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**The Business of Bodies: How Legal Frameworks Shape the Lives of Nevada's  
Sex Workers**

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## **Abstract**

*Nevada is the only U.S. state to permit legal prostitution, yet the systems that regulate its brothels often fall short in protecting sex workers' rights and well-being. This paper draws on 14 interviews with sex workers, brothel owners, and county officials across Nevada to examine how legalized prostitution shapes workers' experiences through economic, social, and health-based lenses. Findings reveal that while legalization offers some safety and structure, inconsistent regulations, exclusionary hiring practices, high entry costs, and lingering social stigma limit its benefits. Workers often face unclear policies, limited bargaining power, and barriers to healthcare access—particularly transgender and male sex workers. Interviewees also highlighted gaps in sexual health education and uneven enforcement of state mandates. These insights underscore the limitations of partial formalization and point to opportunities for regulatory reform that centers worker dignity, inclusivity, and autonomy within the legal sex industry.*

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## **Introduction**

Cultural shifts and evolving social attitudes appear to have gradually reduced some of the taboo surrounding prostitution and sex work, with increasing discussions about these topics emerging in mainstream discourse. Despite shifting cultural perspectives on prostitution, it remains illegal in nearly all U.S. states, with Nevada being the only state that permits regulated brothels in certain counties (AMARK Foundation, 2023). Since the legalization of prostitution in Nevada, state legislation and sexual health regulations have evolved, yet they often place limitations on the rights and well-being of sex workers due to inconsistencies and outdated policies across counties. For example, while Nevada’s brothel system mandates regular sexual health precautions, such as weekly STI testing, other forms of precautions such as “dick-checks”—when clients' genitals are checked for signs of infections before a sexual service—are not regulated (Brents & Hausbeck, 2005). Additionally, sex workers are classified as independent contractors, which can be beneficial when it comes to setting their own work schedules and prices with clients. However, this classification can also complicate matters when they face injuries or are required to pay for weekly STI testing and other materials out of pocket (Brents, 2016). This raises important questions about how state legislation and county policies, while granting sex workers some degree of autonomy, may also unintentionally impose financial, social, and health-specific burdens. As a result, these policies may limit their access to critical resources, ultimately undermining their rights and well-being in a system that should be protecting them.

This paper examines Nevada’s legal framework for prostitution under Nevada Revised Statutes (NRS) 244.3475 and the corresponding county ordinances that permit legalized prostitution, focusing on their impact on sex workers’ well-being through economic, social, and

health lenses. The study explores Nevada legislators' perceptions of prostitution, evaluates current sexual health regulations, and investigates the broader socio-economic consequences for workers in the industry. Interviewing brothel owners, sex workers, and county commissioners will provide insight into how Nevada's unique brothel framework affects those within the system. By exploring the limitations of the current framework and proposing potential improvements, this research emphasizes the need for comprehensive, targeted policies that protect taboo industries and promote fair treatment. Legalizing sex work alone does not guarantee safety or fair treatment; it requires a nuanced, balanced approach that protects sex workers from exploitation, supports industry autonomy, and ensures adequate health safeguards. This research aims to prompt policymakers to address the complexities involved in creating policies for marginalized sectors and underscores the importance of carefully designed protections for those involved in the profession.

## **Background**

### **Prostitution Laws in Nevada**

Prostitution was legalized in Nevada in 1971 through Nevada Revised Statutes (NRS) 244.345, which granted rural counties the authority to license and regulate brothels at their discretion. In practice, this statute restricts legal sex work to licensed brothel establishments only. Before this bill, prostitution was not regulated by the state and was left to the county's jurisdiction. Although prostitution was not heavily regulated state-wide, state officials did enforce a weekly health check in 1937. During World War II, President Franklin D. Roosevelt ordered the suppression of prostitution near military bases, temporarily shutting down Reno and Las Vegas's red-light districts in 1942 (Albert, 2001). When the order was lifted in 1948, Reno

officials attempted to close brothels, a decision upheld by the Nevada Supreme Court in 1949. By 1951, both Reno and Las Vegas had officially banned brothels under nuisance laws, though they continued to operate in more rural parts of the state (Albert, 2001). The growing discontent toward visible prostitution in urban centers led brothel owner Joe Conforte to advocate for licensed brothels. His efforts culminated in the passage of a 1971 law legalizing licensed brothels in Nevada's rural counties, formally establishing the state's unique regulatory system for prostitution. Nevadans, living in Reno and Las Vegas, feared their efforts would be undermined and advocated for legislative restrictions. This led to the addition of a clause prohibiting counties with populations exceeding 200,000 from legalizing prostitution. Although this population threshold was adjusted in later amendments as Nevada's population grew, it continued to prevent urban areas from legalizing prostitution (KUNR, 2021).

Nevada is the only state in the United States that allows legalized prostitution. Under the NRS 201.354 legislation, "It is unlawful for any person to engage in prostitution or solicitation therefor, except in a licensed house of prostitution." Although Nevada allows prostitution in authorized areas, there is heavy regulation on which areas are allowed to apply for the license. Only in counties with populations of less than 700,000 residents are permitted to regulate and legalize brothels in their jurisdiction (NRS 244.345). Out of 17 counties only 10 qualify to regulate prostitution. Out of the ones who qualify, only 7 have licensed and operating brothels, but this number changes frequently (MCI Maps, 2018). If permitted, the board of county commissioners of eligible counties are then allowed to vote for or against banning brothels (Nevada Revised Statutes 244.345). While county commissioners are the primary decision-makers for brothel legalization, public referenda and community input processes can sometimes play a role in shaping these decisions, but little is known about these processes

because change in regulation is infrequent. However, there is no statewide process for legalizing prostitution, as Nevada law delegates this authority to local governments (NRS 244.345). This decentralized approach highlights the significant variation in how prostitution is regulated across Nevada, which may leave room for disparities in worker protections, brothel conditions, and enforcement standards.

Despite legalization across counties, prostitution in Nevada remains subject to significant restrictions and legal consequences. In addition to overseeing licensed brothels, Nevada imposes strict penalties for soliciting prostitution outside of these regulated establishments, with additional provisions addressing serious offenses such as child prostitution and coercion (NRS 201.354). While these offenses are rigorously enforced, exemptions may apply if individuals are suspected to be victims of trafficking (NRS 201.354). Depending on the crime, an individual could face a misdemeanor charge, such as illegally prostituting or soliciting, resulting in up to 6 months in jail. More severe offenses, like trafficking children, prostitution while knowingly having HIV, or "living off the earnings of a prostitute" (often associated with pimping or pandering), are classified as felonies and can result in up to 15 years in prison and fines of up to \$20,000 (Nevada Revised Statutes 201.354; 201.300; 193.130). While the number of arrests and prosecutions fluctuate each year, the Nevada Department of Public Safety State Police Uniform Crime Reporting recorded 3,477 prostitution-related arrests in Nevada in 2017 (NV Crime Mapping, 2018). The prostitution industry in Nevada is heavily regulated, and most related crimes are punished with serious penalties, often as felonies.

While Nevada's efforts to regulate illegal prostitution and sex work conducted outside licensed brothels are important and necessary, there is a notable lack of comprehensive and consistent state oversight regarding the operations and conditions within licensed brothels

themselves. The state has focused its attention on curbing illegal activity and enforcing penalties, to address the underlying issues faced by those involved in unlawful sex work. However, the regulation of licensed brothels is left to local jurisdictions, leading to significant variations in standards for worker protections, safety conditions, and accountability. This lack of consistent oversight leaves gaps in ensuring the well-being and rights of those working within the legal sector of Nevada's prostitution industry.

### **Sexual Health Regulations At-Large and by County**

Public health is a cornerstone of Nevada's legal framework for prostitution, with state laws designed to reduce the transmission of sexually transmitted infections (STIs) and ensure the safety of both sex workers and clients. Under Nevada Revised Statutes (NRS) 201.354, licensed brothels are required to enforce strict health protocols, including initial testing for HIV, syphilis, gonorrhea, and chlamydia before employment, followed by mandatory weekly vaginal or urethral swabs for gonorrhea and chlamydia, and monthly HIV blood tests. The Nevada Administrative Code (NAC) 441A and 441A.800 expand on these requirements, mandating condom use, reporting of communicable diseases, and immediate suspension from work if negative test results are not provided. These comprehensive health regulations reflect the state's zero-tolerance policy on STI transmission within the legal sex industry.

Brothels are required to display health notices and maintain transparent communication about health protocols. Furthermore, any communicable disease diagnosed among sex workers must be reported to health authorities, enabling public health officials to monitor and manage potential outbreaks effectively. Although testing for other sexually transmitted infections is not mandatory, brothel operators may impose additional health requirements at their discretion. Notably, there is no mandatory testing for oral sexually transmitted infections, highlighting a

regulatory gap despite the risk of oral transmission. Additionally, sex workers are not required to undergo anal testing unless they seek employment at a licensed house of prostitution that permits anal intercourse. In such cases, they must provide a rectal specimen for testing gonorrhea and Chlamydia trachomatis using culture, antigen detection, or nucleic acid testing methods. While Nevada enforces strict regulations on weekly STI testing and mandatory condom use, other forms of testing, such as anal and oral, are either nonexistent or more relaxed. The state also does not specify how it monitors compliance with mandatory condom use, highlighting gaps in regulatory enforcement. Moreover, all testing requirements are placed solely on sex workers, while clients are not required to undergo any form of testing, leaving a significant oversight in public health measures (NAC 441A.800)

### **Inconsistencies Among County Ordinances**

The state of Nevada grants considerable regulatory authority to individual counties, resulting in a fragmented and inconsistent legal landscape for brothel operations. While baseline health mandates like STI testing are established at the state level, nearly every other aspect—zoning, licensing limits, permitted acts, and definitions of sex work—is determined locally. Many counties impose strict land-use restrictions, often relegating brothels to remote or industrial zones far from residential, educational, or religious sites. For example, Nye and Mineral Counties prohibit brothels from operating within several hundred yards of schools, churches, or private residences, while Esmeralda County mandates that brothels be at least five miles from any inhabited area (Nye County Code 9.20.130; Mineral County Code 5.12.080; Esmeralda County Ordinance No. 124, 3). Additionally, licensing caps further limit access to legal workspaces; Lander County allows only two brothels countywide, restricted to a single

street in Battle Mountain, and Lyon County permits no more than four licenses total, all confined to a designated “XX Zone.”

Beyond location-based restrictions, county ordinances often reflect outdated or exclusionary understandings of sex work. The language used in legal codes varies significantly, with many counties still using stigmatizing terms such as “prostitute” or “employee of prostitution.” Nye County stands out for using the term “courtesan,” while Elko County uses the more contemporary “sex worker” (Nye County Code 9.20.020; Elko County Code 4-9-4). However, these language differences often signal deeper systemic disparities. In several counties—including Churchill and Mineral—male sex workers are explicitly prohibited from being employed for purposes of prostitution, permitted only to serve in roles such as maintenance, security, or bartending (Churchill County Code 5.20.190; Mineral County Code 5.12.140). While these restrictions are often framed as limitations on who may reside in brothels overnight, they functionally exclude men from participating in legal sex work altogether, reinforcing a deeply heteronormative framework within Nevada’s brothel system.

This exclusionary logic was partially addressed in 2014 when the state introduced an inclusivity update requiring that all workers with urethras—including men and transgender individuals—undergo the same weekly STI testing as cisgender women (NAC 441A.777). Prior to this amendment, the state’s public health policies reflected a narrow view of sex work that largely ignored the existence and needs of non-cisgender and male sex workers. While the policy shift marked a significant step toward inclusivity in sexual health regulation, it also underscores the need to examine whether these updates have been meaningfully implemented across counties that continue to uphold outdated employment restrictions.

Furthermore, the operational status and regulatory transparency of brothels vary dramatically by county. Esmeralda, Churchill, and Humboldt Counties currently have no active brothels, and in the case of Esmeralda, its ordinances are not publicly available online and must be retrieved directly from the county sheriff. On the other hand, White Pine County does have two operating brothels, but its ordinance page pertaining prostitution features dated and incorrect information from 1980 (White Pine County Code 10.36.010). This patchwork of outdated laws, missing documentation, and uneven enforcement further underscores the fragmented nature of brothel governance in Nevada and highlights the need for updated, inclusive, and standardized policy across the state.

Though all counties with legalized prostitution must adhere to state-mandated health regulations, significant variation exists in how these standards are implemented and enforced at the local level. For instance, while state law requires brothels that permit anal sex to collect rectal specimens for weekly testing of gonorrhea and *Chlamydia trachomatis*, only Nye County explicitly references rectal testing in its ordinance (Nye County Code 9.20.150). Additionally, although condom use is required by state public health guidelines during all sexual services, most counties do not explicitly mention condom use in their ordinances, suggesting a lack of clear enforcement language. Beyond standard STI testing, some counties impose additional health requirements. Elko County requires hepatitis B screening (Elko County Code. 4-9-14), while Lyon and Storey Counties include testing for herpes simplex virus as part of their medical protocols (Lyon County Code 5.03.14; Storey County Code 5.16.210). These variations underscore how counties interpret and enforce health standards differently, resulting in inconsistent protections for sex workers across the state.

