

Sex Work Research

Methodological and Ethical Challenges

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The challenges involved in the design of ethical, nonexploitative research projects with sex workers or any other marginalized population are significant. First, the size and boundaries of the population are unknown, making it extremely difficult to get a representative sample. Second, because membership in hidden populations often involves stigmatized or illegal behavior, concerns regarding privacy and confidentiality are paramount and difficult to resolve. In addition, they often result in challenges to the validity of the data. Third, in spite of evidence to the contrary, associations between sex work and victimization are still strong, dichotomies remain prevalent, and sex workers are often represented as a homogeneous population. Drawing on three research projects in which the author has been involved—all grounded in a sex-as-work approach—as well as the work of others, this article provides several strategies for overcoming these challenges. Clear guidelines for ethical, nonexploitive methodologies are embedded in the solutions provided.

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Three sets of challenges arise when conducting research on the sexual service industry. First, the size and boundaries of the population are unknown, so it is extremely difficult to get a representative sample. The traditional methods of sampling such populations—snowball sampling, key informant sampling, and targeted sampling—do not solve this problem. Snowballing samples, for example, tend to be biased toward the more cooperative participants. Data from key informants (social service agencies, health care workers, and police) generally reflect their interactions with clients who are in crisis. Consequently, the stories of those less interested in participating and those not in crisis are rarely reported. Targeted sampling, although widely used, is only as good as one's ability to penetrate the local networks of the stigmatized population. In addition, bias can be introduced during targeted sampling when the most visible participants (such as street workers) are oversampled and the least visible (those who work inside) undersampled.

Second, because membership in hidden populations often involves stigmatized or illegal behavior, concerns regarding privacy and confidentiality are paramount. This, it is often argued, may lead individuals to refuse to cooperate or to give unreliable answers to protect their privacy. Alternatively, participants may say what they think you want to hear. In either event, the researcher is getting reporting differences rather than true differences. As a consequence, the data, regardless of how rigorously collected, are often the first aspect of the study to be challenged, especially when not in line with the commonly held stereotypes of the prostitute or prostitution. When conducting research with hidden populations—in this case, sex workers—additional strategies are required to reduce challenges to the validity of the data.

This brings us to the third set of challenges to be overcome: the enduring associations between sex work and victimization, the prevalence of dichotomies, and the notion that sex workers represent a homogeneous population. Despite growing evidence to the contrary from both researchers (Benoit & Millar, 2001; Ford, 1998a; Jennes, 1990; McLeod, 1982; Pons & Serra, 1998; Shaver, 1988, 1994, 1996) and sex workers (Almodovar, 1993; Bruckert, 2002; Chapkis, 1997; Delacoste & Alexander, 1987; Doezema, 1998; French, 1988), a recent review of a decade of social science literature revealed that associations between sex work and victimization are still strong and that dichotomies remain prevalent (Vanwesenbeeck, 2001, p. 242). The activity is still characterized as work or exploitation (Conseil du statut de la femme, 2002) or as good girls versus bad girls (Bell, 1987) when in fact, as is the case with all work and all workers, it is a combination of the two. Finally, as articulated by Pheterson (1990) and heralded by others (Colpron, 2001, p. 12), prostitution is commonly treated as an identity category rather than a revenue-generating activity. To counteract this tendency, it is essential to develop strategies that increase the potential for revealing diversity within each sector of the industry as well as between sectors. In addition, we need to develop tools and theoretical approaches for comparing sexual service work with other forms of personal service work.

METHOD

This article describes the strategies used in three different studies when attempting to address each of these challenges. The first study involved interviews with 220 women, men, and transgender workers (genetic males who present themselves as women) on two different field sites (San Francisco 1990 and Montreal 1991). The semistructured interview guide included questions about demographics (current and past), sex work activities, work

relations, occupational hazards (e.g., arrest, sexual assault, physical assault, drug use), enjoyment of sex, income sources and expenses, relations with others not involved in sex work, work history, and future plans. One of our objectives was to examine the differences, if any, in the way sex work was organized and experienced by women, men, and transgender workers. The fieldwork was carried out by the researchers (one woman and two men)¹ and four student assistants (two women and two men).²

The second study involved interviews with 107 women and men sex workers and a matched sample of 73 hospital workers (aides and orderlies) on two different field sites (Montreal, 1993, and Toronto, 1994). The hospitals selected for the study were adjacent to the prostitution strolls. A much more open-ended interview guide was developed. Topics were similar to those used in the first study, except that a series of new questions was added that included family background and contact with family, a detailed job description, a discussion of the circumstances surrounding the decision to do sex work (or hospital work), details regarding the workplace environment and interpersonal relationships, likes and dislikes about work, leisure activities, and general health status. We also introduced a series of questions about job stressors, including sexual harassment, discrimination, missed work days, verbal threats and insults, and so forth. In addition to making gender comparisons, our objective was to investigate the extent to which the working conditions and experiences varied from one service work situation to another. The fieldwork was conducted by myself and seven student assistants (five women and two men).³

The third study, which began in 2000, focuses on several sectors of the sex industry (street-based work, massage, dancing, escort, and domination) as well as different genders of workers (female, male, and transgender). The project, grounded in a community-academic partnership, is designed to examine Canadian public policy and the health and well-being of sex workers. The research, guided by a population health promotion framework (Hamilton & Bhatti, 1996), examines how health, social service, labor, municipal regulations and policies, and their interface with criminal justice policies and practices enhance or harm the health and well-being of sex workers. We interviewed 120 sex workers and 34 key informants in Toronto and Montreal. Of the sex workers, 62 identified as female, 40 identified as male, and 18 identified as transgender. Interviews were conducted by the researchers (three women), student assistants (four women), and community partners (two women and two men). We are moving into the reporting phase of the project.⁴

In addition to the studies in which I have been personally involved, I draw on the work of other researchers who have struggled with similar problems

(Boyton, 2002; Lever & Kanouse, 1998; Pyett, 1998) and others who have already published research findings highlighting the heterogeneity of sex workers (Benoit & Millar, 2001; Browne & Minichiello, 1996; Lerum, 2000; Nadon, Koverola, & Schludermann, 1998; Perkins & Lovejoy, 1996).

Our general approach to these challenges was to adopt techniques allowing us to (a) identify appropriate sites and penetrate local networks while preserving representativeness, (b) legitimate our role as researchers in ways that would encourage cooperation and veracity, and (c) build on strategic comparisons. The first two are difficult to separate because they are built into our site selection, fieldwork, and participant selection strategies. Thus, they are discussed together, first in the context of research with street-based workers and then when researching indoor workers. Solutions to the third set of challenges are addressed in a section of their own.

OVERCOMING SAMPLING BIAS AND PRIVACY CONCERNS

In the first study, we focused on street prostitution and chose to address it as a revenue-generating activity rather than as an identity category or a deviant or criminal activity. Rigorous sampling strategies were combined with a participant-centered approach. We built on two sets of strategic comparisons: one linked to gender (women, men, and transgendered people) and another, developed for the second study, involving a comparison between sex workers and hospital workers.

