



VULNERABILITY OF SEX WORKERS TO CERVICAL CANCER
VULNERABILIDADE DE PROFISSIONAIS DO SEXO AO CÂNCER DO COLO DO ÚTERO
VULNERABILIDAD DE PROFESIONALES DEL SEXO AL CÁNCER DEL CUELLO DEL ÚTERO

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ABSTRACT

Objective: to understand the relation between the social representations and the vulnerability of women who are sex workers concerning the cervical cancer. **Method:** this is an exploratory study type which brings qualitative approach that used the database of two subprojects linked to the Program of Scientific Initiation of the University of the State of Bahia which complete the research <<Vulnerability of sex workers to cervical cancer>>, approved by the Ethics Committee of the State University of the Southeast of Bahia, under protocol nº 041/2011. CAAE: 0049.0.454.000-11. It was carried out a triangulation of the data submitted to the Content Analysis through the descriptive analysis. **Results:** the participants of this study had a low social-economic condition, few of them knew about the development and the meaning of this neoplasia, but they understood several situations of vulnerability. **Conclusion:** the necessity of systematization of actions that enable a better health condition as well as life to the investigated populations is extremely important, and also a deeper scientific knowledge. **Descriptors:** Cervical Cancer Neoplasias; Prostitution; Vulnerability.

RESUMO

Objetivo: apreender a relação entre as representações sociais e a vulnerabilidade de mulheres profissionais do sexo, no que concerne ao câncer de colo uterino. **Método:** estudo do tipo exploratório com abordagem qualitativa que utilizou o banco de dados de dois subprojetos vinculados ao Programa de Iniciação Científica da Universidade do Estado da Bahia que integram a pesquisa << Vulnerabilidade de profissionais do sexo ao câncer de colo do útero >>, aprovada pelo Comitê de Ética da Universidade Estadual do Sudoeste da Bahia, protocolo nº 041/2011. CAAE: 0049.0.454.000-11. Foi realizada a triangulação dos dados submetidos à Análise de Conteúdo por meio da análise descritiva. **Resultados:** as participantes deste estudo possuíam condição socioeconômica baixa, pouco conheciam sobre o desenvolvimento e significado dessa neoplasia, mas compreendiam diversas situações de vulnerabilidade. **Conclusão:** sinaliza-se a necessidade de sistematização de ações que viabilizem melhor condição de saúde e vida à população investigada, inclusive, de aprofundamento do conhecimento científico. **Descritores:** Neoplasias do Colo do Útero; Prostituição; Vulnerabilidade.

RESUMEN

Objetivo: aprehender la relación entre las representaciones sociales y la vulnerabilidad de mujeres profesionales del sexo, en lo que se refiere al cáncer de cuello uterino. **Método:** estudio del tipo exploratorio con abordaje cualitativo que utilizó el banco de datos de dos subproyectos vinculados al Programa de Iniciação Científica de la Universidad del Estado de Bahia que integran la investigación <<Vulnerabilidad de profesionales del sexo al cáncer de cuello del útero>>, aprobada por el Comité de Ética de la Universidad Estadual de Sudoeste de Bahia, registro nº 041/2011. CAAE: 0049.0.454.000-11. Fue realizada la triangulación de los datos sometidos al Análisis de Contenido por medio del análisis descriptivo. **Resultados:** las participantes de este estudio poseían condición socioeconómica baja, poco conocían sobre el desarrollo y significado de esa neoplasia, pero comprendían diversas situaciones de vulnerabilidad. **Conclusión:** se señala la necesidad de una sistematización de acciones que hagan viables mejor condición de salud y vida a la población investigada, inclusive, de profundización del conocimiento científico. **Descriptores:** Neoplasias del Cuello del Útero; Prostitución; Vulnerabilidad.

