‘Shifting markets, shifting risks: HIV/AIDS prevention and the geographies of male
and transgender tourist-orientated sex work in Phuket, Thailand’

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Introducing sex tourism

Tourism, sexual relations and economic exchanges have been inextricably linked since the very advent of international travel. However, these inter-linkages have become increasingly intense and pervasive over the past three decades, with sex tourism representing a growing proportion of both sex work and tourism. A recent report by UNAIDS states that “increasingly, sex work is associated with some forms of travel and tourism, and specifically with the recent growth of sex tourism” (UNAIDS, 2002: 4), whilst Oppermann concludes that sex tourism now accounts for a “sizeable proportion of all tourism across the globe”, from the Asia-Pacific to Africa and from the Americas to Europe (Oppermann, 1998: 159). Sex tourism’s growing economic, social and political importance has thus commanded significant attention from the media and a variety of official and voluntary organisations throughout the world. However, the phenomenon has received relatively scant interest in academic arenas; Thorbek (2002) asserts that it has become a “non-topic”, whilst Rao observes that “academe has not given sex tourism the attention it deserves” (Rao, 1999: 99). Consequently, the concept of sex tourism remains inadequately theorised, restrictively defined and poorly understood. Rao’s work for example, depicts sex tourism in one-dimensional, stereotypical terms:

“Sex tourism is the dark side of the global phenomenon of tourism … [it] is a purely physical encounter in which the partner is no more than an animated object. Who is a sex tourist? A good definition … is a man who is going through a mid-life crisis, who has been disenchanted with his enjoyment of
life due to feminism and women’s liberation rhetoric” (Rao, 1999: 96).

Such essentialist understandings over-simplify and mask the complex processes by which individuals choose to seek sexual gratification, firstly within commercial sex, and secondly as part of the tourist experience (Kruhse-Mount Burton, 1995). Moreover, Rao’s work typifies the vast majority of writing on sex tourism, which provides highly structuralist accounts of the macro processes involved - following either a mono-dimensional political economy or gender-culture framework - without linking them to the lived experience of these encounters (Askew, 1998). Indeed as Oppermann (1998: 19) recognises, “few authors have actually collected primary data”, but rely instead upon secondary sources to substantiate theoretical presuppositions. As a result, the majority of scholarly work concerning sex tourism remains abstract and de-contextualised, taking little account of the shifting realities of the phenomenon in the twenty-first century. Far from being fixed or monolithic as is often portrayed, sex tourism is highly dynamic and has undergone profound changes in recent years that demand urgent research (Clift and Carter, 2000). In the time of HIV/AIDS, the necessity of such research becomes even more pressing, in order to develop more nuanced and appropriate frameworks for use in policy-making circles. For as Hall recognises:

“International travel and the spread of HIV/AIDS are inseparable. Control of HIV/AIDS transmission can only be effective if management regimes take into account the supply and demand aspects of sex tourism and its international dimensions” (Hall, 1996: 194).
Thailand is often described as the sex tourist destination, yet the industry has shifted dramatically in recent years, with profound implications for HIV/AIDS prevention. In particular, two salient trends have emerged that require critical analysis: the growing heterogeneity of first, sex tourists and workers and second, sexual-economic exchanges. In order to highlight these two trends, this paper will draw upon eight months of ethnographic fieldwork - comprising participant observation, semi and unstructured interviews, focus groups and sexual diaries - conducted during 2004 and 2005 in the popular tourist island of Phuket.

**The growing heterogeneity of sex tourists and sex workers**

Influenced by ‘radical feminism’, there has been a tendency to conceptualise sex tourism primarily, if not solely, as an expression of male patriarchal power. This presumes sex tourists to be both male and heterosexual, and sex workers to be female. However, the burgeoning number of male and transgender sex workers serving female and non-heterosexual male tourists in Thailand disrupts such an understanding. As Jackson and Cook note:

“One notable limitation of most studies of Asian prostitution has been their failure to incorporate the significant and growing population of male and transgender sex workers as a feature of the sex industry, and the implications this may have for understanding the phenomenon as a whole” (Jackson and Cook, 2000: 13).
However, these growing markets are of more than purely academic importance. The World Health Organisation (2001) admits that these workers comprise a “major lacuna” in the existing knowledge of official and voluntary organisations and consequently remain marginalised in HIV/AIDS policies. The three primary sexual networks involved in these emerging markets are: gay sex tourism, female sex tourism and transgender sex tourism - terms that I will briefly elaborate upon in order to avoid any possible misunderstandings.

