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Organizational Challenges Facing Male Sex Workers in Brazil's Tourist Zones

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Brazil's governmental policies and extensive sex worker advocacy organizations have created a rich environment for battling stigmatization and improving labor conditions for sex workers. Still, Brazil's male sex worker population (*michês*), which mostly identifies as heterosexual, remains conspicuously absent from the creative and successful efforts of the sex workers' rights movement. Although their inaction may easily be attributed to male privilege and a lack of exploitation, I argue that stigmatization interferes with outreach and organizational efforts directed at *michês* in ways both similar to and remarkably different from those involving women in the industry. This creates particular challenges for public policy makers and outreach professionals whose work affects these male sex workers.

In 2005 the Brazilian government shocked the Bush administration when it rejected $40 million from the United States Agency for International Development (USAID) that was contingent upon Brazil publicly condemning prostitution.[1] In Brazil, where sex work is technically permissible under law for women and men eighteen years of age or older, the government assists prostitutes through its efforts toward HIV prevention, education, and treatment. By taking such progressive and comprehensive approaches, Brazil cut its expected HIV infection rate by an impressive 50 percent between 1992 and 2002 (from 1.2 million anticipated cases to 660,000), while also prolonging lives by providing free antiretroviral medications. So while Brazil went from a 1.0 percent to a 0.5 percent infection rate, South Africa jumped from the same 1.0 percent rate to percentages reported to be as high as 20.0 percent in the same time period (Phillips 2005). Brazil is rightly proud of its record and did not intend to change its policies to suit U.S. neoconservatives' religious beliefs.

Far from condemning prostitution as demanded by the U.S. government, Pedro Chequer, director of Brazil's National HIV/AIDS Commission, instead

called prostitutes the government's "partners" and condemned the mandate issued by Bush and the Republican Congress as a "theological" and "fundamentalist" blow against "ethical principles and human rights" (Rohter 2005).[2] Although Brazil is widely regarded as a rising star with increasing geopolitical influence in the global economy, no one expected this scathing rejection from its government. In siding with prostitutes over the U.S. president, Dr. Chequer endeared himself to sex worker rights activists worldwide. But in a country with such progressive views on prostitution, what more could sex workers there want? As it turns out, quite a lot.

Following the rejection of the USAID offer, funding for sex work–related projects became scarce, yet the sex workers' rights movement flourished, including innovative programming such as the launching of the fashion line Daspu by the sex workers of Davida and the national candidacy of its founder, Gabriela Leite, for Brazil's congress. Yet *michês* generally remained skeptical and dismissive toward sex workers' rights movements, and apathetic about the funding controversy. Drawing on ethnographic research conducted between 2006 and 2010 I examine processes of stigmatization among men who sell sex to comparatively wealthy Brazilian and foreign men in areas popular with tourists, both on the street and in indoor commercial sex venues.[3] I contend that the men do not openly identify with the profession not only out of a desire to remain "closeted" about their work, but because they do not want to be categorized as sex workers at all. Although they often do frame their commercial sexual activities as "work" (*trabalho*), they do not label it as such when it comes to legal and social professionalization. This is difficult to reconcile with the movement's emphasis on professional pride and labor rights, and creates unique challenges for persons both in and outside the movement who are charged with crafting and implementing public policy that deeply affects this population. This problem may be true of both male and female sex workers, but I focus here only on the challenges specific to these men, such as their intense fear of being wrongly categorized as gay, their view of "sex work" as a feminized occupational category, and the reality that their machismo impedes communication and solidarity with one another and other stakeholders (see also Aggleton 1999).

Past Efforts

In 1991 Rio de Janeiro was already home to two thousand boys and men who supported themselves or their families by selling sex to other men, including gay tourists (Longo 1998a). Just as the gay travel industry began to boom

worldwide in the 1990s, Brazil's inflation soared to an astonishing annualized inflation rate of 6,100 percent in 1994 (Tullio and Ronci 1996). Thus Brazil became exceptionally affordable for foreigners at a time when many young Brazilians were desperate for money and excited by the additional opportunities that relationships with foreigners could provide, including travel and even immigration. Immigration is difficult for men, however, as they cannot marry their male clients, nor would many choose to. However, they do sometimes vacation in Europe with clients or through networks of friends and sex worker colleagues.

