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**ORIGINAL ARTICLE**

# **INCOME AND STREET AS CONSENSUS ON QUALITY OF LIFE BY FEMALE SEX WORKERS, TO MAINTAIN DIGNITY AND WELL-BEING**

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## **Abstract**

The objective was to understand the consensual universe of representational meanings constructed about quality of life by female sex workers. The qualitative study based on the Theory of Social Representations, from a procedural perspective, with 132 women from the Productive Upper Sertão of Bahia, Brazil. The free word association test and in-depth interviews were adopted as data collection techniques. The evocations were processed in the Tri-Deux-Mots software and the interviews were submitted to the IRAMUTEQ software. Both software programs performed factorial correspondence analyses, with different and complementary analysis perspectives. Reading the factorial maps of the evocations and the lexical analysis of the discourses made it possible to consider the similarities and complementarities. The consensual universe of social representations resides in the meanings closest to the axis of congruence of the factors, whose highlighted items are important to achieve quality of life (money, income, comfort and family relationships), from where and/or how they acquire these items (street and work). It is concluded that financial return (income and money) and the street were consensual aspects that provide the achievement of quality of life among female sex workers, as they are associated with characteristics that they consider essential for maintaining well-being and dignity.

**Keywords:** Sex Workers, Quality of Life, Women's Health, Sociology of Health, Social Representations.

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## **INTRODUCTION**

Prostitution by women has been a part of human history and the development of urban centers. In some social contexts, female sex workers were seen as noble women of great importance. However, over the centuries, with the introduction of new matrimonial structures and the establishment of strict rules for marriage in

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patriarchal societies, women's sexuality began to be controlled, keeping them submissive and socially invisible (Medrado; Jesus, 2018; Beauvoir, 2016).

The vulnerability situations are even more serious for people and/or social groups that are disadvantaged in some aspects, especially inequities related to race, gender, social class, socioeconomic, sociocultural and political factors that permeate society and, above all, sex work (Medrado; Jesus, 2018). Female sex workers go beyond the status quo since they are in public spaces and, in addition, because they use sexual practice as a source of income, they expose two symbolic situations and practices that are 'forbidden' for women (Beauvoir, 2016; Silva; Cappelle, 2015).

Prejudice and discrimination against female sex work are present in society (Prada, 2018), including in the institutions that offer services to the population. Even so, female sex workers engage in/experience sexual service as a working condition, as it is a way to achieve financial independence, autonomy and personal fulfillment (Couto et al., 2020; Pasini, 2015; Broqua; Deschamps, 2014).

Even though in Brazil and other countries, such as Spain, for example, this profession is not a criminal practice, workers, because they use their bodies and sexual practices as jobs, are still excluded and stigmatized in/by society, as they reveal their condition, status and social class (Thng et al., 2018; Rama; Tamarati, 2017; Graça; Gonçalves, 2015). The stereotypes attributed to sex work greatly interfere in their daily lives, in socio-demographic indicators, in the prevention of diseases, in the imbalance of the health-disease process and, certainly, in the positive assessment of their quality of life (Couto et al., 2020; Leal; Souza; Rios, 2017).

The term quality of life is understood as a subjective variable that only the individual, based on their experiences, learning and experiences, can evaluate and determine in a qualitative way (Domingues; Oliveira; Marques, 2018). It is worth noting that the World Health Organization (WHO) defines quality of life based on a set of elements that encompass spiritual, physical, mental well-being, social relationships, financial, educational, cultural issues and aspects inherent to housing and basic sanitation (Carter, 2018).

These aspects are the main responsible, as they contribute to sex workers being included in the group most susceptible to conditions of social vulnerability, by strengthening prejudice and increasing invisibility before the State and society. In this aspect, they contribute and reinforce the maintenance of a situation that can make it difficult to confront the different forms of violence resulting from the actions of their clients (Belém et al., 2018). In addition, there is a demand for the construction of the regulation of these activities, with fundamental importance in the monitoring of sexual exploitation and human trafficking, which often occur in this scenario (Leite; Murray; Lenz, 2015).

Women involved in the paid sex market constitute a social group of belonging through the formulation of interactions, construction of their own cultural means, thoughts, routines and ideals, which result from experiences and inter-individual exchanges (Couto et al., 2020). From this perspective, the Theory of Social Representations (TSR) emerges as the representational assumption (common sense) gains meaning with that knowledge formulated by social groups, which reverberates in practices and behaviors constructed and shared within the scope of social groups (Marková, 2017).



