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## Criminal Prosecution and HIV-related Risky Behavior

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## Abstract

We examine the consequences of prosecuting HIV+ people who expose others to the infection. We show that the effect of such prosecutions on the spread of HIV is *a priori* ambiguous. They deter unsafe sex. However, they also create incentives for having sex with more promiscuous partners, consequently increasing the spread of HIV. We test these predictions and find that such prosecutions are associated with a reduction in the number of partners, increase in safe sex, and increase in sex with prostitutes. We estimate that doubling the prosecution rate could decrease the total cumulated number of new HIV infections by a third over a ten-year period.

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## Criminal Prosecution and HIV-related Risky Behavior

### Abstract

We examine the consequences of prosecuting HIV+ people who expose others to the infection. We show that the effect of such prosecutions on the spread of HIV is *a priori* ambiguous. They deter unsafe sex. However, they also create incentives for having sex with more promiscuous partners, consequently increasing the spread of HIV. We test these predictions and find that such prosecutions are associated with a reduction in the number of partners, increase in safe sex, and increase in sex with prostitutes. We estimate that doubling the prosecution rate could decrease the total cumulated number of new HIV infections by a third over a ten-year period.



## Introduction

*"The criminal law has a role to play both in deterring those infected with HIV from putting the lives of others at risk and in protecting the public from irresponsible individuals who refuse to comply with public health orders to abstain from high-risk activities."*

—Supreme Court of Canada, *R. v. Cuerrier*, [1998] 2 S.C.R. 371

Private decisions about risky behavior such as unprotected sex, drinking and driving, and drug use often impose costs on society that are not considered by the individual in making behavioral choices. This result is often invoked as a justification for explicitly taxing certain products and imposing fines and penalties. However, it is often unclear whether such policy actions do more harm or good. The primary argument against such policies is that the demand for risky behavior is fairly inelastic and thus these policies do little to deter such behaviors. For example, most would agree that the fear of dying is powerful and pervasive. Yet, whether capital punishment deters crime is a highly contentious issue among economists (Donohue and Wolfers, 2006; Becker, 2006; Rubin 2006). Taxing risky or criminal behavior may also engender behavioral responses harmful to society (Polinsky and Shavell, 2007). For example, Peltzman (1975) argues that strict seat belt laws might encourage reckless driving; Miron and Zwiebel (1995) posit that free markets for drugs might reduce violence, property crime and other unintended consequences of drug prohibition; and Philipson (2000) argues that mandatory vaccinations might reduce private demand for prevention.

In this paper, we analyze the consequences of prosecuting HIV+ people who expose others to the risk of infection. In the United States, all states are endowed with criminal laws to prosecute individuals infected with HIV who expose others to the virus, and several hundred

such prosecutions have taken place between 1986 and 2001 (Lazzarini et al., 2002). However, states differ in how often, if at all, they charge people under these laws. We develop an economic model of risky sex with law enforcement, and empirically evaluate the effect of stringent law enforcement on the sexual behavior of HIV+ individuals. Our paper extends previous work on the economics of the HIV epidemic to the study of criminal penalization. Previous work in this area has analyzed how sexual behavior and HIV incidence responds to the prevalence of HIV (Kremer, 1996; Auld, 2003), new treatments for HIV (Lakdawalla, Sood and Goldman, 2006), information campaigns (Posner and Philipson, 1994; Booser and Philipson, 2000), and subsidized testing (Posner and Philipson, 1995).

Using unique nationally representative data on the sexual activity of HIV+ individuals and state-level prosecutions, we find that the sexual activity and propensity for unsafe sex of the HIV+ is quite responsive to more aggressive prosecution. Thus, at first glance, a tax on risky behavior appears to be welfare enhancing – it deters unsafe sex and sexual activity by HIV+ individuals and consequently limits the spread of HIV.

However, these laws also have some unintended but rational behavioral responses. In particular, our model shows that, under certain circumstances, such penalties create unique incentives for having sex with more promiscuous partners such as prostitutes for whom it is more difficult to trace the source of infection. The increased sexual activity with more-risky partners could actually increase the spread of HIV. We also show that fear of prosecution reduces disclosure of HIV+ status to potential partners. We test these predictions using data on the sexual activity of HIV+ individuals and find that more aggressive prosecutions are associated with an increased likelihood of having sex with prostitutes and not disclosing HIV+ status.

To illustrate the implications of our empirical results for the transmission of HIV, we use our estimates to simulate the number of new HIV infections generated over 10 years under a 100% increase in HIV-related prosecution rate. The increase in sexual activity with prostitutes offsets partially, but not fully, the impact of the laws on HIV incidence. When ignoring the increase in sex with more promiscuous partners, our estimates imply that doubling the rate of prosecutions against HIV+ individuals could decrease the cumulated number of new infections by 36% over a ten-year period. Taking into account the overall effects of law enforcement, we find that stringent law enforcement could decrease new infections by 34%.

## **1 An Economic Model of Risky Behavior with Criminal Enforcement**

In 1996, Johnson Aziga, a Uganda-born Canadian had unprotected sex with at least 13 women without disclosing that he was HIV+. Mr. Aziga was charged with aggravated sexual assault; and, after two of them died of complications from AIDS, he was charged with murder. (There is a certain irony in that Mr. Aziga was employed by the Ontario Ministry of the Attorney General in 1996). His case is still pending and has received much attention. Aziga's case closely mirrors that of Trevis Smith, a linebacker with the Canadian Football League's Saskatchewan Roughriders. He was charged with sexual assaulting two women because he had unprotected sex with them and did not disclose his HIV status. Smith is currently free on bail; the conditions of his release require him to practice safe sex, tell all future partners he is HIV+, and use condoms.

In this section, we develop an economic model of how such prosecutions affect behavior. The model allows HIV+ agents to choose several dimensions of risky sexual behavior including the number of offers for sex to potential partners; propensity to practice safe sex; disclosure of HIV+ status; and promiscuity of potential sex partners. Potentially, the two partners jointly make some of these decisions, such as to engage in sexual intercourse and practice safe sex.

Alternatively, the HIV+ person may make a take-it-or-leave-it offer specifying all the dimensions of the sexual encounter that the partner can accept or reject. For simplicity, the model abstracts from the joint decision-making process and assumes that an HIV+ agent meets a willing partner with certain characteristics (for example, promiscuity).<sup>1</sup> The HIV+ person observes the characteristics of the potential partner and then decides whether to propose sex to this partner, whether to practice safe sex, and whether to disclose HIV status.

Consider a representative risk-neutral HIV+ person who resides in a state that prosecutes HIV-infected individuals for exposing others to the virus through sexual contact. Let  $\Pi > 0$  denote the disutility from being prosecuted and  $Pr(pros)$  be probability of being prosecuted. The probability of being prosecuted in turn depends on the likelihood that a potential partner would report the sex act to the state and the probability that the state would prosecute conditional on receiving a report:

$$P(pros) = P(reported) \times P(prosecuted | reported) = P(reported) \times \rho \quad (1)$$

The parameter  $\rho$  is the key policy of interest—states with higher values of  $\rho$  have more stringent law enforcement against HIV+ individuals.

The probability of being reported ( $P(reported)$ ) depends on the outcome and circumstances of the sexual encounter. A partner is more likely to report the HIV+ person if he gets infected with HIV and can identify the HIV+ person as the source of infection. Thus, the probability of being reported depends on three behavioral choices made by the HIV+ person:

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<sup>1</sup> This framework follows our data—we have information on the actions taken for sex offers that have been realized, but we do not know anything about offers that have been rejected. Those are anyway irrelevant for the transmission of HIV.

- *Practice unsafe sex (c)*: A partner is more likely to become infected if they do not practice safe sex during the sexual encounter; therefore the probability that a partner will report a sex act with the HIV+ person increases with unsafe sex ( $\frac{\partial P(\text{reported})}{\partial c} > 0$ )
- *Disclose HIV+ status (d)*: a partner is more able to identify the HIV+ person as the source of infection if the person has disclosed HIV+ status; therefore the probability that a partner will report a sex act with the HIV+ person increases with disclosure ( $\frac{\partial P(\text{reported})}{\partial d} > 0$ )
- *Avoid non- promiscuous partners ( $\delta$ )*: a partner who is less promiscuous, i.e. more “exclusive,” can more easily identify the person who infected her; therefore the probability that a partner will report a sex act with the HIV+ person increases with the exclusivity of their relationship ( $\frac{\partial P(\text{reported})}{\partial \delta} > 0$ ). The exclusivity level  $\delta$  follows a distribution  $\Gamma(\delta)$  on the support  $[\underline{\delta}, \bar{\delta}]$ .

