

# SITUATIONS OF HEALTH VULNERABILITIES EXPERIENCED BY SEX WORKERS IN TIMES OF COVID-19 PANDEMIC

## SITUAÇÕES DE VULNERABILIDADES EM SAÚDE VIVENCIADAS POR TRABALHADORAS SEXUAIS EM TEMPOS DE PANDEMIA DA COVID-19

## SITUACIONES DE VULNERABILIDADES EN SALUD EXPERIMENTADAS POR LAS TRABAJADORAS SEXUALES EN TIEMPOS DE PANDEMIA DE COVID-19

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**Objective:** to reflect on the situations of health vulnerabilities experienced by sex workers during the pandemic resulting from SARS-CoV-2 infection. **Method:** this is a reflective study, based on the conceptual theoretical framework of vulnerability in four dimensions: ontological, epidemiological, symbolic and political-programmatic. **Result:** the health of sex workers, in the daily experience of sexual work, has been a challenge for governments among all groups associated with stigmas and vulnerable populations, precisely because they are socially marginalized. This is important for understanding this phenomenon in the midst of the financial, economic and health crisis that people from different nations suffer before the progress of SARS-CoV-2. **Conclusion:** the situations of health vulnerability resulting from the SARS-CoV-2 infection that expose sex workers are consolidated, mainly, by the absence of the State in the social-legal protection and in the guarantee of human rights, so that these women acquire conditions of coping and prevention.

**Descriptors:** Sex Workers. COVID-19. Coronavirus. Health Vulnerability. Vulnerable Populations.

*Objetivo:* refletir sobre as situações de vulnerabilidades em saúde vivenciadas por trabalhadoras sexuais durante a pandemia decorrente da infecção pelo SARS-CoV-2. *Método:* trata-se de estudo reflexivo, fundamentado no

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*referencial teórico conceitual da vulnerabilidade em quatro dimensões: ontológica, epidemiológica, simbólica e político-programática. Resultado: a saúde das profissionais do sexo, na experiência cotidiana do trabalho sexual, tem sido um desafio para os governos entre todos os grupos associados a estigmas e populações vulneráveis, justamente por serem marginalizados socialmente. Isso se configura como importante para a compreensão desse fenômeno em meio à crise financeira, econômica e de saúde que pessoas de diferentes nações sofrem diante do progresso da SARS-CoV-2. Conclusão: as situações de vulnerabilidade em saúde decorrente da infecção pelo SARS-CoV-2 que expõem as profissionais do sexo são consolidadas, principalmente, pela ausência do Estado na proteção sócio legal e na garantia dos direitos humanos, para que essas mulheres adquiram condições de enfrentamento e prevenção.*

*Descritores: Trabalhadoras Sexuais. COVID-19. Coronavírus. Vulnerabilidade em Saúde. Populações Vulneráveis.*

*Objetivo: reflexionar sobre las situaciones de vulnerabilidades en salud experimentadas por las trabajadoras sexuales durante la pandemia resultante de la infección por SARS-CoV-2. Método: se trata de un estudio reflexivo, basado en el marco teórico conceptual de vulnerabilidad en cuatro dimensiones: ontológica, epidemiológica, simbólica y política-programática. Resultado: la salud de las trabajadoras sexuales, en la experiencia diaria del trabajo sexual, ha sido un desafío para los gobiernos entre todos los grupos asociados con estigmas y poblaciones vulnerables, precisamente porque están socialmente marginadas. Esto es importante para entender este fenómeno en medio de la crisis financiera, económica y de salud que sufren personas de diferentes naciones ante el progreso del SARS-CoV-2. Conclusión: las situaciones de vulnerabilidad a la salud resultantes de la infección por SARS-CoV-2 a que exponen las trabajadoras sexuales se consolidan, principalmente, por la ausencia del Estado en la protección social-jurídica y en la garantía de los derechos humanos, para que estas mujeres adquieran condiciones de enfrentamiento y prevención.*

*Descriptor: Trabajadoras sexuales. COVID-19. Coronavirus. Vulnerabilidad en Salud. Poblaciones Vulnerables.*

## Introduction

Corona virus disease (COVID-19) results from an infection by the coronavirus SARS-CoV-2, which gained a pandemic character after its outbreak initially detected in the Chinese province of Hubei<sup>(1)</sup>, having spread rapidly throughout all countries, including Brazil. The prevention measures implemented by governments and early detection have been a challenge, as the virus spreads rapidly and often asymptotically, while the lack of diagnostic tests and the inability of health services to absorb the population with complications of the virus increases mortality, especially in a group of people abandoned by the State<sup>(1-2)</sup>.