## **Political Stakeholders and Environment**

The general consensus among proponents of legalized prostitution in Nevada is that regulation enhances safety, reduces health risks, and provides economic benefits. Supporters such as Madam<sup>1</sup> Bella Cummins, owner of Bella's Hacienda Ranch and founder of the Onesta Foundation, a foundation that advocated for legalized prostitution nationally, emphasize that Nevada's regulated brothel system offers protections for sex workers by ensuring regular STI testing, mandatory condom use, and safe working environments (Cummins, 2018). The Nevada Brothel Association, a coalition of brothel owners and workers, advocates for the industry as a legitimate business that supports local economies and provides safer alternatives to unregulated markets (Cummins, 2018). Lance Gilman is also a notable proponent of legalized prostitution as the first brothel owner to be elected in a public office, specifically as Storey County Commissioner. He argues that "the industry is so much more about providing care and human nurturing than anything else" (Gilman, 2016). Supporters believe that Nevada's regulated approach not only ensures better working conditions for sex workers but also serves as a model for balancing public health, safety, and economic benefits in the sex industry.

Conversely, opponents of legalized prostitution in Nevada argue that it perpetuates exploitation, facilitates sex trafficking, and normalizes the commodification of women's bodies. Organizations such as the National Center on Sexual Exploitation (NCOSE) and campaigns like No Little Girl oppose brothels, expressing concerns that legalization fosters environments where trafficking can flourish (NCOSE, 2021; End Sexual Exploitation, 2022). Individuals like Jason Guinasso have led initiatives to place anti-brothel measures on county ballots, portraying prostitution as inherently exploitative and inconsistent with public morality (Guinasso, 2022).

Critics such as Lisa Thompson argue that while Nevada's legal framework regulates brothels, it

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<sup>1</sup> Refers to a female brothel owner or brothel manager

fails to address broader systemic issues faced by sex workers, including economic coercion and social stigma. They call for stricter enforcement and the closure of brothels to dismantle systems they believe enable abuse and exploitation (Nevada Appeal, 2019). This ongoing debate reflects the tension between those advocating for stricter control and abolition of prostitution and those who view legalization as a pathway to safer and more equitable outcomes.

According to a 2011 poll, 64% of Nevadans supported the legalization of prostitution. Among political affiliations, both Democrats and Republicans showed majority support, with 66% of both Democrats and Republicans in favor, indicating that this issue may not be highly polarizing across party lines (Public Policy Polling, 2012). While there are no specific polls comparing approval rates for legalized prostitution between urban and rural areas statewide, data from individual counties highlights a clear urban-rural divide. In Clark County, an urban area that includes Las Vegas, a 2010 poll revealed that 64% of residents opposed legalizing prostitution (Las Vegas Review-Journal, 2010). In contrast, rural counties like Lyon County demonstrated a super majority vote (75%) in support for the industry, voting in a 2018 referendum to keep brothels legal (Reno Gazette Journal, 2018). This data underscores the significant disparity in public opinion on prostitution between urban and rural areas in Nevada.

The debate over legalized prostitution in Nevada is complex, with deeply contrasting views from various groups, including politicians, advocacy organizations, and county populations. These differing perspectives are not just ideological but have real implications for how laws are crafted, regulated, and enforced, influencing the way prostitution is treated socially and legally at both the state and local levels. Urban politicians and advocacy groups like the National Center on Sexual Exploitation often oppose legalization, citing concerns about trafficking and exploitation, while rural officials and groups like the Nevada Brothel Association

support it for its economic and public health benefits. This divide between urban and rural perspectives reflects contrasting priorities that could shape the legal framework, impacting not only how legislation is written but also how it is enforced, leading to disparities in protections and regulations across the state.

## **Literature Review**

Research on Nevada's legalized brothel system remains limited, especially in terms of how current regulations impact sex workers' health, economic well-being, and professional autonomy. Existing studies tend to focus on the historical evolution of Nevada's brothel industry, public attitudes, and broader issues like violence and stigma, while offering less attention to contemporary questions about regulatory gaps, sexual health protocols, and economic precarity. Although foundational texts such as Albert's *Brothel: Mustang Ranch Its Women* offer important insider perspectives, much of the literature remains dated or fails to capture recent demographic shifts and legal changes within the industry. Moreover, few studies evaluate how decentralized legal frameworks affect sex workers' day-to-day experiences or compare how factors like gender identity, labor classification, and regional policy differences intersect. This review draws on existing literature across five key areas—economic conditions, social stigma, legal exclusion, sexual health regulation, and policy inconsistencies—to examine how well current systems protect sex workers and promote equity. It concludes with a theoretical lens from Carlos Maldonado (1995), whose work on partial formalization offers a valuable framework for understanding how legalization, in the absence of structural reform, may reproduce the same vulnerabilities seen in informal or criminalized sectors. This highlights a critical gap in the

literature, emphasizing the necessity for updated, intersectional, and policy-relevant research that more fully considers the lived experiences of Nevada's legal sex workers.

### **Economic Factors**

Economic factors play a part in how sex worker's livelihood, both within legalized systems like Nevada's and in criminalized contexts. Despite this, little research explores the direct impact of economic legislation on their financial stability. The Love Ranch Brothel v. Nevada Department of Employment's Employee Security Division (2020) case highlights this gap, illustrating how legal frameworks create financial burdens by classifying sex workers as private contractors, thereby excluding them from essential financial protections such as health insurance, retirement plans, and paid leave. This classification, common in Nevada's legal system, allows brothel owners to impose high licensing fees and mandatory testing payments, which can reduce workers' earnings (Brents & Hausbeck, 2005). In exchange for these fees and the income lost through revenue-sharing and operational costs, sex workers gain certain protections, such as physical security and mandated health safeguards (Freeman, 2019). Additionally, sex workers are typically required to give 50% of their earnings to the brothel, resulting in an estimated net income of around \$400 per hour after the house takes its share (Dalesandry, 2014). While this hourly rate may appear substantial, it is important to note that such figures are drawn from high-end, well-established brothels and may not reflect the earnings of the average sex worker across Nevada. Moreover, there is limited research on how frequently sex workers receive clients, which makes it difficult to assess how consistent or sustainable these earnings truly are. While this trade-off can be worthwhile for those who can afford the upfront expenses and split-pay, there is limited research on how these costs may push economically

vulnerable sex workers into underground markets, where legal protections are absent and risks are higher. The financial barriers to entry can make the legalized system inaccessible to all.

Additionally, in Nevada's legal brothel system, sex workers are classified as independent contractors rather than employees, a designation that shapes the structure of their work, their access to labor protections, and evidently their pay. While this classification is often justified on the grounds of flexibility and autonomy, it can obscure the reality that many sex workers in Nevada's brothel system often work under conditions that, in practice, may resemble aspects of traditional employment. Legal scholar Eric A. Posner (2017) argues that such arrangements are characteristic of "relational work," in which workers become economically dependent on a specific employer due to relationship-specific investments. When relational workers are misclassified as independent contractors, they lose access to basic labor protections, rendering them vulnerable to exploitation. In this context, Posner's framework raises important questions about whether sex workers—though labeled independent—may experience limited bargaining power and structural dependency within the brothel system, particularly because they are required to operate through licensed brothels in order to work legally. This arrangement may limit their ability to negotiate contract terms, choose where and how they work, or exit exploitative environments without losing access to legal income, thereby possibly resembling the kind of economic reliance Posner associates with relational employment.

### **Public Opinion**

Public opinion significantly shapes the livelihoods of sex workers, impacting both policy decisions and their experiences in public life. Even within Nevada's legalized brothel system, workers report feeling compelled to remain discreet, limiting interactions with surrounding communities to avoid judgment (Blithe and Wolfe, 2017). As Blithe and Wolfe (2017) show, this

results in a form of voluntary isolation, where sex workers often choose not to go into town or disclose their profession, reinforcing exclusion even in legally sanctioned spaces. This dynamic reflects what scholars describe as structural and internalized stigma—where legal recognition does little to counteract the social narratives that frame sex work as morally deviant. Another paper by Grittner and Walsh. (2020) further emphasizes that stigma is not simply an individual experience, but a collective social process that affects workers’ access to housing, healthcare, and public safety. Similarly, Benoit et al. (2017) argue that prostitution stigma deeply shapes working conditions and health outcomes, often leading to stress, social withdrawal, and lack of access to supportive resources. These patterns illustrate how stigma operates across personal and institutional domains, creating barriers to social inclusion regardless of legal status. Language also plays a central role in reinforcing these dynamics. As Tomura (2009) argues, terms like “prostitute” are not neutral descriptors but carry moral judgment that can lead to internalized shame and a fractured sense of identity. In Nevada, some counties continue to use such stigmatizing terminology in their ordinances, legally codifying negative perceptions of sex workers. This institutional language not only legitimizes public bias but also signals to sex workers that they are not fully accepted, even under a legal framework.

### **Lack of Inclusivity**

While there is limited literature specifically addressing how heteronormative assumptions in Nevada’s legal brothel system impact access for transgender, nonbinary, or male sex workers, the structure of current laws suggests the potential for exclusion. The legal framework in Nevada largely presumes a dynamic in which cisgender women provide services to male clients, with little formal recognition of workers who fall outside this binary. This omission may not only restrict opportunities for gender-diverse individuals to engage in legal sex work but may also

limit the expansion of the client base. Although not yet widely studied, these structural gaps could contribute to some individuals seeking work outside the legal system, increasing their exposure to risk, instability, and stigma. Broader scholarship on sex work regulation supports the idea that legal frameworks often reinforce exclusion. McCarthy et al. (2012), in their article *Regulating Sex Work: Heterogeneity in Legal Strategies*, argue that many national and local laws are shaped by dominant moral ideologies that equate sex work with exploitation—particularly when women are involved. They note that such frameworks tend to prioritize criminalization, reinforcing stigma and marginalizing sex workers rather than protecting them. Their analysis highlights the need for legal strategies that are inclusive, rights-based, and grounded in the lived experiences of all sex workers.

It is also notable to account for the recent regulatory updates within the sex industry. In particular, the 2014 inclusivity amendment, which required that men and transgender individuals with urethras undergo the same weekly STI testing as cisgender female workers, marked a significant effort to broaden the scope of Nevada’s sexual health protocols (NAC 441A.777). This update challenged the state’s previously heteronormative framework, which had largely excluded non-cisgender and male sex workers from formal health oversight. While the amendment represents progress, its real-world impact remains under-researched. There is little data on whether the updated testing requirements have improved public health outcomes or whether gaps in enforcement or provider bias persist. Given the evolving composition of the sex work community, more contemporary studies are needed to assess the effectiveness, accessibility, and implementation of these inclusive health measures. This gap in the literature calls for a more comprehensive understanding of how public health policy adapts—or fails to adapt—to meet the needs of a diverse workforce.

## **Sexual Health**

Nevada's efforts to regulate STI spread through prostitution have shown positive results for the public and brothel owners. Historical data indicates that from July 1, 1988, to December 31, 1993, over 20,000 HIV tests were conducted, with none of the women employed at Nevada brothels testing positive (Albert et al., 1995). Additionally, brothel owners report that customers often perceive legal brothels as a safer alternative to illegal sex work due to mandatory STI testing (Brents & Hausbeck, 2005). These findings suggest that Nevada's regulatory approach has contributed to public health safety and consumer confidence.

Despite state mandates requiring regular testing, there is a notable gap in the literature examining the barriers that legal sex workers in Nevada face when trying to access these medical services. This gap, however, does not diminish the well-established importance of regular STI testing—especially for sex workers, who are among the populations most at risk for infection. For example, Cwikel et al. (2008) highlight elevated rates of STIs among hard-to-reach sex worker populations, emphasizing that improved access to testing is a critical component of public health. Additional research also shows that sex workers more broadly face structural barriers to healthcare, including stigma, cost, and limited service availability (Ziegler 2020), challenges that likely mirror those experienced by sex workers in Nevada.

Although there is limited literature on the effects of STI testing and condom use in Nevada, international case studies provide valuable insights. Studies from Thailand demonstrate a significant improvement in public health outcomes among men who had sexual relations with a sex worker after the government promoted the use of condoms (Nelson et al., 1996). Similarly, research in Tijuana, Mexico, shows that registered female sex workers were more likely to undergo HIV testing (86% vs. 56%,  $p < 0.001$ ) and were less likely to test positive for any STI

(33% vs. 53%,  $p < 0.001$ ) or HIV (3% vs. 8%,  $p = 0.039$ ) compared to unregistered workers (Sirotin et al., 2010). While condoms are generally effective, their failure—often due to improper use or tampering—can still lead to STI transmission and unintended pregnancy (Fitch et al. 2002). These risks highlight broader gaps in Nevada’s regulatory system, which, despite mandating frequent STI and HIV testing, does not address other health threats—particularly the unregulated use of sex toys. Research shows that shared sex toys can transmit infections such as HPV and herpes if not properly sanitized (Mitchell et al. 2005). Without standardized cleaning protocols, this poses a preventable yet often overlooked risk within brothel environments.

### **Decentralized Regulations**

Legalized prostitution in Nevada operates under a complex and decentralized regulatory framework, resulting in significant variations across counties and individual brothels. Brents and Hausbeck (2001) highlight that while state law permits counties with populations under 700,000 to legalize prostitution, the actual implementation and regulation are left to local authorities, leading to a patchwork of policies and practices. This decentralized approach allows for a high degree of autonomy among brothel owners, who often establish their own rules and operational procedures, resulting in diverse working conditions and experiences for sex workers.