Site Selection Strategies

The four fieldwork sites were initially selected for their similar characteristics. In each case, the stroll (the recognized territory of streets for soliciting) was adjacent to a downtown center and represented a high-track working area (i.e., one recognized as the expensive end of the street trade). Sex workers from all three gender groups worked adjacent areas. The fieldwork, carried out by the researchers and various assistants, confirmed that each group of sex workers had its own territory. In fact, as discussed below, the women's strolls on the Canadian sites were further subdivided by other features. The distances between the strolls varied (they were closer together on the San Francisco site) but were within easy walking distances to all four sites.

Secondary criteria for the selection of the sites included their different political, social, and legal regimes. One country difference, for example, was reflected in the accessibility of social and health care services. Universal health insurance is available in Canada but not in the United States. Another

difference is that prostitution per se is not illegal in Canada, but it is illegal in California. As in California, however, there are Canadian laws relating to communicating (soliciting) in public, procuring, owning and operating a bawdy house, and living on the earnings of the prostitution of another.⁵

In addition, the sites are embedded in different cultural histories. San Francisco has been a city with a high degree of tolerance for diverse sexualities, and Montreal, in comparison to Toronto, has a history of greater tolerance for public displays of sexual material. The presence (in San Francisco and Toronto) or absence (until recently in Montreal) of strong prostitutes' rights movements is also likely to have had an impact on the cultural history. Call Off Your Tired Ethics (COYOTE) of San Francisco was founded in 1973 to work for "the repeal of the prostitution laws and an end to the stigma associated with sexual work" (COYOTE, 2003). In addition to engaging in public education regarding a wide range of issues related to prostitution, COYOTE has been active in providing "crisis counselling, support groups, and referrals to legal and other service providers to thousands of prostitutes, mostly women."⁶ The Canadian Organization for the Rights of Prostitutes began in Toronto in 1983. Its objectives were similar to those of COYOTE: the decriminalization of prostitution and an end to the stigma associated with prostitution. Another Toronto organization, Maggie's—The Prostitutes' Safe Sex Project, was established and in full swing by 1991. Despite changes in leadership, Maggie's has had a similarly active presence in that city since then, providing support and referrals for sex workers while educating the sex workers, their clients, and the general public about safe sex, legal practices, and the facts of sex work.⁷ There was no prostitutes' rights organization in Montreal in 1991 and 1993 when we were conducting our fieldwork.⁸ Our design did not give us the ability to fully control for these social, political, and cultural differences, but we felt that an awareness of them would help inform the interpretation of the commonalities and differences across the four different sites. Consequently, such differences should be kept in mind when developing research designs involving several case studies.

Fieldwork Strategies

Our field strategies were grounded in a participant-centered approach. They varied slightly from city to city but generally involved three stages: gaining entry, working the stroll, and leaving the field. The first, gaining entry, entailed 2 to 4 weeks of introductions and public relations activities that served to legitimate both the study and our role as researchers.⁹ We worked in pairs during the regular operating hours of the stroll, introducing

ourselves to people who appeared to be working. Introductions were straightforward and were always accompanied with an open, extended hand and direct eye contact: "Hi, I'm Fran Shaver, this is my assistant Jane. We're letting people know about the research we are conducting over the next few weeks." We then explained the nature of the study and handed out our university business cards. We usually exchanged a few more words before moving on. In almost every case, we learned the street name the person used. Name recollection became an essential fieldwork skill and a potent sign of our respect. It also made it possible to develop lists of all the regular workers on each of the strolls and subterritories that came to our attention within the areas worked by women.

Observing the street life of the strolls, we became observed ourselves. As we came to know the regulars by name, we had many opportunities to discuss their work, and our work, informally with them. We made it clear by our actions that we were guests in their territory; that we were not police, press, outreach or social workers; and that we were able to do the research without putting them at risk or alarming the johns. We also made it clear during these conversations that participation was voluntary and that we would take *no* for an answer and move on politely. In doing so, however, we also pointed out that although it was their right to say no to an interview, it was our job to keep on trying. This lighthearted exchange created an opportunity for them to change their minds once we had gained their respect. It also made it possible for us to courteously check in with them at a later date to see if they had changed their minds.

These informal conversations provided opportunities for us to describe where our findings were destined and what the returns might be for sex workers. During this period, we also talked with the police, outreach workers (The California Prostitutes Education Program [CAL-PEP] in San Francisco¹⁰ and Maggie's in Toronto), and others who came in contact with the sex workers. In addition to legitimating our role as researchers and increasing our knowledge of the strolls, these strategies also permitted us to identify and penetrate the local networks to achieve as close to 100% sampling of the regular workers as was possible.

Although it overlaps with gaining entry, I would like to refer to the next stage as working the stroll. It includes guidelines for maintaining our role as researchers. With the role comes a privileged position, one that facilitates and actually legitimates the asking of personal questions. Maintenance of this role throughout the fieldwork period is essential. Because we were guests in the working environment of others and wanted them to tell us their stories, we created guidelines for developing and maintaining a participant-centered, harm-reduction approach.¹¹ The guidelines included the following:

- working in pairs when strolling (although interviews can and should be conducted one on one in a quiet nearby setting);
- handing out business cards with the full details of the research director's place of work (the assistant's first name only should be written on the card, along with a contact phone number if different from the business office of the director);
- carrying a stroll kit—It was limited to Band-Aids (for blisters), safety pins (for broken straps and garters), matches (for the smokers), and a list of resource people and agencies that handle needle exchanges, general health problems, AIDS and HIV testing, and emergency housing. We did not carry supplies of condoms, clean needle kits, or bad trick sheets. We knew where and how these could be had and passed on the information but felt that carrying these items would identify us as outreach workers or social service providers and would jeopardize our research status and right to ask personal questions;
- walking up the street toward the sex workers—This ensures that they will not be startled by our approach and introduction. I smile, nod, and say “good evening” regardless of whether an introduction is feasible. Sometimes, it is not, especially if they are speaking to a potential date;
- being very conscious of the space we occupied in relation to those approached; never corner a person in a doorway, or if with a partner, never approach a sex worker from two sides. Leaving them room to move away is a courteous way to demonstrate that you are not the police. More important, it provides a clear indication that the choice to participate is theirs;
- holding team meetings on a regular basis—Fieldwork in this context is physically and emotionally draining, a fact rarely appreciated by the assistants on entering the field. Neither is this actuality built directly into any ethical guidelines I have seen. Meetings help debrief and allow for discussions of difficult situations that may arise;
- discouraging guided tours—The research assistants' family and friends are often curious about the work site, and many want a tour of the strolls. Family and friends should not be visiting the fieldwork site. I sanctioned such visits only to alleviate tensions on the home front, usually grounded in unjustified fears about the risks of working on the site and then conducted them myself.