Whilst a small number of heterosexually-identifying males have sexual-economic exchanges with male sex workers, the vast majority of male tourists having sex with these workers identified as ‘gay’ in my research (although a number of these men were ‘closeted’ to varying degrees in their home countries), hence the term ‘gay sex tourism’ is largely appropriate in Phuket. ‘Female sex tourism’ is a more contentious term in the literature; indeed it is a term that has excited considerable and polarised debate amongst scholars over the past decade. One school of thought, heavily influenced by the work of Pruitt and LaFont (1995), makes a conceptual distinction between male ‘sex tourism’ and female ‘romance tourism’. However, as scholars such as Kempadoo (2001) and Sanchez-Taylor (2001) have persuasively argued, this distinction is highly problematic and based upon traditional and gender essentialist models of sexuality. Moreover, such an approach privileges gender over racial and economic power, rather than adopting a more multi-dimensional notion of sex tourism that explores their complex interaction in encounters between tourists and locals. Thus I utilise the term ‘female sex tourism’ within a more holistic notion of sex tourism, which can accommodate the more direct sexual-economic exchanges between female tourists and ‘go-go boys’ working in Phuket’s gay area, as
well as the less commercialised and more protracted liaisons between female tourists and local ‘beach boys’ (it should be noted that the colloquial terms for male and transgender sex workers - go-go boys, money boys, beach boys and ladyboys - do not refer to child sex work in any way).

Whilst gay and female sex tourism refer to the identity of the tourists, transgender sex tourism on the other hand, refers to the workers. This is because there is no established terminology for tourists seeking sexual encounters with transgender sex workers, nor even of the sexuality of individuals seeking sex with transgenders more broadly. The only article I have located which attempts to do this utilises the term ‘gynandromorphilia’ (Blanchard and Collins, 1993), which serves only to further pathologise and stigmatise the desire. I am similarly reticent to use the term 'MSM' (men who have sex with men), within which it is often currently included in HIV/AIDS policy circles, because neither I nor the individuals involved, regard this as sex between two men.

The majority of tourists I interviewed who had sex with transgender sex workers identified as heterosexual men, since they often had female partners, were not attracted to gender normative males and viewed these encounters merely as sexual experimentation whilst on holiday. There are also a number of heterosexual men who enter into sexual encounters with transgenders believing their partner to be female. For post-operative transgenders this is relatively easy to achieve since they can use their neo-vagina, whereas pre-operative transgenders must utilise a number of more creative techniques, such as feigning menstruation and performing only oral sex, or by utilising anal or ‘thigh’
sex to ‘pass’ for vaginal sex. However, I have accompanied this classification with a question mark in the diagram, because a significant number of other such tourists who sought sex with transgenders seemed confused about their sexuality. These tourists were often those who had experienced large numbers of sexual relations with pre-operative transgenders, had regular contact with these workers’ penises during mutual masturbation, oral and/or anal sex and sought such images in pornography. Indeed, the vast majority of these men were members of transgender pornographic websites, which incidentally, is the fastest expanding sector of Internet pornography (Thomas, 2005). Interestingly, many of these men found the lack of any category or term to describe their sexual desires deeply disturbing and marginalizing. For example one such tourist, when asked how he would describe his sexual orientation replied:

“I don’t know, ‘cos there’s no bloody name for it is there? I’m definitely not gay, or even bisexual, ‘cos I’m not into blokes. But I guess I’m not totally straight ‘cos I’m into ladyboys. So, I guess that just makes me a pervert”.

The growing heterogeneity of sexual-economic exchanges

Sex tourism is primarily represented as consisting of brief, cash-for-sex exchanges, however, the increasing diversity of sexual-economic exchanges – in relation to the nature, places and terms of exchange – challenges such a conceptualisation. In line with the broader sex industries, not only is the sex tourist industry expanding, it is also diversifying and as a result its spatial organisation and structures are being reconfigured.
As the United Nations Development Programme recently concluded: “a shift has occurred in the sex trade itself – away from ‘direct’ sex work based in brothels towards ‘indirect’ and less easily regulated settings such as bars, clubs, restaurants and hotels” (UNDP, 2004: 53). Thus increasing numbers of sex tourists find sexual gratification as part of their holiday experience without resorting to ‘typical’ sex provider settings, and even where they do, direct monetary exchange for sexual services may not be prominent (WHO, 2001). Given this trend, it is necessary to move beyond the stereotypical representations and restrictive definitions that currently dominate discussions of sex tourism. For example, the WTO’s definition of sex tourism as “tourism which has as its primary purpose the effecting of a commercial sexual relationship” (WTO, 1995), has become ubiquitous in academic and institutional arenas, but I would argue is both limiting and out-dated.

