76 - THE LIFE QUALITY OF COMMERCIAL SEX WORKERS FROM A CITY IN PORTO ALEGRE'S METROPOLITAN REGION

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1. INTRODUCTION

The research group Body, Movement and Health, of the Feevale University Center, through the research line of Health Training, seeks to understand minority groups of our society and their lifestyles, including the life quality. Therefore, this research aimed to verify the components of the lifestyle of commercial sex workers from a city in Porto Alegre's metropolitan region. This study uses the ideas of some prominent authors like Minayo, Hartz and Buss (2000), who link the life quality to the degree of satisfaction found in the family, loving, social and environmental lives. To Lukkarinen (1998), life quality is a very broad concept of the health and welfare state of the individual, related to his/her functional capacity, the social degree and quality and the community interaction, psychological well-being, somatic sensations, happiness, life situations and the care of basic needs.

Nahas (2003) stated that life quality can be a measure of the human dignity, since it requires the care of basic human needs. This same author defines life quality as "a human condition resulting from a number of individual and socio-environmental parameters, modifiable or not, that characterize the conditions in which a human being lives" (p. 14). Among the socio-environmental parameters considered by the author there are: housing; transportation; security; health care; working conditions and salary; education; recreational options and; the environment. Within the individual parameters there are: heredity and lifestyle. This same author also relates five points to an individual lifestyle: nutrition, physical activity, preventive behavior, relationships and control of stress, which can be analyzed through the “Pentáculo do Bem-Estar”.

There is a tendency, when talking about life quality, to associate it only to possibilities, resources, facilities, awards earned during the process of life. For the commercial sex workers this observation is not different. The beliefs, values and practices of women commercial sex workers should be perceived through the conception of them as human beings, human beings focused on their role as workers (SILVA, 2000).

It is known that the term life quality moves in a polissemic semantic field, including in one hand ideas of sustainable development and human ecology; on the other hand ideas of democracy and human rights and; in addition ideas related to the way of life, conditions and lifestyle (MINAYO; HARTZ; BUSS, 2000). Thus, the present study is also important due to lack of publication about the life quality of commercial sex workers. There are published studies about these professionals' social representations, psychological aspects, knowledge about HIV/AIDS, prevention of AIDS and sexually transmitted diseases (STDs), however little is known about the life quality of this group of workers.

2. METHODOLOGY

In the present study, all women who stated to practice prostitution were defined as commercial sex workers. The study population was composed by women who work in the streets of the city sampled, at specific places and time, from December 2006 to August 2007.

The methodology used in this study was quantitative paradigm, with cross design and consecutive sample, using Hulley et al. (2003) and Pereira (2000) as reference methodologies. The 39 women interviewed, whose ages ranged from 18 to 45 years old, responded to the questionnaire only after the goals of the research were clarified and after agreeing to participate in the study. The questionnaire consisted of questions such as age; naturalization; origin; sexual orientation; stable relationship; children; religion; education; how long she has been in this profession; hours; shifts; customers; the reason why she began and continued in this profession; a secondary occupation; nutrition; physical activity; stress; health; knowledge about HIV/AIDS and its prevention; consumption of alcohol, cigarettes and/or drugs; if ever had an abortion; STDs; involvement with the police; if ever needed an advocate; among others. However, only the issues that were in accordance with the five points of Nahas' “Pentáculo do Bem-Estar” (2003), which can be used to interpret the life quality, were considered for this study. The questions formulated by the researchers included the following topics: physical activity, stress, relationships, nutrition and preventive behavior. Some professionals did not complete the questionnaire due to the arrival of a client, not wanting to answer certain questions or any other reason. This decision was respected by the researchers, and therefore, some issues will be interpreted considering "NA" (not answered) along with other responses.

The data were tabulated and analyzed by simple statistics (analysis of frequency, average and/or standard deviation). This study was previously approved by the Committee of Ethics in Research of the Feevale University Center of Novo Hamburgo, RS/Brazil, case number 4.09.01.06.285, ensuring that the rights of participants were maintained and respected throughout the process of the research, given the resolution 196/96 of the National Council of Health that regulates research involving human beings (BRAZIL, 1996).

