "gay
identity is associated with a pattern in which men who are predominantly and preferentially homosexual have sex with others who are also predominantly homosexual."\(^{87}\)

The study did not find discrepancies between the sexual identities and sexual behaviours among the informants. However, it did find some discrepancies between sexual behaviour and sexual desire. While preferring sex with women, both Shehab and Aziz were having sex with men for the sake of money. And while preferring sex with men, Bahgat is married and has sex with his wife. Furthermore, while Seif does not desire women, he does have sexual relationships with two women and while Salem claims to be not interested in men except for money, he has two male sexual partners from whom he takes no money and mentioned that he sleeps with men who are not clients to proof to the other *Kadaina* that he is like them and thus receives their protection when needed.

The study further found that sexual identity and desires are not fixed, but change over time, according to the individual's perception of himself. The clearest example here is that of Taher who at an early age used to have a desire for women and now is only attracted to men.

Discussing sexual identity led to the discussion of homophobia and its effects on the informants. Homophobia refers to the "disapproval or hatred of sex between men (or between women)-which is expressed in stigma and discrimination and, in extreme forms, violence."\(^{88}\) Homophobia is usually rooted in law, religion and social attitudes and the latter is believed to partly reflect and partly influence law and religious attitudes.\(^{89}\)

In some societies, men having sex with men are threatened with "arrest and imprisonment, dismissal from work, expulsion from family and home, name calling and public humiliation, blackmail, violence and even

\(^{89}\) Ibid.
death." Homophobia could lead men to hide their sexuality from others and sometimes deny it to themselves. While some men might not be affected, for others, homophobia could create patterns of "secrecy, fear and shame, which may lead to depression, abuse of alcohol and violence towards others. Homophobia could also lead some people to repress aspects of their behaviours in order to abide by the society's demands including marrying when they would rather not."90

In Egypt, there is no explicit reference to homosexuality in the legal code. However, it can be punished under various laws covering obscenity, prostitution and debauchery.91 Furthermore, it is condemned by Islam and popular culture reinforces this condemnation.92

Homophobia towards men having sex with men is so entrenched in Egypt and has surfaced to public debates twice during the last eight years, first in 2001 and second in the beginning of 2008. The year 2001 witnessed the Queen Boat event, when the Egyptian government arrested and detained some 60 homosexual men on the Queen Boat in Cairo, while a wave of arrests took place in October 2007 until early 2008 when a number of men who have sex with men were arrested and tried. In both cases, as earlier describe, men captured by the police were severely beaten, abused and forced to undergo anal examinations to prove that they had engaged in homosexual conduct. They were tried with charges of debauchery and contempt of religion.

3.1.3 The Experience of Homophobia

The homophobic experiences faced by some of the subjects in this study were name calling, public humiliation and police harassment. These are often witnessed by the Kadaïna because the way they imitate women in walking, speaking and acting makes them identifiable. Nevertheless, such harassments do not

90 Ibid., p.13.
92 Sherif, B. The Encyclopedia of Sex; Egypt [ Ahttp://www2.hu-berlin.de/sexology/IES/egypt.html].
affect the public behaviours of the three informants who are kadaina and does not make them try to change their conduct except in the presence of police forces. In terms of public reaction, the Kadaina do not seem to mind the homophobic attitudes of people in the street as long as they are away from their homes and families. If any body humiliated or insulted them in the street they would yell back at him and do a big fuss. This is one reason they usually walk together.

When asked about experiencing homophobic attitudes Salem answered: "I receive words and people make fun of me in the street but I don't care. In the beginning I used to put my face in the ground. Now I walk raising my head and nobody talks to me. From what I knew, I feel that all people who talk and make fun of others are weak people. They are just a mouth. If anybody told me anything I make him a scandal in the street... Kadaina with each other protect one another. That's why we always walk together. The Kadaina gather around the Barghal who touches or insults in the street and makes for him a scandal."

Salem has further explained that it is important for him to walk with the Kadaina to receive their protection not only from the usual public harassment but also from robbers. To receive this protection he has to sleep with other men in order to prove that he is interested in men like them and that he is not only doing it for the sake of money; "We walk and laugh and other young men come after us and we go with them... I go and have sex with them to prove it to my friends that I can have sex with men without taking money and that I do it with the one I like... I do it to receive their protection". Salem

The negative attitudes towards the Kadaina are not exclusive to the public but are also held by the Baraghla who look at the Kadaina with inferiority. Taher, for example, would never walk beside a Kodiana in the street for fear that people might mistake him as one. In fact, when I met Taher we were accompanied by Salem and Seif and he was keen on distancing himself from us. When asked if he ever takes the passive

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93 Seif and Karam were acting like females when they were talking and walking with me in the public and did not mind the way people around were looking at them.
role in sex, he said "never, it is only the kadaina and women who does that and I'm a man." Similar responses were given by Shehab and Aziz when answering the same question. They also consider themselves in a position of superiority over their clients because they are the active partners while their clients are the passive ones.

"I see my clients as Khawalat. But I am a man" Shehab.

"My clients see me as their man". Aziz

The Baraghla also see as inferior men who take both the active and passive roles because they are penetrated. When Shehab was asked if he practices receptive anal sex, he fiercely denied it saying "Nobody can dare to come near me. It happened only once when I was drunk. If I were sober I would have never allowed it. I don't even know how I have confessed that now. You shouldn't say that to anybody".

Internalized homophobia was also more salient among the Kadaina and was clearly reflected in the following statements:

"This issue (having sex with men) created a complex for me. I don’t know what I am. I feel guilty when I sleep with a man. I wish to get married. I feel injustice. I don’t know why.... One day I'll get married and be walking with my wife. What would people say about me? I want to be a man." Seif

In all my encounters with Seif, with whom I used to arrange for all interviews in Cairo, I have noticed from the way he talked that he was continuously swearing by the Quran and verbally praying to the Prophet and mentioning Allah a lot in the sentences he formulates. This stimulated me to ask him in one of our chats about what religion meant to him. His answer was as follows: "Religion is something and what I'm doing is
something else. I know that what I'm doing is prohibited. God prohibited it and we are from Lut's people (he means people of prophet Lut). But this something that is neither in my hands nor in yours”.

"Sometimes I feel disgusted with myself because I'm sleeping with men…. I don't care about being infected with AIDS. Death is better for me than the situation I'm in". Karam

The Baraghla, in contrast, did not seem to experience any internal stigmatization related to having sex with men. Internal homophobia was not sensed in the discussion with Shehab and Aziz, and related comments stated by Taher were:

"If people knew about me, they'll say it's just a period and a digression of youth and he'll stop it later....I rarely get upset because I'm sleeping with men and I come back and say no it has become a pleasure for me"

For Bahgat, who is gay, the internalized homophobia shows in the fact that got married for the sake of conforming to the society's obligations. He also noted that he sometimes feels embarrassment and regret:" I think and regret but then I come and do it again because I can't stop it. It's a completely different feeling."

3.2 The Sex Work Experience

3.2.1 Age of Entry and Length of Time in Sex Work

Understanding the experience of sex work as lived by the informants required asking them about the age in which they started sex work, the length of time they have been engaged in the sex industry, the type of sex work they are involved in, details about the income they receive from this occupation, constraints faced, information about clients, types of sexual activities performed as well as details related to the different aspects of the sex work context including contact and work venues, time of work, etc.
Table 2 and 3 summarize a number of these details

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Age of Entry</th>
<th>Period involved in sex work</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seif</td>
<td>19</td>
<td>17</td>
<td>2 years</td>
</tr>
<tr>
<td>Karam</td>
<td>21</td>
<td>15</td>
<td>7 years</td>
</tr>
<tr>
<td>Salem</td>
<td>17</td>
<td>15</td>
<td>2 years</td>
</tr>
<tr>
<td>Taher</td>
<td>19</td>
<td>15</td>
<td>3 years</td>
</tr>
<tr>
<td>Shehab</td>
<td>29</td>
<td>18</td>
<td>11</td>
</tr>
<tr>
<td>Aziz</td>
<td>31</td>
<td>20</td>
<td>11</td>
</tr>
<tr>
<td>Bahgat</td>
<td>37</td>
<td>17</td>
<td>20</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name</th>
<th>Contact Venue</th>
<th>Work Venues</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seif</td>
<td>Street and through friends</td>
<td>Clients' apartments</td>
</tr>
<tr>
<td>Karam</td>
<td>Street and through regular clients</td>
<td>In clients' places of residence, at the side of the railway, in fields nearby a particular bridge in Cairo</td>
</tr>
<tr>
<td>Salem</td>
<td>Coffee shops and through friends who are paid a particular percentage from the payment</td>
<td>Apartments of clients, rented apartments or hotel rooms, depending on the national of the client.</td>
</tr>
<tr>
<td>Taher</td>
<td>Through regular clients or friends</td>
<td>Rented apartments</td>
</tr>
<tr>
<td>Shehab</td>
<td>Initially in bars and through clients. Now always through friend and other clients using mobile phones</td>
<td>Rented apartments, clients' places of residence and hotel rooms</td>
</tr>
<tr>
<td>Aziz</td>
<td>Initially in bars. Now in hotels and through mobile phones</td>
<td>Rented apartments and clients' houses</td>
</tr>
<tr>
<td>Bahgat</td>
<td>Hotels, discothèques and through mobile phones</td>
<td>Rented apartments most of the time, hotels sometimes or an apartment of a close friend</td>
</tr>
</tbody>
</table>

As shown in the above tables, the length of time informants were involved in sex work varied noticeably between them due to their age differences as well as differences in age of entry.
3.2.2 Type of Sex Work

Different modalities of sex work emerged in this study including quick transactions and long-term clients. Furthermore, diverse sex work contacts and venues were found including streets, bars and coffee shops, and contacts through friends and mobile phones.

The work venues mentioned largely depended on the type of clients met. For some high standard clients and foreigners including Arabs and other Western nationalities, work venues included hotel rooms. For Arabs, work venues also included apartments they rent during their summer stay in Egypt. Regarding Egyptian clients, work venues were mainly the clients' apartment or apartments of friends who would offer their place in exchange for a portion of the payment and/or dinner.

"A Saudi (meaning clients from Gulf countries) rents two apartments when he comes to Egypt, one for him and his family and one for himself. If Europeans or Americans, I go with them to rooms in their hotels."

Salem.

"With Egyptians who have no apartments available, we could go to isolated places, for example, at the side of the railway or in fields nearby the bridge. With Arabs, they usually have apartments they rent in summer". Karam

"We go to rented apartments and sometimes the apartments of the clients' themselves. More than once I went with high standard people in hotels and sometimes with Arabs in hotels and those pay a lot in dollars." Shehab

"There is one apartment to which we (Taher and other friends) always go. The client gives to the owner of that apartment money and dinner. The owner is basically opening it for vice. We always meet in this
apartment and we don't go together. I go in first and then the others come so that nobody would suspect anything." Taher

### 3.2.3 Time when Commercial Sex Encounters Take Place and Ways of Hustling for Clients

In terms of the time when sex work takes place, informants who have a full time job during the morning said that they practice sex work mainly at night. For others, it could take place at any time. As for how sex workers hustle for clients, they all mentioned that it happens mainly through eye contact and a special way of looking as well as through adopting particular gestures that show their interest in men.