Additionally, the lack of standardized regulations can lead to inconsistencies in health and safety protocols, licensing fees, and labor practices across different jurisdictions. This variability shows the need for a more cohesive regulatory framework that ensures consistent protections and standards for sex workers throughout the state.

## **Theoretical Framework: Consequences of Uneven Regulations**

Carlos Maldonado's (1995) analysis of informal labor markets offers a useful theoretical lens for evaluating the effectiveness of legal frameworks in transitioning marginalized industries into the formal economy. In "*The Informal Sector: Legalization or Laissez-Faire?*", Maldonado argues that legalization alone is insufficient to improve the conditions of informal sector workers if it is not accompanied by comprehensive and supportive regulation. He critiques both over-regulation and laissez-faire approaches, arguing that both fail to integrate vulnerable workers into the protections and benefits of formal economies. Instead, he advocates for adaptable, context-specific regulation that supports a smooth and equitable transition into legal labor markets.

This framework may be particularly relevant to Nevada's prostitution law. Where laissez-faire approaches to informality, such as criminalizing street-based sex work in counties that illegalize prostitution, perpetuate exploitation by pushing workers into dangerous, unmonitored environments. And while sex work is legal in certain counties, the decentralized nature of regulation, where enforcement is left to individual counties, raises questions about whether legal protections are applied consistently across the state. Brothels may offer structural safeguards such as security personnel or mandatory STI testing (Brents & Hausbeck, 2005), but it remains unclear whether these protections are uniformly enforced or adequate in preventing exploitation. Research by Jovanovski and Tyler (2018) indicates that even within legalized frameworks, sex workers can encounter coercive practices and unsafe working conditions, particularly when oversight is inconsistent or when power dynamics within the industry remain unchecked by exploitative clients or management. These observations suggest that without comprehensive and uniformly enforced regulations, legalized systems may not fully address the

vulnerabilities that sex workers face, underscoring the need for further research into how legal frameworks can be optimized to ensure the safety and rights of sex workers.

International evidence echoes these concerns. Studies in countries with legalized sex work, such as the Netherlands and Bangladesh, highlight how inconsistent regulatory enforcement can undermine the benefits of legalization. For example, a study in the Netherlands found inconsistent condom use among self-employed sex workers, with 35.7% of female and 29.6% of male workers not consistently using condoms during vaginal sex, and 46.2% of female and 35.7% of male workers not consistently using condoms during receptive anal sex (Kampman et al., 2022). Additionally, one-third of these workers did not undergo STI testing in the past year, and many were unaware of low-threshold testing options, pointing to significant gaps in health access and awareness despite legalized frameworks. In Bangladesh, legalized prostitution has similarly failed to provide adequate health protections. Sex workers, particularly those in brothels, face high rates of STI transmission due to poor regulatory enforcement, lack of access to healthcare, and exploitative working conditions (Ullah, 2005). These examples reinforce Maldonado's central point: legalization without consistent, supportive regulation can leave workers exposed to many of the same risks they faced in informal economies.

By applying Maldonado's theory of partial formalization to Nevada's legal sex industry, this study considers how legalization can reproduce many of the same risks and inequities seen in criminalized or informal systems. Within Nevada's brothel framework, legalization provides legal cover but does not guarantee consistent protections, leaving many aspects of sex workers' livelihoods dependent on variable county policies and the discretion of brothel management. This partial formalization risks reinforcing exploitation under the appearance of legitimacy, particularly when legal recognition fails to address the full spectrum of workers' needs.

Existing literature has extensively explored the health and safety benefits of legalization or decriminalization in broad terms, but few studies have evaluated how localized legal frameworks shape sex workers' lived experiences across multiple dimensions—economic opportunity, social inclusion, and perceptions of autonomy. There remains a significant gap in research that holistically examines how sex workers themselves interpret and experience the trade-offs between legalization and decriminalization. This project addresses that gap by exploring how the patchwork of Nevada's county-level regulations impacts sex workers' experience with legal protection and professional dignity—arguing that legalization, without structural reform, may offer symbolic inclusion without addressing the material conditions that most affect sex workers' safety, autonomy, and livelihood.

## **Methods**

This research used qualitative interviews to gather diverse perspectives from individuals involved in Nevada's legalized prostitution system. In total, 14 participants were interviewed: five registered sex workers, five county commissioners, and four brothel owners and/or managers. Each participant worked in a different county and was affiliated with a different brothel or jurisdiction, ensuring minimal overlap and capturing a broad range of experiences across Nevada's decentralized regulatory landscape. Before each interview, participants were informed that no explicit identifying details—such as names, organizations, or county—would be included in the final study. Instead, pseudonyms are used, and participants are described only by their role or institutional affiliation. Participants were also told that the research would explore the livelihoods of sex workers and how various external and logistical factors shape their experiences. See Appendix A for a breakdown of participant demographics.

Nevada currently has 17 operating brothels, owned by approximately 10 individuals or boards—some of whom operate or own more than one location. I reached out to every brothel using publicly available contact information, including phone numbers, email addresses, and in some cases, Instagram profiles. Despite extensive outreach efforts, only five individuals agreed to speak with me. One later withdrew due to scheduling issues and businesses, and another required multiple follow-ups before confirming. Most brothel owners were difficult to contact directly, as many do not spend much time at the brothel itself and instead rely on managers or staff to field calls. When I called, I frequently left voicemails without receiving a response, or was told by managers that I would need to email an owner, often refusing to be interviewed themselves. After emailing all brothel houses using addresses provided by brothel managers and listed on websites, I did not receive any responses directly from brothel owners. Ultimately, most of the brothel representatives I interviewed were individuals I had a prior connection to or had followed up with persistently by phone. A few declined to participate due to concerns about being misrepresented.

Sex workers were generally more willing to speak with me. Initial contacts were made via social media, and my sample grew through snowball sampling as participants referred me to others in the industry. I compensated each participant \$15 for their time. The sex workers I interviewed had a wide range of experience, from as little as one week to over ten years, with some having worked at multiple brothel houses across different counties. My sample also included one male and one transgender female sex worker—groups that represent a small minority within the legal brothel system—providing important insight into perspectives that are often underrepresented in research on Nevada’s sex industry.

In contrast, recruiting county commissioners posed different challenges. Nevada has 10 counties where prostitution is legalized, but only seven currently have active brothels. I reached out to commissioners from all 10 counties through official emails and phone calls. Many declined to participate, citing lack of knowledge about the topic or time constraints. Several did not respond at all, and in some cases, I was only able to leave messages with assistants, receiving no further follow-up. In several instances, commissioners asked for my personal perspective on the legalization of prostitution before agreeing to be interviewed, seemingly gauging whether I was supportive of their stance. This suggests a sensitivity around the topic and a concern with how their views might be represented. Ultimately, I was able to interview five commissioners: three from counties with legal prostitution, one from a county without any active brothels, and one commissioner from a county where prostitution is illegal.

Participants were recruited through a combination of cold outreach and snowball sampling, targeting individuals with direct experience in Nevada's legal sex work system. Only those who were willing and available to participate were included. While this method may underrepresented individuals in more precarious situations—such as those facing coercion or trafficking—it offers valuable insights from those working within the legal framework. It's safe to assume that this pushback indicates that the sex industry in Nevada is highly private and often hesitant to engage with outsiders, particularly researchers, due to fears of misunderstanding, misrepresentation, or reinforcing existing stigma. Many individuals expressed concern about how their words might be portrayed, contributing to a cautious recruitment process. Although this study does not capture the full range of experiences across the industry, the interviews conducted provide a meaningful foundation for evaluating the strengths and gaps of Nevada's

current regulatory landscape and contribute to future policy discussions around health, safety, and legal clarity. See Appendix B for a breakdown of questions asked.

Interviews were conducted via Zoom or phone call, depending on participant preference, each lasting about 30 - 60 mins. Conversations were recorded using Zoom's built-in recording function or the Voice Memos app, with participant consent. Transcripts were generated using Zoom Scribe and manually reviewed for accuracy. The interviews covered consistent core topics—including economic benefit and shortfalls, social stigma, sexual health regulations, workplace practices, and legal frameworks—but questions were carefully tailored to each participant's role and experience. For example, sex workers were asked about their testing procedures, client interactions, and daily routines; brothel owners were asked about hiring processes, compliance with regulations, and operational logistics; and county commissioners were asked about local policy goals, enforcement strategies, and public attitudes toward prostitution.

Initially, qualitative data were categorized using pre-set themes based on the interview guide, including: “Economic Factors,” “Public Perceptions Shaped by Legislative Action,” “Sexual Health Precautions,” and “Inconsistent Legislative Frameworks Across Counties”. However, through thematic analysis and reorganizing common ideas, these categories were refined into six central themes that more accurately reflected the patterns and insights emerging from the interviews: “How Economic Factors Affect Sex Workers,” “How Social Factors Affect Sex Workers,” “Instances of Discrimination and Lack of Inclusion,” “Unmandated and Overlooked Sexual Health Precautions,” “Inconsistent Legislative Frameworks Across Counties and Brothels,” and “Decriminalization and Legalization.”

## **Findings**

### **How Economic Factors Affect Sex Workers**

#### *Overhead Cost*

Engaging in legal sex work in Nevada’s brothels requires navigating a variety of upfront and ongoing costs that extend well beyond licensing fees. These overhead costs, while often framed as the price of participating in a regulated industry, place a considerable financial burden on workers—especially those entering the profession for the first time.

Before even beginning work, sex workers must pay for required documentation and licensing, which varies by county. As one brothel manager explained:

Your business license [is] \$200. Your fingerprints is about \$45 and some change. And then... your work card, which is [another] \$35, \$36 (L).

Another sex worker working in another county added:

When people ask me about startup costs, it’s \$160 for the test, \$150 for the county work card, \$200 for the business license. So that’s just over \$500 already (R). These fees, though seemingly administrative, quickly accumulate and do not include the cost of transportation to the brothel itself.

Other expenses may include transportation to and from the brothel, which is particularly costly given that most sex workers do not reside in Nevada. Many must fly into the state and arrange ground transportation to reach their workplace. Since brothels are typically located in remote, rural areas far from major airports, travel costs can be substantial. As sex worker described,

I book my own flights—both to and from the location—and pay for them myself. When I arrive, they send a driver to meet me at the airport...there’s a \$25 run fee... Any time I leave the brothel with a driver, it’s the same \$25 fee, plus an extra \$5 if I request additional stops along the way (D).

Even beyond licensing and travel, sex workers are responsible for equipping their rooms and maintaining their personal presentation. Additionally many are responsible for providing their own condoms, which are mandatory for the job:

We provide hand soaps in our bathroom, toiletries for the clients, all of our own condoms and lubes and things like that. And then like, this isn't required, but it kind of is—like pretty significant decorations to our rooms (R).

Similarly, another sex worker emphasized the extensive and ongoing nature of appearance-related expenses:

You have to get makeup for sure... your own clothing, lingerie and your own dress or whatever... fake jewelry... shoes... stilettos... nails manicured... a pedicure... I have wild curly hair, so I like to blow it out to look more classier (F).

This layering of expenses—licensing, travel, housing, grooming, room setup, and basic supplies—are often strongly encouraged expenses that play a crucial role in determining how much income a sex worker is able to earn. In many cases, these out-of-pocket investments total hundreds of dollars, making legal sex work in Nevada's brothels a profession that demands not only physical labor but also substantial financial commitment before a single client is seen. As Brents and Hausbeck (2005) have observed, the legalized brothel system does offer sex workers greater safety—but not without cost. Building on their findings, it can be argued that these high upfront expenses may discourage some individuals from entering the legal system altogether, pushing them instead toward underground markets where they face greater risks of violence, exploitation, and criminalization.

### *Cost of Health Testing*

Mandatory health testing is a cornerstone of Nevada's legal sex work industry, intended to ensure safety for both workers and clients. However, these regulations come with a significant cost—both financially and logistically—for workers. Because sex workers are independent

contractors they are not given health insurance from their employer. Additionally, testing must be conducted in-state and often through specific approved providers, depending on the county, using one's existing Medicaid from a different state is not permitted. As sex worker explained, "So in the state of Nevada, I believe, or specific counties, you have to do it there with their doctor. So using your insurance at home is not an option" (C). Another sex worker confirmed the same lack of practicality: "Nowhere else accepts that. You know, if you go to the clinics, no, we have to pay cash" (F). Not only do most clinics not accept Medicaid but most do not accept insurance of any kind making the mandatory cost a large financial burden to some.

Even when insurance is theoretically available, it is often cost-prohibitive or ineffective.

One sex worker recalled her experience:

The insurance was like \$1,000 or something. It was extravagant. I saw my bill. So I would never attempt that again... they just charge up all these urine analyses and all kinds of things. They just throw in the whole bucket. No, no, no. Never again (F).

Routine testing is expensive. In one county, the testing fee, quoted by a brothel owner was, "\$150 if it's blood and culture, \$100 if it's a culture" (B). While faster testing options are available, they cost even more. As a brothel owner noted:

It's like a separate little device that you put blood in... gives you results in approximately 30 minutes... they are a little more money, but the gals don't have to travel to a physician. They don't have to wait that extra length of time. So it all boils down to...you pay a little more, but you're working quicker (B)

Because sex workers typically work only 1 to 3 weeks each month, the turnaround time for STI test results can significantly impact both their earnings and the number of days they are legally able to work. A delay of even a few days can result in lost income, so many sex workers opt to pay higher fees for expedited test processing to minimize downtime. Without a valid test certificate, they are legally prohibited from working, making quick access to testing not just a convenience, but a necessity for financial stability.