3. RESULTS AND DISCUSSION

Results from this research will be divided in 6 subsections: the participants, physical activity, stress, relationships, nutrition and preventive behavior.

3.1 The Participants

The participants in this study had a mean age of 26.4 years (standard deviation of 6.7 years). In the question concerning race, 51.3% of the interviewees considered themselves as white; 15.4% as black; 7.7% as yellow and; 2.6% as brown. Of the total participants, 23.1% did not answer the question about race.

Regarding education, 35.9% of the sex workers had not completed the basic education (up to 8th grade); 20.5% had completed high school; 12.8% had completed basic education; 10.3% had completed primary education (up to 4th grade); the same number (10.3%) had not even completed primary education; 5.1% had incomplete high school; 2.6% had complete technical education and; only 2.6% were pursuing an university degree.

Considering how long they have been working in the commercial sex industry, 23.1% of the women interviewed have been in this profession for up to 2 years; 20.5% up to a year; 20.4% up to 4 years; 7.7% up to 3 years and; 2.6% up to 5 years. Of the total, 25.6% of the participants did not answer this question.

On the question about the monthly income, 30.8% received between 1 and 3 minimum wages; 28.2% between 4 and 6; 7.7% more than 10 minimum wages; 5.1% between 7 and 8; 2.6% received up to 1 minimum wage; 2.6% between 9 and 10 minimum wages and; 23.1% could not, did not want or did not know what to answer.

The characteristics of age of this population studied are similar to those of a commercial sex workers group studied in Florianópolis, where the age ranged between 19 and 47 years old (OLTRAMARI; CAMARGO, 2004). We can compare these data with those found by Schreiner et al. (2004) in their study in Porto Alegre, where the average age was 29.6 years. Out of this group of 97 women, 46.4% had an education between 4th and 8th grades and an average monthly income of up to 3 minimum wages.

3.2 Physical Activity

The first issue of Nahas' "Pentáculo do Bem-Estar" (2003) discussed in this article was physical activity. On this question, 46.2% reported not practice physical activity, 35.9% practice and 17.9% did not respond. Those who practice physical activity, the type, frequency and duration are shown in Tables 1, 2 and 3.

Table 1: Type of Physical Activity[1,2]

Tipo	%
Walking	71,4%
Biking	14,3%
Body building	7,1%
Gym	7,1%
Jogging	7,1%

Table 2: Frequency of Physical Activity[1]

Frequency of days	%
7 times/week	28,6%
3 times/week	14,3%
5 times/week	14,3%
2 times/week	7,1%
Did not answer	35,7%

Table 3: Time Spent[1]

Time	%
1 hour	35,7%
45 minutes	21,4%
30 minutes	7,1%
Did not answer	35,7%

[1] the values were calculated considering the number of practicing physical activity women as 100%

[2] considering that the same person can practice more than one type of physical activity

The authors Birk and Possebon (2005), in their article on physical exercise in the practice of walking on the street, bring the data of the World Health Organization which states that every citizen shall hold at least 30 minutes of moderate intensity physical activity at least 5 times a week, if possible every day. It has to be stressed the importance of the practice of physical exercise to improve the health and consequently the life quality of the population. In the group studied it was observed little adhesion to the practice of sports.

3.3 Stress

When questioned about the frequency with which they feel stressed, 23.1% of the interviewees responded that they always feel stressed; 23.1% replied that sometimes; 12.8% rarely; 2.6% never feel this way and; 38.5% did not respond. Nahas (2003) presents in his book a definition of stress used by Hans Selye: "stress is the way by which the body responds to any stimulus - good, bad, real or imaginary - that change your state of balance" (p. 198). This same author reports some symptoms associated with stress: headache, muscle and joint pain, insomnia, anxiety, irritability, constant fatigue, feelings of failure and loss of memory. These symptoms are in accordance with the ones mentioned by the interviewees. The main symptoms cited by the 59% of the commercial sex workers who felt stressed are described in the Table 4.