Although international agencies such as the World Health Organization (WHO) declare that the trend of complications of the disease (Severe Respiratory Distress Syndrome) is noticeable in elderly people and those who suffer/live with chronic non-communicable diseases<sup>(3)</sup>, groups of populations marginalized by society are even more vulnerable.

The notion of vulnerability emerged still in the early 1990s by Harvard epidemiologists,

in order to break with the culpable meaning that the term “risk” referred to gay people, sex workers and injectable-drug users in the process of illness due to the epidemic of the Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome (HIV/AIDS) that began to affect other social groups that did not fit the so-called group that had risk behaviors: children, adolescents, women and the elderly, for example<sup>(4-5)</sup>.

In Brazil, the theoretical framework of vulnerability began to be discussed in only three dimensions: individual, social and programmatic. However, given the need to expand the concept to explain the conditions that make people vulnerable and with difficulties to cope with such situations, there is a need to understand the concept based on other perspectives that are less watertight and blaming, regarding other problems in the health-disease process<sup>(5)</sup>.

Thus, for this study, the concept of vulnerability can be understood as the condition in which people or social groups (in this case, sex workers) experience their daily lives and

expose themselves to situations that interfere in the health-disease process, at various levels, due to failures in the attention of the State and society, interfering in coping with certain situations of life<sup>(4)</sup>. These women perform their work with a high degree of vulnerability and still marginalized by society, because it is related to the sphere of sexuality and sexual practices as a way of obtaining profit, permeated by social stigmas<sup>(6-8)</sup>. This greater vulnerability occurs because of the absent State support, their need to be exposed to maintain survival, and the housing conditions.

The government of Argentina is an example of support for sex workers in the fight against the pandemic caused by the infection of SARS-CoV-2, because, according to the Association of Prostitutes of the country, the State has been present in granting monthly aid of 5,000 pesos, which is equivalent to 500.00 R\$. Still, stigma is something they fear, since, when accessing social benefits, it will be in the database, which will become public and, for this reason, many families would become aware of their profession<sup>(9)</sup>.

The situations of vulnerabilities faced by sex workers in times of COVID-19 pandemic go beyond Sexually Transmitted Infections (STIs) and are accentuated as they feel neglected and abandoned by the State, without labor protection, such as the guarantee of minimum income for their livelihood, since, with the implementation of social isolation and quarantine measures, they are unable to perform their services, due to decreased or absent clients<sup>(10)</sup>.

Thus, the objective was to reflect on the situations of health vulnerabilities experienced by sex workers in this period of pandemic resulting from infection by SARS-CoV-2.

## Method

The reflective analysis was developed through a cross-sectioned and articulated discussion among the four dimensions of vulnerability (ontological, epidemiological, symbolic, political-programmatic) and the way

the State and society have positioned themselves and prepared to implement protective and preventive measures, which aim to minimize situations of health vulnerabilities, which make sex workers more susceptible to illness resulting from COVID-19. This method allows contributing to the foundation on a theme, phenomenon or object that needs further deepening, as is the case of the course of COVID-19 to vulnerable and stigmatized population groups, such as sex workers.

## Results and discussion

The reflection allowed understanding the situations of health vulnerabilities of sex workers, in the context of the Sars-Cov-2 pandemic, as well as the impacts for this public, concerning the invisibility perpetrated by the State and society. This scenario affects the prevention and adoption of protective measures, referring to the advancement of COVID-19 to people who are unaided and invisible by governments, to implement policies for inclusion, security and guarantee of basic human and labor rights.

### *The ontological vulnerability of sex workers: from individual to collective and the importance of health education*

Ontological vulnerability refers to the vulnerability characteristic of every human being due to the fact of existing and being alive<sup>(11)</sup>. In this sense, it is the recognition of human frailty present indiscriminately in all human beings, in any context, society and cultural and educational level, for example. It constitutes a fact inherent to the bio-psycho-social-spiritual evolution, which, in parallel to its great complexity, also presents important frailty before situations, events and relationships. More practically, it is characterized by the human frailty of falling ill, suffering and dying, embodied by the permanent uncertainty that ends in the mediated or immediate future<sup>(12-13)</sup>.