"It's sometimes arranged in advance with clients. If it's in the morning, it is in the house of the client, if it's at night and we can't do it in the clients' place because his wife is there or something we go to other places. Sometimes I call my clients and they tell me the house will be empty after two days and you can come....In the places we stand, people know each other, I could look into one's eyes, his eyes meets mine and I laugh loudly in a female manner." Karam

" It's always at night. I go to a café where men who have sex with men congregate starting from 9 p.m. There, people send mobile messages to each other. I open the blue tooth to show my mobile name and number and people send me messages saying for example can I see you, can we get introduced to each other or can we go outside together for some time. We look to each other and know each other and go meet outside the café...The shape of my body, the way I dress and the way I walk seduces any man walking and makes men desire me." Salem.

" On Sunday, it's a must. It's the day of my holiday so it's like a celebration on Sunday. In the middle of the week I can do it whenever I feel like doing it but it has to be at night because I work in the morning". Taher
"It depends on the free time we can make available. Meaning, if I have work at the garage in the morning then I go at night and if I have work at night I go in the morning and sometimes I escape from work for two hours and leave the kids (those who work under his supervision) do the work when it's calm." Shehab

"It depends on work. I'm a whitesmith and I'm well known and clever. It depends on my circumstances". Aziz

3.2.4 Income Generated from Sex Work

The income generated from sex work differed considerably between participants. Furthermore, pricing for some informants differed according to the nationality of the client, the type of sex acts requested, the client's financial situation and the overall setting.

The first time Seif sold sex for money he was paid 25 pounds and the second time 30 pounds. Karam's income from sex work could reach 200 or 300 pounds per month. However, in some months he might not be able to get any clients at all. He receives much money from sex work during the month of July because many Arabs come to Egypt in this month. He also charges price based on the assessment of the apparent financial situation of the client. As stated by Karam:

"In month seven (July), money is a lot. People coming, Saudis and Kuwaitis. I go to ... and there I walk in the street at night, at 2:30 or 3:00 and I find the car standing. Arabs sometimes pay 100 pounds, sometimes 150 and sometimes 200. It depends on my cleverness. Sometimes he gives 100 and when I joke and laugh with him he gives me what I want. Egyptians sometimes give 30 pounds and sometimes 40 pounds. These I could get from three places... We look at each others' eyes and we read one another... I can't say how much I get per week or per month. It is always different. Four days ago I was with a client and he gave me 15 pounds. I also can know from his appearance whether he is rich or not and set the charge accordingly. "

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Salem's income from sex work also varies depending on the type of the client, and sometimes payment is in the form of gifts. As he stated: "With Saudi's, payment ranges between US$ 50, that's from the stingy Saudi, and US$ 100. However, if the man enjoyed sex with me he would give more, for example US$ 50 or US$100 more. For Egyptians, they give between 100 and 150 pounds and I also receive gifts like mobiles and gold things such as watches and bracelets. I don’t keep these things at home but keep them with friends. If I kept them at home they will tell me where have you got it from? and I can't say I got from my work in the supermarket. The supermarket would never bring gold.... Europeans pay 100, 155, 200 dollars...The income per month could reach 600 or 700 pounds and in seasons where there are Saudis, payment could reach 3000 and 4000 pounds per month."

Taher's clients are all Egyptians and he does not seem to make good money from selling sex. In setting prices he as well considers the financial situation of the client. As stated: "The last time I took money for sex was last Sunday. I took 20 pounds and I was in need of them. Money from sex could reach 120 pounds per month. The lower price I receive is 15 pounds and the higher is 25. When I'm in shortage of money I make a phone call to one of my clients and for change I may ask the client to introduce me to another friend. I can practice with the person more than once in the day. The first time I take money, the second time no. But some people I take from them more than once according to their situation and whether they are well off or not."

Shehab is relatively well paid from sex work and has a different way of setting prices. His prices are charged based on the whole setting which also includes food and drinks that are consumed before sexual intercourse. For Shehab, "Every month is different and every week is not like the previous one. Sometimes I end up with 100 or 200 pounds per week at others I end up with 500 and 600 pounds it depends on how the week is going and whether the clients are new or regular. Price is charged based on the whole setting, food
and drinks but regular clients have a special treatment. Sometimes I don’t take money from them at all and it’s only for food and drinks that they pay. And sometimes they give more."

On the issue of money, Aziz was always reluctant to speak much. However, he did mention that if it wasn't for the sex work money, he would not have been able to open his workshop. When asked how much he charges for selling sex, he answered: "In the beginning, I used to take 20 pounds per act. Now I sometimes take 50 and sometimes 80. Prices are charged based on the whole setting."

Finally, Bahgat also differentiated between the Arabs and the Egyptians. Furthermore, he was the only one who noted that prices are set based on the type of sex performed; "It is according to circumstances. Sometimes there are Arabs and those give a lot, 100, 200 dollars. For the Egyptians, their maximum is 100 pounds. I also receive gifts...When I’m the one who penetrates I take less than when I am the one who is penetrated. When I'm a karbona (both passive and active) it's a deal. The last time sold sex I was a karbona and I took 150 pounds."

3.2.5 Age of Clients

Clients of interviewed male sex workers covered a wide range of ages with the lowest age being 15 and the highest being 65. Certain terminologies are used to categorize clients into age groups. Clients in the 20s and below are called "Somo'at", while clients above 30 are called "Kowash".

3.2.6 Occupations of Clients

Clients of interviewed sex workers came from a diversity of occupations and social classes. Occupations reported include business men, factory owners, lawyers, government and private sector employees, bank employees, musicians and students.
3.2.7 Marital Status of Clients

Most clients were married and some had children. Six out of the 10 regular clients of Taher are married and two are still students. All of the last five clients of Aziz were married, four of the last five clients of Bahgat were married and three out of the last five clients of Shehab were married.

3.2.8 Preferred Clients

Some informants reported having preferences for certain types of clients. Karam, for example, prefers men between the age of 25 and 30 and dislikes old aged men around 60 and young men under 18. He does not like white men or men with reddish lips and likes men who are dark, tall, with strong hairy bodies and broad shoulders.

Salem does not like ugly men or men who have scars on their faces. The term used among men who have sex with men in Cairo to refer to such a man is "Elshelaf". He also does not like the hairy man who has a moustache. This one is referred to by the word "Elgahr". He likes the good looking man and this is called "Elagar".

Shehab likes clients who are calm, relaxed, "cool" and do not get upset when he takes time to penetrate. "I like clients who want to enjoy sex. I mean those who are very cool and don't get upset when I take time to enter into the mood."

Aside from his preferences, Shehab was keen on expressing his particular disdain towards a client who pays him to have sex with both him and his wife. As narrated by Shehab, "There is one client who brings me to fuck him and to fuck his wife from both the front and the back. I fuck him first and then I fuck his wife and I see him watching me doing it with his wife with a smile. It arouses him when he sees me doing it with
his wife and he ejaculates on the scene. They are high standard people and they have children. I'm disgusted from him but I'm taking money and that's what I care about”.

Lastly, Bahgat’s preferences for clients are based on the role he plays in sexual encounters. When he is the one who penetrates, he likes young clients. If he is the one who is penetrated, he likes the ones with experience because “they are easier to deal with”.

3.2.9 Experiences of Violence

Informants were asked if they ever witnessed physical or sexual violence during their sex work experience and only Karam and Bahgat mentioned that they did.

"I have been subjected to beatings a lot. After finishing with me, one might insult me and slap me. That was in the beginning. Now when I go with someone and feel that he wants to beat me or take money from me I scream until the people come out and gather the neighbours around him and make them know what he was doing. In the beginning, when I went into the streets I didn't know anything. Thieves used to rape me. Two of them one day raised a razor in my face and said if you don't come with us we will scrape your face. So I had to go and sleep with them”. Karam

"Yes, but only once. One day a client took me with him to Elagamy (a city inside Alexandria) and after we finished he beat me and called me names and through me in the desert way. He did that because he didn't want to give me money and if he had said he didn't have money I wouldn't have got upset”. Bahgat
3.2.10 Number of clients

With the objective of exploring the frequency of paid sexual encounters and the multiplicity of clients, informants were asked about the average number of clients they meet per week or per month and the number of regular clients if existed.

Karam, Salem and Taher reported an average number of four clients per month. Karam, however, mentioned that in some months he might not find any clients at all. Shehab noted that it always differs depending on the circumstances, where at times he does not get except one client per week and at other times, he gets clients all days of the week and at other times he does not get any at all. For Aziz, the average number of clients per month is 5 and for Bahgat, the average number is 3.

With regard to regular clients, Karam mentioned having 4 or 5, Salem mentioned having 5, Taher mentioned 10, Shehab mentioned 12, Aziz mentioned 10 and Bahgat mentioned 8.

3.2.11 Constraints to sex work

When asked about any obstacles or constraints that could lead to the ending of the paid sex transaction, informants pointed to the police, thieves and public attitudes towards sex work and male-to-male sex.

Karam explained how thieves can obstruct sex work by recounting an incident when a thief he knows tried to rob the house of his client. On hearing Karam arranging for an encounter with a client who asked him to accompany him to his place, the thief made a plan with Karam to follow them and rob the client's house. He told Karam to take his handkerchief and throw it at the door of the client's apartment so that he would know where it is. Karam was to make sure that the client gets undressed when the thief knocks on the door and pretend to be from the police and then, with the trick, rob the house. According to Karam, if he had directly refused to do what the thief had asked him for, the latter would have beaten him harshly. But he also did not want to subject his client to that robbery so he had to fabricate a story to cancel the transaction.
While walking with the client, he told him he was unable able to continue with the transaction as the time was inappropriate and left. When the thief asked Karam why he had left the client he said because the client found out that his apartment was not vacant. As such, Karam had to sacrifice the payment he was to receive in order to protect his client from a robber.

Karam further narrated an incident when a policeman caught him doing sex with a client nearby the railway. At that time the policemen had taken Karam to jail but freed him after a short time.

The incident of the police with three of the informants that I earlier narrated also shows how police forces could be a source of threat.

Fear from the police and thieves have also been expressed by Salem who mentioned that he does not care about people knowing anything about him, except his family, and that he is only concerned about police and thieves. As stated by Salem, "I'm only concerned about police and thieves. A thief could raise a pen knife and fixes it at your back and take all the money you have. This why the kadaina always walk together".

Throughout my interviews, I came to know that the community of men who have sex with men in Cairo give certain terms to refer to police and thieves. Police are called "Obriza" and a thief is called "Elzenbea".