To this end, this study is necessary because it allows for reflections on the subjective aspects that interfere in the health-disease process and in the promotion of the health of sex workers, such as the assessment of quality of life, through the meanings that are constructed and revealed in their social representations. This theory translates the search for knowledge originating from the cognitive system, constructed and elaborated in the subconscious of these women and how their life context contributes to the formation and dissemination of the understanding that they have or do not have about their quality of life and that goes beyond the barrier of political correctness (Jodelet, 2017; Moscovici, 2015).

The in-depth analysis proposed here is justified by the fact that there is a theoretical gap in the scientific community regarding the quality of life of vulnerable populations, from the perspective of social representations. Therefore, it is clear that their health and the way they live are made invisible to various health professionals, such as nurses, for example, whose care and assistance are focused on the prevention of Sexually Transmitted Infections (STI), neglecting subjective aspects, such as quality of life.

Therefore, the objective is to understand the consensual universe of representational meanings about the quality of life for women in the exercise of sexual service, in order to perceive a collective pattern and the establishment or not of meanings specific to quality of life.

## **MATERIALS AND METHODS**

### **Type of study**

A descriptive and qualitative study based on the procedural perspective of the TSR. This perspective allows the unveiling of meanings constructed in people's mental fields, originating from a reality common to social groups, which share meanings, experiences, interpersonal or individual experiences, feelings, concepts, and propositions, forming the framework of the theory of common sense (Jodelet, 2017; Moscovici, 2015).

By idealizing common sense, TSR enables the understanding of communication within the group and the sharing of information. Thus, the process of formation of social representations occurs in the cognitive system with the attribution of meanings, anchored and objectified in the form of ideas, ideologies, symbols, behaviors, and attitudes and understood (Marková, 2017; Moscovici, 2015). Anchoring and objectification are two mechanisms that occur in the human unconscious, in memory, and in past conclusions, transforming what is unknown, disturbing, and strange into what is known and familiar (Marková, 2017; Couto et al., 2017; Suto et al., 2017).

### **Study Location**

The study participants come from cities that make up the Productive Upper Sertão of Bahia, Brazil, which has a coverage area of 19 municipalities, with a population of around 400,000 inhabitants, with the Guanambi city as its headquarters (Couto et al., 2020).

### **Population and Selection Criteria**



The non-probabilistic sample consisted of 132 women who met the inclusion criteria: being 18 years of age or older and being in female sex work (based on self-declaration) during the collection period. The Snowball selection and recruitment technique was adopted, since the social group is difficult to estimate, as there are few official records of the number (regional or national) of this population still relegated to social invisibility (Vinuto, 2014). It was difficult to access the participants directly, and for this reason the meeting and prior invitations to the women were made possible by the Community Health Agents (CHA).

### **Data Collection**

The information was produced through the application of: a survey to characterize the participants containing the following variables - education, religion, length of sexual service, satisfaction with the profession and sexual satisfaction/pleasure with clients; the free association of words to the inducing stimulus "quality of life" and two open questions to guide the in-depth interview: "tell me what you think quality of life is"; "tell me how you perceive your quality of life in the daily life of sex work". It is worth noting that all participants contributed to the free association of words, of which 30 women agreed to participate in the in-depth interview.

The researchers themselves filled out the survey resulting from the association of words, which had an average response time of 35 seconds for each participant, when they had to quickly say up to five words that came to mind in association with the inducing term. In turn, the speeches produced from the interviews were recorded with the help of audio resources on a cell phone, with an average duration of between 15 and 20 minutes. The interview allowed for a deeper understanding of the propositions and connections established between the words evoked and the discourses.

After recruitment and selection, the data collection environment was provided by professionals from the Regional Testing and Counseling Center (CTA) of the municipality where the Productive Upper Sertão of Bahia is located, in a private environment of two Basic Units of the Family Health Strategy in the neighborhoods where women lived or provided their services. Data were collected between April 2017 and June 2018, individually, with those who accepted the invitations, guided by the researchers themselves. However, some of the participants were unable to travel to these units, due to embarrassment and to maintain anonymity. For this reason, they requested, through the CHAs, that visits be scheduled, with prior authorization from the CTA, for the purpose of collecting information in their homes and/or workplaces.