To help alleviate this initial burden, some brothels will pay for their sex worker’s testing with the expectation that they will pay it back after their tour<sup>2</sup>, taken out of their paycheck oftentimes with a surcharge. A sex worker describes, “If we choose to have the cost taken out as a draw against our pay, they charge a 15% fee, which brings the total to around \$165” (D). This system places sex workers in a double bind: either absorb the high upfront cost and get back to work quickly, or wait for more affordable testing and delay income. In a job where time truly is money, many feel compelled to pay more just to minimize downtime.

These mandatory health-related expenses highlight the financial strain that defines much of Nevada’s legal sex industry—especially for those without the resources to manage ongoing medical costs. As Freeman (2019) notes, legalized prostitution can help reduce the spread of HIV. However, this argument often overlooks a critical concern. If legalization were implemented more broadly, its public health benefits could be limited by the reality that many people interested in registering as sex workers may be unable to afford the cost of required testing. Without affordable, accessible health services, the effectiveness of legalization in reducing STI and HIV rates may fall short of its promise, as well as keeping all sex workers safe.

### *Brothel and Sex Worker Financial Agreement*

The current prevailing revenue-sharing agreement between sex workers and brothel management is a 50-50 split. Experiences and opinions about the fairness of that arrangement vary significantly across workers and establishments.

As a sex worker describes it, the split is justified by the infrastructure that brothels provide:

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<sup>2</sup> A temporary working period in which a sex worker lives and works at a licensed brothel, typically lasting from one to three weeks.

I mean, the general rule of thumb is it's 50-50... I recognize the fact that the brothel is what's bringing the business to you. The brothel is providing you a location to do it. In some cases, the brothel is providing you security (C).

In this framing, the cut reflects the cost of access to clientele and physical space, a business exchange that, at least for some, feels reasonable.

However, others disagree—particularly when hidden or compounding costs come into play. A sex worker offered a starker view, stating:

50-50 split with the house totally sucks... if the client takes a house limo, it's 30% off the top to the limo and then still 50-50. So I end up getting 35% of the money (R).

The perceived imbalance extends beyond numbers to labor and risk. As another sex worker noted:

The staff is doing considerably less work than the courtesans are. And taking considerably less risks... I think the cut is too big. I think that some people are probably fattening their pockets (N).

In this view, the split does not adequately reflect the realities of the work, especially when workers are also paying for their own safety supplies, medical testing, and appearance-related costs.

That said, not all brothels operate on identical terms. One sex worker described a rare exception:

It's the only house that gives 60-40. Everybody else gets 50-50. And plus, you have to pay for room and board. But not here... we don't pay room and board, and the boss buys the food and we share it (F).

These variations are significant. Some brothels deduct room and board—often \$25 to \$52 per day—and others delay payment until the end of the week or the end of one's tour, complicating cash flow for workers who may already be financially strained according to sex worker F. In rarer cases, brothel owners allow for individualized financial negotiation. These arrangements, while not common, illustrate the informal and often inconsistent nature of brothel economics—even within a legalized system.

Location also influences earning potential:

If you're close to Vegas or Reno... you're more likely to get customers that spend more. If you're in the rural counties in the east, you'll get more clients in Oregon or Arizona and other nearby states (F).

This geographic variation affects not just client volume, but also the kinds of agreements brothels can offer, since access to high-paying clientele can offset more favorable terms for workers.

The prevailing 50-50 revenue-sharing model between brothels and sex workers has remained largely unchanged over time and is widely accepted as the industry norm. As noted in previous research, sex workers typically receive about half of their earnings, averaging an estimated \$400 per hour after the brothel's share (Dalesandry, 2014). While some workers view this split as a fair exchange for infrastructure, clientele access, and security, others argue that the model becomes inequitable when compounded by hidden costs such as transportation, room and board, and required medical testing. These additional deductions can leave workers with significantly less than half their earnings, raising concerns about transparency and financial autonomy. Although there is little formal debate within the system, interviews suggest that not all workers are equally satisfied with the terms—and that many lack the power to negotiate. Given that sex workers are legally classified as independent contractors, this rigidity is especially notable. Even if the 50-50 model is defensible in theory, workers should be granted greater flexibility to negotiate terms that reflect the specific conditions and contributions of their labor.

### *Independent Contractor vs Employee*

One of the defining features of legal sex work in Nevada's brothels is that all sex workers are classified as independent contractors rather than employees. This classification brings both

flexibility and risk, with workers expressing a range of perspectives on the benefits and drawbacks of this system.

Several workers value the autonomy that contractor status offers. A sex worker emphasized this independence, stating:

You are a contractor. You are your own business entity... You file your own taxes. I would prefer that in my own opinion. It's better in this industry, especially since we don't work for the brothels. We dictate our own prices and our own services (C).

This perspective is echoed by another sex worker, who explained:

I like the autonomy that [being a contractor] gives me. And I feel like if I was an employee it would be more of a pimp situation. And I don't want other people telling me what I can and cannot do... I think it's very important for each courtesan to have full control over what they will do and how much that's worth (D).

The status of independent contractor allows them to set their own prices—a benefit that can lead to higher earnings. A brothel manager noted that many brothels foster a sense of camaraderie where workers avoid undercutting one another, helping maintain fair pricing and protecting everyone's income (L). This informal coordination shows how autonomy and peer support can work together to strengthen financial outcomes.

At the same time, some workers recognize that independent contractor status can be easily abused. A sex worker reflected on the tension between formal classification and actual control over working conditions:

We truly are—if you look at who is supposed to be a contractor, who is supposed to be an employee—we really are contractors. But... technically the way we do shifts, I think, is illegal... You can't tell contractors when they can and can't work. You can't tell them what they can and can't wear... That is employees—you can give employees a uniform. You can't give contractors a uniform... The limo fees are illegal, or at least would fall into employee misclassification (R).

As R pointed out, brothels sometimes blur the line between independent contractor and employee by enforcing rules and requirements that more closely resemble those applied to formal

employees, without the given benefits of an employee. These lack of benefits are illustrated by a sex worker:

If I'm an independent contractor, I have to pay my own insurance... so forbid I break a leg, an arm—you know, I'm stuck. I don't have insurance, so I can't get compensation (F).

For sex worker N, the lack of unionization and legal recourse left her particularly vulnerable when things went wrong. She argued:

It being regulated and being unionized would be an amazing thing, because we don't have any recourse... You miss out on a couple weeks of work... and you just miss out on income (N).

Some sex workers express concern about the agreements imposed on them and how being classified as independent contractors may increase their vulnerability.

Taken together, these observations reflect the double-edged nature of independent contractor status in Nevada's brothel system. While some sex workers value the autonomy to set their own prices and define the scope of their services, others point to restrictive schedules, required uniforms, and mandatory fees that closely resemble the conditions of formal employment—without offering its protections. As Posner (2017) argues, workers engaged in “relational work” become especially vulnerable when misclassified as independent contractors, as their ongoing compliance and economic dependency limit their ability to exit or negotiate better terms. Sex workers in the Nevada brothel system, though technically independent, cannot negotiate revenue-sharing agreements (for most), housing fees, or testing schedules, suggesting a significant imbalance of power. This blurred line between independence and control raises broader concerns about whether the current legal framework truly protects sex workers' rights or instead reinforces systemic inequities. Even when workers accept these conditions, their classification may still obscure labor dynamics that deserve closer scrutiny.

## *Economic Benefits and Challenges*

For many sex workers, entering the legal brothel system in Nevada is a calculated economic decision. The potential for financial advancement—whether paying off debt, supporting children, or funding future education—is a powerful motivator. However, this pursuit is often complicated by inconsistent scheduling, regulatory hurdles, and lack of transparency, all of which can derail financial plans and create economic instability. Some sex workers join the profession with the clear goal of upward mobility. One individual, who had worked as a sex worker and is a brothel manager shared that she, “was able to pay off my credit...that [she] took advantage of for many years” (L). A commissioner describes how sex work is used as a bridge to other careers:

When I was in high school, I learned that a lot of them come here to earn money to become doctors, lawyers, because those educations are extremely expensive. And back in those days you didn't have FAFSA and any grants for people... So a lot of them, that's what a lot of them did. (A)

Yet, even with strong economic intentions, sex workers are not immune to financial risk.

One major issue is the unreliability of clients, as one sex worker reflects, “I basically learned that unless I have a substantial non-refundable deposit from a client, I won't be booking tour dates around their requests ever again” (D). Because tours are often booked by week, sex workers have to operate on rigid scheduling practices. One sex worker explained that if someone wants to see her one extra day outside of her tour date she has to add an entire week to see them (R).

Beyond clients, bureaucratic inefficiencies within the system itself can cause delays and lost income. As one sex worker described,

You go to the sheriff's office to get fingerprinted and get your sheriff's card. And you can't get your sheriff's card until your tests come back... Tuesday after you see the doctor, you can't do anything else, right? Like you can't work. You're just kind of like, stuck there. (R)

This downtime—often due to waiting for licensing or test results—can stretch over days, cutting into potential earnings. In addition, income is highly unpredictable, with many sex workers describing their earnings as inconsistent and closely tied to fluctuations in the broader economy.

For many sex workers in Nevada’s legal brothel system, the decision to enter the profession is driven by economic ambition—whether to pay off debt, support family, or fund future educational goals. While the potential for high earnings exists, particularly in top-tier brothels where sex workers can reportedly earn around \$400 per hour after the brothel’s cut (Dalesandry, 2014), this figure obscures the broader financial realities of the profession. Income remains highly unpredictable, often impacted by client unreliability, rigid scheduling requirements, and administrative delays related to licensing and testing. Workers may lose days of potential earnings waiting for approvals, and their ability to accommodate clients is tightly bound to tour structures. These barriers—combined with the standard 50% revenue split and hidden costs—complicate the financial calculus of sex work, making upward mobility possible but not guaranteed.

## **How Social Factors Affect Sex Workers**

### *County Perspectives and Persistent Stigma*

Across Nevada, the social landscape for sex workers is anything but uniform. Depending on the county, sex workers might be met with hostility, indifference, quiet tolerance, or even a sense of normalized integration. One commissioner shared that some brothels are viewed as part of the community’s fabric as they would donate to the local communities (A).

In contrast other counties may actively resist expanding or opening new brothels, citing moral concerns or fear of youth exposure. “I don't think that the local community has an appetite

for a brothel...young children could end up in there if they had a fake ID,” one commissioner argued (H). When asked about his personal opinion on prostitution he states that:“A person should always hold themselves to a high regard and never be allowed to be purchased... I just feel like [they’re] in the deep, dark depths of life” (H), showing how influential county stakeholders can hold certain biases against sex workers.

This uneven geography of stigma also shapes clients’ behavior. “A lot of men that show up at the brothels still act like they're doing something illegal,” C observed. Despite being in a regulated and legal setting, many clients whisper, look over their shoulders, or express nervousness, reinforcing a culture of secrecy and shame.

For some, shifting roles within the brothel hierarchy also impacts how they're perceived. A former worker who now holds a management position reflected on the cultural change she’s noticed over time:

When I worked here as a working girl<sup>3</sup>... you could kind of feel a little bit of the judgment... but coming into management, I have not [had] one issue, not one complaint, not one anything (L).

L’s perspective suggests that over time, societal attitudes can shape how sex workers are perceived, and or that sex workers and other brothel staff may receive varying levels of respect as a result.

Still, incidents can quickly reinforce public mistrust. As one brothel owner recounted, a drug incident involving a bartender at another brothel became sensationalized in the press: “One bad thing happens... and it's all the brothels are thought to be in that” (K). K expresses that the brothel owners are not involved in the crime but because it happened on their premises they had to face legal and social ramifications. Consequently, other brothels also face public backlash despite having no affiliation to the bartender.

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<sup>3</sup> A commonly used term within Nevada’s legal brothel system to refer to cisgender female sex workers.

Because of the stigma, some sex workers choose to obscure their faces on websites or wear masks in promotional materials. “Many people who work at the brothels don't show their face on the brothel website... only time you see their face is if you actually book with them,” explained one sex worker (R). This internalized shame or fear not only makes it more difficult for sex workers to market themselves, but also reinforces the broader societal view that sex work is dishonorable and deserving of ridicule or exclusion.

Altogether, this patchwork of acceptance, invisibility, and judgment reveals that legal recognition alone is not enough to dismantle the deeply ingrained societal stigma surrounding sex work. Even in counties where brothels have operated for over a century, sex workers continue to navigate a complex social terrain—one shaped by the unresolved tension between legality and perceived deviance. As Grittner and Walsh (2020) argue, stigma is not just internal or individual—it is enacted and reinforced across multiple levels of society, from community attitudes to institutional policies. Their work supports the notion that sex workers must often perform emotional and spatial labor to manage their identities in the face of moral scrutiny, even when operating within a legal framework.

### *Community Interaction and Regulation*

While no county or brothel legally or physically prevents sex workers from leaving the premises, they are often strongly discouraged from interacting with local residents or participating in public life. One sex worker shared, “I have the brothel owner pick me up because I don't want to be walking in the town by myself,” (F), she continued, “I go into the bank... and they just look at me up and down. It just felt uncomfortable” (F).