For simplicity, we also assume that the cross derivative of the probability of being reported with respect to each of these choices is zero. For example, we assume that the change in the probability of being reported implied by a change in disclosure is independent of the level of safe sex practiced. We also assume the second derivatives have the usual properties:

$$\frac{\partial^2 P(\text{reported})}{\partial c^2} < 0, \frac{\partial^2 P(\text{reported})}{\partial d^2} < 0, \frac{\partial^2 P(\text{reported})}{\partial \delta^2} < 0.$$

The exclusivity of the partner, the practice of unsafe sex and disclosure also influence the value of the sexual encounter. We assume that everything else equal the HIV+ person prefers less promiscuous partners; prefers unsafe sex and prefers to disclose HIV+ status because of



altruistic concerns.<sup>2</sup> In other words, the value of sex ( $V$ ) with a particular partner increases with the exclusivity of the relationship ( $\frac{\partial V}{\partial \delta} > 0$ ) with the partner, increases with having unsafe sex ( $\frac{\partial V}{\partial c} > 0$ ) and increases with disclosure ( $\frac{\partial V}{\partial d} > 0$ ). For simplicity, we also assume that the cross derivative of the value of sex with respect to each of these choices is zero.

When matched with a partner  $i$ , the HIV+ person observes whether this partner is promiscuous, i.e. the exclusivity level  $\delta_i$ . After observing the exclusivity level, the agent faces first a discrete choice (whether to propose sex or not) and if he decides to propose, he chooses the levels of disclosure  $d$  and unsafe sex  $c$  to maximize expected utility.

Let's focus first on the optimal levels of disclosure and safe sex conditional on making a proposal. The HIV+ person solves the following maximization problem:

$$\max_{c,d} \{V(\delta_i, c, d) - \rho P(\text{reported})\Pi\} \quad (2)$$

A sufficient condition for the solutions to the first-order conditions with respect to  $c$  and  $d$  to yield a minimum is that the Hessian matrix is negative definite. The following condition ensures this property of the Hessian matrix (Appendix 1 provides more detail):

**Condition 1:**  $\frac{\partial^2 V}{\partial c^2} - \Pi\rho \frac{\partial^2 P(\text{reported})}{\partial c^2} < 0$  for all  $c$  and  $\frac{\partial^2 V}{\partial d^2} - \Pi\rho \frac{\partial^2 P(\text{reported})}{\partial d^2} < 0$  for all  $d$ .

A sufficient condition for this condition to hold for all  $\rho \in [0,1]$  is:

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<sup>2</sup> We assume the HIV agent values honesty and hence, ceteris paribus, would prefer to disclose HIV status. In our nationally representative sample of HIV+ persons, 83% of respondents either strongly agree or agree that it is their duty to tell all new partners that they are HIV+.

**Condition 1'**:  $\frac{\frac{\partial^2 V}{\partial c^2}}{\frac{\partial^2 P(\text{reported})}{\partial c^2}} > \Pi$  for all  $c$ , and  $\frac{\frac{\partial^2 V}{\partial d^2}}{\frac{\partial^2 P(\text{reported})}{\partial d^2}} > \Pi$  for all  $d$ .

This means that a decrease in unsafe sex  $c$  or disclosure  $d$  leads to a sharper decrease in the marginal value of sex than in the marginal probability of being reported. If condition 1 is satisfied, the optimal levels  $d^*$  and  $c^*$  satisfy the following first-order-conditions:

$$\frac{\partial V}{\partial c} = \Pi \rho \frac{\partial P(\text{reported})}{\partial c} \quad (3)$$

$$\frac{\partial V}{\partial d} = \Pi \rho \frac{\partial P(\text{reported})}{\partial d} \quad (4)$$

Equation (3) states that the HIV+ agent chooses the level of unsafe sex to equalize the marginal disutility from unsafe sex to the marginal benefit from safe sex. On the one hand, increasing unsafe sex increases the value of sex. On the other hand, it increases the chance of being reported to the state and being penalized for having sex. Equation (4) states that the HIV+ agent chooses the level of disclosure to equalize the marginal disutility of disclosure to the marginal benefit of disclosure. On the one hand, increasing disclosure reduces guilt and thus increases the value of sex. On the other hand, increasing disclosure is costly as it increases the chance of being reported to the state.

Given the optimal levels of disclosure and safe sex, the HIV+ person will propose to have sex if the expected utility of proposing is higher than the expected utility of not proposing, which we normalize to  $M$ , i.e. he will propose to a partner of exclusivity level  $\delta_i$  if

$$\left[ V(c^*, d^*, \delta_i) - \rho P(\text{reported})^* \Pi \right] \geq M, \quad (5)$$

where  $P(\text{reported})^*$  denote the probability of being reported evaluated at  $(c^*, d^*)$ .

## 1.1 The Effects of Stringent Law Enforcement

We now analyze the effect of a change in the stringency  $\rho$  of the HIV law on the choices of the HIV+ person. For all the propositions we assume that condition 1' is verified. We provide here intuition for the comparative statics. Formal derivation is presented in the appendix.

**Proposition 1:** *More stringent law enforcement increases safe sex.*

Intuitively an increase in  $\rho$  increases the marginal cost of unsafe sex, as reducing the probability of being reported to the state is more valuable in states that tend to prosecute at higher rates. Therefore, as the expected punishment increases, the HIV+ person seeks to reduce the transmission of HIV to the partner and will thus practice safer sex. More formally, we see from equation (3) that a decrease in the practice of unsafe sex  $c$  increases both  $\frac{\partial V}{\partial c}$  and

$\frac{\partial P(\text{reported})}{\partial c}$  but condition 1' ensures that  $\frac{\partial V}{\partial c}$  increases faster.

**Proposition 2:** *More stringent law enforcement decreases disclosure of HIV+ status.*

Similarly, an increase in  $\rho$  increases the marginal cost of disclosure, as reducing the probability of being reported to the state is more valuable in states that tend to prosecute at higher rates. Therefore, as the penalty increases, the HIV+ person seeks to avoid being reported and is thus less likely to disclose.

**Proposition 3:** *More stringent law enforcement decreases the probability of a sexual encounter.*

This result directly follows from the fact that more stringent enforcement reduces the expected utility from sex as it increases the expected punishment. To see this more formally, consider Equation (5) that shows that the agent is going to propose sex to a partner of exclusivity level  $\delta_i$  if  $\left[ V(c^*, d^*, \delta_i) - \rho P(\text{reported})^* \times \Pi \right] \geq M$ . With an increase of the stringency of law

from  $\rho$  to  $\rho^{**}$ , the new decision rule is  $\left[ V(c^{**}, d^{**}, \delta_i) - \rho^{**} P(\text{reported})^{**} \times \Pi \right] \geq M$ , where  $d^{**}$  and  $c^{**}$  are the new optimal levels of disclosure and safe sex conditional on making a proposal. Because  $d^*$  and  $c^*$  are the optimal levels when the stringency is  $\rho$ , we have:

$$\left[ V(c^*, d^*, \delta_i) - \rho P(\text{reported})^* \times \Pi \right] \geq \left[ V(c^{**}, d^{**}, \delta_i) - \rho^{**} P(\text{reported})^{**} \times \Pi \right] \quad (6)$$

Moreover, since  $\rho^{**} > \rho$ , we also have

$$\left[ V(c^{**}, d^{**}, \delta_i) - \rho^{**} P(\text{reported})^{**} \times \Pi \right] > \left[ V(c^{**}, d^{**}, \delta_i) - \rho P(\text{reported})^{**} \times \Pi \right] \quad (7)$$

These 2 inequalities in equations (6) and (7) can be combined to show that:

$$\left[ V(c^*, d^*, \delta_i) - \rho P(\text{reported})^* \times \Pi \right] > \left[ V(c^{**}, d^{**}, \delta_i) - \rho^{**} P(\text{reported})^{**} \times \Pi \right] \quad (8)$$

Equation (8) implies that all partners with characteristics  $\delta_i$  who are proposed to have sex under the stringency of law  $\rho^{**}$  would also be proposed sex under the stringency of law  $\rho$ . It is harder for equation (5) to be verified when the law is more stringent. So, the HIV+ person is less likely to engage in sexual activities with a more stringent law.

**Proposition 4:** *Under certain conditions, more stringent law enforcement can increase the probability of a sex offer to more promiscuous partners.*

The marginal benefit of having a more exclusive partner is the marginal utility the HIV+ person gains from having sex with a more exclusive partner ( $\frac{\partial V}{\partial \delta}$ ). The marginal cost is the increase in the probability of being reported times the expected penalty from being reported, i.e.  $\Pi \rho \frac{\partial P(\text{reported})}{\partial \delta}$ . Clearly, the marginal cost is increasing in the stringency of the law: the more stringent the law, the less beneficial it is to have a partner who is exclusive and who will thus have less difficulty in identifying the source of a potential infection. If  $\rho$  is sufficiently high, the

marginal cost of exclusive sex is higher than the marginal benefit, and a further increase in  $\rho$  will lead the HIV+ agent to avoid more exclusive partners.