In contrast to the finding of their ontological vulnerability, which would equal all beings that are under the dimensions of time and space,

human beings are aware of their vulnerable being and their state of vulnerability<sup>(13)</sup>. This complex balance between vulnerability as a condition of being, and its consciousness, allows for greater structures, at least in principle, for coping with it and reducing its levels<sup>(14-15)</sup>.

Thus, there is a vulnerability to COVID-19 on the part of sex workers, which is related to the fact that they are human beings, inscribed in the framework of organic degeneration that characterizes all beings on Earth and unfolds not only in their somatic and organic nature, but also in psychological and spiritual nature, for example, in addition to others that could be mentioned. The clearest image of ontological vulnerability refers to a child in the first years of his/her life who, if abandoned, will not be able to survive, in view of the challenges he/she will face, which differs from animals, who early present body and instinctive tools that make them able as soon as possible<sup>(11,13)</sup>.

#### *Vulnerability and Epidemiology: for the understanding of sex work performed by women*

In recent times, in the process of understanding the health of society, one has sought to bring the discussion of some concepts able to contribute to the construction of knowledge and the importance of community health. In this context, a brief discussion of what vulnerability is together with epidemiology stands out, which can bring more elements in the understanding of the work of sex workers.

The epidemiological dimension of the vulnerability of sex workers may be linked to health indicators, which point to the increase or not of the injury to this population group and refers to the consequences of the behavior they adopt to protect themselves from coronavirus infection, often stereotyped, because this is confused with the individual, since it leads to the idea of blaming and maintenance of stigmas<sup>(8,10,16)</sup>.

Thus, vulnerability will refer to frailty, a term present in different thematic fields, but very specifically in human rights<sup>(17)</sup>. Corroborating, in relation to the confrontations of sex workers, in

Brazil, vulnerability refers to the deterioration of civil rights, loss of acquired guarantees and weakening of citizenship, enhanced by gender and class issues<sup>(8,18)</sup>. The following are also highlighted: inequality before the law and subjection to violence, difficulty in accessing housing, health services, social assistance and employment, the coexistence of archaic and modern forms of work with important participation of informality, that is, they are not legally protected and is equivalent to social apartheid in the urban environments in which these sex workers are inserted<sup>(19)</sup>.

In this sense, some reflections about vulnerability, as a reference for the consideration of this concept in Brazilian Epidemiology and Collective Health, propose linking it to the guarantee of citizenship of politically fragile populations from the perspective of human rights<sup>(15,20-21)</sup>.

#### *Symbolic vulnerability: from social gender constructions to social stigmas*

The symbolic level is related to socio-demographic, educational, religious, cultural, community, gender issues and those related to the interference in the will of professional groups and people in the possibility of promoting, preventing and protecting coronavirus infection, since such inequities influence or determine social and historical constructions of the roles played by men and women<sup>(18)</sup>. It is noteworthy that the spaces to be occupied by each one in a sexist and patriarchal society, such as the Brazilian one, in which sex workers go beyond using sex as a source of income and occupying public spaces, constitute two symbolic situations and "forbidden" practices for women<sup>(6-8,24)</sup>.

The symbolic issues that involve sexual work make them vulnerable, as many suffer the institutional prejudice of some people from health sectors, since they carry the stigma of using sexual practice as an occupation. Furthermore, workers dispute the way society inserts them into vulnerable groups, because they protect themselves, take care of themselves and prevent STIs<sup>(6,25)</sup>. It should also be noted that most sex

workers cannot develop home office activities, due to the presence of family members, and in some cases, they are not even aware of the work they develop<sup>(8,10,26)</sup>.

Even with the freedom they take for themselves, sex workers establish symbolic boundaries between personal and professional life, determining what can or cannot during sexual intercourse. The professional relationship developed with clients aims to make them achieve pleasure and gain the value they establish, which reveals the way they lead professional life and develop “sexual contract” signed with men<sup>(27-28)</sup>.

Many women suffer prejudice because they choose to experience sexual practice freely and as they wish, because they understand that their bodies have no owners (they own themselves), and the fact that they are sex workers intensifies prejudice, different from women who follow traditional standards that teach them to marry and have their sexuality restricted to the private within marriage<sup>(18,25)</sup>. A study developed in France with prostitutes evidenced the fact that society considers acceptable the exchange of orgasm for the statements made by men to their partners and judging others who choose to value sex and charge for the satisfaction achieved by him<sup>(29)</sup>.