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INTRODUCTION

The morbimortality caused by cervical cancer, in Brazil, is high, in spite of the proposals, campaigns and advanced and modern treatments which search for the prevention and cure of many cases, mainly when they are early diagnosed, this way; it is undoubtedly, a serious public health problem faced by the country.¹⁻²

The human papilloma virus (HPV), subtypes 16, 18, 31, 33 and 48, sexually transmitted, is deeply linked to the emerging of the cervical cancer; and as a consequence, the sexual behavior, specifically, the multiplicity of partners and the precocious beginning of the sexual activities cause a greater susceptibility to the cervical cancer.³ Despite this strong link, the HPV is not an only factor so that this neoplasia can develop, "other factors related to the immunity, to the genetic and the sexual behavior seem to influence the mechanisms which are uncertain that determine the regression or the persistence of the infection as well as the progression to precursor lesions or cancer".^{4:3}

Because it is a progressive disorder with alterations of intra-epithelial cells which can develop into an invasive stage in a period of approximately two decades, there is a lot to be done in search of the prevention and precocious detection of this pathology.³ Once it is precociously diagnosed the potential to cure is elevated, and it can even reach 100% of chances.⁵

As an ally to the prevention of cervical cancer, we highlight the cytopathological exam, the papanicolaou test or the gynecological examination. It is a primary strategy to detect cytopathological alterations, even when they are in an initial stage, however, many women only take these examinations too late or in some cases they do not take them or when they do it, it is not the recommended way by the Health Ministry.⁶

A study focused on the Social Representations of the sex workers concerning AIDS (Acquired Immunodeficiency Syndrome) points out that many of these women suffer from the "lack of Access to the social assistance net and mainly from the exclusion they face".^{7:317} The sex workers are afraid of being discriminated, elevating this way their chance to be marginalized by the society and leaving them apart from the health services.⁸

In this perspective, the social exclusion they face, as well as the specific characteristics of the daily life itself, turn the

women who are sex workers to need a greater care in health, especially regarding the sexually transmitted diseases and the cervical cancer.²

The prostitution, something that exists since a long time ago, refers to the commercialization of the body - sexual practice - and as a way to reward it the woman receives a monetary payment or even some favors, however, initially, for some people, this practice was considered as a ritual (pointing the beginning of puberty) and many of them were considered as sacred and received honors.⁸

In the present context, specifically in Brazil, this practice is seen in a prejudiced way, so these women end up being discriminated and excluded from the society. This way, "contrary to what happened in the past civilizations, the image of a prostitute in Brazil has always been linked to the devaluation of women [...] The public policies [...] promoted the end of this profession, which was considered to spread the diseases".^{8:104}

The term "sex worker", used to refer to women who sell their body in exchange for money or any other good, was originated from the National Meeting of Prostitutes, and the first one happened in Rio de Janeiro in 1987.⁷

With the gradual rise of the number of women who do it for a living, it is observed a need to improve the life of these professionals, their socioeconomic situation and also reduce the prejudice by attempting to turn this practice into something legal, determining that they are legally considered as "sex workers".⁸

Concerning health, however, there are scarce studies that investigate the sex workers and they focus on the association of this people with the sexually transmitted diseases and to AIDS, with little focus on cervical cancer and/or HPV as an important agent to the development of this disease.

The female sex workers are exposed to countless contexts of vulnerability (individual, social, programmatic). Vulnerability is understood as

[...]result of a group of characteristics of the political, economical and sociocultural contexts that enlarge or dilute the individual risk. Besides working these social dimensions (social vulnerability), it is a permanent and long term challenge to sophisticate the prevention and assistance programs enabling the dialogue and the comprehension about the most structural prevention obstacles and about the access and the several experiences with the available preventive ways (programmatic

vulnerability), so that, in the beliefs plan, attitudes and personal practices (individual vulnerability), everybody, meaning each one, can in fact protect themselves against the infection and the disease.^{9:118-9}

In order to study the vulnerability of the sex workers to cervical cancer it was adopted in this investigation the theoretical referential of the Social Representations (TRS). This theory originated from the social sciences was proposed by Moscovici in 1961, in his study about the social representation of the psychoanalysis, *Psychanalyse: son image et son public*.¹⁰ Moscovici considers that the social representations are some knowledge used by the individual in their daily life and that it is similar to the same ones used by the group in which they are inserted, and because of it, it can be considered as a construct of men, as part of this group.¹¹

In Brazil, the TRS was introduced in the decade of 80 and highlighted in the health area with the use, especially, in the studies with the purpose of investigating the social knowledge that guide the practices of a specific group regarding health problems.¹²

Given the above, this research aims to understand the relation between the social representations and the vulnerability of female sex workers, concerning the cervical cancer.