## **2 Data**

We propose to use data on law enforcement against HIV+ individuals and data on the sexual activity of HIV+ individuals to test the implications of the economic model of risky behavior.

Below we describe each of our data sources.

### **2.1 Criminal Statutes and Law Enforcement in the US**

As of 2000, all US states certified that their criminal laws were “adequate to prosecute individuals infected with HIV who intentionally or knowingly infect or expose others to HIV.”<sup>3</sup> Penalties for breaking the law range from a minimum of one year to a maximum of life in prison (Wolf and Vezina, 2004). The certification by states of the criminalization of exposure to HIV comes from the 1990 Ryan White Comprehensive AIDS Resources Emergency Act which required such warranty from the states in order for them to receive AIDS relief grants for AIDS treatment and care. The motivation at the time was concerns about the safety of blood supply (Wolf and Vezina, 2004).<sup>4</sup>

States have taken three general approaches to prosecute HIV+ individuals who expose others to the risk of HIV: (i) adopt HIV-specific laws; (ii) rely on existing sexually transmitted diseases (STD) laws; or (iii) use general criminal statutes such as assault or reckless endangerment (Lazzarini et al, 2002). As of 2005, 24 states have HIV-specific laws. In most states, the HIV-specific laws refer to sexual activity, exchange of bodily fluid, needle sharing and organ donation. In some cases, the laws also address other activities such as spitting that have little or no risk of spreading HIV. Most of these laws focus on intentional HIV exposure

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<sup>3</sup> Source: Ryan White Comprehensive AIDS Resources Emergency, 42 U.S.C, §300-47ff.

<sup>4</sup> This requirement was abandoned in 2000 as all states fulfilled the requirement.

rather than actual infection. In four states, it is exposure without disclosure that constitutes a crime.<sup>5</sup> Note however that disclosure might be hard to prove in court. Some states have also passed sentence enhancement laws that punish more severely a criminal who is HIV+ (e.g., prostitutes). The STD laws, most of which were passed before 1930, punish exposure to a communicable disease or STD (Lazzarini et al, 2002).

We use data from Lazzarini et al. (2002) to measure prosecutions against HIV+ individuals who expose others to the risk of HIV. Lazzarini et al. (2002) have compiled data from cases decisions and newspaper articles and identified 316 prosecutions of exposure or transmissions of HIV for the period 1986-2001. Risk behaviors for prosecutions include sexual exposure (67%), spitting, biting, or scratching (23%), and syringe infection (4%). Sentences (among those that could be determined) range from life imprisonment to probation. Excluding life sentence, the median imprisonment sentence was 6 years. Prosecutions were clustered during the years 1993 to 1998, the six years preceding our data on sexual activity of HIV+ individuals, with twenty or fewer prosecutions nationwide in most other years.

Some of those cases were highly publicized in the media so it is likely that HIV+ individuals have heard about them. In addition, several websites targeted to people living with HIV/AIDS summarize the various prosecution cases, provide links to newspapers' articles relating the cases, and discussion boards on the topic of criminal prosecution for HIV+ individuals<sup>6</sup>.

## **2.2 The HIV Cost and Services Utilization Study**

We aim to investigate the effects of prosecutions of HIV+ individuals on the risky behavior of HIV+ individuals. We use data from a nationally representative study of HIV+ patients in

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<sup>5</sup> See <http://www.hivcriminallaw.org/> [accessed in March 2004].

<sup>6</sup> See for example <http://www.thebody.com/index/legal/transmission.html> [accessed in November 2007].

care, the HIV Costs and Services Utilization Study (HCSUS), to measure sexual activity of HIV+ individuals. The HCSUS employed a multi-stage national probability sample design to identify HIV+ patients over 18 years old, who made at least one visit for regular care in the contiguous United States in January or February of 1996. It does not include HIV+ patients whose only contact with the health care system was through military, prison, or emergency department facilities, or who have not made contact with the health care system for their HIV. HCSUS is a panel data set with three waves of interviews and with detailed information on the demographics, and health of respondents. However, detailed questions about sexual activity including number of partners, safe sex practices, paid sex and disclosure of HIV+ status were asked only to a random sample of 1,794 respondents who completed the third wave of HCSUS interviews. Interviews for this “Risk and Prevention” study were conducted from September to December 1998. 1,421 respondents completed the interview (a completion rate of 79%, or 84% after adjusting for mortality). This sample is representative of the 197,063 HIV+ US adults who received care in 1996 and survived until 1998. We use this subsample of HCSUS respondents for our analysis. State level variation in HCSUS has been used to identify how treatment affects risky behavior (Lakdawalla, Sood, Goldman, 2006); how insurance affects HIV-related mortality (Goldman et al, 2001; Bhattacharya et al., 2003); and how treatment affects labor supply (Goldman and Bao, 2004).

## **2.3 Description of Variables**

### *2.3.1 Measures of risky behavior*

Stringent law enforcement against HIV+ individuals is likely to affect the sexual activity of HIV+ individuals along several dimensions—including the number of partners, propensity for safe sex, promiscuity of partners and disclosure of HIV+ status. These are measured as follows:

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- *Level of sexual activity:* We use the number of partners in the past 6 months as our key measure of the level of sexual activity. We expect the level of sexual activity to reduce with stringent law enforcement.
- *Safe sex practices:* HCSUS respondents were asked about the frequency of unsafe sex practices in past 6 months. The responses to this question were classified into the following mutually exclusive categories: no sex, never unsafe, sometimes unsafe, always unsafe. We expect stringent enforcement to reduce unsafe sex practices.
- *Disclosure of HIV+ status:* We employ an indicator variable for whether the respondent never disclosed HIV status to the 5 most recent partners. We expect that conditional of having sex; stringent law enforcement will decrease disclosure of HIV+ status.
- *Promiscuity of partners:* HCSUS did not ask about the promiscuity of potential sex partners. However, HCSUS did ask respondents whether they had sex with prostitutes. Based on the responses to these questions respondents were classified into two categories: those who had no sex with prostitutes and those who had some sex with prostitutes. Respondents who reported “no sex with prostitutes” or “always avoid sex with prostitutes” were assigned to the first group, others were coded as having some sex with prostitutes. Increase in the proportion of respondents having sex with prostitutes would indicate an increase in the promiscuity of sexual partners. Under certain conditions, we expect stringent law enforcement to increase sex with prostitutes.

### 2.3.2 *Measure of law enforcement*

Lazarrini et al. (2002) document U.S HIV-related laws and the number of prosecutions that have been reported in legal decisions and the press. Based on their data, we employ two variables to measure the stringency of a state HIV law:



- *Strict law*: a binary variable equal to 1 for respondents who reside in states with higher than median prosecutions per 10,000 AIDS cases from 1986 to 2001;
- *Log prosecution rate*: The log of prosecutions per 10,000 AIDS cases from 1986 to 2001.

Table 1 presents the distribution of respondents per state for states with strict law and non-strict law respectively. About half of our sample lives in a state with strict law.

### 3 Empirical Framework and Identification

We use multivariate regressions to investigate the association between stringent law enforcement and measures of risky sexual behavior described above. We estimate ordinary least squares models for “number of partners”; probit regressions for “never disclosed to 5 most recent partners” and “sex with prostitutes”; and ordered probit models for the categorical variable for unsafe sex practice. Standard errors are adjusted for clustering at the state level.

We estimate 2 sets of models. Covariates in the first set of models include age, gender, an indicator variable for non-white, a set of indicator variables for education (less than high school, high school, some college), self reported gay or bisexual (vs. straight) sexual orientation and stage of disease. There are three categories in clinical stage: asymptomatic, symptomatic, and AIDS. Patients have AIDS if they manifest conditions such as Kaposi's sarcoma, toxoplasmosis, or other life threatening conditions typically associated with AIDS. Symptomatic HIV+ patients manifest some conditions related to their infection, but not one of the AIDS defining conditions.

Our identification comes from interstate variation in stringency of law enforcement. However, it is possible that stringency of law enforcement is related to the attitudes towards sex, religiosity and other determinants of sexual activity. If this is the case, then the first set of models which include only individual controls might be biased as they attribute all cross-state

differences in sexual activity to differences in the stringency of law enforcement across states. One solution to this problem is to include state fixed effects and exploit changes in law enforcement to identify the effects of laws on sexual activity. Unfortunately, this is not feasible as panel data on sexual activity of HIV+ individuals is not available.