In addition to protecting the sex workers, these guidelines clarify the difference between the researchers and others who operate in the field (e.g., social service providers, outreach workers, advocates), reinforce the difference between researcher and sex worker, and legitimate and provide a space for the fears many researcher assistants (and their families) have but are reluctant to discuss. Because the rules provide a focus for discussion, and sometimes contention, they also provide the research team with an opportunity to adapt them to particular circumstances. On occasion, it may be more ethical to step out of researcher mode than to maintain it. We have all passed on information regarding a bad date or the imminent arrival of a squad car or foot-patrol officer. I have lent my telephone calling card to a woman who

wanted to make arrangements to leave her pimp and have protected sex workers from possible arrest or police harassment by misinforming the officer in question that we were leaving the stroll to conduct an interview. The rules help ensure that such actions are taken only after discussing and weighing the risks with respect to the respondent, the researcher, and the data.

Respect for free and informed consent was not an issue when conducting the face-to-face interviews. Participants selected the interview site (generally a quiet corner of a restaurant, on occasion in a nearby park or street side, and in residential hotels). Most were conducted during their hours on the stroll, but on occasion, arrangements were made to meet off the stroll. Most of these were held in the worker's home. When the interview began, participants were reminded of the purposes of the study, that they were free to bypass questions that made them uncomfortable, and that they could discontinue the interview at any time. A very small number chose to bypass questions regarding income, but no interviews were discontinued. Interviews ranged from 45 minutes to 1.5 hours.

Acquiring free and informed consent was, however, an issue with regard to our ongoing field observations. Sex workers who have agreed to an interview have not consented to letting the researchers take field notes about their, or their colleagues', activities at other times. Therefore, we activated a process for obtaining consent in this area by encouraging the sex workers to help us identify existing stroll boundaries, welcoming restaurants, and other friendly establishments on the stroll. We also asked them about the population characteristics of the regular and nonregular workers. This minor collaborative initiative drew the participants into the study by allowing them to identify the boundaries they recognized and the networks within which they worked. In addition, it legitimated our note taking while in the field and permitted us to verify the accuracy of our own observations. The more we knew about the field setting and the people in it, the more confidence we felt we had in the sampling techniques used and the validity of the data acquired.

Participant Selection Strategies

To preserve the representativeness of the stroll samples and the integrity of the database, we only interviewed people we had seen working on several different occasions (the regulars) and who were not under the influence of alcohol or drugs at the time. We also took care to ensure that the distinguishing characteristics of those interviewed reflected the characteristics of the stroll population in question as much as possible. Full stroll counts were con-

ducted on a regular basis during our field observations, and with the help of the women, men, and transgender workers, we were able to create lists of the regular workers by their street names. We then matched our sample to the stroll population by characteristics, such as age, visible minority status, and work location. On the strolls worked by the women, we were also careful to draw participants from the subterritories that had been observed by the researchers and identified as such by the women on the Montreal and Toronto sites. Our objective was to achieve as close to 100% sampling of the regular workers as possible.¹²

We were generally on site during working hours (from 7 p.m. or 8 p.m. until the clubs closed; this was as late as 3 a.m. or 4 a.m. in Montreal). We walked the stroll in pairs hailing and chatting to those we knew and introducing ourselves to others. A good time to ask for an interview was when business was slow or when it was clear that a worker was returning from a date. Because we had observed who was involved in the sex trade, no mistakes were made (e.g., asking non-sex-workers), and because we had become well known on the street, there were very few refusals. All respondents were given the nominal sum of U.S.\$10 in San Francisco and C\$20 in Montreal and Toronto as a token of our appreciation for their participation in the interview.

The guidelines were more difficult to follow with respect to male hustlers. There was a higher turnover rate, they were more likely than the women to volunteer to be interviewed, and they were more likely to bring along a buddy who also wanted to be interviewed. In Toronto and Montreal, we also found they were more likely to have a substance abuse problem and more likely to want to do the interview simply for the C\$20 honorarium. In these cases, especially if we had not observed them working regularly, one of our criteria for participant selection, we said no.

Leaving the Field

It is important to leave the field in guest mode, taking the time to say good-bye and thank everyone, whether they were interviewed or not. This provides the researchers with an opportunity to ensure that people know where to call if they have further questions or wish to see the final results. This ritualized leave-taking also provides additional protection for both the participant and researcher. It acknowledges the essential contribution made by the participants in a respectful and courteous manner. It legitimates the withdrawal anxieties experienced by the researchers, who in spite of the attachments that develop on both sides, generally find it a more difficult process than the participants do.

Studying Off-Street Workers

Overcoming sampling problems and privacy and truthfulness concerns when researching indoor workers requires a different set of strategies. Those identified here were developed in conjunction with the third study described above: the community-academic research partnership designed to examine Canadian public policy and the health and well-being of both on- and off-street sex workers.

Our community partners had a significant advisory role (but no veto power) in the design of the project proposal and the research instruments used. The academic team hired and trained community partners, along with students, to participate in recruitment strategies and conduct interviews. In addition, products and outputs are negotiated, including issues of intellectual property and ownership. Consequently, our strategies were significantly different from those adopted on the strolls in the field studies described above. These strategies, especially the training of sex workers as research assistants, were particularly helpful in overcoming sampling and privacy concerns.

Our community partners, regardless of research training, were able to provide insider information and insights on how best to approach the physical venues and the people working within those venues in the three sectors identified for our study (street, escort, and exotic dancing). Special posters inviting dancers to *Have Their Say* were designed for the clubs, and smaller business-card-sized flyers were designed by an escort for recruiting other escorts. In addition, we facilitated cold calls to escorts advertising in the newspaper by placing an advertisement of our own in the same section of the paper. Because the sex workers involved in the active recruiting of participants were operating in contexts familiar to them and often knew, or knew of, the people they were approaching, they were able to accelerate our entry to the different milieus. Once accepted as guests in their working environments who were interested in their stories, we were able to introduce other members of the team and legitimate our role as researchers. Participants were given the option of being interviewed by a sex worker or student assistant in the setting of their choice and the option of being interviewed by a man or woman. This addressed many of the concerns regarding trust, privacy, and confidentiality.