METHOD

This is an exploratory study with qualitative approach that used the database of two sub-projects linked to the Program of Scientific Initiation of the University of the State of Bahia which integrate the research Vulnerability of sex workers to cervical cancer.

The participants of the primary study were 27 sex workers who accepted to participate in the research after the free and clear consent. The study was developed in Guanambi, a city located in the countryside of Bahia, which is 796 kilometers southeast away from the capital Salvador, with a population of 78.801 inhabitants.¹³ Guanambi has some areas where the sex workers live and receive their clients, and the suburb São José and downtown - which is a place where the commercial market of food, agricultural products, clothes and shoes, among others, take place, and where the traders and buyers from several cities attend - are highlighted due to the high incidence.

The interviews happened during November and December of 2011. Initially, we contacted the health communitarian agents who were in

charge of the mentioned areas, something which made it easier to approach the sex workers. The contact with the research subjects happened through a visit in the workplace of the sex workers, explanations about the research, the reading and signing of the Free and Clear Consent Term, and in case of accepting to take part in the study, the research followed the ethical rules of the Resolution 196 of 1996 of the National Council of Health that is about investigations involving human beings.¹⁴

In search of guaranteeing the privacy of the interviews, each one of these women receive a nickname beginning with the letter A and followed by a number, chosen according to the order in which they were interviewed.

The first sub-project, named Factors/situations of vulnerability to cervical cancer of the sex workers in the city of Guanambi/Bahia used as an instrument for the data collection a structured form which tried to identify the vulnerability to cervical cancer factors which were present in the study participants who were submitted to the descriptive analysis (calculus of absolute and relative frequencies).

The second sub-project, named Social Representations of sex workers about the vulnerability to cervical cancer and its relations with the preventive care used a semi-structured form, a guide for the performance of the interview with the participants, in order to understand their representations about the vulnerability to cervical cancer. The collected data from this instrument was submitted to the analysis of thematic content, proposed by Bardin.

This way, we try to present the triangulation of the collected data in the sub-projects mentioned above. It is important to highlight that:

The use of the triangulation demands [...] the combination of multiple strategies of research which are capable of understanding the qualitative and quantitative dimensions of the object, following the requirements of the qualitative method, guaranteeing the representativeness and the diversity of positions of the social groups that make the research universe, concerning the ambitions of the quantitative method, enabling the magnitude knowledge, coverage and efficiency of program about study.^{15:1115}

Given the above, the triangulation of the information obtained through the distinct collect instruments and data analysis techniques allowed a greater understanding of the study object: the vulnerability of the sex workers to cervical cancer.

This study had the research Project approved by the Ethics Committee in Research - CEP of the State University of the Southeast of Bahia - UESB, protocol nº 041/2011. CAAE: 0049.0.454.000-11.

RESULTS AND DISCUSSION

The results of this study, organized in categories, interlace the understood representations from the sub-project Factors/situations of vulnerability to cervical cancer of the sex workers in the city of Guanambi/Bahia and the situations of vulnerability identified in the sub-project Social Representations of sex workers about the vulnerability to cervical cancer and their relation with the preventive care in an attempt to respond to the objective of this study to understand the relation between the social representations and the vulnerability of female sex workers, concerning the cervical cancer.

It was interviewed 27 female sex workers, they were 33,89 years old at average, most of them were single (74,07%); brown (66,67%); catholic (77,78%); incomplete secondary school (66,67%) and receiving less than a minimum wage a month (59,26%).

In search of presenting the found results, two categories were delimited: vulnerability and prevention against cancer, discussed and based on the TRS and interpretative dimensions of the authors who deal with this study theme.

• Vulnerability to cancer

In a general way, the interviewees recognize the situations of vulnerability to which they are exposed, however, they do not know the definition of the Cervical Cancer, the way how it develops, as well as the importance of the HPV to the development of it, as it is evident in:

Nothing comes to my mind. (A12)

[...] I can't even explain it. (A2)

This fact can be explained by the socioeconomic situation to which they are submitted, as the low schooling which is revealed in the characterization of the research subjects, 14,81% are illiterate; 66,67% have incomplete secondary school; 1,41% have complete secondary school; 3,70% have incomplete high school and 7,41% complete high school, none of them have taken or are taking a degree.