Male prostitution certainly thrived prior to this time, but by the 1990s it was moving increasingly indoors to bars and *saunas*, the latter term used for bathhouses featuring brothel-style prostitution (Parker 1999; Green 1999). What had often been a confusing network of informal sexual economies during Brazil's military dictatorship (1960–1984) became increasingly formalized in the 1990s, especially in urban centers such as Rio de Janeiro. This transformation eventually accommodated the increasing popularity of Brazil in gay travel circles, gay magazines, and online gay communications networks. With the formalization of the gay tourist industry into a lucrative market that included package tours organized exclusively for gay men *Michês* filled out the rapidly segmenting market, which included high-end escorts advertising in newspapers (and eventually online), cheap and seedy to expensive and ultra-modern *saunas*, low-wage street (or beach) prostitution, and, of course, more informal exchanges made in various venues. This diversification is not particularly unique in and of itself, but its cumulative effects created Brazil's contemporary gay sex industry.

Ironically the contemporary gay tourist industry would not exist without the outreach and HIV prevention efforts of Projeto Pegacão, which first emerged in 1989 under the leadership of Paulo Longo and draws its name from a slang expression alluding to "cruising" for sex. Several of my tourist interlocutors explained that they and their friends had stopped visiting the Dominican Republic and Mexico over concerns about HIV but that Brazil's lower HIV rates made it appealing. When the project began, only 15 percent of *michês* surveyed reported using condoms, but that figure increased to a reported 80 percent within a year (Larvie 1999, 1997; Longo 1998b). *Michês* consistently referred one another to Longo and his three-person staff, and several began distributing condoms to colleagues themselves. Despite some successes and recognition, the project was effectively bankrupt by 1998, and Longo died in 2004 at the age of forty. Longo complained that funders preferred distributing educational pamphlets and "did not seem to be interested

in financing a project whose methodology is based upon the relationship between street educators and the target audience" (Longo 1998b).

The sexual landscape of the city has shifted considerably since Longo's outreach work, but street hustling still exists, as does noncommercial and quasi-commercial gay cruising for public sex. Because Rio also has a well-deserved reputation for crime, poverty, and violence, the city's safe, convenient, and legal *saunas* became an appealing alternative for gay tourists. Many—though not all—of these *saunas* feature *michês*. Here, gay tourists and locals can cruise several floors of bars, video rooms, wet or dry saunas, showers, hot tubs, workout centers, and stages featuring entertainments such as go-go dancing, drag performances, and even bingo games.

Michês, who often wear a colored towel to differentiate them from clients in white, stroll throughout the *saunas* casting provocative glances and flirtatiously revealing their genitals to prospective clients. Clients negotiate prices with and pay *michês* directly, whereas *sauna* management profits from the sale of drinks and food, as well as the entry charged to the *michês* (U.S.$5) and clients (U.S.$15). Management also collects U.S.$15 or more from clients who rent *cabines* (private rooms) for forty- to sixty-minute sexual sessions, known as *programas*, that often include clean linens, condoms, and lubricant. In order to bypass laws against pimping, *saunas* cannot profit directly from the *michê*'s sexual labor. Despite this prohibition, some interlocutors reported that a few establishments make clients pay the house, which then pays a portion of the money to the *michê*.

Saunas also employ staff members (some of them former *michês*) as doormen, bartenders, or locker-room attendants. Although rigid divisions exist between staff and sex workers, some staff members envy the money *michês* make and make themselves available for post-shift *programas*. *Michês* do not have set schedules and tend to work only when they need money, and they are quick to admit that they spend their earnings on clothes, electronics, going to clubs, or on gifts for girlfriends. *Michês* sometimes work for more than one *sauna*, especially in Rio, as typically no exclusive agreements are made between management and *michês*. Upon entering a *sauna* for the afternoon or evening, however, they must commit to a stay for a set number of hours. Leaving early, either alone or with a client, necessitates paying a fee or a bribe to the manager.

Various nongovernmental organizations (NGOs) and government workers have targeted *saunas* for safe sex education and outreach efforts. The *Michês* I know appreciate the information and the effort but told me they had little interest in getting deeply involved with these organizations, which they

sometimes describe as condescending, or in forming their own. "There is no NGO to really help the *boys*. They just want to find out if you have a disease," Jonaton complained. "I don't want [any contact] with them." Others said the information was unnecessary because they already have a thorough knowledge of safe sex practices and extremely high rates of condom use. Relying on self-reporting can be dangerous, as male sex workers sometimes say what they think researchers want to hear (Padilla 2007, 10), but I have observed many casual conversations between *michês* regarding the best strategies for determining when one ought to use condoms for oral sex. They show no such ambivalence regarding condoms and anal sex, and are quite emphatic on this point. Indeed, mutual suspicion between clients and *michês* seems to have resulted in the normalization of condom use. Thus, in at least this one regard, bias against gays and sex workers appears to be keeping people safe.