Table 4: Symptoms of Stress[1]

Symptoms	%	Symptoms	%
Gets irritated with everything	84,2%	Does not feel like doing anything	10,5%
Feels depressed	63,2%	Feels fear	10,5%
Feels agitated	42,1%	Does not have desire to have sex	10,5%
Is smoking more	42,1%	Isolates herself from other people	10,5%
Has insomnia	26,3%	Is consuming alcohol	5,3%
Feels pain all over the body	26,3%	Does not eat	5,3%
Is feeling more tired	21,1%	Feels nervous	5,3%
Is eating too much	15,8%	Is loosing hair	5,3%
Has migraine/ headache	15,8%		

Question of multiple answers

3.4 Relationships

The third issue of the "Pentáculo do Bem-Estar", relationships, was addressed with questions about stable relationship; children; participation in a women's group and; assaults. Of the 39 respondents, 28.2% declared to have a stable relationship. Of those, 45.5% had a relationship for up to 3 years; 27.3% from 4 to 6 years and; 27.3% from 7 to 9 years of relationship. As for the amount of children, 33.3% of the workers had one child; 25.6% had two children; 17.9% had three children; 10.3% had no children; 7.7% had four children; 2.6% had seven children and; 2.6% had 11 children. As for participating in a women's group, 43.6% participated in a group; 38.5% did not participate in any group and; 17.9% did not answer this question. The answers about the assaults suffered are related in the Table 5.

Table 5: Assaults Suffered

	Yes	No	Did Not Aswer	Look for Help[1]
During childhood	5,1%	71,8%	23,1%	100%
By their companion	15,4%	61,5%	23,1%	83,3%
By their children	2,6%	74,4%	23,1%	0,0%
By a member of their family	0,0%	76,9%	23,1%	0,0%
By a client	20,5%	56,4%	23,1%	25%

[1]The calculation was made considering the number of assaulted women as 100%

In the study by Schreiner et al. (2004), 53.6% of the group studied had stable relationship, almost double of the percentage observed in the present study. Silva (2000) presented qualitatively the importance of the relationships not only with family members (stable relationship, children), but also the relationship with the co-workers, since this relationship "is part in the process of living, a resource for improving the life quality of the prostitute "(p. 78). This statement also shows the importance of participating in a women's group.

3.5 Preventive Behavior

For a discussion of the preventive behavior, the fourth issue of the "Pentáculo do Bem-Estar", the following issues were addressed: alcohol consumption during working hours; use of illegal drugs; condom use; HIV-test and; resources for prevention of STDs. Of the 39 respondents, 79.5% have already been HIV-tested; 5.1% have not taking the test and; 15.4% did

not answer this question. About the STD prevention, 61.5% of the respondents reported to use condoms; other resources, such as tablets, not to use drugs, do HIV tests and condom exchange were also mentioned. The relationship of the use of condoms with clients and partner can be analyzed in the Table 6.

Table 6: Use of Condoms with Clients and Partner

	Always	Sometimes	Rarely	Never	Do Not have a Stable Relationship	Did not answer
Clients	84,6%	0,0%	0,0%	0,0%	------	15,4%
Partner	17,9%	5,1%	5,1%	12,8%	35,9%	23,1%

At the question about the alcohol consumption during working hours, 51.3% responded that do not consume any alcohol while working; 41% did not answer and; 7.7% of the interviewees admitted to consume alcohol while working. As for the question about the use of illicit drugs, 59% affirmed not to use them; 26% did not answer and; 15% stated to use illicit drugs.

The data found in this study can be compared to the ones found by Schreiner et al. (2004), which learned that 93.8% of the commercial sex workers always used condoms with their clients, though they did not verify the use of condoms with stable partners. They also found that 61.9% of the sex workers consumed alcoholic beverage, however it is not specified when this consumption occurred; and 10.3% consume illegal drugs.

3.6 Nutrition

To assess the diet behavior of this group, the food was divided into fats, oils, sugars and sweets; milk and derivatives; meat, eggs and beans; vegetables; fruit; bread, cereals, roots and pasta. This division was made using the food pyramid presented by Nahas (2003) are described in the Table 4

Table 4: Diet Behavior

	Always	Sometimes	Rarely	Never
Fats, oils, sugars and sweets	58,3%	12,5%	20,8%	8,3%
Milk and derivatives	62,5%	16,7%	12,5%	8,3%
Meat, eggs and beans	91,7%	4,2%	0,0%	4,2%
Vegetables	45,8%	12,5%	25,0%	16,7%
Fruit	54,2%	16,7%	12,5%	16,7%
Bread, cereals, roots and pasta	79,2%	16,7%	4,2%	0,0%