Concerns about the representativeness of the three samples were addressed by continuously expanding them to encompass participants with different characteristics and experiences until saturation had been reached (i.e., until no new types of stories and experiences were being reported). In addition, we sought to ensure that results were representative of each sector and not merely idiosyncratic of single individuals or settings by comparing interviews with different types of participants (e.g., sex workers, representa-

tives of sex work organizations, service providers, city officials) and analyses of policy documents. These strategies, designed to increase confidence in the validity of the data collected and conclusions drawn, had been used successfully by Lewis and Maticka-Tyndale (2000) and were easily integrated into the partnership model.¹³

Partnership models are challenging, however, and not everyone is comfortable working with them. The research process takes longer (especially when capacity building), community partners may not be in a position to participate actively or may want to renegotiate their involvement, and community and academic partners often have disparate objectives and perspectives about the research process and its products. Nevertheless, the benefits of academic-community partnerships are substantial. They provide different perspectives, increase the synergy of ideas and resources, enhance the quality of the data, provide opportunities for capacity building, encourage reciprocal exchanges of skill and knowledge between the academy and the community, and increase public accountability. In short, they provide the key to overcoming at least two of the obstacles faced when conducting research on the sex trade: sampling bias and privacy concerns. In doing so, they increase the credibility of the data.¹⁴

OVERCOMING ASSUMPTIONS OF HOMOGENEITY

The key to overcoming the third set of obstacles identified (the enduring associations between sex work and victimization, the prevalence of dichotomies, and the assumption that sex workers represent a homogeneous population) is grounded in research designs embodying strategic comparisons. A continued focus on sex work and sex workers will help make it, and them, more visible, but comparisons are essential if we are to fully understand the challenges they face and the social, political, and economic processes creating and maintaining those challenges. They will help identify which of these challenges are unique to sex work (and sex workers) and which are features of more general conditions, such as gender, ethnicity, educational opportunities, health status, and poverty.

Moving to this stage of the investigation creates additional demands on the research. It requires the identification of appropriate comparison groups and doubles the research enterprise to learn about such groups. In the case of community-academic partnered research, the challenges may be compounded because the necessity for comparison is not always obvious to vulnerable or marginalized groups. The next section clearly demonstrates that the advantages of moving to comparative research are sufficiently large

enough to warrant the extra effort required. Examples of four types of comparisons, drawn from my own work and that of others, are identified below.

Comparisons of sex workers with appropriate comparison groups often serve to falsify popular perceptions. For example, many researchers cite evidence that sexual and physical violence are precursors to prostitution, at least in the Western world (Vanwesenbeeck, 2001). This is a popular and strongly maintained lay perception as well. Nadon et al. (1998), however, argue that the evidence, more often than not, is methodologically flawed. Shortcomings include the failure to involve a comparison group or the use of comparison groups that significantly differ from the sex worker samples with respect to age and socioeconomic status. Nadon et al. corrected for this shortcoming by interviewing 45 adolescent prostitutes and 37 nonprostitute adolescents of similar age from similar socioeconomic backgrounds and neighborhood locations and found that the two groups did not differ significantly in the incidence of childhood sexual abuse (68% and 57%, respectively). Nor did the groups differ with respect to the characteristics surrounding the sexual abuse. With respect to childhood physical abuse, the nonprostitute group reported higher rates than the prostitute group (71% and 48%, respectively). The nonprostitute group was also subjected to more acts of physical violence.

Evidence is often presented showing that sex workers experience elevated levels of psychological stress (Farley, Baral, Kiremire, & Sezgin, 1998; Farley & Barkan, 1998). A pressing question here is whether the stress is related to sex work per se or the violent conditions of the work, especially in the context of street prostitution. Evidence gathered by Romans, Potter, Martin, and Herbison (2001) from less vulnerable sex workers (i.e., off-street workers) and a comparison group of age-matched women in Australia suggests the latter. No differences were found between the two groups in mental health on the General Health Questionnaire or in self-esteem. Neither were there any differences in their assessment of their physical health or the quality of their social networks. This was the case even when sex workers had been exposed to more adult physical and sexual abuse than the comparison group (cited in Vanwesenbeeck, 2001, p. 270).

Another comparison, this time involving an analysis of the sexual practices and risk-taking behavior of gay and bisexual men and men (straight, gay, and bisexual) practicing street prostitution in Canada, undermines often held perceptions regarding the prevalence for risk-taking behavior among sex workers (Shaver & Newmeyer, 1997). Data on the former group were drawn from three sources: the Men's Survey, a panCanadian study of gay and bisexual men conducted in collaboration with the Canadian AIDS Society (Myers, Godin, & Calzavara, 1993); Québecoise de lutte contre le sida (COCQsida); and Godin, Carsley, and Morrison (1993). Data on male prosti-

tutes were drawn from a series of fieldwork interviews conducted in Montreal in 1991. Selected correlations from the three studies regarding age, risk-taking behavior, level of education, income, language, sexual identity, drug use, and number of partners clearly indicate that the male hustlers were not the greater risk takers.

In a similar study, Weinberg, Worth, and Williams (2001) took seriously the claims by New Zealand men engaged in sex work that they were more similar than different from other people in HIV status and the practice of safe sex. Specifically, the authors focused on those factors that make a population more or less vulnerable to HIV and how they affect its spread into the sex work population. Data from 1,852 respondents in the New Zealand study, (carried out by Worth in 1996; comparing male sex workers and other men who have sex with men), were used to evaluate the claim. The results partially supported the hypothesis in that these two groups of men were similar with regard to their HIV status. Sex workers were found to be different, however, in being less likely to engage in safe sex practices. The difference between these findings and those of Shaver and Newmeyer (1997) regarding safe sex practices suggests that more comparative work needs to be done. They also provide clear directions for further research.

Comparisons within one sector of the industry (e.g., street prostitution) serve to undermine perceptions of homogeneity. In addition to enhancing the inclusiveness of our research, comparisons between the three groups of sex workers in our study enabled us to capture significant elements of gender diversity within the street trade. We were able to identify a number of significant differences in their work routines. Women, for example, were significantly more likely than the men or the transgender group to have regular work schedules, to see more clients on average in a week, and to spend less time with them. Women earned the most from their sex work activities and were the least likely to report other sources of income (Shaver & Weinberg, 2002; Weinberg, Shaver, & Williams, 1999).

We also found important differences in the occupational health and safety risks faced. The women assessed their work as more stressful than men (Shaver, 1996), and indeed, the work is much more risky and hazardous for them, especially with respect to prostitution-related arrest and sexual assault (Shaver & Weinberg, 2002; Weinberg et al., 1999). Gender differences also existed with respect to more traditional health problems. In comparison to the men, for example, the women were more likely to take care of themselves (e.g., have regular visits to a doctor or clinic) and had different complaints than men. Sore feet, shortness of breath, general fatigue, and insomnia were high on the women's list of complaints, whereas the men identified upset stomachs, headaches, leg cramps, and difficulty concentrating (Shaver, 1996).

In the course of our gender comparisons, some popular perceptions, particularly those regarding education, were supported. Fewer than 60% had completed high school on some sites, and it went as low as 40% on other sites. Gender differences in level of education were not significant (Shaver & Weinberg, 2002). Other popular perceptions about those involved in prostitution were falsified, namely those related to other work experiences and the level of victimization by pimps. All had had experiences with at least two other jobs, and many with three, either before or while doing sex work. And our data indicated that pimping is exaggerated. The majority of women work for themselves, as do virtually all the men and the transgenders (Shaver & Weinberg, 2002). Furthermore, challenges to these results as unreliable are undermined by the disparate patterns we observed in Montreal between the women reporting they worked for themselves (50%) and those who said they worked for another (50%). The latter group was older (25.5 years vs. 19.6 years), more likely to have completed high school (53% vs. 33%), and less likely to be cohabiting (33% vs. 80%). They also worked fewer hours per day (6.7 vs. 7.9), fewer days per week (5.5 vs. 6.1), and charged an average of 15% less for the services provided (Shaver, 1993, p. 161).