Challenges

Despite my optimism about certain aspects of sexual health, very few of the *michês* use condoms with their intimate female partners. Some of the men say they get tested regularly at the local clinics, but only a few ever offered convincing details. Substance abuse is high, especially of alcohol, marijuana, and cocaine, and some use these drugs as a form of self-medication either to deal with aspects of the work they do not like (see also Mimiaga et al. 2009, 62) or at the client's request. The men also frequently purchase inexpensive counterfeit versions of an erectile dysfunction drug called Pramil from *sauna* staff or other sex workers. Antonio, a *sauna michê* in his early twenties, noted the undesirable but necessary nature of the drug: "When the house is very full and there are lots of clients wanting to go upstairs [to a *cabine*], then I have to take Pramil, you know? And then you do four or five *programas*. Without Pramil I can only do one or two." Because of the unreliable quality and results of these counterfeit drugs, some men take them by the handful, resulting in painful side effects such as headaches and heart palpitations. Nineteen-year-old Carlos described his only experience with it as frightening, noting, "Your veins swell, your ears get hot, your face gets hot, you turn red . . . I've already learned the dangers of it."

Although it is true that working in a *sauna* is far safer and more lucrative than working on the streets or beaches, *michês* find it difficult to stay competitive. Seasoned *michês* in their mid-twenties wax nostalgic about the days when there were fewer *saunas*. Twenty-five-year-old Anderson complained, "Nowadays, even without advertising, every day five or ten [guys] knock on

the door without even calling the *sauna* beforehand. . . . [It used to be that] a *boy* would knock on the door to enter and there was a test to see if the *boy* was any good . . . Now, whoever comes in, comes in." Because many clients who visit Brazil are looking for stereotypically masculine Latin "machos" rather than young, slender "twinks," men can work well into their thirties, especially if they avoid drug and alcohol use and the sun's deleterious effects. As men age, they tend to move to seedier, lower-budget *saunas* and then to known hustler bars and street corners.

The working conditions in *saunas* are hardly ideal for younger *michês*, who complain that some *saunas* overcharge them for a towel large enough to wrap around their waist, forcing them to use a single hand towel too small to fasten. Some *saunas* feature "no towel nights," which are as unpopular with *michês* as they are popular with clients, who receive large towels, and can rent bath robes and even wear street clothes in some establishments. *Michês* complain that they feel vulnerable when nude and dislike being unable to decide how most effectively to reveal intimate parts of their bodies to prospective clients. As nineteen-year-old Naldo said of his experience working in a low-end *sauna* for nine months:

> My first impression of "the life" was harsh because I started in this *sauna* that forced me to work naked and being naked was very difficult because I was not ready to be naked in front of everybody! Just walking around normally. In other saunas you can get a towel . . . but this *sauna* is nude [some nights]. Here it was the most difficult, but later I got used to it. [Sometimes] they make you pay between 5 and 10R$ [U.S.$3–$6], depending on the towel that you are going to use. [For] 5R$ you get a small towel, and [you have to stay at least] five hours inside the house. And for 10R$, [you stay at least] three hours inside the house with a bigger towel. The point [of the pricing] is to get you to use a small towel so the *boys* are naked.

While few *saunas* directly pressure *michês* to accept clients against their will, *michês* do complain that *saunas* do not allow them to leave early without paying a penalty. The fact that they are unable to easily leave the *sauna*, especially on a slow night, also means that the *michê* is in a more difficult bargaining position. He may have to accept a client he does not like, accept less money, or agree to provide sexual services that he usually prefers not to, such as being anally penetrated. Those who work outdoors have even more grievous complaints, as they have no real recourse when a client tries to change the terms of their agreement. Indoor and outdoor *michês* both

struggle with stigmatization at non-erotic establishments in the areas where they work, where they are subjected to poor service, dirty looks, snide comments, sudden and inexplicable bathroom closures, and unforeseen changes to hours of operation. It is in these most quotidian moments of marginalization where the sting of being stigmatized is felt most acutely.