The calculation to verify the body mass index (BMI) was performed with the value of weight and stature stated by the workers, using the equation BMI = body weight (kg) / stature ^{2} (m). According to Bosi et al. (2006), the stated weight and the measured one have a satisfactory correlation, thus the stated weight and stature can be used in research when it is not possible to measure them. The average stature was 1.62 m (SD = 0.07), the average weight was 62.6 kg (SD = 11.1) and the average BMI was 24 kg/m^2 (SD = 4.3). Interpreting the IMC under Nahas (2003), it was found that of the 23 participants who answered this question, 8.7% were below weight; 52.2% fell in the normal range; 21.7% were overweight and; 17.4% fell in the range of obesity I.

Therefore, of the professionals who responded to the question about weight and stature, it was found that 47% were outside the range considered normal for the BMI. This may be a reflection of inadequate food consumption, such as the high rate of consumption of fats, oils, sugars and sweets (presented in the table above), and the lack of physical activity.

4. FINAL CONSIDERATIONS

The results indicated the need for educational activities, mainly on the nutritional components; habits of physical activity and; on preventive measures. It is also necessary to give information about the harmful effects of smoking; alcohol and drugs consumption and; the importance of condom use in all sexual relations.

Maciel, Fernandes and Medeiros (2006) consider that the effectiveness of any measure depends directly on their ability to achieve, eliminate or minimize the factors that trigger the problem in question. For this it is essential firstly to know and analyze these factors. For this reason, according to the data presented and analyzed in the present study, there is a field of intervention for the health professionals, whether in primary, secondary or tertiary prevention.

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ABSTRACT

The research group Body, Movement and Health, of the Feevale University Center, through the research line of Health Training, seeks to understand minority groups of our society and their lifestyles, including the life quality. Therefore, this research aimed to verify the components of the lifestyle of commercial sex workers from a city in Porto Alegre's metropolitan region. The methodology used was quantitative paradigm, with cross design and consecutive sample, and a semi-structured questionnaire. The data analysis was done through simple statistical and data analyzed followed the model of the “Pentáculo do Bem-Estar”. Mean age was 26.4 years; 35.9% of the sex workers had not completed the fundamental education and; 28.2% have a stable relationship. 46.2% do not practice physical activity; 23.1% responded that always feel stressed, being irritation the most cited symptom of stress (84.2%). 79.5% have already been HIV-tested; 84.6% of the interviewees reported that always use condoms with their clients. 47% are outside the range considered normal for BMI. The results indicated the need for educational activities, mainly on the nutritional components; habits of physical activity and; on preventive measures with information on the harmful effects of smoking; alcohol and drugs consumption and; the importance of the condom use in all sexual relations.

KEYWORDS: Commercial sex workers. Life quality. Lifestyle.

LA QUALITÉ DE VIE DES PROFESSIONNELLES DU SEXE D'UNE VILLE DE LA RÉGION MÉTROPOLITAINE DE PORTO ALEGRE

RÉSUMÉ

Le Groupe de Recherche Corps, Mouvement et Santé, par la voie de recherche intitulée Formation Professionnelle de la Santé vise à comprendre les groupes minoritaires de notre société, leurs styles de vie ainsi que la qualité de vie dans ces différents milieux. Pour cela, cette recherche a pour but vérifier les composants du style de vie des professionnelles du sexe dans une ville de la région métropolitaine de Porto Alegre. La méthodologie employée est de paradigme quantitatif, avec un projet transversal et un échantillon consécutif, ayant pour instrument un questionnaire semi-structuré. L'analyse des données a été réalisée par moyen de statistique simple et les données de cette analyse ont suivi le modèle “les cinq piliers du bien-être”. L'âge moyenne des professionnelles du sexe est de 26,4 ans, 35,9% d'entre elles n'ont pas conclu les études à l'école obligatoire et 28,2% ont un partenaire fixe. 46,2% ne pratiquent pas d'activité physique, 23,1% affirment se sentir toujours stressées, ayant pour symptôme le plus souvent mencionné l'irritation (84,2%). Parmis les interviewées, 79,5% ont déjà réalisé un examen de HIV, 84,6% d'entre elles disent utiliser toujours des présevatifs avec leurs clients. 47% se situent à la marge de la moyenne considérée normale par IMC. Les résultats indiquent le besoin d'actions éducatives, surtout en ce qui concerne les composants nutritionnels et l'habitude des activités physique; les mesures préventives avec des informations sur les maléfices du tabac, de l'acool et de la drogue; et sur l'importance de l'utilisation de préservatifs à tous les rapports sexuels.