In spite of these gender differences, it is essential to leave open the idea that males, transgenders, and females are not necessarily homogeneous categories; there can be diversity within gender. For example, in a longitudinal study of 90 women sex workers on the effects of being a prostitute and the changes that occurred throughout time, Vanwesenbeeck (1994) found that about one fourth were doing well, one fourth were doing poorly, and the rest were in the middle. The women who were categorized as poor in well-being were those who had had a history of victimization and trauma.

Regional comparisons also undermine popular perceptions. Our findings, for example, indicate that drug use among street prostitutes is not a given. It varies by gender and site; women were the heavy users in San Francisco, but transgenders and men were the heavy users on the Canadian sites (Shaver & Weinberg, 2002). These comparisons revealed some demographic variations (in San Francisco in comparison to the Canadian sites, the women and transgenders were older on average, and ethnic minorities were more prominent) and some social and cultural variations (women and transgenders working in San Francisco had more years in the trade, and the risks of arrest and sexual assault were higher on the Canadian sites). Such differences may well reflect local conditions, such as varying levels of tolerance for sexual diversities, variations in municipal and policing practices, and differential access to prostitutes' rights groups and other service providers. These conditions should be explored in greater detail (Shaver & Weinberg, 2002).

These results replicate the basic differences between women and men working in Sydney, Australia (Perkins & Bennett, 1985). However, the Australian data were gathered from a compilation of different studies of each gender group, whereas ours were grounded in strategic comparisons (which could be made directly and tested for significance) using the same research instrument and fieldwork techniques. This latter methodology not only increases the reliability and validity of claims regarding gender differences, it greatly enhances the generalizability of the findings.

Between-sector comparisons increase our awareness of the heterogeneity inherent in different work venues and management structures. The preliminary findings from our current study of Canadian public policy and the health and well-being of sex workers indicate that street venues hold greater risks than indoor venues; not only are those working the streets exposed to higher rates of arrest and violence, but they also appear to have lesser access to health services than their counterparts working in indoor venues. Some of our findings suggest that off-street workers have more control over their work process; however, this does not seem to extend to exotic dancers who may well have the least amount of control. In Montreal, for example, dancers are obliged to work independently but do so under severe management constraints. Most pay a fee to the club manager or DJ for each shift they work and earn their salary from the clients who pay them directly for the dances performed. They are not considered to be employees of the club and thus are excluded from benefits associated with labor legislation and minimum standards law. Nevertheless, the dancers report that they are subject to employee obligations, such as maintaining particular work hours and working a specified number of days per week. Requests to alter these obligations because of family or other commitments are likely to be denied or penalized (e.g., "If you cannot work today, do not come in for the rest of the week").

These findings, although only preliminary, are in line with the work of several others who have made between-sector comparisons. Benoit and Millar (2001), Chapkis (2000), and Whittaker and Hart (1996), to name only a few, have all reported that working the streets is much riskier than other venues in terms of legal intervention, police arrest, and experiences of violence. Another recent comparison by Church, Henderson, Barnard, and Hart (2001) found that street workers experienced significantly more physical violence from their clients than did women working indoors. In addition, "working outdoors rather than indoors was more strongly associated with levels of violence by clients than was the city, drug use, duration of drug use, or the age that women began prostitution" (Church et al., 2001, as cited in Vanwesenbeeck, 2001, p. 266).

Studies focusing specifically on variations in health risks and health status also report that those working street venues are worse off (Jackson, Highcrest, & Coates, 1992; Pyett & Warr, 1997). Perkins and Lovejoy (1996) compared call girls and brothel workers with respect to their healthy or unhealthy lifestyles. Both call girls (private sex workers) and brothel workers were infected with sexually transmitted diseases as often in their noncommercial sexual relations as in their work, smoking was a serious problem for both, and each group endured problems from clients specific to their work sites. Overall, the call girls had healthier lifestyles but were more vulnerable to pressures from clients for unsafe sex and potential violence.

It is not just arrest, violence, and health status that vary by work venue; readings of risk are also modified. Plumridge (2001) focused on the discourses of outside and inside workers, specifically examining the way individual discourses about risk function to credential a speaker, counteract any potential accusations of risk taking, and occlude attention to evidence of risk and risk taking. These discourses operated differently among street workers and their counterparts located in indoor venues. The latter put the case for their uptake of sex work in terms of quick, good money and workplace freedoms. In the absence of such good money and where workplace freedoms allowed personalized and individualized control by management, women were pushed toward competition and risky practice. Street workers, on the other hand, expounded arguments of personal agency and of being in control of risks and dangers on the streets, which were known well and depicted graphically. Such arguments disavow personal vulnerability and may increase risk-taking behavior.

Other comparisons indicate that management regulations can also undermine or enhance the safety of the working environment. Recent research on escorts indicates that control may have more to do with the conditions under which they work (independently or for an agency) than the sector in which they work. According to Lewis and Maticka-Tyndale (2000), escorts in Windsor

were able to choose whether to work for an agency or be independent of one, to work for several agencies if they wished, and to change agencies at will. They were also able to arrange their work from their homes, remaining in their community and with their families while they awaited calls from clients. (p. 446)

In contrast, escorts in Calgary obtain their licenses from a particular agency rather than the municipality. Leaving the agency means abandoning the license to work and sets up a situation that negatively affects the working environment. Benoit and Millar (2001) also found that sex workers operating

independently were in the best relative position to determine their working conditions, including their own cost of labor, net earnings, pace of work, clientele, and the sex activities performed while working.

Research on exotic dancers also demonstrates that management regulations have a significant impact on the working environment. Those in the peep show context, who work with a glass barrier between themselves and their audience, have more control over the performer-client relationship than do dancers in strip clubs. The latter, who operate without the safety of a physical barrier, are often left with the full responsibility of enforcing the boundary between legal and illegal touching during the dance (Chapkis, 2000, p. 185). On the other hand, "because the workers at the Lusty [peep show] are employed for a straight wage with no possibility of tips, the management assumes the primary responsibility of disciplining the workforce to comply with perceived market demands" (p. 186). Policies on appearance, weight, costumes, and customer relations are clearly defined and vigorously enforced. Surveillance, including video monitoring of dancers, is the norm: "If you don't smile on stage, they won't give you a raise."

Their research indicates that occupational dangers vary by type of sex work; risks (especially those related to violence) are highest for those working on the streets. It also indicates that variations in management relations and one's capacity to work independently can undermine or enhance sex worker safety regardless of the sector worked.