For public attitudes towards male-to-male sex and sex work, they were considered by Seif, Karam, Shehab and Aziz as the main constraint to sex work. Fearing that anybody who lives in the neighbourhood might know about their activities, they all refrain from practicing sex work in the areas they live in. As stated by Shehab: "If people knew that I take money they'll say I'm the kids' type and nobody will come to me. This is why I don't do anything in my area. People in my area only know that I'm a gangster who humiliates men but don't know that I take money for sex".
Concerns related to police and public attitudes were also expressed by Bahgat who said "If the police or people knew anything it will be a scandal."

3.2.12 Family Knowledge about Sons' Involvement in Sex Work or Male-to-Male Sex

All respondents, except Seif, mentioned that their families knew nothing about their having sex with men or about their involvement in sex work. To some of them, this would bring shame to the family.

Seif's mother is the only parent who knows about her son's homosexuality, but not his involvement in sex work. She witnessed him by chance having sex with a male friend of his, upon which she had a stroke and got paralyzed. His brothers are suspicious but none of them is sure about it.

When informants were asked if their families knew about their situation, some answered the following:

"They know nothing. This would put them in shame and humiliation". Salem.

"Nobody knows anything. It is a dishonor". Karam.

"If they knew, they would have renounced me". Shehab

"Nobody knows anything about this. It would be a scandal in this country". Bahgat

3.2.13 Buying Sex

Participants were asked if they buy sex at times and Shehab and Aziz, confirmed that sometimes they buy sex from female sex workers.

3.2.14 Type of Sexual Activities Performed

The sexual activities reported by informants conformed to a large extent to the sexual identities they identified themselves with. The only discrepancy found here was the reporting of penetrative sex by Seif who considers himself a Kodiana. Until recently, Seif used to perform only penetrative anal and receptive
oral sex and avoided receptive anal sex. However, he now practices both receptive and penetrative anal sex.

Karam reported practicing all types of sexual activities except penetrative anal sex. Sexual practices he performs include receptive anal sex, sex between thighs, as well as penetrative and receptive oral sex. He also described other sexual positions including putting the penis of the client between his breasts and under his armpit. He also spoke about always trying different positions and possibilities.

Salem stated that he performs all types of requested sexual activities except penetrative anal sex, as he does not like doing it and oral sex, which he considers "disgusting". Salem also noted that people from different nationalities favour different types of practices.

Taher reported practicing penetrative anal sex, and Shehab and Aziz mentioned penetrative anal and receptive oral sex. Finally, Bahgat reported practicing all types of sex whether penetrative or receptive.

Most informants further stated that they often watch pornographic movies of men who have sex with men and imitate what they see accordingly.

In the next chapter, more details about the sex work experience of respondents will be explored as aspects affecting the HIV risk context of male sex work. The general HIV situation and response in Egypt will be addressed, followed by an analysis of respondents’ knowledge, attitudes and practices related to HIV and an exploration of the way they interact with their clients and how these interactions affect safer sex encounters.
4.1 HIV in Egypt

4.1.1 HIV Situation

The first case of HIV in Egypt was discovered in 1986. Since that date, the cumulative number of cases reported to the National AIDS Programme (NAP) has reached 2,788 by the end of June 2007. The current number of people living with HIV reporting to the NAP is 1,061 with estimates ranging from 2,900 to 13,000 according to UNAIDS/WHO 2007. Most of those living with HIV are adults in the age group 20 – 40 years, with the male/female ratio being 4/1. Sexual transmission remains the main mode of HIV transmission (87%), with heterosexual transmission representing 60% and homosexual transmission representing 27%. Injecting drug use is responsible for 1% of reported cases, while mother to child transmission represents around 2% of cases. Transmission through blood and blood products account for 6% of the total reported cases, while in 4% of the cases the mode of transmission is unknown.\(^9^4\)

Although the overall prevalence of HIV in Egypt range from 0.007% to 0.02%, the reported number of cases is on the rise (as elaborated in the below figure) and the preconditions for a wider epidemic exist. Multiple factors are regarded as facilitating the potential growth of the epidemic and making it difficult to control. These include overpopulation, a large population of youth (the group where over 50% of new HIV infections worldwide occur, poverty (20% of population under poverty line), the continued presence of illiteracy in the general population (38%), weak knowledge of HIV; rare condom use, sharing of syringes, and sex with multiple partners.\(^9^5\)


\(^9^5\) Ibid.
Worldwide, there are three classifications of HIV epidemics: *Generalized Epidemic* where HIV prevalence among the general population (as measured by women attending antenatal clinics) is 1% or higher; *Low Prevalence Epidemic* where HIV prevalence among the general population is less than 1%; or *Concentrated Epidemic* where HIV prevalence in the general population is less than 1% and 5% or higher among vulnerable groups in the population (such as men who have sex with men or sex workers for example). A study finalized recently by the Ministry of Health and Population and the global organization Family Health International funded by the United States Agency for International Development (USAID) indicates that Egypt may be witnessing a concentrated epidemic among men who have sex with men, where HIV prevalence was found to be 6.2% among a sample of 267 men who have sex with men. Moreover, there are serious indicators of risk behaviours suggesting that HIV may rapidly spread if the increase of interventions does not take place urgently. Condom use rates are very low, including among populations most-at-risk such as injecting drug users and female sex workers. There are also high rates of marriage among men who have sex with men which suggests that an epidemic among this population may easily spread to the general population.\(^{96}\)

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\(^{96}\) Ibid.
4.1.2. HIV Response

Egypt is the signatory to both the Millennium Development Goals agreement and the Declaration of Commitment on HIV/AIDS. In keeping with these two agreements, the NAP within the Ministry of Health and Population and a range of national partners are working with support of international agencies to increase HIV awareness among and provide services to vulnerable populations, prevent new infections and offer counseling and care to those infected and affected with HIV and AIDS. Several programmes have been set up to accomplish these ends including establishment of anonymous voluntary counselling and testing centers across the country, providing free antiretroviral treatment to people living with HIV who are in need of it, introducing peer education programmes, as well as pilot outreach programmes for most-at-risk populations including injecting drug users and female sex workers. 97

Egypt has also finalized a multisectoral National Strategic Plan (NSP) on HIV and AIDS. The plan will be led by the Ministry of Health and Population, but other key government sectors will be involved in implementation including the Ministries of Interior and Information, the National Youth Council as well as the civil society represented by the Egypt Coalition on HIV, the Egyptian NGO Network against AIDS (ENNAA), people living with HIV and others. Action areas highlighted by the NSP include:

1. Prevention of new HIV infections
2. Prevention of mother to child transmission
3. Prevention and control of sexually transmitted infections
4. Care and support for people living with HIV
5. Strengthening the HIV surveillance system
6. Strengthening the programme monitoring and evaluation system. 98

98 Ibid. p.7.
The average amount of funds dedicated to the HIV response in Egypt is US$ 11 million. US$ 8 million comes from the Ministry of Health and Population. As for donors contributing to the response, they are currently USAIDS, the UN and the Ford Foundation.\textsuperscript{99}

In an attempt to explore the potential HIV vulnerability of some male sex workers in Egypt and needed strategies for intervention, informants in this study were asked about their knowledge, attitudes and practices related to HIV, behaviours that could put them at risk of infection, as well as issues that inform their sexual behaviours with clients including engagement in safer sex\textsuperscript{100} practices.

### 4.2 HIV-related Knowledge, Attitudes and Practices among Male Sex Workers

#### 4.2.1 Knowledge about HIV and AIDS and Self Assessment of Risk
The level of knowledge related to HIV and AIDS varied among informants. While some had very poor knowledge about HIV, others were relatively more informed. However, nobody had complete knowledge about HIV, its modes of transmission, and nobody knew anything about its symptoms. Furthermore, none, except Salem and Bahgat, knew that there is a difference between the terms HIV and AIDS, and even those two did not really understand what the difference was about. For all the others, when speaking about symptoms or modes of transmission they were all mistakenly referring to AIDS. Anyway, all informants were aware that sexual intercourse, in one way or another, represents one mode of the virus transmission and that condom use is necessary for preventing transmission. However, most underestimated their risk of infection, a point I will later address in more details.

For Seif, transmission could be through oral sex and anal sex when one takes the receptive role. He also had misconceptions about symptoms. His reply was, "I heard about AIDS. It is transmitted through sucking or if a person is not clean in his genitals (when asked what 'not clean' meant, he said when one has

\textsuperscript{99} Ibid.

\textsuperscript{100} Safe sex practices include consistent condom use and non-penetrative sex. In discussions related to this topic I was only asking about condom use.
discharges that looks like soap) but I don't know anything else about it”. Regarding symptoms he said, "The body turns blue and looks like a stick and under the eyes it is black."

Seif did not consider himself at risk of infection since he does not practice receptive oral sex, nobody penetrates him (that was the case during the first interview and not recently) and he is always using condoms.

For Karam, transmission happens through having sex with more than one partner consecutively. As stated, "I know nothing about AIDS. I heard it's transmitted if when one finishes with me I go and do it with another and then another and then another. I heard about AIDS from the guys who stand in the street. " Karam could not mention any symptoms. However he did recognize his risk of being infected but said he does not care since he prefers death to the situation he is in.

Salem was aware of all means of HIV transmission except mother to child transmission. However, he stated that if a person has strong immunity, he will not be infected. He knew that there is a difference between HIV and AIDS but did not accurately comprehend the difference. He did not know about any symptoms and said that AIDS does not appear on the person except after 20 years. When asked if he thinks he is at risk of HIV infection, he said "I know I'm at risk but I think I'm at more risk when I sleep with Europeans or Americans. For Egyptians, I am at risk only if I sleep with those who are promiscuous".

When asked about his knowledge of HIV or AIDS, Taher stated, "I heard about AIDS but I don't know what its harms are. It comes from infected blood and sexual intercourse. I don't know any symptoms or what is the window period, and I know that a condom would protect me." Taher further stated that he is not at risk of infection since he uses condoms.
For Shehab, he knew that transmission could be through infected blood and sexual intercourse but did not know much more than that. As replied, "AIDS causes death. I know it could be transmitted through blood. I once read in the newspaper that some people in Egypt carried syringes with AIDS and went on injecting people with it so that they would get AIDS. I hear from clients that AIDS is transmitted through sex."

When asked about his self assessment of risk he said, "Why? All the people I know are not ill".

Aziz said "AIDS is a fatal disease" and mentioned that transmission could be through sex. However, he harbored some misconceptions about the means of transmission including "eating from the food of an infected person or hugging him".

Finally, Bahgat stated that he knows HIV could be transmitted through sex and transfusion of infected blood and that there is a difference between HIV and AIDS; "Of course I know about AIDS and know that it comes from sex and from blood transfusion. I know there is a difference between HIV and AIDS but I don't know the difference. I know it has to do with the immune system but I don't know how it works."