When stigmatization is manifested in discrimination, the subject is reduced from a complete and valued person and rendered as a partial or incomplete subject (Goffman 1963). For many of the men, being stigmatized was so much a part of their lives that they had difficulty recognizing when a slight was not actually directed at them. For example, one time when a toilet was genuinely broken, a *michê* insisted that the manager probably broke it himself to prevent him from using it. Here it is worth remembering that examples of "felt stigma" are a result of the internalization of real stigma and are damaging in their own right (Halgrimsdottir et al. 2006).

Michês who work in areas where there is not much tourist traffic are at even greater risk and constitute a very different population. The organization Garotos da Noite, based in the Amazonian city of Manaus (population 1.8 million) has very few resources and relies almost exclusively on the work of a few volunteers to do outreach to *michês*. Outreach project manager Dartanha Silva reviewed his current research and work with me, and the results are frightening:

> When we reached out to the *michês*, they pulled away. But the biggest problem was in relation to public policy, which for male prostitution is almost nonexistent . . . and when we pass information on to [*michês*] about [STI] prevention [and] human rights, they don't want to know, unlike the girls . . . The fact that the prevalence of STDs in Manaus is 7 percent more than the national average is very worrying. And they aren't in the habit of using condoms. We talk, do the workshops, but . . . sometimes the client provides the drugs in exchange for him agreeing not to use condoms or they offer more money for the *programa* . . . some of the eighty-nine *michês* we interviewed [in our latest study] were minors . . . [But if we contribute to] police rounding them up, then we've created a problem with the kids because the next time they won't take our material. [We try to tell them] that they shouldn't do *programas* in the client's house or in their own house. Many killings occur for this reason. When it's the client's home, there are *boys* who steal and kill. On the other hand . . . last year there were five *garotos de programa* [rentboys, another term for a male sex worker] murdered by clients because the *garotos* stole from them. We've

been working with *michês* for two years and we still can't get them past the need for prevention . . . The *garotos de programa* have no interest in getting organized.

Whether working in *saunas* or on the streets, with tourists or locals, it is perplexing why the *michês* are resistant to participating in sex workers' organizations. It is true that these men operate from a more privileged position, because they do not face the same severe forms of client violence as female sex workers (Chacham 2007); indeed, Brazilian popular media shows the reverse, as *michês* are often cast as dangerous aggressors (e.g., Kaye 2007; Mott and Ferreira de Cerqueira 2003). Although *michês* are economically subordinate to nearly all their clients, they often do not have (or at least do not choose to honor) the same responsibilities as women sex workers toward children, parents, or other family members, which can make it easier for the men I spoke with in Rio and Bahia to turn down clients or take a few days off. Despite these distinctly male privileges, *michês* continue to insist that they are actually *more* stigmatized than women sex workers.

Most *michês* worried that their families, friends, and girlfriends would think they were gay. As one man noted, "there is more prejudice against men. People think that everyone who works in the sauna is gay. They know the women work because they need to. They think men are there because they like it." Another *michê,* João, cited the temporary nature of the work as another reason for this lack of organization, noting, "With men there's much more prejudice. *Michês* don't organize because nobody is there for life . . . People work there just to get some extra money so there's never going to be an NGO for *garotos de programa*." Note that João makes an important assumption that women enter the profession "for life," even though this is plainly not true.

Yet João, like many men who think of themselves as selling sex temporarily, finds that he cannot afford to stop selling sex. It is the best job available to him that he is willing to accept, and he considers it a far better option than the menial labor available to him. So while the *michês* are genuine when they say selling sex is temporary, consistently choosing to stay in "the life" is a rational (albeit repetitive) decision. The perceived impermanence of their work thus makes organizing irrelevant in their view, as any unpleasant aspects can be tolerated on the grounds that they are temporary. As one *michê* explained with deliberately self-conscious irony when I asked if he was still doing *programas*, "No, I quit." Then he smiled. "Every week, I quit."