Several researchers are beginning to recognize the utility in comparing sex work with other types of personal service work. Often, it increases our understanding of both types of work. For example, in common with other forms of service work (bartender or barmaid, orderly, or nurse's aid) women and men doing sexual service work have separate job titles: "Women are most often called prostitutes, hookers, working girls, or whores. Men, on the other hand, are referred to as male-hustlers or simply hustlers, terms that carry much less stigma than the labels given to women" (Shaver, 1996, p. 48). We learn even more when this difference is paralleled with other research findings, such as those of Browne and Minichiello (1996). They argue that women sex workers are bothered more by the stigma and labels of deviance than their male counterparts and, as a consequence, have to put more effort into managing their identities (cited in Vanwesenbeeck, 2001, p. 268). Oerton and Phoenix (2001), who interview sauna and home-based prostitute women and female therapeutic massage practitioners, theorize about the connections between gender, body, touch, sex, and sexuality when examining the discursive devices employed by the two different groups of women. They conclude that the effects are similar for both professions: "The devices allow them to repudiate the taint of sex while simultaneously allowing them

to be publicly reinscribed as illicit, disreputable and, above all, sexy” (p. 387).

Disparaging comments are often made about the distancing strategies sex workers use to manage stigma, mark boundaries, create comfort zones, and separate professional sex from other sexual activities. Comparisons, however, show that distancing strategies are not unique to sex work. Professional distancing is often required as a form of emotional protection while on the job or is integral to a code of professional ethics, particularly in the caring professions (Shaver, 1994). Neither sexual harassment nor assault is unique to sex work; they are significant stressors in many jobs. A 1989 study commissioned by the Montreal Urban Community Police “found that over 30 percent of the 250 policewomen on staff had been victims of sexual harassment by their colleagues” (Colpron, 1989, as cited in Messing, 1991, p. 53). In the United States, it has been estimated that there are between 156 and 710 cases of workplace rape every year, and another American study “reports that convenience store cashiers (who often work evenings and nights) run a high risk of sexual assault, as much as 20 times greater than that of other women” (Seligman et al., 1987, as cited in Messing, 1991, pp. 53, 73). According to another study, the risks of violence at work increase between 5 p.m. and 5 a.m. on Friday and Saturday nights (Salminen, 1998), a sobering finding considering this is the very time frame when sex workers tend to be the busiest.

Ford (1998a, 1998b) reports on two projects comparing women and men involved in street prostitution with ward aids and orderlies in hospitals.¹⁵ The evidence indicates that sex workers and hospital workers experience similar levels of work-related stress. Violence was found to be a stressful aspect of both types of work, but “hospital workers were twice as likely to be assaulted by their patients than were sex workers by their clients” (p. 427). Although sex workers appeared to have more personal control over their work environment, they expressed more work dissatisfaction with their work and were less likely to rate it as important (Ford, 1998a). Overall, hospital workers coped with occupational risks in an institutional and routine manner, whereas sex workers more often relied on personal rules and coworkers to help manage the risks (Ford, 1998b).

Lerum (2000) compared three different service organizations: a fine-dining restaurant, a breakfast diner, and a strip club. She was interested in exploring how service workers, “particularly wait people and sex workers, gain legitimacy and power” (p. 1169). Her ethnography highlights the similarities between less and more legitimate types of work. Ongoing research by Benoit, Jansson, Leadbeater, and McCarthy¹⁶ compares three other occupational groups: food and beverage servers, hairstylists and barbers, and sex workers. They are testing two main hypotheses: how differences in work

autonomy and control affect workers' access to health services and overall health, and how differences in levels of occupational prestige affect workers' access to health services and overall health. In addition to undermining the enduring associations between sex work and victimization, the prevalence of dichotomies, and the assumptions of homogeneity, such comparisons will help normalize sex work and place it in the context of other personal service work. Ultimately, such comparisons will facilitate a greater understanding of the social mechanics of all work.

CONCLUSION

As argued in this article, the challenges involved in the design of ethical, nonexploitative research projects with sex workers, or indeed with any marginal or stigmatized population, are significant. Resolving them involves numerous strategies, including the development of techniques to penetrate local networks and increase the representativeness of the sample, the adoption of participant-centered and harm-reduction guidelines that protect sex workers while legitimating the role of the researcher, and grounding the study design in strategic comparisons that undermine the mistaken notion that sex workers represent a homogeneous population. These strategies have proven to be effective in the three research projects in which I have been involved as well as in the work of several others.

Fortunately, when the techniques and strategies described here are adopted, they also serve to address the principles of ethical research. The participant-centered approach builds in respect for human dignity as well as respect for vulnerable persons. Respect for free and informed consent is established on two levels—one related to site observations and another to the individual interviews—and privacy and confidentiality are easily maintained. Most important, the four sets of strategic comparisons described above serve to expose the heterogeneity within the sectors of the sex industry, between the sectors, and between the sex industry and other service industries, thus ensuring a greater respect for inclusiveness and a better balance of harms and benefits, including minimizing harm and maximizing benefits.

NOTES

1. The researchers were myself, Martin Weinberg, and Colin Williams.
2. The results from the San Francisco study are reported in Weinberg et al. (1999).
3. Some of the results from this comparison can be found in Ford (1998a, 1998b).

4. The research is funded in part by a Social Sciences and Humanities Research Council of Canada (SSHRC) Strategic Grant: Canadian Public Policy and the Health and Well-Being of Sex Workers; Jacqueline Lewis (principal investigator), Windsor; Eleanor Maticka-Tyndale, Windsor (coapplicant); and Frances M. Shaver, Concordia (coapplicant), 2000 to 2004. The community partners include the Exotic Dancer's Alliance, Stella, Montreal; Maggie's, Toronto; and the Peel District Health Unit.

5. The buying and selling of sexual services is not prohibited by the *Criminal Code of Canada*. Nevertheless, certain activities associated with sex work are subject to criminal sanction, including operating or being found in a common bawdy house (s.210), knowingly transporting or directing any person to a common bawdy house (s.211), procuring or attempting "to procure a person to have illicit sexual intercourse with another person" (s.212[1][a]), living "wholly or in part on the avails of prostitution of another person" (s.212[1][j]), communicating in a public place "for the purposes of engaging in prostitution or of obtaining the sexual services of a prostitute" (s.213), and obtaining or attempting to obtain the sexual services of a person under the age of 18 (s.212[4]).

6. COYOTE of San Francisco was founded by Margo St. James in 1973.

COYOTE works for the rights of all sex workers: strippers, phone operators, prostitutes, porn actresses etc. of all genders and persuasions. COYOTE supports programs to assist sex workers in their choice to change their occupation, works to prevent the scapegoating of sex workers for AIDS and other STDs, and to educate sex workers, their clients and the general public about safe sex. (*COYOTE*, 2003)

7. Off shoots of Maggie's include the Sex Workers Alliance of Toronto and the Sex Workers Alliance of Vancouver (SWAV). The SWAV Web site, founded in 1994, states that SWAV (2003) fights "for sex workers' right to fair wages and to working conditions that are safe, clean and healthy."