Bahgat denied being at risk of infection saying that he takes his precautions through using condoms most of the time and, when not using condoms, by using antiseptics before and after intercourse.

None of the informants had ever tested for HIV and all denied knowledge of a person who is living with HIV or AIDS.

### 4.2.2 Attitudes towards People Living with HIV

Most of the informants showed stigmatizing attitudes towards people living with HIV. When asked if they would deal normally with a person living with HIV or care for a family member who is HIV - positive, the answers were as follows:
"The limit of God is between me and him. God protects us from his evilness." Seif

"I would not deal with anybody who has AIDS. I would take care of him if he's in my family but not a friend." Karam

"No. I would fear from him". Taher

"No. If I knew someone like that I will not deal with him from the beginning. Even if he's from the family he should go to hospital". Shehab

"No, if he is my relative I'll take him to hospital". Aziz

The two participants who did not have stigmatizing attitudes towards people living with HIV were Karam and Bahgat. Their answers were as follows:

"It would be normal to talk to a person living with HIV, eat with him and care about him. We have the same wound." Karem

"I can take care of a person living with HIV but I wouldn't sleep with him and I would try to avoid any blood contact. I wouldn't use his things like his clothes or his towel or his spoon as his mouth might be injured". Bahgat

4.2.3 Sources of Information about AIDS

When asked where they get their information about AIDS from, the most commonly stated source was clients. This was followed by TV, radio, magazines and friends. Moreover, Aziz mentioned that AIDS is sometimes discussed in Church.
Salem further stated that there are centers that provide information about AIDS, but he feels embarrassed to visit these centers; "There are centers but I don't like going to them. I feel embarrassed to ask about AIDS. They will tell me what do you have to do with AIDS? Do you practice sex?"

4.2.4 Knowledge of STIs

In addition to HIV, there are over twenty diseases that could be transmitted through sexual intercourse including gonorrhea, syphilis, Chlamydia, herpes and hepatitis. Some of these sexually transmitted infections can be transmitted more easily than others, and the presence of one of them can increase the likelihood of transmission of another. For example, HIV is transmitted more easily when one or both sexual partners has another STI which causes an ulcer or open sore through which HIV can be transmitted.\(^\text{101}\)

In this research, most informants did not believe they could contract any disease from sex. Only Bahgat was relatively informed about STIs. Some knew nothing about STIs, most did not know about symptoms of STIs and all mentioned never having an STI before.

After listing to them the different symptoms of STIs, Seif and Karam said they know that some people might have urethral discharges but they stated that they know no names of STIs or what their other symptoms were.

Salem previously saw urethral discharges from one of his clients and mentioned the name of syphilis. Taher said he knows nothing about STIs and Shehab mentioned Gonorrhoea, which was experienced by one of his friends. Aziz mentioned that he does not know about STIs but sometimes feels pain in his penis when it is erected. However, seeing that the pain "ends alone" after few days, he does not seek treatment. Bahgat knew about Gonorrhoea and Syphilis and some of their symptoms as they were experienced by some friends.

4.2.5 Condom Use

All informants use condoms and know that condoms can prevent diseases. However, the only one who reported consistency in condom use is Taher. All the others do not use condoms consistently and some of them do not use them unless requested by clients or based on the type of client or the type of sexual practices performed. Moreover, none of the informants had heard about or ever seen the female condom, which would be useful to use by receptive partners.

Seif does not use condoms except with anal sex because he believes that AIDS is transmitted "only through the anus". Accordingly, he does not use condoms when sexual partners are females; "I don't use condoms with the two girls I know because AIDS cannot be transmitted through the vagina".

Karam does not use condoms except when he sees that a client is clean. When asked what he means by "not clean", he said when the client's pubic hair is dirty or when he has white spots on his skin; "I don't put on condoms when I see that the client is not clean. If the client is not clean, I tell him to get a condom and avoid letting the place where he has white spots touch my skin or my face because if the place where there is a spot touches my body I will have spots too. I also don't put on condoms with married men. Because they are married, they take good care of themselves".

Salem always uses condoms with non Egyptians. With Egyptians, he uses them only with those he thinks are promiscuous and his regular clients fall under this category. "One of the kadaina told me I always have to use condoms. I always use them with foreigners. With Egyptians, I use them only with those who are Atateen (promiscuous)".

Shehab does not prefer using condoms and does it only when his clients ask him to; "I don't like putting it on. Even when I fuck the woman living with me I never put it even when I do it from the back. I never ask clients to put on condoms but I put it on when they tell me to put it on. I feel nothing when I use condoms. I
like to feel the flesh over the flesh." As Shehab does not like using condoms in personal sexual relationships, he also does not use them with female sex workers. Shehab also noted that he does not use condoms with his wife and in that case he further attributed condoms with pregnancy. "May wife is at home and she's clean and I am intact. Why do I put it? She is also putting a coil".

Like Shehab, Aziz does not like using condoms but does it when clients ask for it or when he has sex with women he is suspicious about. "I use it with women I suspect they have something, when she doesn't look clean".

In contrast with Shehab and Aziz, Bahgat always asks clients to use condoms. However, with some regular clients he does not use condoms because he views them as "clean". "With particular clients I don't use condoms. I know them and I know that they are clean and use dettol. They don't use it because they don't like it. …If one of the clients who are dear to me refused to use condoms I won't insist on using condoms because I love him. But this happens rarely".

4.2.6 Who Buys Condoms?

Most informants stated that they do not buy condoms but depend on clients or friends in getting them. Those who could buy condoms by themselves are Seif and Bahgat, and the latter was the only one who was carrying condoms with him during the time of the interview. One reason stated for not buying condoms by the sex worker was embarrassment. As mentioned by Salem, "I always get condoms from friends. I shy from going to the pharmacy and asking for a condom myself". Another reason could be lack of desire for condom use, which is the situation of Shehab and Aziz.

All informants stated that condoms are cheap and with affordable prices.
4.2.7 Group Sex

Four informants, namely Taher, Shehab, Aziz and Bahgat, reported involvement in group sex. However, the main issue that is of concern in this regard is that all noted that new condoms are not necessarily used when partners are exchanged, a situation which increases the level of risk for partners involved in group sex.

As stated by Taher, "I sometimes participate in group sex with two other friends who do not like using condoms. We are three and we meet with other three... We exchange partners but I don't change the condom I use when I finish with one and start with another."

Shehab, on the other hand, said, "Yes, we're sometimes many and this is a party and we take good money for it because it becomes a deal. I can take 300 from this. We could be 10 or 5. I was introduced to Bahgat there. In such parties people always use condoms but they are never changed unless they get broken". The replies of Aziz and Bahgat were very similar to Shehab's and they engage in the same group sex parties that Shehab attends to.

4.2.8 Use of Lubricants

All sex workers, except Salem and Aziz, stated that they use lubricants for intercourse. Seif and Karam stated using Vaseline, Taher stated using shampoo, while Shehab and Bahgat said that different clients use different lubricants including hair crème, Vaseline, and KY Gel, which is the most expensive.

4.2.9 Presence of Personal Sexual Partners

Four informants stated that they currently have personal sexual partners from whom they receive no payment. Salem has two personal male partners, Shehab has a girl friend and Bahgat has a wife. None, except Salem, uses condoms with his personal partners on the assumption that they all "clean".
4.2.10 Recreational Sex outside Monogamous and Paid Relationships

Informants were asked if they were engaged in non-work sex (which could be called promiscuous or recreational sex) aside from monogamous relationships and all of them confirmed that they do. Taher in particular mentioned that he practices sex with many young men without payment yet said they are too many to count. As he stated, "I have sexual relations with many people but I don't remember how many they are. I could have more than one in the same day. God has given one health." However, he said he always uses condoms with these partners.

Shehab and Aziz mentioned that they are friends with some female sex workers with whom they could practice sex without payment and Salem said that he sometimes gets involved in such sex to prove to his friends that he is interested in practicing sex with men with out receiving money.

For Bahgat, since he is primarily interested in having sex with men, he is not so keen about receiving payment but does not refuse to get paid when there is an opportunity to get money.

Furthermore, Seif stated that there is an infamous cinema in one of the popular areas in Cairo, where men seeking to have sex with men go to practice sex, and that he could run into men in the street and have sex with them without payment because he would have a desire for them.

Condom use in this type of sex varied with the different perceptions informants had for their necessity of using condoms depending on the type of sex performed and the type of partners (clean, promiscuous, etc).

4.2.11 Drug Use

Given that drug injection using shared injecting equipment can result in HIV transmission, informants were asked if they ever injected drugs and none of them reported that he had. Nevertheless, some of them
confirmed their use of alcohol and other recreational drugs such as hashish, opium and bango, which are smoked.

4.3 HIV Vulnerability

From the above, one can conclude that although measures for HIV and STIs prevention are generally adopted by the interviewed male sex workers, aspects of exposure to the risk of HIV infection persist. Although all informants know about the importance of condoms, most of them are not using condoms consistently. Reasons presented to justify non adherence to condom use at times are either related to personal dislike of condoms or attribution of risk to only certain types of clients, partners and sexual acts. Furthermore, some informants are particularly promiscuous and have multiple sexual partners who are not necessarily clients.

Another challenge to safer sex facing some sex workers is engagement in group sex without changing condoms when switching sexual partners. A third challenge relates to the use of Vaseline as a lubricant by some sex workers and clients. Oil–based lubricants such as Vaseline should never be used because they destroy the latex of the condom\(^{102}\) and thus makes it useless. An additional challenge is the use of recreational drugs which can lower men's self-consciousness and make them less likely to practice safer sex.\(^{103}\) Lastly, limited knowledge about STIs and their symptoms, in addition to shyness from exposing one's sexuality to others, represent obstacles against seeking any needed treatment.

In the remaining part of this chapter, discussion of safer sex will be placed in a wider framework that analyzes how the different meanings sex workers give to commercial sexual encounters affect their sexual behaviours with clients and accordingly safer sex practices.

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\(^{102}\) International HIV/AIDS Alliance. Ibid.

\(^{103}\) Ibid.
4.4. Meanings behind Sex Work and Ensuing Sexual Encounters

Browne and Minichiello have argued that "the various social meanings male sex workers attribute to having sex, their typologies of clients, the psychic contexts of male commercial sex" are all issues that inform safer sex interactions and sexual behaviours. According to Browne and Minichiello, there are four features that shape the sexual encounter. These comprise "the physical context, the participants, the interaction between the participants, and the scenario or psychic context". They argue that sociological research has emphasized that safe/unsafe sex occurs at the level of interaction between sexual partners and hence sex work should be conceptualized as an interactive and open process, where sexual behaviour has a negotiable nature. The framework that should be applied in this regard is interaction theory which argues that subjective meanings influences negotiations between people and allows for sexual negotiations to be studied as "communication through which intentions and actions are negotiated through continuous verbal and non-verbal dialogues". Such analysis does not only look into where sexual work is spatially located but also "how the male sex worker's perception of self and clients influences the types of interactions sex workers have with clients, and the way in which processes of power and control are exercised".