In one county for example, women can live off-site and come and go like any other nine-to-five worker. In contrast another county operates under a “closed shop” model where

workers live on brothel property and are expected to “keep a low profile” if they leave the brothel and avoid public interactions that might be construed as solicitation explained one brothel owner (K).

Some counties uphold rigid forms of social separation, requiring sex workers to remain "low profile" when off brothel property. According to a commissioner, there is no formal law prohibiting sex workers from entering town, but they are expected to avoid going out without a chaperone. Another sex worker added, “They don't like the whores fraternizing with the townspeople and corrupting them... they tolerate us, we're helping the economy, but they don't like us” (N).

This tension—between financial contribution and social exclusion—is echoed by multiple voices. A county commissioner admitted that while brothels bring in tax dollars, they don't necessarily support surrounding businesses and may even deter other enterprises: “The town likes the tax dollars that they benefit from, but... I'm not convinced it brings in other types of businesses—possibly making other businesses flee” (Y). Another county commissioner bluntly stated, “A brothel is seen in a negative light through most people's eyes. I don't think the financial impact to the county would even be noticeable” (H). These comments echo how little the local government views the brothels within their counties.

However, the degree to which brothel owners engage with the community varies. In other parts of Nevada, brothels are viewed as long standing institutions embedded in the social fabric.

One county commissioner, whose mother previously managed a brothel, shared:

Our house where I lived was on [the street where the brothels were located]. It was a normal thing when we were kids... we went trick-or-treating [there]... they supported youth programs and all that, which they still do...It's never affected us (A), showing how normalize the brothels were in her community growing up.

Some counties even see brothels as active participants in community life. The same commissioner shared:

Like, you know, when you have youth programs and certain businesses are donating to Little League and those types of things, they're very engaged in making sure that they're giving back to their community (A).

A brothel owner within the same county echoed this, noting their regular donations to the fire department, EMS, and local charities (K). At times, some brothels like any other business try to engage and give back to their town.

Local law enforcement also plays a role in shaping how sex workers are allowed to interact with the community. In Lander County, a cooperative relationship between the sheriff's office and brothel operators helps maintain the brothel's good standing—so long as the sex workers avoid drawing complaints. These issues can range from a speeding ticket to someone being under the influence. One brothel owner states:

If the lady goes into town and is actively soliciting or doing something, the sheriff will call me, and I'll have a talk with him... then I will come and correct it immediately (K). The brothel owner explained that, regardless of how serious the situation might be, he is held responsible if a sex worker draws attention to themselves in town—effectively placing brothel owners in a parental role over their workers.

These findings reinforce and expand on the existing literature around stigma and social exclusion in legalized sex work. While prior research has highlighted how stigma encourages self-isolation and limits civic participation (Blithe & Wolfe, 2017; Grittner & Walsh, 2020; Benoit et al., 2017), this study illustrates how such dynamics are spatially and institutionally enforced within Nevada's legal brothel system. The expectation that sex workers remain "low profile" or seek chaperones when in public, despite no formal legal mandate, underscores how deeply structural stigma is embedded in local social norms. Even in counties where brothels are

economically beneficial and culturally familiar, they are tolerated but discouraged from integrating into public life.

### *Terminology*

The varied relationships between brothels and their surrounding communities reflect a broader tension around visibility, regulation, and public image. At the heart of this tension is language—how sex work is labeled, discussed, and understood. As societal perceptions shift, so too does the vocabulary surrounding the profession, with terminology becoming a powerful tool for both personal identity and institutional recognition. Many sex workers emphasize the importance of self-identification and actively choose language that carries dignity and agency:

I think there's been a lot of negative connotations attached to other terms like 'slut' or even 'prostitute. I prefer the term 'sex worker' because it feels pragmatic and neutral. But I also really like the word 'courtesan' or 'luxury courtesan,' since it places more value on the individual doing this work. It carries a more positive connotation and helps shift the way people perceive the profession" (D).

Even within legal and bureaucratic systems, there has been a slow but meaningful shift in how sex workers are described. One brothel owner noted that in Nye County, the term "prostitute" was officially removed from legal codes, replaced with "sex worker" or "courtesan" as part of a broader effort to reduce stigma (B). Another sex worker described the change in how their identification cards are labeled:

You go to the sheriff's office, you get fingerprinted, and then you... get your sheriff's card. It used to say 'prostitution'—but when [the brothel owner] talked to them about that, now it says 'worker' (F).

Others, however, still express ambivalence about the newer terminology. "The word 'sex worker' automatically labels that sex is happening," one brothel owner explained. "And as I said, that isn't always the case" (B). For some, "courtesan" offers a more refined alternative that

avoids direct assumptions about services, allowing for greater flexibility in how their work is perceived and valued.

The interviews reveal how language remains a central axis through which stigma, legitimacy, and self-perception are negotiated in Nevada’s legal sex work industry. While legal recognition has afforded some protections, the terminology used to describe sex workers—both in public discourse and official documents—continues to shape their lived experiences in profound ways. As Tomura (2009) argues, labels like “prostitute” are not neutral; they carry moral judgment that can fracture a person’s identity and reinforce internalized shame. This was echoed by several sex workers and brothel owners, who shared how terms like “sex worker” or “courtesan” offer greater dignity, flexibility, and respect. Small but significant changes—such as removing “prostitution” from sheriff-issued ID cards or revising local ordinances—signal an institutional shift toward recognizing sex work as labor. However, such changes are uneven across counties, and the persistence of stigmatizing language in legal codes continues to reinforce exclusionary norms. These linguistic decisions are not limited to appearances but shape how sex workers are perceived by others and how they see themselves, signifying the importance of terminology in both reinforcing and resisting stigma within the legalized system.

## **Instances of Discrimination and Lack of Inclusion**

### *Discriminatory and Exclusionary Legal Frameworks*

Despite its reputation as a progressive exception in the U.S. landscape of sex work legislation, Nevada’s legal brothel system is underpinned by laws and practices that remain deeply exclusionary. At the core of this framework is a regulatory model that reinforces heteronormative assumptions about who can engage in sex work and under what conditions.

Many sex workers report that these legal frameworks remain primarily built around the assumption that only cisgender women serve male clients—leaving out anyone who does not fit this mold. As D, another sex worker, noted:

Right now counties are in charge of their own legislation and verbiage. And I feel like they're exclusionary. We are evolving as a people and as an industry. And the language is heavily towards female courtesans and male clientele (D).

D calls out the narrow-minded status quo within the brothel business.

C, one of the few, male sex workers, operating within a legal brothel, explained that his entrance into the industry was partially a political act, meant to challenge the inherent gender dynamics baked into policy and public perception:

I am doing it to make a statement. Mostly because I think we can all agree that our society is based off of the patriarchy... The majority of people that are clients are male And yet they are also the majority of people that are making the laws in this country that are saying that it's illegal. And I thought that if a male were suddenly in the roles... I'm now the prostitute. It would at least bring some attention to it (C).

Hoping to create change, he began pitching himself to brothels three years ago but was initially met with silence. Additionally, he admitted that he has engaged in prostitution outside of the legalized systems. When he tried again more recently, he was hired by the only female brothel owner in the state, B, who shared his values and vision for a more inclusive industry. B described the lack of inclusivity among her peers, stating, “I don’t think there’s another house that’s as progressive and as understanding of the real message as me” (B). Her willingness to hire him stands in stark contrast to the broader resistance within Nevada’s brothel industry and highlights how leadership can shape the boundaries of inclusion.

After securing approval from a brothel owner to work at their establishment, C still faced some hurdles. His efforts were initially met with bureaucratic challenges, as the county’s regulations only specified that individuals with a cervix were eligible for the required medical testing—a prerequisite for obtaining a work card. Even after legal changes at the state level in

2014 allowed for more inclusive STI testing requirements—such including the term “urethra” and in addition to “cervix” to accommodate individuals with penises—some counties failed to implement those changes within their own ordinance. Worker C had to personally petition his county to adopt the revised language. Although he eventually received approval, the lack of inclusive language and procedures highlights a broader inconsistency between state and county implementation. It also reflects the systemic exclusion embedded in local regulations and the historically narrow way counties have viewed and regulated sex work.

The language of state legislation is also criticized by a sex worker who highlights its lack of inclusivity. Referring to the provision that states, “If the person is male or transgendered, a urethral specimen [is required] for a test to confirm the presence or absence of gonorrhea” (NAC 441A.800), she pointed out that the phrasing is awkward and unnecessarily gendered. In her view, the law should simply reference anatomical requirements rather than gender identity. As she explained, “This is how you do a penis test... the gender is actually irrelevant. What they're saying is like this type of equipment requires this type of testing” (Worker R). Her critique underscores how language in regulations can reinforce binary gender assumptions, rather than focusing on the medical realities relevant to testing.

These testimonies illustrate how the absence of inclusive legal and health codes creates structural barriers that disproportionately impact transgender and male sex workers. Although existing research has not yet fully explored how these legal omissions play out in practice, the accounts suggest that individuals who do not conform to the dominant cisgender female–male client model often face additional limitations. While some have managed to navigate or resist these challenges, the burden of advocating for inclusion frequently falls on the workers themselves. This underscores the need for broader structural reforms, including uniform legal

language and health protocols that acknowledge the diverse identities and experiences within the sex industry—an issue scholars like McCarthy et al. (2012) have argued must be central to any equitable regulatory strategy.

### *Operational Discrimination and Lack of Representation*

Beyond the structural exclusions in legal language and policy, many sex workers—particularly those who are transgender, male, or from racially marginalized communities—experience discrimination at the operational level within brothels. These experiences often reflect both a lack of preparedness by management and entrenched biases among staff, clients, and local regulators.

One transgender sex worker, N, shared that the brothel she applied to appeared unprepared to support or represent her. Although the application did not include any questions about gender identity, she had supplied her social media, which clearly stated that she was transgender. “I applied on the website and I provided all the information they needed... You don’t have to dig very far—I mean, it says transgender right at the top of my profile” (N). They only found out after N was getting her health checks at the brothel when her doctor realized that she was not cisgender. Her experience highlights how some brothels may demonstrate a lack of diligence in their hiring processes, which can create unnecessary obstacles for transgender individuals. Given that sex work is inherently tied to physical presentation and client expectations, it would be reasonable for brothels to inquire about relevant aspects of a worker’s identity. The failure to ask such questions not only places transgender applicants in a difficult position but also sets the stage for potential misunderstandings between the worker and the business. A more intentional and informed approach to hiring could help prevent these challenges and ensure a more inclusive environment for all applicants.

Despite the initial uncertainty, the brothel manager ultimately allowed N to stay for her tour. However, this decision came with challenges. She was told that the brothel owners were uncomfortable with her presence, which affected how she was promoted. Unlike other workers, N received little institutional support and had to rely on her own networks to gain visibility and attract clients, “Their social media, they promote the ladies<sup>4</sup> that are there in the current week... They [only] put me on the website, but they had no plan to promote me” (N). Instead of offering inclusive marketing or client-matching approaches, brothel staff often relied on sex worker N to do her own outreach—and in doing so, reinforced the idea that her presence was an exception, not the norm. “It was like me trying to fight to find a way to market myself and make money” (N).

This lack of institutional support extended into the daily operations during lineups, where clients select a worker from those presented. But this often resulted in humiliating moments, “When they call for lineups... the younger hostess will be like, ‘Um, they're not interested in you.’ And it was very humiliating... in front of all the ladies” (N). N did not like how she was treated and singled out by the management among her co-workers.

Additionally, local officials made discriminatory assumptions about N’s services, which ultimately resulted in her being denied the opportunity to return to the brothel. Under Nevada state law, brothels are presumed to offer anal services unless they explicitly declare otherwise. If a brothel is considered an “anal house,” every sex worker employed there must undergo rectal STI testing, regardless of whether they personally offer anal services. The brothel where N was placed was not categorized as an anal house, meaning such testing was not previously required. However, a county commissioner insisted that all workers undergo anal swabbing solely because N is transgender—without asking her what services she actually provided. As she explained,

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<sup>4</sup> A commonly used term within Nevada’s legal brothel system to refer to cisgender female sex workers.

“They just assume that the only type of service that I offer is receptive anal sex.” Because the brothel felt it would be unfair to require additional testing for all workers based on this assumption, they made the decision to let N go.

Discrimination is also seen in how management and sex workers treat clients—racial and cultural profiling were also present. N noted a pattern in how staff approached or avoided certain clients, “There are certain kinds of clients that get less attention... I noticed like racial profiling a little bit... women would be hesitant to approach them” (N).

Brothel workers and owners reported consistent problems with clients attempting to remove condoms mid-intercourse or using false condoms, often associated with certain nationalities. A brothel owner explained where these prejudices derive from, “The girls kind of train each other... If a gentleman of this nationality comes in... she tells the others he has to use a house condom” (K), showing that there are some prejudices held by sex workers against some of their clients.

These accounts emphasize that mere inclusion in legal frameworks is insufficient. Without brothels and management systems that actively and intentionally support all sex workers—regardless of gender identity, race, or background—discrimination continues to manifest at the operational level. As the literature suggests, legal systems often reflect dominant social norms rather than challenge them (McCarthy et al. 2012), and when brothel practices mirror this narrowness, they risk reinforcing the very exclusion the law claims to address. As a result sex workers from marginalized backgrounds may struggle to access clients, feel unsupported within the workplace, or even turn to unregulated or underground markets as a result of unwelcoming environments. In this sense, the failure to implement inclusive practices not only undermines equity but may also compromise the economic stability and safety of those the legal system is meant to protect.