8. However, Stella, a community organization for all female-identified sex workers, was founded 2 years later in 1995.

Stella's goals are to provide support and information to sex-workers so that they may live in safety and with dignity; to sensitize and educate the public about sex-work and the realities faced by sex-workers; to fight discrimination against sex-workers and to promote the decriminalization of sex-work. Stella favours empowerment and solidarity by and amongst sex-workers, since we are committed to the idea that each of us has a place in society, and human rights worth defending. (*Stella*, 2003)

9. In San Francisco, we (Weinberg, Shaver, and two research assistants) lived next to the fieldwork strolls for 1 month in the summer of 1990. Because of the restricted time frame, our public relations activities were more limited than they were in the other cities. Fieldwork in Montreal (my home) was conducted in 1991 and 1993. The team included me and four research assistants working for 4 to 5 months. The Toronto fieldwork was conducted by Shaver and six research assistants (three from Toronto and three from Montreal). Shaver and the Montreal team members lived in accommodations next to the Toronto strolls for a period of 2 months in the summer of 1994.

10. During our fieldwork, CAL-PEP was the active arm of COYOTE.

11. Our objective with a harm-reduction approach is to balance potential harms and benefits for both the sex workers and the research team. The guidelines listed here include techniques for

the minimizing of harm and maximizing of benefits for both groups; the first five relate to the sex workers and the last two to the members of the research team.

12. For those interested in other participant selection strategies, respondent-driven sampling (RDS) is a viable alternative. Developed by Heckathorn (1997) in the late 1990s, it involves a variant of chain-referral (snowball) sampling. He demonstrated that it reduces the bias generally associated with chain-referral methods. Similar to the more traditional chain-referral sampling, RDS assumes that those best able to access members of hidden populations are their own peers. In addition, however, it involves a dual incentive system, a primary reward for being interviewed and a secondary one for recruiting others into the study. The system produces a robust recruitment network in which a few initial (or seed) participants each produce chain-referral systems that yield a large number of recruits during the course of successive waves. More important, when the sampling process is allowed to continue through enough waves to equilibrium, the sample characteristics regarding ethnicity and gender become wholly independent of the initial set of participants (Heckathorn, 1997, p. 183). This avoids a significant deficiency of traditional chain-referral sampling: that the sample's characteristics merely reflect the initial sample. This technique is currently being used effectively in a youth-at-risk study being conducted at the University of Victoria (the principal investigators are Cecilia Benoit and Mikael Jansson).

13. For a discussion of saturation sampling, see Kirby and McKenna (1989).

14. Pyett (1998) also describes the challenges and benefits of community-academic partnerships.

15. The two projects are the Faculty Research Development Programme, Concordia University, titled "Managing Defilement: A Comparison of Sexual and Asexual Service Work in Toronto (F. M. Shaver is the principal investigator) and the Programme Etablissement de Nouveaux Chercheurs titled "Managing Defilement: A Comparison of Sexual and Asexual Service Work in Montreal (F. M. Shaver is the principal investigator).

16. These authors are working on a project titled "The Impact of Stigma on Marginalized Populations' Work, Health and Access to Services" (CIHR Operating Grant; Cecilia Benoit, University of Victoria is the principal investigator and Mikael Jansson, Bonnie Leadbeater, and Bill McCarthy are the coinvestigators; 2002-2005).

REFERENCES

- Almodovar, N. J. (1993). *Cop to call girl*. New York: Simon & Schuster.
- Bell, L. (Ed.). (1987). *Good girls / bad girls* (A project of the Ontario Public Interest Research Group, Toronto). Toronto, Ontario, Canada: Women's Press.
- Benoit, C., & Millar, A. (2001). *Working conditions, health status, and exiting experiences of sex workers*. Victoria, British Columbia, Canada: Prostitutes, Education, Empowerment and Resource Society.
- Boyton, P. (2002). Life on the streets: The experiences of community researchers in a study of prostitution. *Journal of Community and Applied Social Psychology, 12*(1), 1-12.
- Browne, J., & Minichiello, V. (1996). The social and work context of commercial sex between men: A research note. *Australian and New Zealand Journal of Sociology, 32*(1), 8692.
- Bruckert, C. (2002). *Taking it off, putting it on: Women in the strip trade*. Toronto, Ontario, Canada: Women's Press.
- Call Off Your Tired Ethics*. (2003). Retrieved January 12, 2003, from <http://www.freedomusa.org/coyotela>
- Chapkis, W. (1997). *Live sex acts: Women performing erotic labor*. New York: Routledge.

- Chapkis, W. (2000). Power and control in the commercial sex trade. In R. Weitzer (Ed.), *Sex for sale: Prostitution, pornography, and the sex industry* (pp. 181-201). New York: Routledge.
- Church, S., Henderson, M., Barnard, M., & Hart, G. (2001). Violence by clients towards female prostitutes in different work settings: Questionnaire survey. *British Medical Journal*, *322*, 524-525.
- Colpron, J. (2000). Stella: Vivre et travailler en sécurité et avec dignité. [Stella: Making space for working women]. *Bulletin d'information de l'IREF*, *35*, 10-13.
- Conseil du Statut de la Femme. (2002). *La prostitution: Profession ou exploitation? Une réflexion à poursuivre* [Is prostitution work or exploitation? Further consideration is needed]. Québec, Montreal, Canada: Author.
- Delacoste, F., & Alexander, P. (Eds.). (1987). *Sex work: Writings by women in the sex industry*. San Francisco: Cleis.
- Doezema, J. (1998). Forced to choose: Beyond the voluntary vs. forced prostitution dichotomy. In K. Kempadoo & J. Doezema (Eds.), *Global sex workers: Rights, resistance, and redefinition* (pp. 34-50). New York: Routledge.
- Farley, M., Baral, I., Kiremire, M., & Sezgin, U. (1998). Prostitution in five countries: Violence and posttraumatic stress disorder. *Feminism and Psychology*, *8*(4), 405-426.
- Farley, M., & Barkan, H. (1998). Prostitution, violence, and posttraumatic stress disorder. *Women and Health*, *27*(3), 374-379.
- Ford, K.-A. (1998a). Evaluating prostitution as a human service occupation. In J. E. Elias, V. L. Bullough, V. Elias, & G. Brewer (Eds.), *Prostitution: On whores, hustlers, and johns* (pp. 420-434). Amherst, NY: Prometheus.
- Ford, K.-A. (1998b). *Risky business: The negotiation and management of work related risk by patient-attendants and prostitutes*. Unpublished master's thesis, Concordia University, Montreal, Quebec.
- French, D. (1988). *Working*. New York: Pinnacle Books.
- Godin, G., Carsley, J., & Morrison, K. (1993). *Les comportements sexuels et l'environnement social des hommes ayant des relations sexuelles avec d'autres hommes (Enquête québécoise: Entre hommes 91-92)* [The sexual behavior and social environment of men who have sexual relations with men.]. Québec, Montreal, Canada: Ministère de la Santé et des Services Sociaux, Université Laval, Hôpital Général de Montréal, COCQ-SIDA et Société Canadienne du Sida.
- Hamilton, N., & Bhatti, T. (1996). *Population health promotion: An integrated model of population health and health promotion*. Ottawa, Ontario: Health Canada.
- Heckathorn, D. D. (1997). Respondent-driven sampling: A new approach for the study of hidden populations. *Social Problems*, *44*(2), 174-199.
- Jackson, L., Highcrest, A., & Coates, R. A. (1992). Varied potential risks of HIV infection among prostitutes. *Social Science and Medicine*, *35*(3), 281-286.
- Jennes, V. (1990). From sex as sin to sex as work. *Social Problems*, *37*(3), 403-420.
- Kirby, S., & McKenna, K. (1989). *Experience, research, social change: Methods from the margins*. Toronto, Ontario, Canada: Garamond.
- Lerum, K. A. (2000). Doing the dirty work: Emotion work, professionalism, and sexuality in a customer service economy. *Dissertation Abstracts International: The Humanities and Social Sciences*, *61*(3), 1169.
- Lever, J., & Kanouse, D. E. (1998). Using qualitative methods to study the hidden world of offstreet prostitution in Los Angeles County. In J. E. Elias, V. L. Bullough, V. Elias, & G. Brewer (Eds.), *Prostitution: On whores, hustlers, and johns* (pp. 396-406). Amherst, NY: Prometheus.