In this study I tried to understand the meaning of having sex according to each informant, how different types of clients pose different levels of risk to safer sex practices, the psychic context of the commercial sexual encounter –which involves engagement in internal thoughts as well as discursive dialogues with clients before, during and after sex, as well as safer sex interactions between the workers and their clients.

4.4.1 The Meanings of Having Sex

The meanings given by some informants to the act of having sex were clearly formative of the way they conducted themselves during sexual encounters. A number of meanings were attached to having sex. These included money, the need to feel love and kindness, interest in sex, as well as sexual release. The meanings

105 Ibid. p. 600.
mainly differed based on who the partners were-clients, personal partners and partners of promiscuous relationships.

"Sex for me is love. But when it comes to clients, it is money. They will do it with me or without me and they will pay money for that so why don't I take this money." Seif

"Is sex related to love? No, I stopped loving anybody. You pay me I will go with you, you won't pay, it's over." Karam

"Sex is money. But when I do it with my personal partners it's about feeling tenderness and compassion" Salem

"It's about sexual release." Taher

"I love doing sex in general but with women. With men it's only for money or for humiliation. With women it's lust. With men it's money." Shehab

"I love women. With men it's money." Aziz

"No. This is not work. Sex is something I love doing and for money I take it as it comes". Bahgat

The ways in which some of the informants defined sex represented an essential part of their ability to practice either safe or unsafe sex. In this regard, condom use sometimes demarcated sex that is done for money from sex that is done for other personal reasons including love, desire or sexual release. As previously elaborated, Aziz and Shehab do not use condoms in personal sex because they do not like it. However, they have to use condoms in commercial sex when this is demanded by clients. Moreover, Bahgat uses condoms most of the time with his clients but does not use it with his wife.
4.4.2 Types of Clients as Perceived by Sex Workers

It was difficult to get from informants a classification for clients according to type and hence an understanding of how different types of clients can pose different levels of risk to safer sex. Not all informants were able to give detailed information about their perception of client types or how this would lead to safer sex. However, some did refer to certain characteristics of clients that could affect the sexual encounter in one way or another. For example, Karam mentioned that he could stop the sexual transaction with a client if he felt that he is violent and aggressive or if he found him not clean. He also noted that clients who are married are always clean because they always "take care of themselves". With clients he considers "clean", Karam does not use condoms.

Salem mentioned that he does not take old clients unless he is in great need of money and does not accept ugly clients and "would never take them even if they will give money". He also noted that foreigners are the ones who often use condoms and that he uses condoms with Egyptians who are promiscuous.

Shehab indicated his preference for clients who are "cool", "calm", "take their time in entering the mood" of doing intercourse and "do not get upset" when he takes his time to penetrate. He disfavors those who get quickly aroused saying "I don't like clients who start immediately after we enter". Yet he did not link safer sex with any type of clients.

For Aziz, he is completely indifferent about the clients and for him "they are all the same and the important thing is money". As for Bahgat's preferences, it depends on whether he takes up the passive role or the active role; "If I'm the mashwi (active) I like the young ones more, if I'm the maaly (passive) I like the experienced as they are easier to deal with".
Based on the above, we may also suggest that sex workers base their classifications and preferences for clients on their marital status, age, cleanliness, appearance, quickness in reaching orgasm, as well as violence or aggressiveness.

4.4.3 The Psychic Context

As explained by Browne and Minichiello, the psychic context refers to the creation of "an erotically charged atmosphere which consists of fantasies and erotic thoughts or acts that may be shared or secretly acted out in the mind, verbally negotiated or emerge spontaneously as part of the sexual action". The psychic context also involves engagement in internal or discursive dialogues before, during and after sex. These dialogues "create a frame of reference that people use to reflect on, critically analyze, judge and understand their experiences".106

One of the important aspects of the sex worker's internal dialogues is "sussing out clients", which involves "an intuitive, nonverbal, perceptive assessment of who the other person is, what they want".107

Most informants in this study indicated that they can "suss out" clients for their sexual preferences and other potentialities using their senses. Through sussing out clients, informants indicated that they can understand the type of sex that will be requested, if there is potential for violence or if the client would be unclean and thus decide on whether to go on with the transaction or refuse it.

"I can figure out if the client is roguish or takes drugs. I look and know. It shows from his eyes' look if he's kind or if his way is bad." Karam

"I can know what type of sex he wants from his gaze and from the way he speaks. It shows on people." Salem.

106 Browne J., Minichiello V. op. cit., p. 611.
107 Ibid. p. 612.
"I assess them out for their wealth. I know who can pay well and who can't and I set the price accordingly". Taher

"We know the client from the way he looks and the way he dresses". Aziz

"We know each other and we have our signs. This requires experience. Some people I read immediately and know whether they like to penetrate or receive. Other people I know they have to do with the system but I don't know whether they are like this or like that. I stopped going with people I don't know or suspect". Bahgat

With regard to thoughts during sexual intercourse with clients, they ranged between thinking about how to keep the client pleased, concentrating on things to help the sex worker remain sexually aroused, finishing with the client quickly, and blaming oneself for involvement in male sex work. Thoughts after intercourse were sometimes negative and entailed regret for a number of informants.

"I think about how to finish quickly with the client and sometimes I ask myself what am I doing? Sometimes after I leave I feel disgusted from myself and when I finish I feel depressed". Karam

"My concentration is on the client and how to make him happy. I laugh and look at his face and do the positions he requests. ...Sometimes after I finish I go on blaming myself and cry." Salem

"During the encounter I think about how to satisfy the client so that I would find him again." Taher

"I concentrate with the client. Sometimes when I'm not in the mood I think of something that would keep me aroused and hence the penis stays erect." Shehab
Discursive dialogues with clients before and after intercourse ranged between non verbal interaction, laughter and jokes, and discussion of personal problems and concerns.

"Our talks are often funny and full of jokes and laughter and nothing serious is being talked about. But sometimes people like talking about their personal problems. One client once took me to his apartment and introduced me to his wife as a friend and asked her to leave us alone. His wife was so beautiful. I told him why do you do that and you have your wife with you. He said I don't want her. He is not happy with her because she doesn't stop demanding things from him.... Some clients regret what they are doing. One day a client after finishing with me jumped from beside me and shouted 'Oh Allah please forgive me, what made me do that!' When he said that, I shouted loudly at him and got all the neighbours around to scandalize him. He does what he does and then says Allah forgives me!" Karam

"Some clients just finish and leave. Others keep talking after and before sex. After finishing, one could tell me are you happy? I hope I didn't bother you nor did anything that bothered you." Salem

"Before intercourse all talks are about sex. I tell the client today I saw a film and they did this and that in the film in order to get him aroused. After intercourse we laugh and joke and so forth." Taher

"Before intercourse it's normal talk like I miss you and what's the news. After intercourse, the client sometimes talks about his personal life". Shehab

"Sometimes the client tells me he's upset because he does that and this would be the last time, but he returns again. It's an addiction ya basha... Before intercourse, there isn't much talking but during intercourse talks are dirty and sometimes about love. After sex, it's either jokes or talks about personal matters. One is upset with his wife, one is upset from his work and so on." Aziz
"We talk about everything that concerns us or concerns our personal life. There is the one who is upset with his wife and the one who has problems at work. Such talks are before and after intercourse". Bahgat

Some informants were further asked about what happens when the client does not state straight out what he wants in terms of specific sexual practices and how the sex worker commences in this situation. Their answers were as follows:

"If the client did not state what he wants I do what I want but I don't put anything in my mouth (he means he refuses oral sex). I start with kisses and hugs and if I have a nice movie of dancing I show it. We agree from the beginning that he's the one to penetrate". Karam

"I usually ask the client about what he wants. If he tells me do what you like I start with hugging and fore playing until we get aroused and sometimes we watch pornographic movies for the khawalat and do like them". Shehab

"I ask him what he wants and if he did not answer I cuddle him and then do with him". Aziz

"We always understand each other and from experience I know what everybody wants." Bahgat

Informants were asked if clients ever demand the creation of unusual erotic atmospheres or particular acts and some stated that there are clients who like dressing like women, demand to be beaten and called names or request the performance of plays.

"Some of the clients like being treated as prostitutes and like being insulted and called names. Others like being treated as normal women and there are those who see themselves as romantic." Shehab
"Sometimes we play that we're in prison. At times I become the prisoner and at times the jailer. The jailer rapes the prisoners. Or we pretend to be in a Cabaret and act like prostitutes in the Cabaret." Bahgat

In terms of safer sex interactions, it has previously been indicated that it is not necessarily the sex workers who request or negotiate for condom use but the clients are sometimes more informed and are the ones who demand sex workers to put on condoms. Furthermore, as noted by most informants, it is usually the clients who bring condoms with them. This does not, however, negate the fact that some clients are completely unaware of their risk to HIV or any other STIs and are not interested in taking the necessary precautions to avoid disease transmission. As stated by Salem when asked about AIDS-related concerns of his clients, "Nobody has ever mentioned anything about HIV or AIDS. It's not in their minds.... For condoms, it's Europeans who use them".

Informants who stated that they sometimes request clients to use condoms were asked about the modes of interaction they adopt in order to achieve the latter's compliance. From the different modes discussed by Browne and Minichiello, three modes of interactions were identified by informants to ensure condom use. These are the "educative" mode, the "challenge", and "walk out modes".

In the "educative mode", the worker becomes responsible for teaching clients about the necessity of condom use to avoid infections and remind them of the risks of unprotected sex. In the "challenge mode", the sex worker responds to the requests of clients for not using condoms "with a challenge that involves throwing the ball back into the client's court by making them think about what they're asking for and the risks involved". Challenging often occurs in reply to "clients making statements that are based on false beliefs, such as 'You know I'm clean. I'm married'. Here the sex worker challenges the assumptions that underlie such statements, convincing the client to recognize the falseness of his claims "in light of the situation he is in".

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Finally, the "walk out mode" refers to ending the encounter with a tension between both partners. It is used when the client insists on unsafe sex after the worker has tried other modes.