MOTS-CLÉS: Professionnelles du sexe. Qualité de vie. Style de vie.

LA CALIDAD DE VIDA DE LAS TRABAJADORAS DEL SEXO EN UNA CIUDAD METROPOLITANA CERCA DE PORTO ALEGRE

RESUMEN

El grupo de investigación Cuerpo, Movimiento y Salud busca compreender los grupos minoritários de nuestra sociedad y sus estilos de vida, incluyendo la calidad de vida, a través de la linea de investigación Formación Profesional en Salúd. Por ese motivo, esta investigación tubo el reto verificar los factores del estilo de vida de las trabajadoras del sexo de una ciudad de la región metropolitana de Porto Alegre. La metodologia utilizada fué de paradigma cuantitativo, con delineamento transversal y muestra consecutiva, ultilizandose como instrumento un cuestionário semi-estructurado. El análisis de los datos se hizo a través de estadística simples y los datos para análisis siguieron el modelo del “Pentáculo” del Bien Estar. La edad media fué de 26,4 años, 35,9% de las trabajadoras del sexo no habían concluído los estúdios de primaria y 28,2% tenían compañero fijo. 46,2% de ellas no practican actividad física, 23,1% respondió que siempre se sienten estresadas, donde la irritación fué el síntoma de estrés más citado (84,2%). 79,5% ya realizaron el test de HIV, 84,6% de las entrevistadas relató siempre usar preservativo con sus clientes. 47% enquadraronse fuera de la franja considerada normal para IMC. Los resultados indicaron la necesidad de acciones educativas, principalmente cuanto a los factores nutricionales, hábitos de actividade física y, sobre medidas preventivas con informaciones sobre los malefícios del tabaco, consumo de bebidas alcohólicas y drogas, y en la importancia del uso de preservativos en todas las relaciones sexuales.

PALABRAS-CLAVES: Trabajadoras del sexo. Calidad de vida. Estilo de vida.

A QUALIDADE DE VIDA DE PROFISSIONAIS DO SEXO DE UMA CIDADE DA REGIÃO METROPOLITANA DE PORTO ALEGRE

RESUMO

O Grupo de pesquisa Corpo, Movimento e Saúde, através da linha de pesquisa Formação Profissional em Saúde, buscam compreender os grupos minoritários de nossa sociedade e os seus estilos de vida, incluindo a qualidade de vida. Por isso, esta pesquisa visou verificar os componentes do estilo de vida das profissionais do sexo de uma cidade da região metropolitana de Porto Alegre. A metodologia utilizada foi de paradigma quantitativo, com delineamento transversal e amostra consecutiva, tendo como instrumento um questionário semi-estruturado. A análise dos dados foi feita através de estatística simples e os dados para análise seguiram o modelo do Pentáculo do Bem Estar. A idade média foi de 26,4 anos, 35,9% das profissionais do sexo não tinha concluído o ensino fundamental e 28,2% possuía companheiro fixo. 46,2% não pratica atividade física, 23,1% respondeu que sempre se sente estressada, sendo a irritação o sintoma de estresse mais citado (84,2%). 79,5% já realizou o teste de HIV, 84,6% das entrevistadas relatou sempre usar preservativo com seus clientes. 47% enquadra-se fora da faixa considerada normal para IMC. Os resultados indicaram a necessidade de ações educativas, principalmente quanto aos componentes nutricionais, hábitos de atividade física e, sobre medidas preventivas com informações sobre os malefícios do fumo, consumo de bebidas alcoólicas e drogas e na importância do uso de preservativos em todas as relações sexuais.

PALAVRAS-CHAVE: Profissionais do sexo. Qualidade de vida. Estilo de vida.