### **Data Processing and Analysis**

The evocations resulting from free association were transcribed in Microsoft Word 2016 software, organized in a database and processed with the help of Tri-Deux Mots software version 2.2. The software produced the Correspondence Factorial Plan/Map, which presents the arrangement of words and fixed variables (education, religion, time of sexual service, satisfaction with the profession and sexual satisfaction/pleasure with clients), which contributed to the correlations, that



is, from the approximation and distance between evocations and the socio-demographic characterization.

The Correspondence Factorial Analysis (CFA) is made possible by the factorial plan, which favors a qualitative-quantitative, multivariate analysis, according to frequency,  $\chi^2$  (greater associations) and importance of the most relevant words or meaning cores according to the affinities that are established in the axes/factors/lines formed in the graph (Couto et al., 2017; Suto et al., 2017).

The speeches revealed in the interviews were organized and transcribed in full with the help of Microsoft Word 2016 software and submitted to Lexical Analysis, made possible by the IRAMUTEQ software. As part of the results, another Factorial Correspondence Plan was issued, this time aiming at the apprehension of the terms attributed to quality of life, based on the lexical convergences and divergences present in the speeches, which are organized spatially and schematically on the map, according to the calculations of co-occurrence of the most important words in the text segments (Couto et al., 2017; Suto et al., 2017).

The results were then cross-referenced by cross-referencing the information in order to highlight the congruence's and similarities, made possible by the two methods of collection and analysis, to apprehension of the consensuses that constitute the social representations (Suto et al., 2017).

### Ethical Aspects

Throughout the research implementation process, the authors complied with the standards and criteria for quality rigor, guided by the Consolidated Criteria for Reporting Qualitative Research (COREQ) guidelines. The research was approved by the Research Ethics Committee of the Guanambi Higher Education Center under protocol number 2.007.080 in 2017. In order to comply with the standards of the National Health Council, such as confidentiality and anonymity, the participants received an identification code, the letters "TS" (acronym for sex worker), followed by the interview number (example TS 01, TS 02, TS 03).

### RESULTS

Regarding the characterization of the women studied, the majority of the 132 were between 18 and 35 years old (78.2%), had incomplete/complete elementary education (63.6%); declared themselves to be black (63.4%), Catholic (65.1%), had worked for less than 5 years (68.1%), were not satisfied with their profession (48.4%), did not feel pleasure or sexual satisfaction with clients (60.2%) and used condoms during sexual relations (67.8%) and contraceptives (66.7%).

Table 1. Adapted sociodemographic characteristics as markers of social vulnerability of sex workers (n=132). Guanambi City, Staty of Bahia, Brazil, 2018.

Variables	Absolute Frequency (n)	Relative frequency (%)
Age		
18 to 24 years old	42	30,43
25 to 34 years old	64	47,83
35 to 50 years old	22	18,84
over 50 years old	4	2,90



Education level		
Fundamental	74	56,06
Medium	58	43,94
Self-declared color		
White	22	16,68
Black	47	35,60
Brown	63	47,72
Religion		
Catholic	71	53,78
Evangelical	13	9,86
Other	48	36,36
Length of service		
<= 01 year	33	25,00
> 01 and <= 05 years	64	48,48
> 05 and <= 10 years	18	13,63
> 10 years	17	12,90
Satisfaction with prostitution		
Yes	54	40,16
No	79	59,84
Enjoys customers		
Yes	25	18,8
No	80	60,2
Sometimes	28	21,1
Condom use		
Yes	89	67,42
No	43	32,58
Use of contraception		
Yes	92	66,69
No	40	33,31

The Correspondence Factor Map (Figure 1) resulting from data processing using Tri-Deux-Mots, presents the spatial organization of the variables and exposes the approximations and distances of the fixed and opinion variables in the two factors (axes), factor 1 (+1 to -1) and factor 2 (-2 to +2). Thus, the map provides a visualization of what brings the participants together and separates them according to their profile (characteristics) and their responses, enabling an understanding of what constitutes consensus among the group. Therefore, as the evocations are closer to the zero axis (connection point between the lines), it becomes possible to highlight the group's consensual universe.