"I first tell them I use condoms. If they say no I tell them this is safer to avoid diseases". Seif

"When I see that the client is not clean I tell him to put on condoms. If he insists on not using it I leave." Karam

"If the client said no I first tell him it's important for diseases. If he insists on not using one I leave him. My health is more important than money." Salem

"I ask clients to use condoms. If they refuse and say they have nothing, I tell them it would be healthy since I don't know what I could be having or what you could be having so they say it's good that you are concerned about this and accept to use condoms." Taher

### 4.5 Power Relationships between Sex Workers and Clients

Based on the informants' descriptions of the different aspects of their interactions with clients, their negotiations for prices and for particular sexual acts as well as the negotiations of few of them for safer sex, one may claim that power between sex workers and clients tends to be interactive and reciprocal and that sex workers are not necessarily in a subordinate power position with respect to their clients just because of the clients' status in a higher social hierarchy or the sex workers' material gains from clients. Sex workers generally have a choice over the kind of sex practices to perform, the kind of clients to accept and are consistently involved in payment and, to some extent, safer sex negotiations. The kind of friendly and personal discourses and interactions that sometimes occur between clients and sex workers also suggest a level of mutuality in relationships.
This mutuality was perceived by Salem and he expressed it when he stated what he thinks about his relationships with his clients; "we are equals. We're both using each other. I use them by taking their money and they use me by having sex with me".

However, it should concurrently be acknowledged that informants may have claimed to have greater control over their sexual encounters than they actually have. Only a few mentioned that they try to persuade clients for condom use and, in fact, some do not use condoms unless they are asked by clients. Furthermore, some are not particular in their choice for clients as long as they receive money. One may suggest that the informants' need for controlling their self presentation could have partially informed their answers.

As a general conclusion, it could also be argued that power relationships between sex workers and clients could be influenced by gender ideologies more than by class. Those who are passive or receptors in the sex act are generally considered inferior to those who penetrate regardless of their status as clients or workers. This point was clearly reflected in the statements of the sex workers who took up the male role in sexual encounters. When asked about their clients' attitudes towards them, Shehab, Aziz stated the following:

"I look to my clients as khawalat, whereas for them, I'm a man. I feel superior to them because I'm a man."
Shehab

"My Clients look at me as their man" Aziz

It is clear from the previous results that nearly all interviewed sex workers are vulnerable to sexual health and HIV problems and thus require targeted interventions to address their vulnerabilities. The following chapter will summarize the results of this research and suggest strategies for intervention that would aim at
reducing the vulnerability associated with individual risks as well as the overall societal determinants of vulnerability in order to respond to HIV infection and support those living with it.
5.1 Summary of Results

This research has produced some data regarding the etiology and risk context of male sex work among a small sample of male sex workers in Cairo and Alexandria. It also provided an understanding of the sociodemographic characteristics and the living conditions of this population. Male sex workers have rarely been studied in Egypt before, yet are believed to be vulnerable to many social ills including HIV and STI infections, abuse by figures of authority, community and family members as well as other psychosocial problems. In this chapter I will be highlighting some of the most important findings of this research, based on which suggestions for possible interventions will be proposed.

*Etiology*

Although money remains the most important reason influencing the decision of some young men to enter sex work, this study has confirmed that there is also a strong link between child sexual abuse and engagement in sex work. All 7 informants interviewed in this research narrated early childhood experience of sexual abuse which ranged between rape and molestation, and pornography and exposure to the sexual acts of others. Other secondary factors included unemployment, low levels of education, and other types of childhood abuse including physical, psychological and emotional abuse as well as family neglect. Symptoms of emotional abuse were reflected in low levels of self esteem, high levels of self stigma and suicidality among a number of informants.

*Socio demographic characteristics*

The study has demonstrated that male sex workers are not necessarily young people as they could be from different age categories. The youngest informant in this study was 17 years old while the oldest was in the late 30’s. Differences were also found in the levels of education, sources of income and other characteristics, yet a commonality between nearly all informants in the sample was the denial that sex work
could be considered as a profession. Sex education was nearly non-existent among them all as all received their information about sexual issues from friends or from pornographic movies they used to watch. Another commonality was that they all entered into sex work around the same age.

**Sexual identity**

The study has found that while some sex workers preferred having sex with women rather than men, some favoured only men. With regard to sexual identity, sex workers mainly identified themselves following the "feminine vs. masculine" pattern where sexuality is defined in accordance with the domination by or reception of the penis in the sex act. Within this approach to sexual identification, those taking up the feminine role are always looked upon with inferiority and degradation and are the ones suffering most from homophobia whether on the community level or the individual level. Those who perceived themselves negatively also seemed to suffer from internal stigma that is related both to having sex with men as well as involvement in sex work.

**The sex work experiences**

Different modalities of sex work were reported ranging between street sex workers and sex workers arranging for their business through friends and regular clients by mobile phones. The street sex workers were generally younger and had less formal education, while those who were more independent were economically more settled and had been working longer in the sex industry. More significant differences, however, were found in terms of payment received from sex work. While some informants seemed to gain good sums of money from sex work, it was less beneficial for others. In terms of payment, pricing was based on different factors including the nationality of the client, the type of sex act, the client's apparent financial situation and the overall setting.
Another important finding is that many, if not most, clients of sex workers are married. This should be an issue of concern since it suggests that in case there is unprotected sexual intercourse and HIV infection clients may transmit HIV to their wives and thus infection would be spread from only a subset of sex workers to the general population.

Difficulties encountered within the sex work context included exposure to thieves, police harassment, and fear from homophobia. Fear from police was not only confined to legal prosecution but sometimes different types of abuse. However, those most exposed to police abuse are the effeminate sex workers who are identified by the way they act and walk.

**HIV Vulnerability**

Although all informants recognized that HIV could be transmitted through sexual intercourse and all knew about the importance of condoms, nearly all seemed vulnerable to HIV and all, except one, were inconsistent on condom use. Non adherence to condom use was either related to personal dislike of condoms or limited understanding about situations of risk. Some informants attributed HIV risk to only certain types of clients, partners and sexual acts. Furthermore, some informants were particularly promiscuous and were not keen on using condoms with their multiple sexual partners.

Another issue of worry is involvement of some respondents in group sex without recognizing the necessity to change condoms when switching partners. Such a situation would particularly put receptive partners at risk of infection in case it's only the penetrative partners who are putting on condoms. A solution for avoiding infection through group sex would be for receptive partners to put on female condoms. However, female condoms are not available in Egypt and none of the informants have actually heard about them.
Other possible factors of vulnerability associated with some sex workers were the use of oil-based lubricants that could tear condoms such as Vaseline, the consumption of recreational drugs that lowers self consciousness, as well as embarrassment and limited knowledge of STIs, which could hinder the seeking of treatment.

**Meanings Related to Sex and Interaction with Clients**

The study has fairly confirmed that the subjective meanings male sex workers relate to the act of having sex, their typologies of clients and the psychic contexts of commercial sex- which involves internal dialogues and discussions with clients- are all issues that inform their safer sex interactions with clients and their sexual behaviours. In this context sex workers were sometimes able to adopt interaction strategies to ensure safe sex with clients. Moreover, the type of dialogues and ways of interaction with clients described by informants suggested that power relations between sex workers and clients are of an interactive and reciprocal nature. However, these findings were expressed from the point of view of sex workers and cannot be confirmed without an examination of the perspectives of clients. A parallel understanding of clients' engagement in commercial sex would give a more complete understanding of sex work interactions complexities.

**5.2 Implications**

While undertaken with the goal of providing absent information about the presence and context of male sex work in Egypt, this research does not claim to make any generalizations nor provide a complete picture of male sex work in the country. Its findings can only be regarded as results with which a new topic is opened. Nevertheless, they still reflect the situations of some Egyptian male sex workers and can form basis on which recommendations can be suggested.

This study highlights the vulnerability of some Egyptian male sex workers to sexual health, financial and psychological problems, and exposure to violence, stigma and homophobia, and hence a need to reinforce
programmes that address these vulnerabilities. Additionally, it is important to acknowledge that there is a broad range of issues of vulnerability that can only be addressed at the wider societal and structural levels. These issues would take a long time to resolve and would include society level homophobia, childhood maltreatment and lack of formal sex education in Egypt.

The issue of men who have sex with men in Egypt and the rights of these populations is particularly problematic and controversial. Men who have sex with men in Egypt face strong social stigma and homophobia and male sex workers would be facing a double stigma due to their involvement not only in sex work but also in male-to-male sex. This would make it impossible to try addressing the issue of male sex work without resolving the wider issue of male-to-male sex which requires additional work on the societal and political levels. Furthermore, as suggested in this study, male sex workers seem to refuse identifying their engagement in paid sex as work and prefer to name this activity as a source of income. As such, it may be more effective in Egypt to design interventions targeting men who have sex with men in general and within these interventions design programmes that are particularly tailored to male sex workers.

In the following section I will present some of the lessons learnt from interventions targeting men who have sex men in other countries, which I think are useful to guide interventions for this population in Egypt. Subsequent to that, I will present the general guiding principles to respond to HIV and male sex work based on UNAIDS guidance note on the subject. Finally, recommendations will be more focused around the particular results of this study and what could be more feasible to implement at the time being in Egypt.
5.2.1 Lessons Learnt from Programming for Men who have Sex with Men

Working with Governments and Health Authorities

The first lesson learnt in HIV programming for men who have sex with men is that such programming should be carefully tailored to local cultures. Instead of depending on approaches based on patterns of male-to-male sexual behaviour found in Western Europe and North America, local sexual minorities must be identified and involved in developing the programmes that should target them. In the case of Egypt, these would include the Kadaina and the Baraghla.

The second lesson learnt is that work should start in collaboration with government and health authorities based on assessment of the local environment. In a country like Egypt where the political environment tends to be very restrictive, it would be useful to handle the issue with caution. Organizations aiming at targeting men who have sex with men should be watchful and recognize tense or volatile situations, maintaining a lower profile as needed. Alienating the authorities or aggravating them may make work more difficult. Once a productive relationship has been established with the government and tensions are resolved, organizations can suggest that the population in question participate in evaluating existing policies and recommending changes if necessary. This is because a basic principle for effective interventions is to involve the targeted population in the design, implementation and monitoring and evaluation of programmes. It would additionally be necessary that non governmental or community based organizations request official support for programmes related to men who have sex with men, including protection of outreach workers.

Working with Mainstream Communities

109 Ibid., p. 13.
110 Ibid.
It would also be fruitful to work with "Mainstream Communities" or opinion makers such as media, religious leaders, intellectuals, community based organizations and development agencies to gain their support for programmes. Sensitizing these partners could assist in reinforcing links with, and acceptance by, the immediate neighbours of a project and the police. Sensitization could be done through developing training manuals for sexual health promotion of men who have sex with men and running workshops and training sessions. The media, in particular, can help changing perceptions and attitudes towards men who have sex with men and reducing stigma and discrimination since it has always played a crucial role in influencing public opinion in Egypt. The media should be trained about sexuality, human rights, STIs and HIV. However, in sensitizing mainstream society organizations should be observing and accommodating mainstream social norms and refrain from antagonizing other communities.  

\textit{Health Services}  

In terms of provision of health services to men who have sex with men, such as screening and treatment for STIs and confidential pre- and post- HIV counseling and testing and others, it might be useful to forge partnerships between organizations working for men who have sex with men and already established health care institutions for referral and support. This also necessitates encouraging and training health care providers "to adopt appropriate counseling, preventive and medial approaches" to the population in question and "to be aware of the existence of anal sexually transmitted diseases." Moreover, the capacities of public and private health care providers need to be built to offer "quality, non-stigmatizing treatment" for STIs, which would be essential for the long terms sustainability of services.  