The definition of a sex tourist as someone whose primary goal of travel is commercial sex, highlights the WTO committee’s focus on tackling organised ‘sex tours’, which emerged in the 1980s but today represent only a small minority of encounters. Moreover, by defining sex tourists’ primary purpose as commercial sex, you also mask the complex factors and broader processes involved in the majority of sex tourism encounters. For many sex tourists, commercial sex is not the principal reason for travel, but one of a series of expectations from their holiday. The WTO definition also excludes the significant proportion of sex tourists who are labelled ‘situational sex tourists’, since there is no intention to engage in sexual-economic exchanges with locals during their travels, but nevertheless this occurs due to a combination of opportunity, anonymity, and
crucially the *ambiguity* of the exchange. Many of these tourists have never engaged in commercial sex in the West, nor regard their encounters as a ‘commercial sexual relationship’, because it does not resemble Western models of sex work. Whilst direct monetary exchange is commonly considered to be the fundamental characteristic of the sex worker-client relationship, it is far less prominent in sex tourism than in Western sex work. Erik Cohen (1993) noted a decade ago that sex tourism exchanges are far less contractual than in the West and are ‘incompletely commercialised’. The shift towards ‘indirect sex work’ represents a growth in what Cohen terms ‘open-ended prostitution’, whereby tourist-orientated sex workers utilise ‘soft-selling techniques’, which play down the commercial basis of exchanges and do not seek reimbursement before or after each sexual act, but extract material reward in a variety of forms: meals, drinks, jewellery, designer clothes, housing and international travel for example.

Moreover, tourist-orientated sex workers provide a plethora of other embodied labour services: they often act as companion and interpreter; shop, carry luggage, tidy and clean the client’s room; wash and fold their clothes; and provide massages and manicures for example (O’Connell Davidson, 1995). Thus research has indicated that in the West, 80% of sex work encounters last less than one hour, whereas over half of sex tourism encounters last for several days or more (Kleiber and Wilke, 1995 quoted in Oppermann, 1998). Such protracted encounters, combined with the absence of monetary transactions challenge and destabilise the commercial/non-commercial sex binary, highlighting that the commercial nature of sex tourism encounters is more a matter of continua than a simple either/or classification.
Thus several scholars have noted that Western models of sex work are not necessarily applicable to the context of sex tourism and that consequently many of the current HIV prevention programmes deployed in these domains are inappropriate and ineffective. Indeed, there is a growing tendency for both sex tourists and sex workers to disassociate themselves from these stigmatised identities. Goffman (1963) has argued that in response to the management of a ‘spoiled identity’, members of stigmatised groups who have internalised negative beliefs and stereotypes about themselves, will employ various strategies to distance themselves from these groups. Relationships are thus often discursively reconfigured as boyfriend or girlfriend, rather than as sex worker or client. This creates acute problems for traditional HIV/AIDS prevention programs, which - heavily influenced by the discourses of international humanitarian organisations - rely upon a ‘risk group’ approach that aims to identify, register and regulate the behaviour of all sex workers. In this new context ‘PLACE-based approaches’ (Weir et al, 2003) to HIV/AIDS prevention provide a more appropriate tool for policy-makers and NGOs.

A geographical approach to HIV/AIDS prevention

“The PLACE method recognizes that it may be more feasible to reach individuals with high rates of new partnership acquisition with a place-based rather than a risk-group approach. The PLACE approach …identifies core areas where people with high rates of new partnership acquisition can be reached without requiring intervention programs to grapple with either
defining or assigning membership in groups that often carry stigma” (Weir et al, 2003).