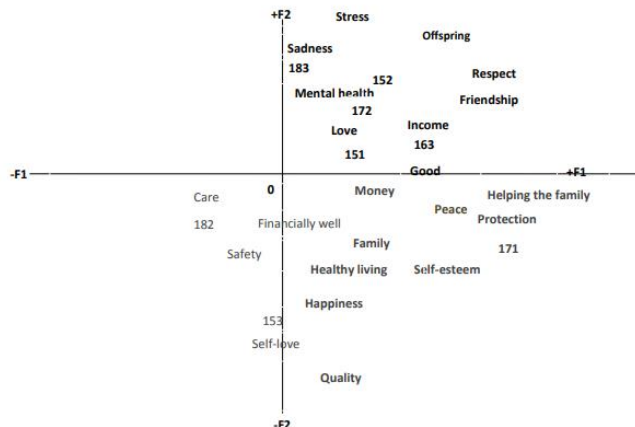


Figure 1 – Graph of the Factorial Plan of the words evoked by sex workers and identification variables (n=132). Guanambi City, State of Bahia, Brazil, 2018.

Source: prepared by the authors of the research.

Chart 01: Legend with the meaning of the numerical codes present in the factorial plane of correspondence, processed by the Tri-Deux-Mots software, after analysis of the evocations obtained with free association of words by sex workers (n=132). Guanambi City, State of Bahia, Brazil, 2018.

151 – Catholics; 152 – Evangelicals; 153 – Other religions; 163 – More than 05 years in sex work; 171 – Satisfied with sex work; 172 – They are not satisfied; 182 – Does not feel pleasure with customers; 183 – Sometimes he takes pleasure with customers.

Source: prepared by the authors of the research.

In the Figure 1 shows the semantic fields that make up the social representations of sex workers regarding “quality of life”, as well as the variables associated with these fields. On the abscissa axis, where F1 is located, there is the translation of the most significant representational contents, constituting the representations, demonstrating 41.1% of the total variance of responses.

On the ordinate axis, F2 represents 22.4% of the variance and composes the significant representational contents of this axis. Adding the percentage values of F1 and F2 explains 63.5% of the total variance of the responses, which demonstrates statistically reliable parameters with internal consistency, that is, it characterizes an analysis with significance.

Regarding the minimum frequency of words for this study, 8 (eight) was considered, due to the vast and heterogeneous semantic field provided by the interviewees. In total, there were 1637 words, 313 of which were different. The variables that served to characterize the profile of the participants and that contributed to the abscissa and ordinate axes were: religion, length of service in sex work, satisfaction with the sexual service and whether they feel pleasure in relationships with the client.

In factor one (+1 to -1), women who do not declare themselves to be Christian (153) and do not feel sexual pleasure with clients (182) are in opposition to those who are not satisfied with the sexual service (171). For the ordinate axis (-2 to +2), Catholic women (151), Evangelical women (152), women with more than 5 years of experience in sex work (163), women who are not satisfied with sex work (172) and

sometimes feel pleasure in relationships with clients (183) are in opposition to those who are not satisfied with sex work (171).

Considering that what contributes to the point of intersection interferes in the construction of the main meanings and are, therefore, revealing of the group's consensus, it is worth highlighting that the variables responsible for delimiting this homogeneous representational universe were sex workers who stated that they were Catholic, those of other religions and those who do not feel pleasure with clients. Regarding the terms constituting the representation, for F1- only the terms „care“ and „financially well“ were significant for women of other religions and who did not feel sexual pleasure with clients.

In F1+, the words physically well, money, good, peace, self-esteem and helping the family had high frequencies for those who were satisfied with sex work. The +2 axis had a notable contribution from the evocations stress, sadness, mental health and love for sex workers who do not always feel pleasure with clients. Finally, factor -2 was influenced by women of other religions and who were not satisfied with sex work, whose most important expressions were money, financially well, family, security, healthy life, happiness, self-love and quality. The statistically important words that most closely resembled the central axis (0) of the factor map were care, money, financially well, security and family. These are terms that reveal aspects of the acquisition and positive evaluation of quality of life and, at the same time, show that it is something distant or difficult to achieve.

The speeches produced in the interviews, also submitted to Correspondence Factor Analysis (CFA) processed by the Iramuteq software, originated graph 2 (Figure 2) of the correspondence factorial plan. The main words were presented through lexical analysis and as the highest factorial loads were verified; those with the greatest degree of proximity were highlighted, based on the lexical contents, being organized spatially in the plan.

By revealing statistical reliability, the graphic (Figure 2) presentation of the AFC shows consensus among the group, enabling a significant analysis. For this study, a minimum frequency of 18 words was considered, due to the plurality of the semantic field elaborated by the participants. A total of 3,755 words were produced for only 1 stimulus, of which 622 were different and 292 were used. In Figure 2, one can observe the consensual contents of the 3 lexical classes originated from the interviews, that is, everything that is arranged and is in congruence with the intersection point (zero) of the lines. The spatial organization of the words in the plan showed approximations and distances from the semantic-lexical content present in the speeches with the zero axis that intersects between factor 1 and factor 2.