Prior research documents that state level policies are uncorrelated with unobserved determinants of health and sexual practices among the HIV+ population. For example, Lakdawalla, Sood, Goldman, (2006) used variation in state Medicaid policies as instruments to estimate the effect of treatment on sexual activity of HIV+ persons. They showed that these state level policies were uncorrelated with unobserved determinants of health and sexual practices of HIV+ persons. However to test the robustness of our results, we estimate an additional set of regression models that include several state level measures that are likely to be correlated with sexual activity as additional covariates. These covariates include percent of state population living in urban areas, abortion rate, teen pregnancy rate, percent of state population that prays several times a week and percent of state population with a college education. Urbanization data are based on the 2000 Census as reported in the Statistical Abstract of the United States: 2004–05. Data on abortion and teen pregnancy rates (pregnancies/abortions per 1000 females aged 15–44) in 1999 are based on the survey by the Alan Guttmacher Institute (Finer and Henshaw, 2003), and population estimates from the U. S. Census Bureau. Data on frequency of prayers are from the 1998-2002 General Social Surveys that collect nationally representative data on social attitudes and behaviors. Data on percent college educated are from the 1998 current population survey (CPS) <sup>7</sup>.

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<sup>7</sup> Another concern with using cross state variation is that HIV+ persons with a high propensity for risky sex might migrate out of states with aggressive prosecutions leading to a spurious

In another test, we use data from the GSS and estimate “placebo regressions” to examine whether stringency of HIV related law enforcement is related to sexual practices (number of partners, unsafe sex, ever paid for sex) of the general population. We estimate 2 sets of regressions. In the first set of regressions the GSS sample is representative of the general population. In theory, HIV related law enforcement should not affect sexual practices in the general population given the low prevalence of HIV in the US (about 1 in 300). In other words, there is no causal link between HIV related law enforcement and sexual practices in the general population. However, if HIV related law enforcement is correlated with observed or unobserved determinants of sexual practices in a state, then the stringency of law enforcement might be an important predictor of sexual practices. Thus, a finding of no association in these placebo regressions would support the claim that the association between HIV related law enforcement and sexual practices of the HIV+ is causal and not driven by differences in sexual practices across states.

The above test assumes that sexual attitudes of the general population and the HIV+ population within a state are somewhat correlated. However, this might not be true given the large differences in the demographics of the HIV+ population and the general population. Therefore, in the second set of regression we re-weight the GSS sample to match the demographics of the HIV+ population. Specifically, we re-weight the sample so that it matches the HCSUS sample in terms of age category (18–29, 30–39, 40–49, and 50+), race (White and non-White), gender, and sexual orientation. The sexual attitudes and practices of respondents in

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correlation between risky sex and prosecutions. However, prior research shows that from 1996 to 1998 less than 3% of the HCSUS sample migrated across states and there was no systematic pattern in the migration (Bhattacharya et al. 2003).

this GSS sample with HCSUS weights are more likely to be correlated with those of HIV+ persons. Thus, a finding of no association between law enforcement and sexual practices in these re-weighted placebo regressions would further bolster the claim that the association between HIV related law enforcement and sexual practices of the HIV+ is not driven by differences in sexual practices across states. However, since the re-weighted sample is largely representative of high risk HIV- persons it is possible that HIV related law enforcement has a causal effect on the sexual practices of respondents in this sample. For example, high risk HIV- respondents might reduce condom use in response to strict law enforcement if they believe that strict law enforcement will induce the HIV+ to decrease their sexual activity, or they might reduce sex with prostitutes if they believe that strict law enforcement will induce the HIV+ to have more sex with prostitutes.

#### **4 Results**

Table 2 presents descriptive statistics on the distribution of number of partners, safe sex practice, paid sex and disclosure of HIV+ status according to the strictness of law enforcement, as defined in Section 3.3.2, against transmissive activity by HIV+ individuals. The trends in the raw data are remarkably consistent with the predictions from the economic model. The results show that HIV+ individuals in “strict law” states have fewer partners on average (1.68 compared to 2.65). This difference comes from that fact that respondents in states with strict law enforcement are more likely to abstain from sex (37% versus 30%) and less likely to have more than 2 partners (22% compared to 31%). HIV+ individuals in states with strict law enforcement are also more likely to practice safe sex. For example, 58% of HIV+ individuals in strict law states always practice safe sex (or equivalently never practice unsafe sex) compared to 53% of HIV+ individuals in states without strict laws. The raw data also show that even though strict law

enforcement is associated with reduced sexual activity and safer sexual practices; it does have some negative consequences. In particular, strict legal enforcement is associated with an increase in sex with prostitutes and reduced disclosure of HIV+ status. For example, respondents in strict law states are twice as likely not to reveal their HIV status to their sexual partners. Similarly, among respondents with more than one sexual partner, 26% of respondents in states with strict law report having sex with prostitutes compared to 24% of respondents in non strict law states.

While these descriptive statistics are supportive of our theory, they do not condition on factors other than strictness of law enforcement. Table 3 presents some individual characteristics by strictness of law enforcement and shows that respondents who reside in a strict law state are more likely to be female, white, straight (compared to gay or bisexual) and less educated. However, there are no differences in the health status of respondents across the two types of states.

Table 4 presents the estimation results. For each behavior, we present two specifications each using one of the two measures of stringency of HIV laws – “strict law” an indicator for whether the prosecution rate is higher than the median prosecution rate and “log prosecutions,” the log of prosecutions per 10,000 AIDS cases. The striking result from Table 4 is that the stringency of law enforcement significantly affects basically all the risky behaviors and verifies the results obtained from the descriptive statistics presented earlier. HIV+ individuals living in strict law states have on average 0.67 less sexual partners than HIV+ people in states without strict law. The results from the continuous measure of prosecution rates show that a 100% increase in prosecutions is associated with 0.46 less sexual partners. The coefficients from the ordered probit regression of unsafe sexual practices show that more stringent law enforcement against HIV+ individuals who expose others in the population to the risk of HIV is also

associated with HIV+ individuals practicing safe sex. The mean marginal effects from the ordered probit specification (not presented in the table) show that a 100% increase in the prosecution rate is associated with a 1.9 percentage point increase in the probability of abstinence, a 2.0 percentage point increase in the probability of always practicing safe sex (never practicing unsafe sex), a 2.3 percentage point reduction in the probability of sometimes practicing unsafe sex, and a 1.6 percentage point decrease in the probability of always practicing unsafe sex. Thus, the results show that stringent law enforcement is likely to reduce the spread of HIV by reducing both the level of sexual activity and the propensity for unsafe sex.

However, the coefficients from the probit models in the last 2 columns of Table 4 suggest that these laws also might have some perverse effects. Respondents in states with strict law enforcement are significantly less likely to disclose their HIV+ status to their partners. Moreover, among respondents with more than one partner, respondents living in states with more stringent laws are more likely to have sex with prostitutes; however this effect is not statistically significant. Both of these behaviors could increase the transmission of HIV.

We also re-estimated our models including controls for other factors. The stringency of the HIV law in a given state could be correlated with other variables (such as religiosity) influencing risky behaviors. In order to evaluate whether this is the case, we include state-specific controls to our models. In particular, we include religiosity (proportion of population that prays several times a week), abortion rate, the teen pregnancy rate, the proportion of people with a college degree and the percentage of people living in an urban area. Table 5 presents the results. Our results are robust to adding state-specific controls; we still find that more stringent law enforcement is associated with an increase in number of partners, increase in propensity for safe sex, and reduction in disclosure of HIV+ status. In fact adding the controls increases the

magnitude of the impact of the HIV laws on risky behavior and makes the coefficients more precisely estimated. For example, the association between stringent law enforcement and sex with prostitutes is statistically significant. A 100% increase in the prosecution rate increases the probability of sex with prostitutes by 11.2 percentage points among people more than one partner.

In another specification test, we estimate placebo regressions to test for association between stringency of HIV related law enforcement and sexual practices in the general population. In theory, a causal link between HIV related law enforcement and sexual practices in the general population is unlikely. Therefore, any association between HIV related law enforcement and sexual practices in the general population might indicate spurious correlation between HIV related law enforcement and sexual practices. To implement this test, we use data from the 1996 and 1998 waves of the GSS and estimate regression models similar to those reported in Table 5 for the HIV+ population. In the first model we estimate an ordered probit model for number of partners, which is coded as a categorical variable (1; 2; 3; 4; 5; 5 to 10; 11 to 20; 21 to 100; 100+) in the GSS. In the second model, we estimate an ordered probit model for unsafe sex practices which is also coded as categorical variable (sex with spouse only or abstinence; non-spousal sex and condom use; non-spousal sex and no condom use). In the last model, we estimate a probit model for “ever paid for sex.” Table 6 presents the results from these models<sup>8</sup>. We find no evidence of an association between stringency of HIV law enforcement and number of partners, unsafe sex practices and having paid for sex in the general population. The point

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<sup>8</sup> We estimated similar models where we used “strict law” instead of log prosecutions as the key independent variable. The results from those models were virtually identical to the results presented in Table 6.

estimates on log of prosecutions and corresponding marginal effects (not reported in the table) are close to zero and statistically insignificant. For example, the marginal effect of log of prosecutions on probability of “sex with spouse only or abstinence” is 0.0002. These regression results for the general population are in sharp contrast to results for the HIV+ population (reported earlier in Tables 4 & 5) that showed a strong association between stringency of HIV law enforcement and sexual activity of the HIV+ population.