## **Unmandated and Overlooked Sexual Health Precautions**

### *Logistical and Social Barriers to Medical Access*

Despite the legal framework regulating sex work in Nevada, access to timely and affordable healthcare remains a significant challenge for many sex workers. Clinics in some smaller counties often refuse service to brothel workers outright, citing vague excuses or staffing limitations. Some sex workers report being turned away under the pretense that a gynecologist is unavailable—only to discover that regular patients were still being scheduled. As one sex worker recounted, “I call as a regular patient and they tell me, yeah, you can come in and get GYN tests. They just don’t want [sex workers] there” (F). When asked whether their county provided a list of clinics or hospitals that offer the required medical services, one sex worker responded, “We

have to keep calling. We have to find places on our own” (F), stressing how they receive no help from the county officials when facing this challenge.

Her brothel owner echoed these concerns, highlighting both the discrimination sex workers face and the challenges involved in completing the state-mandated weekly health tests. “We’ve gone through about five different clinics because they don’t really want to service the working girls,” he explained (K). As a result, he opts to drive his workers 150 miles outside their county each week to access a clinic that will serve them. He also noted that some clinics deliberately misrepresent their turnaround times, claiming it takes up to seven days to return results—delays that are especially problematic given that most sex workers operate on a week-by-week tour, making it infeasible to wait an entire week before being cleared to work (K).

These challenges are reflected in Nevada’s brothel system, rigid testing procedures amplifying the inconvenience of compliance. One sex worker shares,

There’s an office for the Southern Nevada Health District five minutes from my house in Vegas. But I have to drive an hour and 20 minutes to my brothel just to test. That’s a whole day lost (R).

This issue is further exacerbated by the limited testing options approved by the Nevada government. According to one sex worker, other adult industries—such as pornography—offer monthly testing memberships that are both flexible and affordable, allowing individuals to get tested as often as needed for a flat monthly fee. Despite the comprehensive nature of these alternative tests, Nevada does not recognize them as valid for meeting the state's weekly testing requirement (R).

Regional disparities further complicate matters. Northern counties tend to reject “blanket clearances,” instead requiring specific documentation for each test, while southern counties accept more general certification (K), making it a little bit harder for northern counties to get their testing done.

Despite the legal status of sex work in Nevada, many sex workers face significant barriers to accessing required STI testing—particularly in rural counties where clinics often turn them away or delay results. These challenges, rooted in stigma and regional inconsistencies, force some to travel long distances or waste copious time. As Ziegler (2020) notes, marginalized populations frequently encounter systemic barriers to healthcare access, and the experiences of Nevada’s sex workers reflect how legal recognition alone does not guarantee equitable or reliable medical support. Taken together, these factors underscore how the legal status of sex work does not guarantee equitable healthcare access. In fact, the persistence of stigma within the healthcare system continues to undermine sex workers' ability to comply with state regulations—ultimately affecting their livelihoods and reinforcing exclusion even within a legalized framework.

#### *Unstandardized and Under-regulated Health Procedures*

Despite the existence of state-level health regulations, the implementation of sexual health protocols within Nevada brothels remains remarkably inconsistent. From STI testing practices to genital health checks, the procedures vary not only by county but also by brothel, often relying on informal peer training rather than standardized medical oversight.

Some brothels, particularly larger or more affluent ones, conduct in-house testing. While some sex workers appreciate the convenience and trust the on-site doctors (C), others raise concerns about the potential for fraud or incomplete screenings (F). Smaller houses, on the other hand, often rely on external clinics or hospitals, but access to these facilities can be unreliable and discriminatory, as previously argued.

One area of underregulation is the use of visual genital inspections—colloquially referred to as “dick checks”—which are often performed without any formal medical training and are not required by the state. According to one sex worker, these checks are typically passed down

informally from more experienced workers to newcomers, with no involvement from healthcare professionals. “What you learn just kind of depends on who you get assigned to,” she explained, emphasizing how these critical health screenings are treated more like ad hoc rituals than standardized procedures (R). The lack of consistency is troubling; what one worker learns may differ entirely from what another is taught, even within the same brothel. In certain houses, even longtime workers admitted they rarely conduct health inspections, relying on “observation” and personal comfort instead (F). Additionally, because female clients are less common, many sex workers either lack training in how to conduct genital inspections on them or choose to opt out of performing these checks altogether (C). Another sex worker pointed out that this is especially concerning given that these visual inspections are often the only method used to screen clients for potential sexually transmitted infections (N).

Even among brothels with policies requiring health inspections, the execution varies widely. Some workers, particularly those with health sensitivities or prior complications, make highly individualized decisions about whom to see. One worker recalls her co-worker, refusing any clients showing signs of yeast infections due to a personal allergy to common antifungal medications. Others assess risk differently. Without standardized expectations, sex workers are left to navigate critical safety choices largely on their own (R).

Testing procedures are equally variable and at times invasive. One worker recounted how her local clinic required a full endocervical swab, even after a hysterectomy (R). Others noted that anal swab testing, which should be routine given the nature of some services, is either inconsistently enforced or entirely ignored, even when brothels knowingly permit anal sex. “Even though it’s not a policy and it’s posted [as prohibited], they’re still aware of it and don’t get the ladies tested,” one worker shared (N).

In some cases, workers were subjected to invasive tests without being informed in advance. “The doctor came in and said, ‘I have to do an anal swab.’ I said, ‘No, I don’t do that,’ and they replied, ‘Well, the house is listed as an anal house so we have to test everyone,’” she insisted that she did not know this information before-hand (F).

Beyond bodily testing, several sex workers identified additional operational gaps within brothels. For example, some establishments do not enforce protocols around the use or cleaning of sex toys, and protective measures—such as checking condom quality—are often left entirely to the discretion of the worker. “I hold it up to the light. I make sure it’s not punctured, not outdated, or melted,” one worker explained (F). She also emphasized that while she personally uses protection on her sex toys, not all brothels maintain the same standards. Recalling a concerning experience, she shared:

“I came in here and there were two bullets on the table—they call them bullets, the small ones—and I asked, ‘Do people put condoms on them when they use them?’ and they said no. I just dropped the thing on the floor. No, that’s not sanitary” (F). This lack of consistent hygiene practices points to broader regulatory gaps that can impact both worker and client safety.

These findings underscore the disconnect between Nevada’s formal health regulations and the inconsistent, often informal, practices within brothels. While state law mandates regular STI and HIV testing, implementation varies widely by county and establishment, with workers frequently left to navigate health and safety decisions on their own. Visual inspections are often passed down informally, anal testing is inconsistently applied even when services are offered, and sex toy sanitation remains unregulated—despite research showing such items can transmit infections like HBV and herpes if not properly cleaned (Mitchell et al. 2005). These gaps are especially concerning given the elevated STI risk among sex workers noted by Cwikel et al. (2008), and the reality that condom effectiveness depends heavily on correct and consistent use

(Fitch et al. 2002). Ultimately, this inconsistency in practice and lack of oversight highlights a critical need for more standardized, inclusive, and medically informed protocols across Nevada’s legal sex industry.

## **Inconsistent Legislative Frameworks Across Counties and Brothels**

### *Licensing and Regulation Differences Across Counties*

Nevada’s legal brothel system operates under a patchwork of local ordinances that create significant inconsistencies in licensing, advertising, vetting procedures, and regulatory enforcement across counties. This fragmented framework leaves sex workers navigating a legal landscape that is often unclear, contradictory, and inconsistently enforced—even within the same profession.

In some counties, advertising restrictions are so narrowly defined that brothels can only legally promote their adjacent businesses, not the brothel itself. As sex worker shared, “I believe it's by law that we can only advertise the restaurant and bar. You cannot legally advertise the brothel” (D). Even when advertising is permitted, confusion about what can and cannot be said persists:

The laws surrounding the brothels are really specific and they're really unclear. “Even management at the brothels don't always know everything... We’re told we can't discuss pricing online or over the phone with clients. They have to come in to get prices in person... but I’ve never been able to find what law actually forbids this (R).

This makes it hard for sex workers to communicate with their clients or unknowingly break the law because they are unsure about the regulations.

Health and safety requirements also vary widely, including the frequency of testing and the content of required panels<sup>5</sup>. “Like one of the counties has an HSV test on the panel, which is

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<sup>5</sup> A term used to describe the group of STI tests that sex workers are required to complete before and during their employment in a licensed Nevada brothel.

actually kind of ridiculous,” noted one worker (R). In other counties, workers are required to get additional vaccinations, like a full hepatitis B series, before being eligible to work (F).

Enforcement of these regulations is also uneven. Some counties conduct occasional inspections, but these are often announced in advance and relatively informal, “We do inspections where we go down... check their licenses... make sure everything is clean...” explained one county official (Y). Meanwhile, brothel licensing is highly restricted in some areas. “In our county, they give two licenses for brothels... since I think the 70s,” shared another commissioner (A). In many counties, the brothel licenses are tied directly to specific buildings or plots of land—effectively freezing the location and number of operations. Brothel owners J and R suggest that most brothels don’t move because it is too much money to pay for the licensing and move the building, but some counties do not even allow that option.

Further, what disqualifies someone from working in one county may be entirely permissible in another. “If you did drugs or had a drug charge, you could not work [in Lyon County],” said sex worker. “But... I’ve seen girls in this county who did attempted murder and they got a card” (Sex worker F). This inconsistency not only contributes to unequal opportunities but also raises questions about the rationale behind disqualification criteria and safety for other sex workers and clients.

Restrictions on services also differ. Some counties permit "outdate" services, where clients can take a worker off-property for an outing. Others operate as “closed counties,” where all activity must occur on-site, limiting worker mobility and income opportunities. “We can't do anything off the property... [but] they will allow the guys to take the girl over to one of the local eateries for lunch,” explained one brothel owner (R).

These findings reflect the fragmented nature of Nevada’s legal brothel system, where local control leads to significant variation in how laws are interpreted and enforced. From inconsistent health requirements and advertising rules to differences in licensing and disqualification criteria, sex workers often face unclear or uneven standards depending on the county. As Brents and Hausbeck (2001) note, this decentralized approach allows for brothel-level autonomy but can result in inconsistent working conditions and regulatory confusion. These interviews suggest that more standardized guidelines could help improve clarity and support for workers while still respecting local governance.

#### *Noncompliance and Regulatory Gaps in Brothel Operations*

Despite the existence of county-level regulations meant to govern legal sex work, gaps in oversight and inconsistent enforcement leave many sex workers vulnerable to unsafe conditions and legal ambiguities. These regulatory blind spots often shift the burden of protection and compliance onto the workers themselves, creating a system where personal judgment replaces formal protocol.

One major issue is the limited rules around drunken customer behavior. As one sex worker recounted:

I once agreed to party with an intoxicated client, and because of their level of intoxication, they ended up doing things I did not consent to or feel comfortable with. From that experience, I set a personal rule for myself: if a client is obviously under the influence, it will either be a two-girl party or no party at all (D).

Others noted similarly precarious encounters with inebriated patrons:

I had a belligerent drunk one time that was just a little rough with me. All I did was just end our party and it ended, and that was it (L).

While sex workers have full autonomy to accept or reject clients, there are no clear legal or organizational protocols for handling potentially dangerous or intoxicated individuals.

Importantly, the lack of regulation extends not just to clients but to sex workers themselves. One interviewee noted that instances of workers providing services while intoxicated were not uncommon: “Yeah, blackouts and stuff like that. Yes, yes, I’ve seen that” (F). This absence of standardized safety protocols, either to protect clients or workers, raises serious questions about consent and safety within the brothel system.

Legal ambiguities around specific acts also create enforcement loopholes. One example is the inconsistent understanding and enforcement of rules surrounding anal sex:

We’re a non-anal house,” one worker explained. “And what that actually means is... sort of a gray area. I misunderstood the law at first... I thought the law just meant like to do anal, you need a rectal swab and our doctor doesn’t offer it... so I will just offer anal because I am complying with the law and getting these testing (R).

Later, R explained her confusion upon learning that because she offered anal services, all workers in her brothel were required to undergo rectal testing, even those who did not provide such services, making her unintentionally noncompliant with the law.

This confusion is compounded by brothel management’s often laissez-faire approach, as R reasoned that, “Management’s philosophy has always kind of been what goes on behind closed doors is up to us, as long as we’re using protection and like to make it expensive” (R). She acknowledged that they were knowingly neglecting the law by failing to disclose that anal services were offered in the house, in order to avoid the additional testing requirements mandated by the state.

Operational policies also reinforce outdated control tactics. As a sex worker described, one brothel still enforced a rule prohibiting laptops in personal rooms—stemming from decades-old fears of women meeting clients off-premises. “It’s a holdover rule from the ’90s... Nobody trusts whores.” Although cell phones were allowed, the restriction on laptops

exemplified how management policies can infantilize or micromanage workers under the guise of control.

These testimonies highlight how Nevada's inconsistent brothel structures create uneven protections for sex workers, particularly in the absence of standardized safety protocols. While sex workers technically retain the right to accept or reject clients, interviews reveal that they often rely on personal judgment to navigate risky situations, such as engaging with intoxicated clients or unknowingly bypassing required state testing due to managerial oversight. Without clear legal or organizational guidance, both clients and workers may engage in behavior that compromises consent or safety. As Brents and Hausbeck (2001) argue, the autonomy granted to local jurisdictions and brothel owners has resulted in a patchwork system where enforcement varies widely. This inconsistency is further compounded by outdated operational rules that reflect lingering distrust rather than contemporary risk management. Together, these regulatory gaps and outdated policies shift the burden of safety and compliance onto individual workers, reinforcing the need for more consistent, updated statewide standards that prioritize both protection and respect.