- Lewis, J., & MatickaTyndale, E. (2000). Licensing sex work: Public policy and women's lives. *Canadian Public Policy / Analyse de Politiques*, 26(4), 437-449.
- McLeod, E. (1982). *Working women: Prostitution now*. London: Cromm.
- Messing, K. (1991). *Occupational safety and health concerns of Canadian women—A background paper*. Ottawa, Ontario: Labour Canada.
- Myers, T., Godin, G., & Calzavara, L. (1993). *The Canadian survey of gay and bisexual men and HIV infection: Men's survey*. Ottawa, Ontario: Canadian AIDS Society.
- Nadon, S. M., Koverola, C., & Schludermann, E. H. (1998). Antecedents to prostitution: Childhood victimization. *Journal of Interpersonal Violence*, 13(2), 206-221.
- Oerton, S., & Phoenix, J. (2001). Sex/bodywork: Discourses and practices. *Sexualities*, 4(4), 387-412.
- Perkins, R., & Bennett, G. (1985). *Being a prostitute: Prostitute women and prostitute men*. Boston: Allen and Unwin.
- Perkins, R., & Lovejoy, F. (1996). Healthy and unhealthy lifestyles of female brothel workers and call girls (private sex workers) in Sydney. *Australian and New Zealand Journal of Public Health*, 20(5), 512-516.
- Pheterson, G. (1990). The category 'prostitute' in scientific inquiry. *The Journal of Sex Research*, 27(3), 397-407.
- Plumridge, L. W. (2001). Rhetoric, reality and risk outcomes in sex work. *Health, Risk and Society*, 3(2), 199-215.
- Pons, I., & Serra, V. (1998). Female prostitution in Spain: Neither criminals nor victims. In J. E. Elias, V. L. Bullough, V. Elias, & G. Brewer (Eds.), *Prostitution: On whores, hustlers, and johns* (pp. 493-500). Amherst, NY: Prometheus.
- Pyett, P. M. (1998). Researching with sex workers: A privilege and a challenge. In J. E. Elias, V. L. Bullough, V. Elias, & G. Brewer (Eds.), *Prostitution: On whores, hustlers, and johns* (pp. 368-375). Amherst, NY: Prometheus.
- Pyett, P. M., & Warr, D. J. (1997). Vulnerability on the streets: Female sex workers and HIV risk. *AIDSCare*, 9(5), 539-547.
- Romans, S. E., Potter, K., Martin, J., & Herbison, P. (2001). The mental and physical health of female sex workers: A comparative study. *Australian and New Zealand Journal of Psychiatry*, 35(1), 75-80.
- Salminen, S. (1998). Increased risk of workrelated violence during weekend nights. *Perceptual and Motor Skills*, 87(3), 984-986.
- Sex Workers Alliance of Vancouver*. (2003). Retrieved November 25, 2003, from <http://www.walnet.org>
- Shaver, F. M. (1988). A critique of the feminist charges against prostitution. *Atlantis*, 4(1), 82-89.
- Shaver, F. M. (1993). Prostitution: A female crime? In E. Adelberg & C. Currie (Eds.), *In conflict with the law: Women and the Canadian justice system* (pp. 153-173). Vancouver, British Columbia, Canada: Press Gang.
- Shaver, F. M. (1994). The regulation of prostitution: Avoiding the morality traps. *Canadian Journal of Law and Society*, 9, 123-145.
- Shaver, F. M. (1996). Prostitution: On the dark side of the service industry. In T. Fleming (Ed.), *Post critical criminology* (pp. 42-55). Scarborough, Ontario, Canada: Prentice Hall.
- Shaver, F. M., & Newmeyer, T. (1997). Hommes gais ou bisexuels et prostituées: Pratiques sexuelles et comportements à risque [Men who have sex with men: A comparison of the HIV/AIDS risk patterns of gay and bisexual men and male prostitutes.]. In N. Chevalier, J. Otis, & M.-P. Desaulniers (Eds.), *Sida et prévention* (pp. 175-190). Montréal, Quebec, Canada: Les Éditions Logiques.

- Shaver, F. M., & Weinberg, M. S. (2002, November). *Outing the stereotypes: A comparison of high track strolls in Montreal, Toronto, and San Francisco*. Paper presented at the Society for the Scientific Study of Sex, Annual Meeting, Montreal, Quebec, Canada.
- Stella. (2003). Retrieved November 25, 2003, from <http://chezstella.org>
- Vanwesenbeeck, I. (1994). *Prostitutes' wellbeing and risk*. Amsterdam: Vu University Press.
- Vanwesenbeeck, I. (2001). Another decade of social scientific work on sex work: A review of research 1990-2000. *Annual Review of Sex Research, 12*, 242-287.
- Weinberg, M. S., Shaver, F. M., & Williams, C. J. (1999). Gendered sex work in the San Francisco tenderloin. *Archives of Sexual Behavior, 28*(6), 503-521.
- Weinberg, M. S., Worth, H., & Williams, C. J. (2001). Men sex workers and other men who have sex with men: How do their HIV risks compare in New Zealand? *Archives of Sexual Behaviour, 30*(3), 273-286.
- Whittaker, D., & Hart, G. (1996). Research note: Managing risks: The social organisation of indoor sex work. *Sociology of Health and Illness, 18*(3), 399-414.

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