The last 3 columns in Table 6 present results from regressions where the GSS sample is re-weighted to match the demographics of the HIV+ population. Consistent with the results from the un-weighted sample we find no evidence of an association between stringency of HIV law enforcement and number of partners, and unsafe sex practices. However, the results from this specification show that strict HIV related law enforcement is associated with a *reduction* in the probability of having paid for sex. This is the opposite of the result for the HIV+ population (reported earlier in Tables 4 & 5) that showed a positive association between stringency of HIV law enforcement and sex with prostitutes. One explanation for this result is that the re-weighted GSS sample is largely representative of high risk HIV- persons. These high risk HIV- respondents might reduce sex with prostitutes in response to strict law enforcement if they believe that strict law enforcement will induce the HIV+ to have more sex with prostitutes.

Taken together, these results suggest that the strong association between stringent law enforcement and sexual practices of HIV+ population observed in our data is likely causal and not primarily driven by spurious correlation between stringency of law enforcement and sex attitudes and practices across states.



## 5 Implication for transmission of HIV

In this section, we use a simple simulation model to illustrate the implications of our empirical results for the transmission of HIV. We simulate the number of new HIV infections generated over 10 years in the US population under three scenarios: (1) base scenario – the number of prosecutions is identical to the ones observed in our data; (2) Partial effect – the number of prosecutions increases by 100% and prosecutions rates affect number of partners, probability of safe sex but not the probability of sex with prostitutes; (3) Full effect – the number of prosecutions increases by 100% and prosecutions rates affect number of partners, probability of safe sex and probability of sex with prostitutes (as estimated in Table 5).

We assume that the population or the pool of potential sex partners consists of two types of individuals – “ordinary” (i.e. non-promiscuous) partners and “prostitute” partners (i.e. promiscuous). We distinguish between ordinary and prostitute partners as these groups differ dramatically in their promiscuity and thus have significantly different probability of infecting other individuals in the population and spreading the infection. We assume that ordinary partners have sex both with ordinary partners and with prostitutes. However, prostitute only have sex with ordinary partners. Let  $n_{oo}$  and  $n_{op}$  be the (expected) number of ordinary partners and prostitute partners infected by an ordinary HIV+ person per period. Similarly, let  $n_{po}$  be the number of ordinary partners infected by a HIV+ prostitute per period. Given the number of ordinary partners  $u_t$  and prostitutes  $v_t$  infected at time  $t$  and a death rate of  $d$ , the number of HIV+ ordinary partners and prostitutes at time  $t+1$  number is provided by:

$$u_{t+1} = u_t(1-d) + n_{oo}u_t + n_{po}v_t \quad (9)$$

$$v_{t+1} = v_t(1-d) + n_{op}u_t \quad (10)$$



We assume that the risk of infection follows a simple binomial of the number of unprotected sex acts (see for example UNAIDS, 2005 for a similar approach). Thus, the expected number of partners infected by ordinary HIV+ individuals and infected prostitutes is given by:

$$n_{oo} = (N - N_{prost}) p_{neg,o}^t \times \left(1 - (1-i)^{C \times p_{unsafe}}\right) \quad (11)$$

$$n_{op} = N_{prost} \times p_{neg,p}^t \times \left(1 - (1-i)^{C \times p_{unsafe}}\right) \quad (12)$$

$$n_{po} = N^P \times p_{neg,c}^t \times \left(1 - (1-i)^{C^P \times p_{unsafe}^P}\right), \quad (13)$$

where,  $N$  and  $N^P$  denote the total the number of sexual partners per period of ordinary individuals and prostitutes respectively and  $N_{prost}$  the expected number of prostitute partners of an ordinary individual.<sup>9</sup>  $p_{neg,o}^t$  and  $p_{neg,p}^t$  are the probabilities that an HIV+ person's ordinary and prostitute partners are HIV- respectively at time  $t$ . Similarly,  $p_{neg,c}^t$  is the probability that a prostitute's client is uninfected.  $p_{unsafe}$  and  $p_{unsafe}^P$  are the probabilities of unsafe sex for ordinary partners and prostitutes respectively.  $C$  and  $C^P$  are the number of sexual contacts per partner for ordinary partners and prostitutes respectively. Finally,  $i$  is the risk of infection per unprotected contact. Equations (11) to (13) show that the expected number people infected by a HIV+ person is an increasing function of (1) the number of partners, (2) the number of contact per partner, (3) the probability that the partner is uninfected, (4) the probability of unsafe sex, and (5) the probability of infection per unprotected contact.

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<sup>9</sup>  $N_{prost}$  is given by the probability of having sex with a prostitute multiplied by the number of prostitute partners among those who have sex with prostitutes.

We calibrate the parameters of our simulation model using existing evidence on the sexual activity of HIV+ persons, the uninfected population and prostitutes. We then use the parameter estimates from Table 5 to simulate the cumulated number of new HIV infections generated over 10 years in the US under the different law enforcement scenarios described earlier. We next describe how we calibrate our model.

Our simulation takes place in country inhabited by 300 millions of people, including 200,000 prostitutes. The number of prostitutes in the US is not known and estimates vary widely: The Federal Bureau of Investigation (FBI) reports approximately 85,000 arrests related to prostitution in 2005 (FBI, 2005); the National Task Force on Prostitution suggests that over one million people in the US have worked as prostitutes in the United States at some point (Education Prostitution network, 2007); Potterat et al. (1990) estimated the annual prevalence of full-time equivalent prostitutes in the US to be 23 per 100,000 population based on a capture–recapture study of prostitutes found in Colorado Springs, CO, police and sexually transmitted diseases clinic records between 1970 and 1988; and Esselstyn (1968) report an estimate of 600,000 full-time prostitutes at the beginning of the 50s. Our simulation is based on a relatively conservative rate of 70 prostitutes per 100,000 individuals. The HIV/AIDS infection rate at time zero is 0.002 among ordinary people and 0.05 among prostitutes,<sup>10</sup> yielding a total infection rate

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<sup>10</sup> The promiscuous population we consider may include sex workers and people who occasionally trade sex for money. Braine et al. (2006) show that there is a wide array of sexual transaction taking place in the US. There are no recent statistics of HIV prevalence among prostitutes in the US. A 1989 study from the CDC found a 13% infection rate among female prostitutes (CDC, 1989) and Morse et al. (1991) found a 17.5% infection rate among male sex-workers in the population in New Orleans. In Mexico, various studies found infection rates

of 0.002 —which is comparable to US estimates (CDC, 2006). We assume a yearly death rate among infected people of 0.03 (CDC, 2006).

Table 7 presents the parameters we use to compute  $n_{oo}$  and  $n_{op}$  for the three scenarios we consider: base scenario, partial effect and full effect. Both the partial and full effect scenarios estimate the effects of a doubling of the prosecution rate. The only difference between the partial effect and the full effect parameters is the probability of having sex with prostitutes. The partial effect scenario does not take into account the negative consequence of the law, i.e. that increasing prosecution rates also increases the probability of having sex with prostitutes. We use the results from the descriptive statistics in Table 2 to evaluate the parameters of the baseline case: the average number of partner is 2.14; the probability of unsafe sex (sometimes or always) is 0.44, the probability of sex with prostitutes is 0.25 among the 26% of people who have two partners or more, yielding an average probability of 0.065. We use the estimation results from Table 5 to estimate the parameters for the partial and full effect scenarios. For both scenarios we rely on the specification with the log of prosecutions to estimate the effects of a 100% increase in the number of prosecutions. For example, the estimates show that that increasing prosecution rate by 100% would decrease the number of partners by 0.68, decrease the probability of unsafe sex by 5 percentage points, and increase the probability of sex with prostitutes by 11.2 percentage points among people with two partners or more.

The other parameters are independent of the stringency of law enforcement. The risk of infection per contact comes from the medical literature and is set to 0.003 (UNAIDS, 2005). We assume that the HIV+ individual has on average 2 prostitute partners if he has sex with

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ranging from 0.14% to 1% among female sex workers (Gertler et al., 2003 and references therein).

prostitutes. Also, we assume that HIV+ individuals have on average 8 sexual contacts with ordinary partners and 4 with prostitutes if they have sex with prostitutes. These yield a total of 0.022 and 0.013 expected infections for a 6-month period per ordinary partner in base and full scenario respectively at time zero.