(Dis)identities

Michês spend a great deal of time deflecting intimations that they are gay. It is commonly accepted among this population that a straight men can anally penetrate another man and retain his heterosexual status (e.g., Parker 1999; Carrillo 2002; Green 1999). However, being passive in anal intercourse is usually seen as something that no straight man - not even a *michê* - would do. Consequently, many *michês* deny that they engage in this activity. The truth, however, is that the majority of *michês* will accept anal penetration for the right amount of money, and some will even do so at no extra cost (or a small extra fee to keep up appearances.) Some clients take this as a sign that the *michê* enjoys the activity, finds the client attractive, and/or is "really gay after all." What these clients fail to realize is that when a *michê* has done multiple *programas* (especially if he ejaculated during any of them), or if he is faced with a client for whom he does not think he will be able to sustain an erection, he can be anally penetrated without worrying about his performance or losing money.

Michês prefer to keep such details "*entre quarto paredes*"("between four walls") and dislike discussing their *programas* with one another. This is an additional way of managing stigmatization and compartmentalizing their sexual behavior as distinct from their sexual identity. Sometimes, *michês* will even get angry at one another if they know or suspect someone is engaging in passive anal sex, especially at a reduced rate. This increases the risk that clients will expect similar services and pricing. Consequently, when gay-identified *michês* begin working in a *sauna* or public area, they can disrupt the social order and cause tension.

The concern with being mistaken for gay is a primary reason why many choose to lead a complete double life. They are less concerned about the stigma attached to being sexually promiscuous, which is disproportionately (and unfairly) applied to women, than they are worried that friends, family or intimate female partners might suspect them of being a "faggot" (*viado*). The priority given to warding off the stigma of homosexuality reveals a great deal. These men have internalized homophobia and experience the same shame that gay clients may experience in their own lives, and yet they react to this experience in different ways. A few become extremely homophobic and describe their existences as miserable objects suffering at the hands of perverts. Nearly all the men I know, however, emerge from their own experiences of being stigmatized with sympathy for (rather than empathy with) their clients. They tended to describe them as "sad" and "pathetic," but said

these words with no tinge of malice. "I pity them. Most of them are so lonely. Look, they say you need a big dick [*mala*] to be successful as a *boy*," Anderson explained to me one afternoon as he sipped a beer. "But you know, really, you just need to be able to hold them. Many *boys* don't understand this, they can't do it . . . A big dick helps, but the main thing is that there is no one in the world for them. It's very sad."

Women's Work

It is telling that Anderson positions the job of the sex worker as a caregiver. The labor is affective as well as sexual. Affective labor is often discussed in regard to care industries in which individuals, usually women, engage in these economies, even though their jobs are actually (or should be) about tasks other than affect (Hochschild 1983). Many *michês* who spoke quite casually about "fucking," "sucking," and other acts were much less comfortable discussing the intimate behaviors that clients often requested, such as cuddling or kissing, but these activities speak to the caregiving role that men such as Anderson often had, and their uneasiness with what they perceived as an emasculating form of labor. Even those who did not want to discuss cuddling with clients had stories about clients who cried. This was especially true of older, Brazilian clients. I heard of lonely Brazilian bachelors, married men, and numerous priests who often wept during or after sex. Some would even pay for a double session, sitting contemplatively there with the *michê*. Several times I entered bar areas of *saunas* and saw *michês* I knew sitting stoically with an arm over a Brazilian client's shoulder after a session, as the client stared blankly across the smoky room downing the corrosively high proof liquor known as *cachaça*.

Other clients who desired affective labor from the *michês* included tourists who took them sightseeing and to dinner, a notable event given that many Brazilian tourist sites, such as the famous Christ statue, are far too expensive for poorer Brazilians to visit. In these instances, they expected the *michês* to function as tour guides and entertaining companions. Such arrangements allowed *michês* to speak euphemistically of "working with tourists," describing themselves as tour guides or venders regardless of how much of their income was derived from that activity or the amount of time spent on it. This kind of disidentification is not surprising for anyone who has spent much time around or working with people in informal sexual economies (Kong 2006; Munoz 1999), but many of the *michê,* primarily in Bahia, had girlfriends or wives who were also sex workers. Although they understand sex to

be work (*trabalho*) and understood themselves to be selling sex, they would often reject words like "sex worker," "prostitute," "*michê*," and even "*garoto de programa,*" and identify with other job categories even when they derived comparatively little to no income from those jobs.

Considerable effort has been put into creating effective sexual health prevention programming for men who have sex with men precisely because of the importance of recognizing the separation of identity and behavior, but it is also important to understand that this principle must be extended in other ways if one is to comprehend the reluctance of straight-identified men who sell sex to enter into projects that they associate with sex workers' rights movements.