\textit{Outreach Activities}  

\hspace{1cm}\textsuperscript{111} Ibid.  
\hspace{1cm}\textsuperscript{112} Ibid.
With regard to outreach activities, it is generally recommended that outreach staff and volunteers are themselves men who have sex with men. This is needed for reasons of programme acceptability to the targeted community and comprehension of the problems it faces. Organizations can thus recruit outreach and peer educators from the community of men having sex with men and provide them with the necessary training and support. This would additionally empower them as resource persons and contributors to the community.\textsuperscript{113}

Regarding information to be disseminated through outreach activities, it is important to make sure that the messages being delivered through different projects and programmes in the same geographical area are consistent. Given that there is sometimes overlap between men, men who have sex with men and male sex workers, there would be value in coordinating training of outreach workers or ensuring interactions between them. A number of issues should also be considered in developing such materials. Aside from providing information about HIV, STIs and methods of prevention, such material should be presented in appropriate terms and languages to avoid further stigmatization. They should promote testing as a responsible behaviour rather than an indication of high risk activity, impart information on HIV testing and counselling resources, discuss living with HIV and HIV positive sex as well as stress the importance of confidentiality. They should also present available local research findings on the knowledge, behaviours, attitudes and practices of men who have sex with men to make the community aware of the issue, and highlight local HIV and STIs prevalence of men who have sex with men, if available, to remind the community of the need to adopt measures of risk reduction. Furthermore, while materials from other countries can be adapted to save time and resources, it is essential to ensure, as much as possible, the incorporation of culture-specific visuals and language and use models from the communities under focus.\textsuperscript{114}

\textsuperscript{113} Ibid., p. 15.
\textsuperscript{114} Ibid., p. 15, 16.
Methods of outreach could include distribution of condoms, water-based lubricants and IEC materials at public events; organizing talks, workshops and group sessions; developing radio and television programmes; personal interaction and one-to-one outreach in venues popular with men who have sex with men; and establishing or using existing websites and internet facilities like chat rooms.  

It is further recommended to map venues frequented by men who have sex with men before selecting the ones for programmatic interventions. The mapping should also determine the peak hours, layout and outreach opportunities in selected venues. For outreach to be effective and appropriate and IEC materials distributed, it is essential to understand how people interact and communicate in these venues. Outreach also helps in research and data collection. Moreover, if the venues are specifically catering for men who have sex with men it would be useful to develop contacts with the owners and staff working in these establishments and involve them in the response.

Community Building and Mobilization

In some countries, including Egypt, there is a socioeconomic divide between different groups of men who have sex with men. Educated upper and middle class men who have sex with men often identify themselves with gay movements and identities in developed countries, whereas the majority of men who have sex with men from lower socioeconomic classes do not. This social dichotomy may cause frictions and disputes between groups who call for establishing a distinct identity as a starting point for programmes focusing on men who have sex with men and those who argue for programmes "within existing amorphous" groups. To solve such debates, it may be crucial to integrate into programmes "community building and mobilization" which should be led by the community itself rather than an outsider.

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115 Ibid., p. 17.
116 Ibid., p. 18.
Communities of men who have sex with men should be encouraged to develop services and programmes for themselves, with support from more experienced nongovernmental organizations.\textsuperscript{117}

\textit{Research}

Research on behaviours and attitudes of men who have sex with men should be implemented by universities, research institutions, nongovernmental and community-based organizations and in collaboration with men who have sex with men. The latter could be trained in research skills so that they can actively participate in all stages of the research process. Furthermore, needs assessment surveys should be undertaken to guide the development of services and programmes.

\textit{Advocacy}

Efforts of advocacy should target politicians, religious leaders, academia, the media, legal and medical professions as well as the public in general. Goals of advocacy could include revision of laws that could be used against male-to-male sex and enactment of protective and anti-discrimination laws for men who have sex with men to ensure their access to information and social and medical services.\textsuperscript{118}

\textit{Administrative and Management Issues}

Organizations working for men who have sex with men should be perceived as credible and trust worthy. This can be achieved by the development of "professional standards, producing regular reports and updates, and through accountability". For funding purposes, it might be better to position programmes for men who have sex with men as sexual health programmes for males or to incorporate them into male sexual health programmes. To this effect, employment of female staff can assist in avoiding harassment by authorities.

\textsuperscript{117} Ibid. p. 19.
\textsuperscript{118} Ibid. p. 21.
5.2.2 Guiding Actions for HIV and Sex Work

The above discussion has given practical options and insights into how HIV programmes for men who have sex with men could be designed and implemented. The following discussion will present the guiding principles set by UNAIDS to guide action on HIV and Sex Work. Since not all actions underlying these principles are applicable for the situation of male sex workers in Egypt, I am listing only those I believe are pertinent. For example, it would be too ambitious and unrealistic to recommend the establishment of partnerships between community based organizations and sex work networks in a country were sex work is criminalized by law and is likely to remain so for a long time.

In its Guidance Note on HIV and Sex Work, UNAIDS has identified three pillars to "provide a comprehensive rights-based, evidence informed response to HIV and sex work.”

Pillar 1 is Reducing vulnerabilities and addressing structural issues.

Pillar 2 is Reducing risk to HIV infection

Pillar 3 is Building supportive environments and expanding choices

Pillar 1. Reducing vulnerabilities and addressing structural issues

Reducing vulnerabilities and addressing structural issues related to male sex work require looking into the political, economic and socio-cultural factors that together contribute to involvement in sex work and vulnerability to HIV. These entail, among other things, addressing poverty, promoting education for all, and promoting access to decent work and alternative employment opportunities.

Addressing poverty necessitates ensuring that sex workers benefit from programmes that expand economic and social opportunities to both reduce vulnerabilities to sex work entry and to provide other alternatives to

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120 Ibid. p.4.
those who want to leave it. Development strategies, including programmes of income generation and microfinance can thus ensure sustainable incomes for individuals and households.121

Education is critical for HIV prevention as it "expands choices, reduces risks and promotes resilience". It is thus important to expand good quality education opportunities to meet the needs of children, youths and adults and advance economic independence, sexual information and safe sex practices. 122

Growth of employment and creation of job opportunities should also be at the centre of national AIDS strategies. Programmes for vocational training are particularly needed to develop apprenticeship and skills in enterprise settings as well as in the public sector. Such programmes could provide skills training to youth and former sex workers.123

Reducing vulnerabilities to entry in sex work also necessitates addressing childhood abuse as a risk factor and paying attention to the different experiences of childhood abuse as a potential of high risk behaviour. Considering that childhood abuse has been earlier associated with lifetime exposure to trauma and increase vulnerability in high risk situations, and in this study was found to predict engagement in sex work, then prevention and harm reduction strategies that screen for child maltreatment should be developed.

**Pillar 2. Reducing Risk to HIV Infection**

Reducing HIV infection and impact should be done by increasing "comprehensive, accessible, acceptable, and user friendly services" that are adapted to the local context and individual needs. Some of these services include:

121 Ibid.
122 Ibid.
123 Ibid.
• Information about HIV, human rights, sexual health, condom use, safer sex and available health services. This information can be provided through different levels including through peers, media and health professionals.

• Delivery of information about HIV, STIs and condoms to clients and others who are involved in sex work including police personnel and local authorities.

• Access to prevention commodities like good quality, free or affordable male and female condoms, in addition to lubricants and medications

• Access to sexual and reproductive health services including diagnosis, treatment and care

• Development of programmes that promote freedom from abuse and discrimination

• Provision of psychological and social support

• Access to free voluntary counseling and testing for HIV followed by social support, care and treatment of those testing positive

• Access to drug and alcohol-related harm reduction programmes

It might not be possible to provide all of these services to most sex workers in a city or country, so programmes can begin by providing them to a small number of sex workers and overtime expand to reach most sex workers. Furthermore, preliminary packages should be well designed. For example, testing should not be provided without counseling, access to treatment and psychosocial support as well as elimination of discrimination among healthcare providers. Like wise, condoms should not be delivered in isolation from clients and others involved in the sex trade. HIV services should be made available to those who buy sex and campaigns should be developed to target clients and educate them about safer sex, condom use, and health seeking behaviours and encourage them to behave responsibly toward sex workers.

125


125 Ibid.
It would also be useful to integrate HIV, sexually transmitted infections, tuberculosis and hepatitis programmes. Additionally, there should be a degree of flexibility in service hours and providers to attend to the local context of sex work.\textsuperscript{126}

Moreover, better results in HIV programming are usually seen in programmes where sex workers participate in a meaningful and voluntary way. It is thus essential to involve sex workers in the design, implementation and monitoring and evaluation of programmes. Coercive programmes to control or reduce sex work have generally not been successful and have been associated with abuse of sex workers and their families. Types of such coercive programmes that should be avoided include mandatory medical treatment and measures, forced rehabilitation, or programmes executed by police or based upon detention of sex workers.\textsuperscript{127}

Special consideration should also be given to sex workers who are living with HIV. People living with HIV in general are subjected to stigma and discrimination and in the case of sex workers living with HIV this stigma is compounded. Sex workers living with HIV should have access to a high standard of HIV treatment, care and support services in the country. For those testing positive, special support and quality counselling should be provided to address issues such as potential discrimination and loss of income. To prevent disease progression, education and encouragement related to healthy living, safe sex, development of resistant strains of HIV, opportunistic infections and ongoing transmission of the virus should be given. Moreover, health professionals and service providers should learn not to discriminate against sex workers living with HIV and offer adequate access to testing, counseling and treatment services.\textsuperscript{128}

\textsuperscript{128} Ibid.
Pillar 3. Building supportive environments and expanding choices

HIV interventions should focus on diminishing the social barriers encountered by sex workers and increasing the options available to them to "exercise more control over their own health and over their environments." Building supportive environments for sex workers entails providing them with other work opportunities and skills, addressing stigma and discrimination and reintegrating sex workers in their communities and families.