As historically occurs to silenced and socially invisible minorities, a crisis situation, of any nature (economic, sanitary, political, among others), will affect these groups more intensely, in the sphere of patriarchal and sexist societies. Corroborating this idea, Simone de Beauvoir considers that “Never forget that a political, economic or religious crisis is enough for questioning women’s rights [...]”<sup>(24:8)</sup>. The right to decent working conditions and the enjoyment of financial resources that enable the satisfaction of their most vital needs are traditionally denied to sex workers, and this is greatly sharpened in the context of quarantine by COVID-19.

#### *Political/programmatic vulnerability of sex workers: the disproportionate impact of the crisis on the excluded strata*

The political/programmatic dimension of the concept of vulnerability can be understood

by verifying the existence of public policies, programs, actions and initiatives, which make up the determinants of the conjuncture (social, health, or others) that one intends to change. They also concern the institutional commitment to the prevention of health problems of individual and collective subjects<sup>(5,30)</sup>.

Over the past 20 years, the consequences of more recent epidemics and pandemics (such as Zika virus, Ebola, H1N1 pandemic and Middle East respiratory syndrome, for example) reveal the need to strengthen national public health sectors with qualified personal resources, exponentially growing demand absorption capacity and infrastructures, including disease surveillance systems and laboratory networks to meet neglected and stigmatized populations, such as prostitutes<sup>(2-3,10,16)</sup>.

As citizens, like other workers, retirees, unemployed and people who do not work, prostitutes carry a tax burden on themselves and, therefore, should enjoy some of the rights denied to them<sup>(23)</sup>, such as working hours defined by law, social security benefits arising from their labor contribution, as well as the enjoyment of wage basis, third of vacation and its enjoyment, thirteenth wage, unemployment insurance and sickness benefit. There is not even a dialogue attempt between government representatives with the Unified Center for Sex Workers (UCSW) in Brazil, to rethink the strategies to cope with the vulnerabilities potentiated by the SARS-CoV-2<sup>(30)</sup>.

Moreover, in turn, the United Nations Joint Program on HIV/AIDS (UNAIDS) and the Global Network of Sexual Work Projects, in order to ensure compliance with human rights, guide the implementation of protective measures and respect for the class, especially in this period of difficulties generated by the COVID-19 pandemic and faced by the entire society that lives from informal work, including sex workers. They still have to live with increased harassment by clients, reduced income and exclusion of emergency social protection plans<sup>(25,30)</sup>.

Based on the principles of human rights, the aforementioned entities and bodies also propose that governments create an emergency firewall, articulated between health services

and immigration authorities, guaranteeing sex workers, who migrate, access to health services. It also guarantees financial access for emergency support programs, access to homeless housing, including homeless workers, interruption of prisons and prosecutions of women offering sexual service in countries where sex work is criminalized, involving communities and class bodies of prostitutes in public health planning, and offering tests for COVID-19, free from institutional prejudice<sup>(30)</sup>.

## Conclusion

The four dimensions of vulnerability analyzed here, the ontological, epidemiological, symbolic and political-programmatic, reveal that situations of vulnerability to COVID-19, to which sex workers are exposed, permeate mainly the absence of the State in the social-legal protection and in the guarantee of the principles of human rights. Furthermore, vulnerability is related to the maintenance of stigmas and social and institutional prejudices, reinforcing the marginalization of these women who make up this social group, as well as the invisibility for public policies necessary for their needs, whether in this pandemic period or at any time.

Such issues hinder their adoption of skills/behaviors to cope with the pandemic, since social, cultural and gender inequities end up acquiring greater magnitude in societies governed by people inscribed in the context of patriarchy, morality and Christian tradition, which generates women's invisibility, especially those who experience sexual freedom and use sexual practice to gain their income. At a time when isolation and social distancing are important preventive practices to combat SARS-CoV-2 infection, sex workers experience reduced demand of clients and, consequently, decreased profit and supply of their needs and their families'.

In this context of coping with situations of vulnerability by sex workers, in the various dimensions analyzed, the political and social system are the main responsible for hindering

the protection of each of them, since there are gender, economic and occupational inequities involved, in addition to the lack of organization and support of the State in the protection and safety of sex workers that provide conditions to proceed with isolation, adequate food and hygiene conditions before the advance of the SARS-CoV-2 virus.

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