Notably *michês* often denied that they functioned as a supportive community or that they worked collectively, although they do work together to keep prices up, to drive pickpockets or aggressive panhandlers and street children out of their territory, and to keep the immediate area of the beaches and streets where they worked safe enough for their work. They also alerted one another when there was free food to be had from a church group and warned one another of bad clients. Beyond general recommendations, however, they rarely spoke about the specifics of their work life and were cautious about revealing details about their home lives to one another. For *michês*, it is important to withhold information that could make them vulnerable to being dropped to the bottom of the *michê* hierarchy. This includes not only hiding details about what acts they are willing to perform but also overreporting their prices (to emphasize their distaste for sex with men), overreporting both their penis size and their numbers of female sexual partners, and using homophobic epithets to describe clients or *michês* who are suspected of being gay. By reasserting their own masculinity while decreasing the amount of honest communication they have with one another, they are better able to manage stigmatization.

Another important communication strategy that places them in a favorable position in the *michê* hierarchy is to assert their status as an honorable person. In interviews as well as in interactions with one another, they are quick to point out that they do not cheat or steal from clients but that others do. They often insist that they do not use drugs or that they only use marijuana, even though this information is frequently false. They emphasize their status as committed and involved fathers who are selling sex to provide for their children. This claim is true for several of the men I know well but is doubtful in other cases. Regardless of the truth of any of these claims, the important point is that they use these conventional markers of good men to

emphasize that they are not like other *michês* they know and definitely not like the violent portrayals in the popular media. By presenting themselves in this manner, they use normative ideas about masculinity to lessen the stigma they experience. The combined effect of these omissions, additions, and reframings is that they re-create themselves along the lines of another stereotypical figure: the prostitute with the heart of gold.

Conclusions

The hesitancy, apathy, and hostility *michês* express regarding sex workers' rights highlight the fact that they often feel patronized or feared as a vector of disease by certain service providers. Evidently *sauna* labor conditions also need to be reformed, which is unlikely to happen without *michês*' engagement in collective bargaining. My research findings also suggest other recommendations for substantive policy change concerning *michês*. In the area of service provision, many *michês* are eager to learn skills either to leave the sex industry or to improve their skills as a sex worker. Providing these services, however, in keeping with the men's stated interests, may be less appealing to providers who prefer to remain focused solely on sexual health issues even though sexual health is inseparable from other facets of the men's lives (e.g., Parsons, Koken, and Bimbi 2007). Many *michês* want to learn English and computer skills (especially how to build their own websites), to acquire legal resources and advocates, to better understand how to navigate bureaucracy, and to improve their Portuguese literacy. They also want greater access to other career paths, including microcredit loans to start businesses, such as fruit carts and magazine kiosks.

Another area needing improvement is education for their clients; some clients do and say horrible things, and businesses such as *saunas* as well as governments do little to tell sex tourists what is expected of them as consumers. *Saunas*, for example, should post a sex workers' bill of rights developed together with the *michês* and including precautions that clients should observe proper hygiene and respect the terms of their agreements (both acts and prices), as well as information on payment. Significant disagreements among sex tourists involve the issues of tipping, the importance or insignificance of overpaying, and the ethics of using large amounts of cash to leverage men they meet in public into performing sexual acts.

The central challenge for organizational efforts is that they take into account the effects of stigmatization on different sex worker populations. For *michês*, existing models of sex workers' rights that hinge on the pride

of professionalization may be doomed, as these men reject sex work as an identity-forming practice. One must therefore look to sexual health models designed specifically for men who have sex with men (MSM). The fusion of these two models—sex workers' rights activism and MSM-based outreach, each already successful in Brazil—could provide an organizational structure with the wider appeal that it is geared toward "men who sell sex to men." Until such time as such efforts get started, however, a more thorough understanding of the processes of stigmatization should inform current legislation, activism, and advocacy projects.

NOTES

1. The statement condemning prostitution can be found in United States Congress 2003; United States Leadership Against HIV/AIDS, Tuberculosis, and Malaria Act of 2003; and House Resolution 1298/Public Law 108-025.

2. Brazil's Ministry of Labor provides a useful model for the classification of "sex professionals" (*Profissionais do sexo*). It is referenced in the Classification of Occupations (CBO) as #5198-05.

3. Men and boys (including street children) also sell sex to local men in other neighborhoods and locations, including downtown streets, slums, and rural communities. For more on sexuality among street children in Brazil, see Richards 2005.