Sometimes sex workers wish to leave sex work. However, due to financial obligations and needs including, as seen in this study, lack of access to other sources of income, insufficient income to cover life expenses, repayments of debts and others, they are unable to quit sex work. Sex workers usually face multiple and complex problems that contribute to their involvement in sex work in the first place. Accordingly, the creation of alternatives to sex work and the widening of choices need to be not only of a comprehensive nature, but also attends to the individual circumstances of sex workers related to psychological and mental health, drug dependency, family rejection and legal problems.129

Sex workers have to able to choose not to engage in sex work. Their ability to make such a decision depends on various factors including "having access to alternative or supplementary income, repayment of debts, financial security, safe working conditions, drug dependency, having a secure place to live, criminal records, stigma and discrimination. Sex workers living with HIV may immediately need to find alternative employment. Assistance should thus be provided to them, including through training in "economically viable" skills.130

All sex workers face stigma and discrimination and male sex workers face a double stigma because they have sex with men. Sex workers may face rejection by their communities and hence need to be able to take

part in community life without subjection to marginalization at the economic, cultural or social levels. Barriers to the participation of sex workers in family and community life should thus be addressed.\textsuperscript{131}

5.2.3 Piloting Interventions for Male Sex Workers in Egypt

The guidelines presented above indicate that successful interventions targeting men who have sex with men in general and male sex workers in particular necessitate addressing the problem at both the levels of individual risk and the overall societal determinants of vulnerability. Programmes working on reducing HIV risk among male sex workers should work on improving access to information and quality services including of prevention, treatment and psychosocial support, which would enable sex workers to control their risk situations, and on creating an enabling environment to address the underlying factors of overall vulnerability which could include, among other things, stigma, discrimination and criminalization.

Considering the sensitivity of addressing men who have sex with men in Egypt, a pilot programme, which could cover a period of two years and which would be more suitable to manage through a Non Governmental Organization (NGO), should be initiated within an overall reproductive health package. Components of such a programme if tailored to male sex workers would include the following:

- **Obtaining basic information about male sex work settings and their social and legal contexts in order to guide the design and implementation of interventions.**

A rapid assessment or needs assessment can be conducted to collect essential information over a short period to enable an intervention to start quickly. Such an assessment is often conducted using participatory approaches which engage key actors and workers involved in sex work settings. The minimum information that could be gathered by the assessment to start an intervention include information about the different types of sex workers and clients; geographical focus; sex workers' needs, priorities and perceptions; laws and policies related to sex work; policies and priorities of funding agencies; key stakeholders and potential

\begin{footnote}
\textsuperscript{131} Ibid., pp.9-10.
\end{footnote}
partners; sex workers' demographic information; community structures and relationships; factors that could facilitate and hinder interventions, patterns of risk behaviours and health seeking behaviours; condom use and safer sex behaviours; knowledge and attitudes about HIV/AIDS and STIs; potential channels and messages for reaching target groups; services already available and their quality; and attitudes of service providers.

A rapid assessment would help obtain the basic behavioural data that would assist in the development of an evidence based pilot programme in Egypt and facilitate the monitoring and evaluation of the interventions progress.

- **Capacity building of the involved NGO**

Considering the limited capacities of NGOs in Egypt to address and reach out to male sex workers, the selection of the NGO partner would not be based on existing HIV related experience but rather on the overall openness of the NGO to work with marginalized groups and its potential for scale-up and expansion. The role of the NGO will be mostly to manage the pilot and coordinate the various services offered. Institutional capacity building should thus be provided to the NGO to enable it implement its roles, and networking should be strengthened with other NGOs that have previously implemented interventions targeting other vulnerable groups such as female sex workers, drug users and street children for exchange of experiences. The technical capacity of the NGO should be developed in the fields of HIV prevention, care and support, as well as in human rights principles and monitoring and evaluation. Building the capacities of NGOs can be taken up by UN organizations or international partners, such as the Ford Foundation, who are interested in supporting programmes for men who have sex with men whether technically or financially.\(^{132}\)

\(^{132}\) UNAIDS and Ford Foundation have recently forged a partnership to initiate a programme targeting men who have sex with men in Egypt but they are still in the planning phase.
• **Peer education and outreach**

As elaborated in this study, there is a strong social web between male sex workers that links them together and to other men who have sex with men. The pilot programme should make use of these social networks to equip some individuals involved in male sex work or male-to-male sex with the knowledge and skills to act as educators to their peers and promote risk reduction messages. Peer educators should be chosen from individuals who demonstrate the capacities to take up this role and will be responsible for reaching out to their peers in areas where they socialize.

Training for peer educators can adopt the approach of one-to-one technical support or workshops. Themes to be included in the initial training are: basic information on HIV, STIs and drug use; strategies for personal development and empowerment; dealing with peer pressure; stigma and discrimination; gender and sexuality; laws related to sex work and homosexuality; human rights; violence; advocacy; voluntary and confidential HIV testing and counseling; communication on behaviour change and development of communication materials; STI management; safe sex negotiations; and HIV related treatment, care and support.

Peer educators would reach out to their peers with information on HIV, STIs and prevention measures; high-quality condoms, water based lubricants and instructions on proper condom use. They should also inform them about available HIV services such as voluntary counseling and testing centers and STIs or reproductive health clinics. IEC materials would be utilized for outreach.

Peer educators would additionally liaise sex workers with the partner NGO and service providers and ensure that male sex workers would feel safe when deciding to access HIV related services or seeking testing. They would also report on any incidents of stigma and discrimination experienced from service providers.
Outreach should further be extended to clients and others who could be involved in the sex trade such as pimps. Awareness of clients about HIV and STI prevention, including encouragement of testing and condom use, should be raised.

- **Increasing and improving accessibility to quality services**

The social stigma, homophobia and criminalization associated with male-to-male sex and male sex work represent obstacles against utilization of services needed by male sex workers. Fear of discrimination, stigmatization and prosecution could make male sex workers reluctant to pursue health services in cases of sexually transmitted infections. For the time being, it would not be useful to establish health services that exclusively deal with the health, social and psychological needs of the targeted population, as those would unnecessarily increase the population's visibility and would be discriminatory and unsustainable. Services provided to male sex workers should be mainstreamed within existing services while improving their quality to avoid situations of stigmatization and marginalization. Such services include medical care services for diagnosis and treatment of STIs, voluntary counseling and testing centers, other specialized services like those providing psychological support, and care and support services to persons living with HIV.

Furthermore, service providers need to receive the same training on issues related to HIV including stigma and discrimination. A rapid assessment of the knowledge, attitudes and practices of service providers towards men who have sex with men would thus define the training needs for them, and define quality monitoring of the services. From another side, it is essential to involve male sex workers in defining what they view as acceptable services and evaluating the quality of those services.
Other services needed by male sex workers, which the partner NGO could be providing, include organizing illiteracy classes and skills building in areas they identify, and providing legal support to ensure the protection of the sex workers' rights and deal with cases of homophobia and violence.

- **Advocacy and creation of a supportive environment**

In the initial pilot phase, a discrete approach should be adopted in the programme implementation, while trust should be built with government stakeholders through sensitizing them about the importance of this area for programming and making them better understand their role and potential risks if this area is neglected. Constructive dialogue should be built between the ministries of Health, Interior and Justice and other concerned parties. The programme can facilitate such a dialogue and advocate for a response that has human rights dimensions. Work should particularly be advanced with the police to raise awareness about the programme area of work and ensure support for it. This sensitization could be achieved through a national workshop to advocate for a scaled-up access of men who have sex with men to care, prevention, treatment and support and train stakeholders from the government on relevant issues.

In conclusion, Egypt needs to start increasing access to HIV programming for the different sub-populations of men who have sex with men including male sex workers. Any programme to be developed in this respect will be targeting an area in the national response that represents an important gap, and if it is neglected, it might lead to the growth of AIDS epidemic. An effective response should act on the levels of individual risks and the overall societal determinants of vulnerability. Moreover, response should be advanced within the recognition of the state's responsibility to protect the rights of all people involved.
Appendix A
Interview Guide

Socio demographic profile:

1. Age
2. Level of education
3. Place of Residence
4. Financial situation/different sources of income/other occupations
5. Living arrangements
6. Marital status
7. Number of dependents
8. Sexual history
9. History of sexual and/or physical abuse
10. Sex Education
11. Self identification in terms of sex work occupation and sexual identity
12. Sexual preferences
13. Gender of personal sexual partner
14. Social networks
15. Relationship with family members and disclosure of male sex work status within the family

Sex work experience

1. Type of sex work (street work, self employed, working with sugar daddies, and other qualifications).
2. Length of time as a sex worker
3. Age of entry
4. Reason for working
5. Income generated from sex work per week or per month/ payment given at last paid sex
6. Price charged per sex act or according to type of sex.
7. Number of clients per month, per week/ or last week.
8. Presence of regular clients/ number of regular clients.
9. Age of clients
10. Occupations of clients
11. Marital status of clients? How many of the last five clients were married.
12. Contact and work venues
13. The time when commercial sex encounters take place and ways of hustling for clients
14. Type of sexual activities performed
15. Constraints to sex work
16. Homophobia experience and its effects

Points related to HIV/AIDS Knowledge, Attitudes and Practices

1. Knowledge about HIV, its modes of transmission, symptoms, means of prevention and difference between HIV and AIDS.
2. Self assessment of risk for contracting HIV
3. If ever tested for HIV. If yes, where and when.
4. Knowledge about anybody who is HIV positive.
5. Acceptance to interact with an HIV positive person. For example, acceptance to care for an HIV positive person, eat with him, touch him...etc
6. Sources of information about the disease/ Preferences regarding sources of information.
7. Knowledge about and usage of condoms
8. The relationship between asking clients to use condoms and condom use by the latter. If last week is considered, how many sex workers used condoms when all clients were asked, when only some were asked and if they asked none, how many clients used condoms.
9. The relationship between condom use and type of sexual act.
10. Buying sex, whether from other male sex workers or from female sex workers on the streets and condom use in these encounters.
11. Participation in group sex and condom use
12. Condom use with regular clients, and according to the type of sexual acts

13. Condom use with personal partners (lovers and other non-paying partners) and reasons for non-use

14. Who buys condoms (the sex worker or the client)? In case it is the sex worker, where does he get the condom from and does he consider it costly.

15. If the sex worker is carrying a condom with him at the time of the interview.

16. Types of lubricants used and accessibility to water based lubricants

17. If condom breakage happens. If so, what are the factors accounting to that problem.

18. Occurrence of forced sex or rape/harassment or physical violence on the streets.

19. If ever injected drugs or if currently injecting.

20. Alcohol use with clients

21. Knowledge about symptoms of STDs or existence of the symptoms:

22. Seeking treatment for STDs. How long after the last bout of STD, the first choices for treatment and the costs.

The social meanings behind male sex work from the perspectives of male sex workers and the implications these meanings have on sexual behaviour and negotiations of safe sex with sexual partners

1. The meaning of having sex

2. Client types and how this affects the encounter.
   A. Clients’ concern over HIV and STDs
   B. Clients' acceptance of safe sex or desire for unsafe sex
   C. Clients' attitudes towards sex workers
   D. Clients' attitudes towards themselves for being involved in sex work
   E. Compliance to condom use

3. The psychic context
   a. The creation of an erotically charged atmosphere
   b. Sussing out clients
   c. Discursive or internal dialogues engaged in by the sex worker before, during and after the sexual sale.

4. Safe sex interactive modes (natural, educative, challenge, trick sex, other options, walk out modes)
Appendix 1

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