Table 8 presents the parameters for the behavior of an infected prostitute. Since little is known about the activities of sex workers in the US, our parameters are more speculative. We assume that a prostitute has 100 different clients per 6 months period and has an average of 4 sexual acts per client.<sup>11</sup> Brewer et al. (2000) interviewed 98 adult prostitute women in Colorado Spring and those report a mean of 347 male sexual partners in the last 6 months and a median of 103. Clients are drawn from the general population so the HIV prevalence of client is the one of the ordinary population, e.g. 0.002 at time 0. We further assume that prostitutes have unsafe sex 30% of the time,<sup>12</sup> independently of the state laws.<sup>13</sup>

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<sup>11</sup> Using a US survey of clients of female street sex workers, Della Giusta et al. (2006) identify two profiles of clients: the experimenters who have never been with a sex worker before and the 'regular' clients. We assume that 4 contacts per partner over a 6-month period averages over these two types of clients.

<sup>12</sup> In Della Giusta et al. (2006), 74% of the clients of female street sex workers report always using condom with sex workers.

<sup>13</sup> The implicit assumption is that clients decide whether to use a condom or not, and that HIV+ clients are too few to change the average rate of condom use. Gertler et al. (2003) suggest that in Mexico, clients obtain the sex practice they want, albeit paying more for it. In a small-scale study in Australia, Pyatt and War (1997) found that client resistance was the major obstacle to female sex workers maintaining safe sex practices.

In the first year, the model generates 33,530 HIV new infections for the base scenario, which is very close to the approximately 40,000 new infections taking place in the US estimated by the CDC (CDC, 2006).<sup>14</sup> Figure 1 plots the 10-years cumulated number of new infections (including both primary and secondary) generated under the three scenarios. After 10 years, the cumulated number of new HIV infections is 382,791 in the base scenario, 244,782 in the partial effects scenario and 250,991 in the full effects scenario. Due to the mortality of HIV+ people, the difference in overall prevalence after 10 years is limited: 0.0026 under the base scenario compared to 0.0022 in the other two scenarios. The prevalence among prostitutes exhibit more heterogeneity: 0.075 in the base scenario, 0.068 under the partial effect scenario and 0.082 under the full law scenario.

These simulations results show that a 100% increase in the prosecution rate would reduce the total number of new infections by roughly 36% if one only considers the estimated deterrent effects of prosecution rates on number of partners and unsafe sexual practices. However, if one considers the full effect of stringent law enforcement including its perverse effect on sex with prostitutes then a 100% increase in prosecution rate reduces the number of new infections by only 34%. Thus, both the intended and to unintended consequences of strict law enforcement have important implications for the spread of HIV.

## **6 Conclusion**

HIV is a difficult disease to prevent as it involves the complex interplay of many behavioral factors—including continued sexual activity by those who are known to be HIV+. Many states have criminal statutes designed to prosecute the willful infection of others, but states differ in their willingness to prosecute such behavior. We find that more stringent prosecution of such

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<sup>14</sup> Out of those 40,000, about 22% are infected through injection drug use.

behavior leads to two offsetting effects—reduced sexual activity but also increased sex with more promiscuous partners. Our simulations demonstrate that this latter effect vitiates the deterrence somewhat—the effectiveness of these laws in preventing HIV transmission is reduced by 2 percentage points, from 36% to 34%.

Other behavioral factors surely play a role beyond those we have measured. For example, it is likely that prosecution discourages HIV testing by raising the shadow price of knowing one is HIV+. This creates uncertainty in the minds of potential partners—thereby making it more difficult for an HIV+ individual to find partners—and hence offers an alternate explanation for why we see an increase in the use of prostitutes. Furthermore, strict enforcement could also have an effect on the behavior of HIV negative individuals or on AIDS treatment, which also affects transmission rates (Lakdawalla, Sood, and Goldman, 2006). A full exposition of these links is left for further research.

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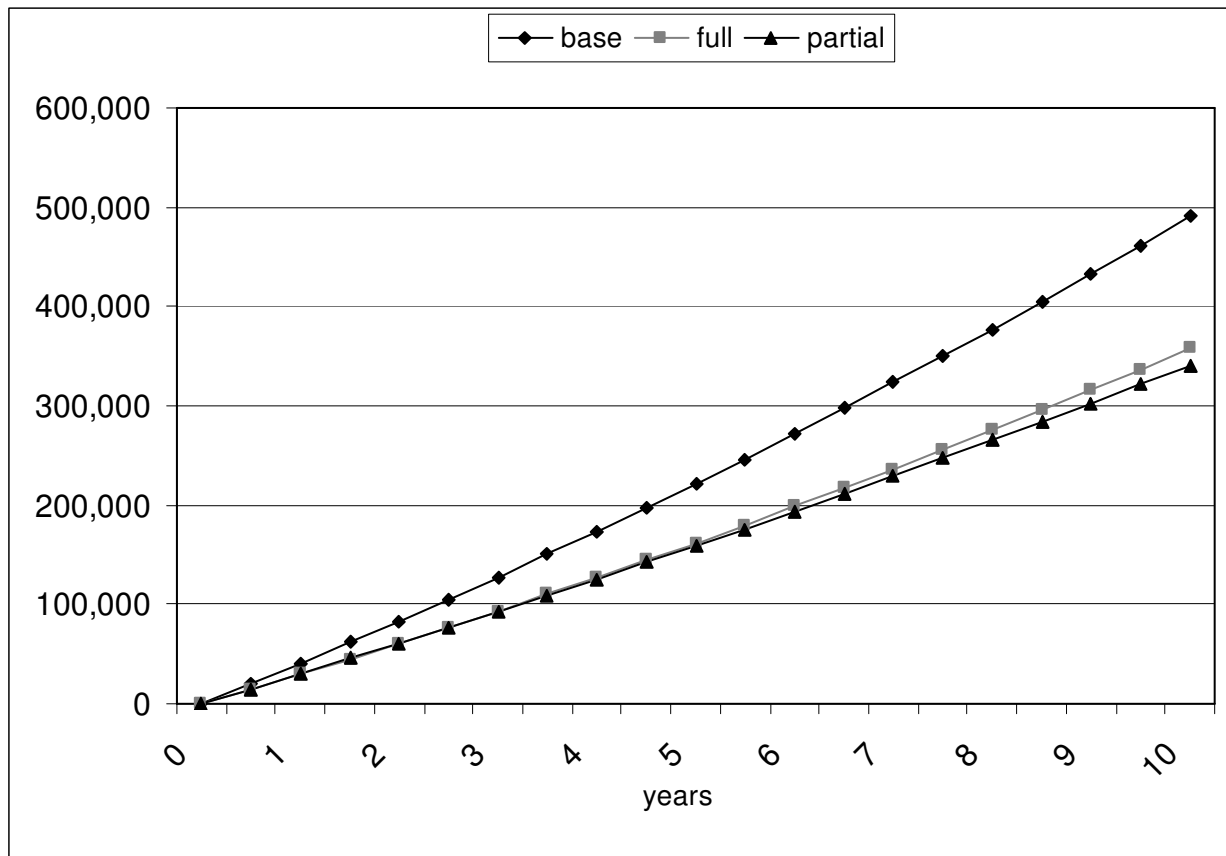
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**Figure 1: Cumulated number of new HIV infections under different prosecution rate scenarios over a ten-year period**



**Table 1: Distribution of respondents by state (N = 1,421)**

<b>States</b>	<b>Freq.</b>	<b>Percent</b>
<b><u>Strict Law Enforcement</u></b>		
AZ	5	0.7
CO	33	4.65
DC	16	2.25
FL	295	41.55
GA	29	4.08
IL	62	8.73
LA	27	3.8
MD	12	1.69
MO	45	6.34
MS	1	0.14
OH	58	8.17
OR	1	0.14
PA	57	8.03
SC	1	0.14
VA	29	4.08
WA	39	5.49
Total	710	100
<b><u>Relaxed Law Enforcement</u></b>		
AK	2	0.28
CA	320	45.01
DE	2	0.28
MA	23	3.23
NJ	65	9.14
NY	219	30.8
TX	80	11.25
Total	711	100

Descriptive statistics based on the HCSUS Risk and Prevention study. Lazarrini et al. (2002) document the number of HIV-related prosecutions in the U.S. Based on their data, we define states with “strict law enforcement” as those states with higher than median prosecutions per 10,000 AIDS cases from 1986 to 2001.