Regarding the monthly income, 59,26% have an income which is lower than the minimum wage; 22,22% receives a minimum wage and only 18,52% gets more than a

minimum wage a month, what is observed in another study, in which the sex workers who were interviewed had a monthly income of, at the most, a minimum wage.¹⁶ It is important to emphasize that the income is a relevant factor of inclination to the development of cervical cancer, besides the behavior, cultural and political aspects, the economic one is also shown as an important situation of vulnerability.¹⁷

When they were asked about tobacco and alcohol drinks, the interviewees recognize them as substances that improve the vulnerability to cervical cancer:

[...] I know the girls (sex workers) who smoke can have it. (A12)

Cigarette, drinks is harmful. (A10)

However, 13 (48,15%) out of the 27 women who participated in the research smoke and 23 (85,19%) out of them drink some type of alcoholic drink, and 52,17% of them drink every day. This consumption is related, greatly, to the work impositions related to the necessity of an encouragement for the sexual practices, as it is evident in:

[...] but I drink, otherwise I can't work. (A12)

The sex workers make use of the alcoholic drinks as a way to feel more uninhibited during work, in order to better approach their clients, as well as to bear the sexual activities.¹⁸ the necessity of this incentive comes from, many times, the hard daily labor, they suffer moral and physical aggression, "they work in unsafe places, [...] charge of percentage by intermediate people and violation of the right of going and coming".^{19:33}

The mean age for the beginning of sexual activities was of 15,48 years, however, the interviewees do not report this fact as a vulnerability factor. On the other hand, they point the multiplicity of partners and the unprotected sexual intercourse as situations that elevate the susceptibility to cervical cancer:

[...] not using condom, ah! I also think that having sex with one and another. (A1)

Having sex with several men. (A3)

Not taking medical examinations and not performing intimate hygiene, as well as the sexually transmitted diseases (STD) and the contraceptives were also issues mentioned by the interviewees as factors of vulnerability to cervical cancer, as it can be observed in the speeches, respectively:

The lack of care, of taking examinations, of knowing the result, how you are... because if you don't 'do' it, the person will. (A20)

[...] lack of hygiene. (A22)

I'm afraid of these pills (contraceptive), 'they say' these pills 'help' you have it. (A10)

The sex workers refer to factors which elevate the susceptibility to cervical cancer, pointed in the literature: multiplicity of partners, smoking, the use of contraceptives.²⁰ However, other situations that are considered as risk factors were not evidenced by them such as: multiparity, poor feeding in some nutrients and precocious age at the first sexual intercourse; groups with a greater social vulnerability and a bigger access barrier to the net of services for the detection and precocious treatment of this disease, mainly due to the economic and geographical difficulties, insufficiency of services, cultural matters and preconcept.²¹

Although many vulnerability situations have been mentioned by the sex workers, it was not identified any reference to the HPV any time, even though this fact is extremely relevant to the development of neoplasias of the cervical cells.¹

● Prevention of cancer

Despite the fact that the interviewees referred little knowledge about the definition and development of this neoplasia, regarding its prevention, showed some understanding about the necessary ways to look for it: they point the performance of the preventive examination and the use of preservative.

This fact can be related to the important role of the media concerning the transmission of qualified information, which make the population aware of the importance of the precocious diagnose and of healthy habits of life for the prevention of cancer.²²

In relation to the use of preservative, 4 (14,81%) of them said they do not use it; 14 (51,85%) say they do it, although 50% claimed not having used it in all the relations since the beginning of their sexual life; and 9 (33,33%) use it sometimes, as 7 (77,78%) do not use it with their stable partner; (2001); 1 (11,11%) do not use it when the client demands them not to do it and also 1 (11,11%) do not use it when the client is the same gender and/or a stable partner.

Although the numbers show that around 50% of the sex workers do not use condom in all their sexual intercourses, this method frequently appears in the speeches of the interviewees, when they are asked about the actions that lead them to the prevention:

The condom, that's the only thing that can avoid it, not only cancer, but also AIDS. (A22)

Preventing, isn't it?! Using a condom. (A9)

The study named The job of sex workers in different locus of prostitution of the city reveals that these professionals associate the use of condom with their job and the unprotected sex with sentimental issues.¹⁸ This fact was also observed because the interviewees claimed they do not use the condom with their stable partner, but they do it during their job.