#### *Limited Commissioner Engagement in Sex Work Policy*

While county commissioners wield substantial authority over brothel operations, many express minimal engagement with the day-to-day realities of sex work or the broader policy frameworks that govern it. This limited involvement has led to stagnant regulatory systems and a reactive rather than proactive approach to oversight.

Several commissioners admitted to only a surface-level understanding when asked about the health and safety standards required of sex workers. As one put it,

I mean, that's just a no-brainer there. And they have to be checked very regularly... I do not know how many. I do not know exactly what tests are run. But I do know that they are. I do know that there's—it is regulated... that's just something we all know in Nevada (M).

Another commissioner was even more direct:

I say probably not a clue. I know the doctors go there and I know that they... you know, track them up for STDs and all the rest of that kind of stuff that they could have (Y).

While commissioners play a large role in approving new sex work regulations and brothel licencing, many do not know about the intricacies these policy.

This general unfamiliarity extends to legislative processes as well. Regulations governing sex work have remained largely unchanged in recent years, in part due to a lack of urgency or attention from county officials. “We haven't had any problems and we haven't really revised them,” one commissioner remarked. “Nothing major. No real reasons pop up in my mind for a reason to do that” (Y). Another echoed this sentiment: “I think it's good right where it's at. It's been that way for many years” (A).

As a result brothels are tied to dated protocols and legislations and do not accommodate for growth within the industry. For example, in many counties, licenses are tied to specific plots of land, restricting brothels from relocating detailed one commissioner:

They've always been in the same place... across the track in the same location... [its] probably because those licenses and buildings were owned by those people and they just continued to sell them in those spots (A).

Others emphasized the finality of closures: “You can't open new brothels these days. If you close one, that's it—you cannot reapply for a license and it's gone” (J), showing how the brothel industry in Nevada is old and growingly neglected.

These examples build on Brents and Hausbeck's (2001) assessment of Nevada's decentralized sex work regulations by drawing attention to local governments' disengagement can sustaining regulatory stagnation. While their work documents the variability in brothel rules and enforcement across counties, this research highlights how that variability is compounded by

a pattern of neglect from county commissioners themselves. Despite their authority over licensing and regulatory changes, many commissioners demonstrated only a superficial understanding of existing health and safety standards and expressed little interest in updating outdated policies. This lack of institutional attention has left brothels bound to rigid, decades-old protocols, such as immovable licenses tied to specific plots of land and prevented the regulatory framework from evolving alongside the industry. As a result, the system prioritizes historical precedent over current worker needs. These findings suggest that standardization alone is not enough; a more engaged and informed approach to governance is also essential for creating better conditions for both sex workers and brothel owners.

## **Decriminalization and Legalization**

### *Benefits and Shortfalls of Decriminalization*

Decriminalization is often described by sex workers as a path toward greater autonomy and inclusivity, but stakeholders across counties acknowledge that it comes with challenges—particularly in navigating entrenched legal norms and inconsistent public opinion. For many currently working in Nevada’s legalized brothel system, decriminalization represents a way to open up sex work to people who are excluded under the current gatekeeping practices. One sex worker emphasized how decriminalization could shift power back to marginalized workers:

Giving workers more freedom than just having to work at a brothel is actually really important to protect marginalized people... you basically need to convince a hiring manager that you're fuckable. There are so many like trans folks, fat folks, visibly disabled folks who work as independent escorts and make tons of money... but they could apply to every brothel in Nevada and not get hired (R).

R describes how certain brothel hiring practices are exclusionary, preventing more marginalized populations from accessing legal employment opportunities even if they seek them.

This sentiment is further underscored by a county commissioner from a non-legalized county, who highlighted the ongoing demand for sex work despite the criminalization laws:

Prostitution is rampant [in my county], just because there's demand... there's obviously a downside to that, and so a lot of criminalization, a lot of crimes against and within the system itself, as far as pimps and prostitutes and those kinds of things (T).

He continues to explain some of the efforts his county took to decriminalize prostitution:

We really have no control over it other than it's just illegal. We make donations to groups that deal with prostitution, particularly with sex trafficking, but... we don't really have any direct relationship (T), showing how that sex work and sex trafficking will continue to prevail—even within criminalized spaces. Granted, the commissioner assured me that the legal system is increasingly focused on punishing traffickers while working with the victims:

We're going to [ensure] the sex trafficker is dealt with more harshly... and conversely, we recognize that the victim may not have been under total free will, and we should work with her (T), acknowledging that a blanket criminalization for everyone involved does not protect victims.

A brothel owner shares her perspective on other countries' criminalization approach to prostitution:

“The current archaic legislation actually looks like it deals more with the Nordic law than anything else. What are they going to do to the man or whoever's buying?” (B), reiterating that the state legislation is old and mainly focuses on criminalizing the solicitors.

Across interviews, decriminalization emerged as a framework that many sex workers believe could expand autonomy and improve inclusivity—particularly for those who face exclusion under the current brothel-based system. Participants emphasized that decriminalization could remove gatekeeping barriers that disproportionately affect trans, disabled, and fat workers, who may thrive in independent work but struggle to access legal employment in brothels. At the

same time, public officials acknowledged that criminalization fails to curb demand and often pushes sex work underground, where risks of violence and exploitation increase. Drawing on Maldonado's (1995) framework, these insights affirm that decriminalization is a vital first step in transitioning sex work out of precarious, informal conditions. Maldonado critiques that the laissez-faire approach, which in this case can be characterized as criminalization, denies workers labor rights. In this light, decriminalization serves not only to remove punitive barriers but also to create the foundation for more equitable and protective systems.

### **Benefits and Shortfalls of Legalization**

Legalization of sex work in Nevada has created a framework that many see as a model for safety, regulation, and autonomy. Still, a disconnect remains between the framework's ideals and how it plays out in practice. Granted, several workers and stakeholders emphasized the safety that legalization offers—particularly when contrasted with the dangers of working independently.

One sex worker described why she preferred operating under a legal brothel system, “Not a fan of being independent because that really is kind of a dangerous, putting-yourself-in-harm's-way situation” (D), she continues:

I believe full legalization of sex work would be the best path forward. I think it would reduce trafficking and unsafe situations... I'd rather see everyone operating in a safe, regulated environment and allow the market to adjust, rather than have so many people continue to be harmed (D), claiming that she would not do sex work unless she had the legal and physical protections.

Others emphasized how legalization attracts a particular clientele that is willing to follow rules, pay higher rates, and engage in legal activity, “My clientele are people who care enough about doing this legally... that is a really solid screening process.” (R), this is an additive layer of

protection as R notes that people who want to exploit sex workers will most likely not want to abide by the law.

Some brothel managers pointed to the practical protections legalization provides, he shares, “he tries to leave without paying, we call the sheriff... eventually, he paid \$100 after two hours” (J), he stresses that, “ If you don't legalize it, no one can protect it” (J), suggesting that only through legalization can sex workers defend against being taken advantage of or unfair treatment.

Some County commissioners within counties with legalized prostitution assure that, “It’s better to have [sex work] clean and regulated and housed in the open... as opposed to underground and illegal and where people aren’t protected” (M). Another commissioner reiterates, “It’s a much safer environment—for the girls and for the men” (A), showing their support of legalized prostitution and how it manages risk for both the sex worker and their clients.

However, even for those working in legal brothels, unclear policies remain a persistent frustration:

I feel really strongly about [decriminalization]... even as someone who's working under a legalized system. I'm thankful to be doing this legally, but it could be such a better system... The rules and the laws and the guidelines are so unclear (R), insisting that the current Nevada brothel systems could amend some of their legislation. This issue is exemplified in an experience recounted by a fellow sex worker of how she was financially exploited and deserted :

“I had just made \$3,500 for the house. I was owed \$1,700... When it’s freezing cold and the snow is thigh-high... they throw girls out in the snow for no reason whatsoever... I tried to fight it and get my money, and it got me nowhere” (F). Although F attempted to pursue legal action against her former employer, she was ultimately unable to recover her earnings. The case stalled, and the brothel continued using similar tactics to

withhold pay from other workers—claiming they lacked written receipts for proving they completed certain services and forcing them to leave the premises, often stranding them in remote areas of rural Nevada (F). This example highlights how, despite sex workers’ legal status and theoretical right to seek recourse, structural dynamics and slow-moving legal processes allow exploitation to persist under inadequate regulation.

The findings from this study suggest that while legalization offers a necessary baseline for improving sex worker safety, economic stability, and dignity, it is not a comprehensive solution in its current form. This aligns with Carlos Maldonado’s (1995) theory of informal labor markets, which argues that legalization must be accompanied by clear, adaptable, and enforceable regulation to meaningfully transition workers out of informal, high-risk conditions. In the absence of such structures, legalization can fall short—reproducing many of the same vulnerabilities and inequalities it seeks to eliminate.

Across interviews, sex workers in Nevada’s legal brothel system highlighted economic structures that reflect limited agency. Most are classified as independent contractors but are required to give 50% of their earnings to the brothel without the ability to negotiate terms—an arrangement more reflective of traditional employment than entrepreneurship. Additional hidden costs such as room and board, testing fees, and grooming expenses further limit take-home pay. As one sex worker explained, although legalization offered theoretical protections, in practice, her inability to recover stolen wages and the lack of enforcement mechanisms left her financially and physically vulnerable.

Social factors such as stigma and community exclusion also shape the lived experience of legal sex work. Many participants described staying indoors or being picked up by brothel owners to avoid judgment from townspeople. Local laws still refer to workers as “prostitutes,”

despite efforts by some counties to update language on work cards and ordinances. This reinforces what Tomura (2009) and Grittner and Walsh (2020) have described as structural and internalized stigma—where sex workers are simultaneously legalized and marginalized. These narratives show that even under a legal framework, sex workers are not fully accepted members of their communities or protected from reputational harm.

Discrimination and lack of inclusion emerged most clearly in the experiences of male and transgender sex workers. Some brothels refused to hire them, citing discomfort or outdated norms. Others were misgendered in county health protocols, which still reflect gendered assumptions in STI testing requirements. These findings point to a regulatory framework that still centers cisgender, female-identifying sex workers, thereby limiting inclusivity and reinforcing gatekeeping practices that exclude marginalized populations.

Additionally, health regulations and safety protocols were found to be inconsistently enforced and often informal. Some brothels failed to provide proper training on genital inspections, hygiene practices for sex toys, or checking condom integrity—all responsibilities left to individual workers. Despite the state mandating weekly STI testing, requirements for rectal swabs in “anal houses” were often misunderstood or ignored. Workers expressed confusion about what qualified as compliance, and one participant admitted her brothel knowingly omitted disclosures to avoid triggering stricter testing requirements. These gaps in enforcement compromise the integrity of Nevada’s health system and leave sex workers to make critical safety decisions with limited support.

Compounding these issues is the inconsistent legal and regulatory landscape across counties. Policies on licensing, advertising, disqualifying offenses, and outdating vary significantly—even contradicting one another. In one county, sex workers are required to stay

on-site and keep a low profile, while in another they can come and go freely. Workers reported that certain crimes, such as attempted murder, did not prevent employment in some areas, while a minor drug charge could disqualify them elsewhere. Brothel licensing is often tied to specific plots of land, restricting new entries and reinforcing outdated zoning laws. Advertising is likewise inconsistent—workers are often told what they can or cannot say without legal clarity. These discrepancies not only confuse workers but perpetuate unequal protections based solely on geography.

These complex and sometimes contradictory realities underscore that legalization in Nevada, while beneficial in theory, does not guarantee safety, equity, or dignity for all workers. Drawing on Maldonado’s (1995) framework, these findings affirm that partial formalization—without coordinated regulation and enforcement—leaves sex workers in a system that resembles the informal or criminalized markets it sought to replace. Maldonado also critiques laissez-faire approaches that criminalize or ignore informal labor, showing how these strategies perpetuate exploitation by pushing workers into unmonitored, high-risk conditions. In Nevada, such outcomes can be seen both in non-legalized counties and in legal brothels that operate with outdated or toothless regulations.

To move forward, policymakers must recognize that legal recognition is a starting point, not an endpoint. A truly protective system would ensure equitable labor rights, inclusive hiring practices, medically informed health protocols, and social integration—standards that cannot be achieved without a statewide framework rooted in worker experiences and adaptable to their needs.

## **Policy Recommendation**

These policy recommendations reflect the concerns raised by sex workers about their profession. They are designed to address the challenges most directly affecting them, highlighting the urgent need for improvements within the current system and greater consideration for worker-driven solutions.

### **Improving Stigma**

To promote dignity and social inclusion for sex workers, policy reforms must directly address the stigma embedded in current legal language and community practices. Local ordinances should update terminology to replace stigmatizing terms like “prostitute” with more affirming language such as “sex worker” or “courtesan.” This shift is not merely symbolic—it can foster broader cultural change by signaling institutional respect for workers’ identities and challenging entrenched moral judgments. As one sex worker explained:

I think there’s been a lot of negative connotations attached to other terms like ‘slut’ or even ‘prostitute.’ I prefer the term ‘sex worker’ because it feels pragmatic and neutral. But I also really like the word ‘courtesan’ or ‘luxury courtesan,’ since it places more value on the individual doing this work. It carries a more positive connotation and helps shift the way people perceive the profession (D).