**Table 2: Sexual practices by strictness of HIV law enforcement (weighted).**

	<b>Non-Strict Laws (N = 710)</b>	<b>Strict Laws (N = 711)</b>	<b>Total (N = 1,421)</b>
<i>Number of partners<sup>a</sup></i>			
Average number of partners	2.65	1.68	2.14
Proportion with no partner	0.30	0.37	0.34
Proportion with 1 partner	0.39	0.41	0.40
Proportion with 2 partners or more	0.31	0.22	0.26
<i>Unsafe sex practices<sup>b</sup></i>			
No Sex or Never unsafe	0.53	0.58	0.56
Sometimes unsafe	0.38	0.35	0.36
Always unsafe	0.09	0.07	0.08
<i>Disclosure<sup>c</sup></i>			
Never disclosed	0.05	0.11	0.09
<i>Paid Sex<sup>d</sup></i>			
Sex with prostitutes	0.24	0.26	0.25

Descriptive statistics based on the HCSUS Risk and Prevention study. The weighted sample is representative of the 197,063 HIV+ US adults who received care in 1996 and survived until 1998.

<sup>a</sup>Based on the number of sexual partners in the past 6 months. Number of partners was top coded at 24.

<sup>b</sup>Based on the frequency of unsafe sex practices in past 6 months. Responses are classified as: no sex, never unsafe, sometimes unsafe, always unsafe.

<sup>c</sup>Based on whether the respondent disclosed HIV+ status to the 5 most recent sexual partners. This variable is coded as missing for respondents who reported no recent sexual activity.

<sup>d</sup>Based on whether the respondent reported having sex with prostitutes. Respondents reporting no sex with prostitutes or always avoiding sex with prostitutes were coded as zero and remaining respondents were coded as one. This variable is only defined for respondents with more than 1 sexual partner in the past 6 months.

**Table 3: Weighted descriptive statistics by strictness of HIV law**

	<b>Non-Strict Laws (N = 710)</b>	<b>Strict Laws (N = 711)</b>	<b>Total (N = 1,421)</b>
<i>Demographics</i>			
Age (years)	39.2	38.7	39.0
Female (%)	26	31	28
Non-White (%)	63	57	60
Gay or bisexual	40	37	39
<i>Education</i>			
Less than HS (%)	23	31	27
High school degree (%)	27	32	30
Some college (%)	31	23	27
<i>Stage of Disease</i>			
Asymptomatic (%)	5	5	5
Symptomatic (%)	54	55	54
AIDS (%)	41	40	41

Descriptive statistics based on the HCSUS Risk and Prevention study. The weighted sample is representative of the 197,063 HIV+ US adults who received care in 1996 and survived until 1998.

**Table 4: The effect of the stringency of HIV law enforcement on risky behavior**

	Number of Partners <sup>a</sup>		Frequency Unsafe Sex <sup>b</sup>		Never Disclosed HIV+ <sup>c</sup>		Sex with Prostitutes <sup>d</sup>	
Strict Law Enforcement	-0.673 [0.279]**		-0.192 [0.064]***		0.439 [0.112]***		0.22 [0.179]	
Log of prosecutions		-0.462 [0.167]**		-0.103 [0.052]**		0.138 [0.078]*		0.05 [0.073]
Age	-0.054 [0.011]***	-0.057 [0.011]***	-0.024 [0.003]***	-0.025 [0.003]***	0.001 [0.006]	0.001 [0.006]	0.019 [0.008]**	0.019 [0.008]**
Female	-0.601 [0.191]***	-0.615 [0.188]***	0.004 [0.133]	0.005 [0.133]	-0.215 [0.186]	-0.2 [0.185]	-0.335 [0.217]	-0.318 [0.213]
Non-White	-0.463 [0.159]***	-0.547 [0.149]***	-0.072 [0.051]	-0.087 [0.052]*	0.328 [0.106]***	0.328 [0.100]***	0.095 [0.096]	0.097 [0.099]
Gay	1.605 [0.319]***	1.697 [0.351]***	0.404 [0.095]***	0.426 [0.097]***	-0.216 [0.153]	-0.247 [0.155]	-0.009 [0.152]	-0.035 [0.155]
Less than High School	-1.203 [0.279]***	-1.285 [0.267]***	-0.036 [0.086]	-0.061 [0.093]	-0.169 [0.269]	-0.113 [0.254]	0.222 [0.253]	0.23 [0.238]
High School	-1.795 [0.330]***	-1.83 [0.310]***	-0.172 [0.072]**	-0.183 [0.073]**	0.114 [0.216]	0.149 [0.217]	-0.218 [0.189]	-0.203 [0.200]
Some College	-1.17 [0.254]***	-1.182 [0.251]***	-0.11 [0.060]*	-0.116 [0.059]**	0.1 [0.243]	0.111 [0.229]	0.106 [0.195]	0.084 [0.207]
Stage--Asymptomatic	-0.693 [0.270]**	-0.66 [0.268]**	-0.103 [0.152]	-0.097 [0.145]	0.409 [0.263]	0.394 [0.269]	-0.2 [0.559]	-0.153 [0.543]
Stage--Symptomatic	0.475 [0.137]***	0.479 [0.138]***	0.084 [0.063]	0.085 [0.063]	0.204 [0.116]*	0.186 [0.116]	-0.064 [0.212]	-0.064 [0.218]
Constant	5.333 [0.565]***	5.744 [0.538]***			-1.884 [0.403]***	-1.846 [0.437]***	-1.45 [0.437]***	-1.389 [0.433]***

Notes:

Robust standard errors in parenthesis.

\* significant at 10%; \*\* significant at 5%; \*\*\* significant at 1%

<sup>a</sup> Estimates are based on OLS regression. Dependant variable is the number of sexual partners in the past 6 months.

<sup>b</sup> Estimates are based on Ordered Probit regression. Dependant variable is a categorical variable that measures the frequency of unsafe sex practices in past 6 months: no sex, never unsafe, sometimes unsafe, always unsafe.

<sup>c</sup> Estimates are based on Probit regression. Dependant variable is an indicator variable for whether the respondent disclosed HIV+ status to the 5 most recent sexual partners. Dependant variable is coded as missing for respondents who reported no recent sexual activity.

<sup>d</sup> Estimates are based on Probit regression. Dependant variable is an indicator variable for whether the respondent reported having sex with prostitutes. Estimation sample only includes respondents with more than 1 sexual partner in the past 6 months.



**Table 5: The effect of the stringency of HIV law enforcement on risky behavior with state-specific controls**

	Number of Partners <sup>a</sup>		Frequency Unsafe Sex <sup>b</sup>		Never Disclosed HIV <sup>+</sup> <sup>c</sup>		Sex with Prostitutes <sup>d</sup>	
<b>Strict Law Enforcement</b>	<b>-0.736</b>		<b>-0.17</b>		<b>0.334</b>		<b>0.332</b>	
	<b>[0.367]*</b>		<b>[0.079]**</b>		<b>[0.097]***</b>		<b>[0.159]**</b>	
<b>Log of Prosecutions</b>		<b>-0.688</b>		<b>-0.135</b>		<b>0.163</b>		<b>0.39</b>
		<b>[0.232]***</b>		<b>[0.064]**</b>		<b>[0.112]</b>		<b>[0.066]***</b>
Age	-0.055	-0.058	-0.025	-0.026	0	0	0.019	0.02
	[0.011]***	[0.011]***	[0.003]***	[0.003]***	[0.006]	[0.006]	[0.009]**	[0.009]**
Female	-0.618	-0.607	0.002	0.006	-0.249	-0.257	-0.334	-0.324
	[0.205]***	[0.208]***	[0.134]	[0.134]	[0.180]	[0.179]	[0.223]	[0.223]
Non-White	-0.5	-0.524	-0.055	-0.056	0.264	0.256	0.017	0.057
	[0.144]***	[0.141]***	[0.049]	[0.050]	[0.103]**	[0.104]**	[0.095]	[0.102]
Gay	1.568	1.57	0.371	0.372	-0.25	-0.268	0.118	0.124
	[0.392]***	[0.392]***	[0.096]***	[0.095]***	[0.148]*	[0.149]*	[0.170]	[0.172]
Less than High School	-1.213	-1.228	-0.029	-0.038	-0.179	-0.163	0.199	0.166
	[0.297]***	[0.296]***	[0.089]	[0.089]	[0.270]	[0.273]	[0.285]	[0.280]
High School	-1.793	-1.804	-0.161	-0.164	0.103	0.103	-0.283	-0.285
	[0.330]***	[0.333]***	[0.074]**	[0.074]**	[0.218]	[0.222]	[0.180]	[0.182]
Some College	-1.148	-1.159	-0.101	-0.109	0.128	0.133	0.096	0.081
	[0.241]***	[0.243]***	[0.065]	[0.067]	[0.238]	[0.239]	[0.190]	[0.195]
Stage--Asymptomatic	-0.663	-0.659	-0.071	-0.067	0.431	0.419	-0.235	-0.257
	[0.257]**	[0.268]**	[0.137]	[0.136]	[0.251]*	[0.255]	[0.615]	[0.614]
Stage--Symptomatic	0.488	0.476	0.095	0.093	0.205	0.197	-0.059	-0.053
	[0.141]***	[0.141]***	[0.061]	[0.061]	[0.104]**	[0.105]*	[0.214]	[0.220]
Abortion Rate	0.018	0.031	0.007	0.01	0.015	0.019	-0.014	-0.022
	[0.029]	[0.026]	[0.006]	[0.005]*	[0.005]***	[0.008]**	[0.008]*	[0.005]***
% College Educated	11.08	6.149	2.563	1.47	7.682	10.494	0.04	2.038
	[10.141]	[10.568]	[1.811]	[1.515]	[1.676]***	[1.497]***	[3.110]	[2.617]
Religiosity -- Prayer Frequency	0.705	-5.124	-1.583	-2.754	2.43	4.412	5.164	8.381
	[5.066]	[4.335]	[1.059]	[0.854]***	[1.202]**	[1.773]**	[1.435]***	[0.956]***
Teen Birth Rate	-0.004	0.01	-0.002	0	-0.001	-0.005	-0.006	-0.017
	[0.027]	[0.027]	[0.004]	[0.004]	[0.005]	[0.007]	[0.006]	[0.007]**
% in Urban Areas	-0.018	-0.069	-0.011	-0.02	-0.003	0	0.046	0.082
	[0.040]	[0.047]	[0.008]	[0.009]**	[0.013]	[0.024]	[0.013]***	[0.012]***
Constant	4.416	13.295			-4.739	-6.68	-8.427	-13.743
	[5.624]	[6.522]*			[1.466]***	[2.910]**	[1.645]***	[1.359]***