Given the above, we realize that in spite of the fact that the sex workers recognize the importance of this barrier method, as it is seen in the speeches above, they do not use them always. This fact can be explained both for sentimental values, as it was mentioned above, as for the bargain that exists between them and the client who, for many times, insists in not using the condom, offering some additional money for that. This way, the necessity of money is predominant and consequently, brings a relevant factor to the exposition to the STD, among them the HPV.¹⁸

Like the preservative, the pap smear was mentioned as another way of prevention.

Taking examinations as the preventive one and other gynecologic ones that allow us to see the uterine cervix. (A8)

Preventing myself, taking the preventive examination regularly. (A11)

Therefore, there is still a considerable quantitative of women who have never taken the preventive examination. The found data in this research shows that 7 (25,93%) women have never taken it, while the other 20 (74,07%) have taken it some time. From these 20, 13 (65%) took it one year ago or less than it; 3 (15%) between 2 and 3 years; 2 (10%) between 4 and 5 years and 2 (10%) more than 5 years ago. This way, most of them, 80% take it with the regularity which is determined by the Ministry of Health.

The recommendation of this examination in Brazil, according to the Ministry of Health is that women aged between 25 and 60 years old, must take the preventive examination annually and as soon as they have two negative results (consecutive), they take it every three years. It is important to highlight that even they are not 25 years old, those ones who have already had sexual intercourse also must take the examination⁵.

Some other factors were mentioned as preponderant to the prevention such as the necessity of educational actions, a good intimate hygiene, not drinking alcoholic drinks and not smoking; some factors which are represented by the following speeches:

[...] launching a good campaign for the people who do not understand about this subject. (A5)

[...] taking a shower, cleaning the vagina well. (A10)

[...] not smoking; not drinking. (A12)

Given the speeches above, it is realized the importance of the abandon of some negative practices such as smoking and drinking in order to maximize the prevention of this neoplasia.

Besides, it is still needed to recognize the relevance of educational actions as an enabler of some knowledge which involves not only the acquisitions of knowledge, but also a critical and reflexive thinking, that allows the individual to sensitize for the necessity of prevention and so that they can search for actions that bring behavior changes which enable the prevention to health through new ways of taking care of themselves.²³

As it was evidenced in studies about HIV/AIDS,²⁴ the meaning of Cervical Cancer as “the other’s disease” was also verified in this study. Consequently, this representation of invulnerability, in the daily life of these women, obstructs the preventive measures because women see a presumed protection when they see the others in a condition of greater vulnerability.

CONCLUSION

Several situations of vulnerability were identified in the subjects of the research in relation to the cervical cancer, among them the low socioeconomic condition, the elevated consumption of tobacco and alcoholic drinks, the precocious beginning of sexual activity, besides the low usage of the condom and the preventive examination. However, the subjects of the research identified the unprotected sexual intercourse, the lack of intimate hygiene and the multiplicity of partners as situations of vulnerability as well.

As they recognize several situations of vulnerability and they still do it in their daily practices, they are also aware of ways that subsidize the search for the prevention, and the most mentioned one is the preventive examination performance, as well as the protected sexual intercourse.

This way, it is observed that although the sex workers could not define cervical cancer and describe its way of development, they know important factors to this neoplasia, they recognize the situations of vulnerability and the ways of prevention. The revealed representations indicate the necessity of elaborating some purposes which search for

the sensitization of this population about the daily practice of the obtained knowledge, but not yet experienced, as well as for the social vulnerability which they are exposed to.

To understand the representations that these women have concerning the vulnerability to cervical cancer, their fears, anxiety, curiosity, besides what they think and feel about this pathology and how the care happens effectively considering the prevention of it, we approached a theme which was little explored so far, and that will be able to serve a subsidize for the future researches as well as a guide to the actions that intensify the care turned to this population.

Furthermore, from the knowledge of the social representations and the vulnerability of the sex workers about cervical cancer, it is possible to point out some important elements for the health care, which considers not only the physical and psychological aspects, but also the inherent social aspects to the susceptibility to a certain disease, which will be able to contribute to actions in the daily life of the health practices.

In this perspective, we highlight the necessity to instrumentalize the planning of the embracing local interventions, for example, intersectoral actions, especially educational ones, which can positively impact on the prevention of cervical cancer and on the precocious diagnose directed to the sex workers.

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