Beyond terminology, legal texts should also eliminate gendered labels such as “ladies,” “males,” or “transgender” when referencing sex workers. Instead, statutes should adopt inclusive and anatomically neutral language—using terms like “people with a cervix” or “people with a urethra” where medically necessary. These changes promote clarity, inclusivity, and respect across a range of identities and bodies. Updating both the language of the law and public narratives can reshape how sex work is understood—framing it as legitimate labor rather than moral deviance. In turn, these reforms may improve workers’ mental health, reduce internalized stigma, and empower sex workers to more confidently advocate for their rights.

In addition, any county rules that restrict workers from entering town or require chaperones should be reevaluated. These policies, rooted in outdated fears of solicitation, perpetuate exclusion by treating sex workers as liabilities rather than legitimate residents or contributors to the local economy. Removing these restrictions would affirm sex workers' right to participate in public life, foster community trust, and encourage civic engagement. When sex workers can move freely without suspicion or surveillance, they are more likely to access essential services, report grievances, and feel a sense of belonging within their communities—key components of long-term safety, dignity, and well-being.

### **Reevaluating the Limitations of Independent Contractors**

As independent contractors, sex workers should have the right to negotiate the terms of their labor—including revenue-sharing agreements, room and board fees, and some travel expenses. While Nevada's legal framework assumes that the contractor classification provides workers with flexibility and autonomy, this often masks the limited power that many sex workers actually have in negotiating these terms. The prevailing 50/50 revenue split between workers and brothels is rarely up for discussion, despite the fact that workers also bear additional costs such as daily room and board, licensing fees, and the cost of weekly STI testing. These expenses can significantly reduce take-home earnings, particularly for newer or less-established workers.

Importantly, not all sex workers arrive at brothels with the same level of experience, personal branding, or client demand. Those with more experience, larger online followings, or niche appeal may bring more value to a brothel and should be allowed to negotiate more favorable terms. Nonetheless, the current system blanket classification may not serve everyone equally. Policymakers should consider reforms that ensure true contractual autonomy and economic fairness within the brothel model. This could include requirements for written

agreements that clearly outline payment structures, dispute resolution mechanisms, and transparent breakdowns of fees. Moreover, brothels should be required to offer the possibility of customized contracts based on individual circumstances, rather than assuming that all sex workers are satisfied with the status quo. Such measures would not only enhance agency but would also align more closely with the intent behind the independent contractor designation.

### **Standardized Health Regulations and Accessibility**

Nevada's regulatory system should be updated to create uniform and accessible sexual health protocols across all counties. If they have not done so already, county ordinances should be revised to reflect the most up-to-date statewide requirements—such as mandatory cervical and urethral testing, the enforcement of condom use for all sexual services, and the removal of outdated prohibitions against male sex workers. Ensuring these standards are explicitly codified in local regulations would promote consistency, reduce confusion, and affirm the health and labor rights of all individuals working in the legal sex industry.

Additionally, sex workers should receive standardized sexual health education as part of the onboarding process. This training would be conducted by a state-certified medical professional and should include essential topics such as STI transmission, proper techniques for genital inspections, condom quality assessment, and the safe use and sanitation of sex toys. To support ongoing education, the state should also provide an official health document or manual, easily accessible to all sex workers, outlining these safety protocols. Together, these materials would establish a consistent baseline of health practices across brothels, while reinforcing worker autonomy, informed consent, and access to accurate medical information.

This recommendation aligns with international best practices in sex worker health promotion. A 1996 report by Ngugi et al. emphasizes that rights-based, community-informed

interventions are central to reducing HIV/STI risk and promoting long-term health outcomes among sex workers. In particular, the study shows that when sex workers receive peer-led education and access to low-barrier, nonjudgmental care, both testing uptake and prevention behaviors improve dramatically. Although Nevada mandates regular testing, its current system does little to support informed engagement. Providing sex workers with resources tailored to their real-world experiences, such as how to identify compromised condoms or safely disinfect shared toys, would help bridge the gap between compliance and actual health literacy.

Furthermore, counties should be required to maintain a list of approved clinics that provide STI testing services and ensure at least one facility is always available to sex workers without discrimination or delay. Policies should also mandate that any sexual device used during services be protected with condoms or similar barriers to minimize infection risks. Standardizing these procedures statewide would improve public health outcomes and relieve sex workers of the burden of navigating inconsistent and sometimes exclusionary healthcare systems. By integrating these standards into state-mandated protocols and practices, Nevada can expand the benefits of legalization beyond disease surveillance, moving toward a more holistic and empowering public health approach.

## **Conclusion**

Nevada remains the only state in the U.S. where brothel-based sex work is legal, offering a rare example of what regulation looks like in practice. While this legal framework provides important protections that are absent in criminalized settings, the lived experiences of workers reveal persistent gaps. Through interviews with sex workers, brothel owners, and county commissioners, the research illuminated several pressing challenges, including the financial burdens of entry, persistent effects of stigma and exclusion, the limitations of independent

contractor status and inconsistent sexual health protocols. Despite being part of a legal framework, many sex workers continue to face precarious working conditions, limited recourse in the face of exploitation, and a patchwork of regulatory enforcement that varies significantly across county lines.

In response to these findings, this paper outlines three core areas for policy intervention: improving stigma, reevaluating the limitations of independent contractor status, and standardizing health regulations. These proposals are grounded in both the lived experiences of sex workers and broader theoretical frameworks, including Carlos Maldonado's concept of partial formalization. As shown, legal recognition alone does not guarantee worker protection. Without coordinated oversight, inclusive policy language, and enforceable labor standards, legalization risks replicating many of the harms it aims to prevent. By updating legal terminology, ensuring contract flexibility, and establishing comprehensive onboarding and health education procedures, Nevada can move toward a more equitable, transparent, and rights-based regulatory model.

This research helps fill a critical gap in the literature by offering a contemporary, ground-level view of how legalized sex work functions when implemented. Much of the existing scholarship on Nevada's brothel system is outdated or overly general, focusing primarily on its legality and the economic, social, and health factors that are affected. By centering the voices of sex workers, hearing from brothel owners and weighting county commissioners' opinions, this research offers a more nuanced understanding of how policy, stigma, and regulation intersect in ways that shape the daily realities of sex work in a legal framework.

Looking ahead, there are several ways this research could be expanded or deepened with more time and resources. While this project benefited from a diverse set of interviews, future

work could incorporate more brothel owners across counties, as well as on-site observations to better understand how policies are enforced in practice. Spending more extended time with sex workers could also allow for follow-up interviews, offering insight into how their perspectives shift over time—especially as they gain more experience, respond to changing industry conditions, or navigate new regulations. Given that inclusivity is still relatively new within Nevada’s brothel system, future studies might explore how marginalized sex workers—particularly male, trans, or nonbinary individuals—experience stigma, access clients, and build relationships in this evolving landscape. Comparative research at the international level could further contextualize Nevada’s model, especially by studying places with more centralized or inclusive frameworks. Expanding the scale of research could help ensure that regulatory models are informed not just by legal precedent, but by the lived realities of those most affected.

Ultimately, this project affirms that sex work policy must be shaped not only by legal mandates but by the realities of those doing the labor. Recognizing sex work as a profession is worthy of rights, protections, and dignity.

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## Appendix A

\*Information is provided by participants and the United States Census Bureau

<b>Brothel Owners and Managers</b>			
<i>Pseudonym</i>	<i># of Residents in County</i>	<i># of Brothels in County</i>	<i>Experience</i>
<i>B</i>	50,000 – 99,999	5	30+ years
<i>L</i>	50,000 – 99,999	5	1+ year (as a manager) 10+ years (as a sex worker)
<i>K</i>	5,000 – 9,999	2	7+ years
<i>J</i>	5,000 – 9,999	2	10+ years
<b>Sex Workers</b>			
<i>C</i>	50,000 – 99,999	5	4+ months
<i>D</i>	5,000 – 9,999	1	1+ year
<i>R</i>	50,000 – 99,999	3	2+ years
<i>N</i>	50,000 – 99,999	3	1 week
<i>F</i>	5,000 – 9,999	2	20+ years
<b>County Commissioners</b>			
<i>T</i>	>700,000	0 (Prostitution is not legal)	6+ years
<i>A</i>	5,000 – 9,999	2	3+ months
<i>N</i>	50,000 – 99,999	3	5+ years
<i>M</i>	<5,000	1	4+ years
<i>H</i>	10,000 – 49,999	0 (Prostitution is legal)	3+ months

## **Appendix B**

### **Questions for Registered Sex Workers in Nevada:**

1. What is your current occupation?
2. How long have you been a sex worker?
3. What made you choose this profession?
4. What are some benefits you receive from your job? (Financial, social, health?)
5. What are some shortfalls from your job?
  - a. What do you find the most challenging about your job?
  - b. Do you ever have conflicts with your brothel owner/boss?
    - i. If yes about what?
6. Does your job affect your everyday life?
  - a. In what way?
  - b. How drastically?
7. How would you compare your life before and after you became a sex worker?
  - a. Is your lifestyle and routine different?
  - b. How do people perceive you?
  - c. How has your perception about your profession changed if it did?
  - d. Did it affect your mental health?
8. Can you describe your typical work schedule?
  - a. What is the level of autonomy you have in your profession?
  - b. How are you managed?
  - c. How many hours do you work per day/week?
  - d. How much do you make?
9. What type of legal regulations make it hard for you to do your job or do your job in the way you want?
  - a. Do you personally think it's better to legalize prostitution?
  - b. Are the constant STI/STD health checks a hindrance for you?
  - c. How has legalized prostitution affect your taxes?
10. If there is anything you can change about the prostitution legislation in Nevada what would you change to make it better for sex workers?
  - a. Better for brothel owners?

### **Questions for Brothel owners in Nevada:**

1. What is your current occupation?
2. How long have you owned a brothel?
3. What made you choose this profession?
  - a. If you opened this business how did you go about opening it?

4. What are some benefits you receive from your job? (Financial, social, health?)
  - a. What benefits do you give to your workers?
5. What are some shortfalls from your job?
  - a. What do you find the most challenging about your job?
  - b. Do you ever have conflicts with your sex workers?
    - i. Over what?
6. Does your job affect your everyday life?
  - a. In what way?
  - b. How drastically?
7. How would you compare your life before and after you opened up your brothel?
  - a. Is your lifestyle and routine different?
  - b. How do people perceive you?
  - c. How has your perception about your profession changed if it did?
8. Can you describe your typical work schedule?
  - a. What is the level of autonomy you have in your profession?
  - b. How do you manage your workers?
    - i. How much are they paid and are allowed to work?
  - c. How much do you work?
9. What type of legal regulations make it hard for you to do your job or do your job in the way you want?
  - a. Do you personally think it's better to legalize prostitution?
  - b. Are the constant STI/STD health checks a hindrance for your business?
  - c. How has the Nevada's legal regulation shaped or changed your business?
10. If there is anything you can change about the prostitution legislation in Nevada what would you change to make it better for brothel owners?
  - a. Sew workers?

**Questions for County Officials (in counties that have legalized prostitution):**

1. How long have you worked in the area of policy or law
2. What led you to your position?
3. Can you briefly describe your role in relation to the regulation of legalized prostitution in Nevada or your specific county?
4. What are the primary goals of Nevada's current prostitution laws, in your view?
  - a. Your county's goals? (optional)
5. How do you see the legalization of prostitution impacting public health and safety at the community level?
  - a. Has there been a significant increase or decrease of public health and safety since the last change in legalized prostitution legislation?

6. What effects of legalized prostitution do you believe are most significant for sex workers themselves?
  - a. Specifically social?
  - b. Specifically economic?
7. How do current regulations balance the safety and autonomy of sex workers, and are there areas where you feel this balance is lacking?
8. How does public perception of sex work influence the development and implementation of policies in this area?
9. Do you feel like these regulations are properly followed?
10. Are there legal or social barriers that you believe hinder effective policy outcomes for the well-being of sex workers?
11. What insights would you offer to policymakers in other regions considering similar legislation, based on Nevada's experiences?
12. What immediate changes would you implement to improve the regulatory framework for legalized prostitution, ensuring it supports worker safety and community interests?

**Questions for County Officials (in counties that have banned prostitution):**

13. How long have you worked in the area of policy or law
14. What led you to your position?
15. Can you briefly describe your role in relation to the regulation of legalized prostitution in Nevada or your specific county?
16. What are the primary goals of Nevada's current prostitution laws, in your view?
  - a. Your county's goals? (optional)
17. How do you see the ban of prostitution impacting public health and safety at the community level?
  - a. Has there been a significant increase or decrease of public health and safety since the last change in legalized prostitution legislation?
18. What effects of banning prostitution do you believe are most significant for sex workers themselves?
  - a. Specifically social?
  - b. Specifically economic?
19. How do current regulations balance the safety and autonomy of sex workers/sex industry, and are there areas where you feel this balance is lacking?
20. How does public perception of sex work influence the development and implementation of policies in this area?
21. Do you feel like these regulations are properly followed?
22. What insights would you offer to policymakers in other regions considering similar legislation, based on Nevada's experiences?

23. What immediate changes would you implement to improve the regulatory framework for banning prostitution, ensuring it supports worker safety and community interests?