Tourist resorts in general and sex tourist destinations in particular, form ‘core areas’ - to use Weir et al’s (2003) term - that urgently demand targeted HIV prevention programs. These resorts facilitate a rapid mixing of sexual networks, which would otherwise never come into direct contact. Central to this is the liminality of the sex tourist experience. Ryan and Hall (2001) observe that the holiday is a liminal experience, temporally constrained and consumed in particular geographical locations, that they term ‘marginal paradises’. In the modern age, the holiday has emerged as a commoditised period of consumption of leisure in places other than home, an accepted channel through which people are temporarily freed from the constraints of responsibilities to employers and social roles they normally occupy. Many tourists with whom I spoke viewed Phuket as a site for sexual experimentation, in terms of the gender, race, culture, age and economic status of sexual partners. One tourist who had sex with local transgenders said:

“I come on holiday to Phuket every year on my own. I like the freedom to do what I like, you know, to try new things. My mates back home wouldn’t understand it, they think I come out here for the ladies, which I did used to, and I just don’t tell them otherwise, because it’s none of their business really. But yeah, when I’m here I want to do things I can’t do at home, you know, I’m on holiday”.
More crucially, this liminality can encourage unsafe sexual practices, since “the psychology of the holidaymaker seems often to involve an escape from rules and restraint, reputation and responsibility; in other words, the very things which safer sex is traditionally seen to rely upon” (Scholey, 2002: 256). This trend was worryingly prevalent in the narratives of tourists with whom I spoke. For example, a female tourist I interviewed shortly after she had been involved in a sexual relationship with a beach boy stated:

“I don’t know what I was thinking, I mean I can’t really explain it, it was like I was in another world, it was, well all a bit surreal really …. there were quite a few times when we didn’t use any condoms and I didn’t even go and get a morning after pill, let alone think about AIDS. Looking back, I can’t believe I did that, I’m never like that at home”

Thus sex tourist resorts constitute one such ‘core area’ that require targeted HIV prevention. However, despite the fact that male and transgender tourist-orientated sex work in Phuket would all fall into the classification of ‘indirect sex work’ (since none is brothel-based - see MAP Report, 2005), a one-size fits all approach is unlikely to be effective. This is because just how indirect the sex work is varies greatly, from the brief monetary exchanges occurring in go-go bars and host bars to the less commercial encounters taking place in gay cafes, restaurants, beach and discos. The type of sex work, interactions and identities thus differs significantly between locations and hence the techniques, terms and issues that HIV prevention tackles must be appropriate to the
specific environment. Therefore rather than classifying these places monolithically as indirect, it is productive to analyse their differing characteristics at a more micro geographical level, to assess the individual challenges and opportunities they provide to HIV prevention policy makers.

Conclusions

Sex tourism has received minimal attention in academic arenas and consequently remains under-theorized and restrictively conceptualized as brief sex-for-money exchanges between heterosexual men and brothel-based female sex workers. However, these images are becoming increasingly divorced from the realities of Thailand’s sex tourism industry in the twenty first century. Rather than taking mono-dimensional approaches to the phenomenon, new conceptual frameworks must be developed that can accommodate the growing heterogeneity of sex tourists and workers, and the complex interplay between gendered, raced and economic powers involved in these encounters. They must also recognize the increasing variety of sexual-economic exchanges; with the shift towards more protracted and less commercialised liaisons in a more diverse set of locations. This trend has created acute problems for HIV/AIDS prevention policy-makers, who are under growing pressure to provide targeted cost-effective prevention strategies due to the current climate of international HIV policy, which many perceive as increasingly treatment-orientated. Indeed, in Thailand prevention has slipped down the ladder of priorities over the past decade, so that it now receives just 8% of the HIV/AIDS budget and less than half of the 1997 level (UNDP, 2004). In such a context, I feel that ‘PLACE-
based’ approaches to prevention will prove especially fruitful. However, they must not reproduce the essentialism of earlier policies, by merely substituting core areas for core groups. Prevention policies must address the individual, the environment and their complex interaction both at a macro and micro-geographical scale. They should therefore utilise a range of specific and appropriate strategies that recognise the diversity of types of sex work, exchanges, interactions and socio-spatial identities involved in these encounters, and the unique opportunities and challenges that each set of places provide.

In sum, the shifting intersections between tourism, sex work, sexuality, gender, sexual behavior and sexual health, have resulted in significantly shifting markets and risks, which demand new approaches from policy-makers if we are to successfully combat the HIV pandemic in the new millennium.
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