Notes:

Robust standard errors in parenthesis. \* significant at 10%; \*\* significant at 5%; \*\*\* significant at 1%

<sup>a</sup> Estimates are based on OLS regression. Dependant variable is the number of sexual partners in the past 6 months.

<sup>b</sup> Estimates are based on Ordered Probit regression. Dependant variable is a categorical variable that measures the frequency of unsafe sex practices in past 6 months: no sex; never unsafe; sometimes unsafe; always unsafe.

<sup>c</sup> Estimates are based on Probit regression. Dependant variable is an indicator variable for whether the respondent disclosed HIV+ status to the 5 most recent sexual partners. Dependant variable is coded as missing for respondents who reported no recent sexual activity.

<sup>d</sup> Estimates are based on Probit regression. Dependant variable is an indicator variable for whether the respondent reported having sex with prostitutes. Estimation sample only includes respondents with more than 1 sexual partner in the past 6 months.



**Table 6: The effect of the stringency of HIV law enforcement on risky behavior in the general population**

	Unweighted GSS Sample			HCSUS Weighted GSS sample <sup>d</sup>		
	Partners <sup>a</sup>	Unsafe Sex <sup>b</sup>	Paid for Sex <sup>c</sup>	Partners <sup>a</sup>	Unsafe Sex <sup>b</sup>	Paid for Sex <sup>c</sup>
<b>Log of Prosecutions</b>	<b>0.013</b>	<b>-0.001</b>	<b>0.007</b>	<b>0.017</b>	<b>0.081</b>	<b>-0.192</b>
	<b>[0.025]</b>	<b>[0.039]</b>	<b>[0.039]</b>	<b>[0.088]</b>	<b>[0.071]</b>	<b>[0.103]*</b>
Age	-0.034	-0.012	0.011	-0.036	-0.018	0.012
	[0.002]***	[0.002]***	[0.002]***	[0.004]***	[0.006]***	[0.006]**
Female	-0.421	-0.281	-1.189	-0.389	-0.073	-0.878
	[0.042]***	[0.065]***	[0.085]***	[0.069]***	[0.121]	[0.156]***
Nonwhite	0.052	0.261	0.356	-0.367	-0.034	0.284
	[0.046]	[0.072]***	[0.069]***	[0.103]***	[0.146]	[0.271]
Gay	0.554	0.467	0.617	0.005	0.338	0.482
	[0.080]***	[0.071]***	[0.113]***	[0.172]	[0.151]**	[0.266]*
Less than High School	0.056	0.555	-0.101	0.107	0.186	-0.331
	[0.080]	[0.110]***	[0.135]	[0.179]	[0.319]	[0.337]
High School	0.029	0.162	0.145	-0.473	-0.526	-0.325
	[0.051]	[0.089]*	[0.128]	[0.470]	[0.498]	[0.476]
Some College	0.056	0.104	0.255	0.094	-0.647	-0.063
	[0.070]	[0.113]	[0.093]***	[0.227]	[0.444]	[0.336]
Abortion Rate	0.003	-0.003	-0.001	-0.002	0.008	-0.029
	[0.003]	[0.004]	[0.004]	[0.007]	[0.008]	[0.010]***
% College Educated	-1.292	-1.67	0.684	-1.902	-2.409	2.346
	[0.973]	[1.131]	[1.015]	[1.808]	[3.061]	[3.575]
Religiosity-Prayer Freq.	-0.363	-0.387	0.075	-1.783	-1.359	-3.824
	[0.568]	[0.870]	[0.968]	[1.119]	[1.596]	[2.547]
Teen Birth Rate	0.003	0.004	0.004	0.003	0.005	0.015
	[0.002]*	[0.003]	[0.004]	[0.007]	[0.006]	[0.009]
% in Urban Areas		-0.003	0.001		-0.013	-0.034
		[0.005]	[0.006]		[0.010]	[0.010]***
Constant			-2.1			3.479
			[1.049]**			[2.518]

Robust standard errors in parenthesis. \* significant at 10%; \*\* significant at 5%; \*\*\* significant at 1%

<sup>a</sup> Estimates are based on Ordered Probit regression. Dependant variable is a categorical variable for the number of partners in previous 12 months: (0;1; 2; 3; 4; 5; 5 to 10; 11 to 20; 21 to 100; 100+).

<sup>b</sup> Estimates are based on Ordered Probit regression. Dependant variable is a categorical variable that measures the frequency of unsafe sex practices in past year: sex with spouse only or abstinence; non-spousal sex and condom use; non-spousal sex and no condom use.

<sup>c</sup> Estimates are based on Probit regression. Dependant variable is an indicator variable for whether the respondent reported having ever paid for sex.

<sup>d</sup> Estimation uses weights based on characteristics of HIV+ population (HCSUS data). Specifically, we reweight the GSS sample so that it matches HCSUS proportions in terms of age category (18–29,30–39,40–49, and 50+), race (White and non-White), gender, and sexual orientation.

**Table 7: Parameters for ordinary partners (for a 6-months period)**

	Base Scenario	Partial Effect	Full Effect	Sources
Total number of partners $N$	<b>2.140</b>	<b>1.452</b>	<b>1.452</b>	<i>Tables 2 &amp; 5</i>
Number of prostitute partners if sex with prostitutes	2	2	2	<i>Authors' estimate, no direct evidence available</i>
Probability of having sex with prostitutes	<b>0.065</b>	<b>0.065</b>	<b>0.095</b>	<i>Tables 2 &amp; 5</i>
Probability of unsafe sex $p_{unsafe}$	<b>0.470</b>	<b>0.426</b>	<b>0.426</b>	<i>Tables 2 &amp; 5</i>
Probability prostitute partner is HIV- $p_{neg,p}$	0.95	0.95	0.95	<i>Authors' estimate based on (CDC, 1989) and Morse et al. (1991) and Gertler et al. (2003)</i>
Probability ordinary partner is HIV- at time 0 $p'_{neg,o}$	0.998	0.998	0.998	<i>CDC (2006)</i>
Risk of infection per contact $i$	0.003	0.003	0.003	<i>UNAIDS (2005)</i>
Number of contacts with ordinary partners	8	8	8	<i>Authors' estimate, no direct evidence available</i>
Number of contacts with prostitute partners	4	4	4	<i>Authors' estimate based on Della Giusta et al. (2006)</i>
Expected number of prostitutes infected $n_{op}$ at time 0	0.0007	0.0006	0.0008	<i>Authors' estimate based on equation (12)</i>
Expected Number of ordinary partners infected $n_{oo}$ at time 0	0.0211	0.0123	0.0117	<i>Authors' estimate based on equation (11)</i>

**Table 8: Parameters for prostitutes (for a 6-months period)**

	All Scenarios	Sources
Number of partners: $N^P$	100	<i>Authors' estimate based on Brewer et al. (2000)</i>
Probability of unsafe sex $p_{unsafe}$	0.30	<i>Authors' estimate based on Della Giusta et al. (2006)</i>
Probability client partner is HIV- at time 0 $p_{neg,c}^t$	0.998	<i>CDC (2006)</i>
Risk of infection per contact $i$	0.003	<i>UNAIDS (2005)</i>
Number of contacts per partner $C$	4	<i>Authors' estimate based on Della Giusta et al. (2006)</i>
Expected Number of ordinary Part Infected at time 0 $n_{po}$	0.718	<i>Authors' estimate based on equation (13)</i>