Factor 1 (Figure 2) is responsible for presenting 62.7% of the total variance of the responses, whose meanings are relevant for the understanding of the representations and factor 2 contributes with 22.9% (a smaller variance of the responses) of the lexical content present in the speeches and that constitutes the representations. In general, as the majority of the words are organized in the factor map along the lines that make up the axes, it is possible to infer that there is more consensus than disagreement. Therefore, it demonstrates congruence between the meanings elaborated by the group of female sex workers. The participants' discourse, based on words that connect and intertwine the three classes (and are close to point zero), gives conformity to the consensual universe on quality of life,





since there are meanings that confer homogeneity to the group expressed through the following terms: our, only, give, life, quality of life, money, comfort, being, street, child, pay, stay, self-esteem, income and work.

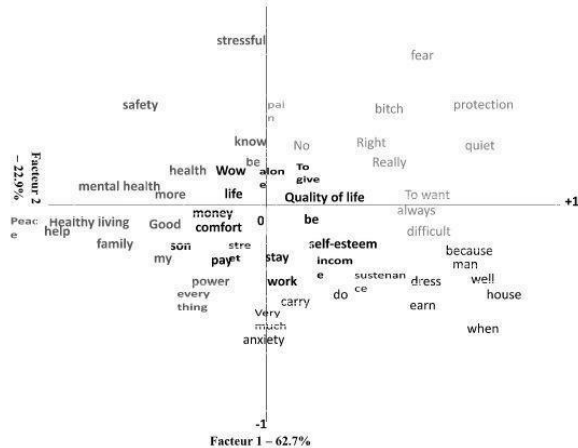


Figure 2- Graph of the Factorial Correspondence Plan of the discourse analysis of the interviews with sex workers (n=30). Guanambi City, State of Bahia, Brazil, 2018. Source: prepared by the authors of the research.

Chart 2 - Legend for the visualization and location of the classes revealed by the factorial plane of correspondence, processed by the Iramuteq software, after analysis of the discourses obtained from interviews with sex workers (n=30). Guanambi City, State of Bahia, Brazil, 2018.

Class 01: words in gray and bold.

Class 02: words in black.

Class 03: words in gray.

Central axis 0: words in black and bold, which are conducive to the three classes.

Source: prepared by the authors of the research.

In this aspect, the meanings that shaped the representations, which are constructed in the participants' cognitive system, are presented in the following statements:

"Quality of life comes from within, it comes from vanity, from self-love. A healthy life is easier when you have money, because we buy good food, go to the health service, to the doctor, pay for procedures for our body. But we know that this is not even our reality, because the money we earn on the street is for the basics, food, clothes, medicine, helping the family as much as we can." (TS 01)

"The only thing I can say is that I would not wish any problem on anyone with the men who seek me out, because they always cut short many of your dreams that you think you will one day fulfill, you set a price that most people don't want to pay, you feel like trash. So I can't think about quality of life in this situation. But I also need to pay my bills." (TS 06)

"I can't wait all month to have money and a minimum wage doesn't cover my needs. My quality of life and that of my son comes from this, this income that will help us to have health, a dignified life, and well-being. I have a son to support, his father doesn't always send money. At the beginning, life on the streets was very difficult, I blamed myself, it was a pain here and there, but now it's better, I don't blame myself anymore." (TS 07)

“My daily life as a whore was traumatic at the beginning, because of my separation, and I didn't want to be a whore. I was very afraid and anxious that something bad would happen to me and I wouldn't be able to take care of my son. At the beginning, my sex life was almost non-existent, it was just about satisfying men and earning money (...) And thank God everything improved, when I started to love myself more and have self-esteem. Today I earn very well, because I value myself and choose my clients very carefully.” (TS11)

“Having health and a good quality of life means being able to experience everything you want, everything that life offers you, in a joyful, happy, and well-being way. This thing about enjoying life within its limits. A healthy life is when a person is able to do physical activity, has independence, has autonomy to do the things they need to do, without feeling sick.” (TS 25)

“I need to have respect for our body, for our profession, and make people respect us. When that happens, we have quality in our work, because just the fact that we are not disrespected means a lot. It means that they will pay us what we ask for. This comes from the self-love that we develop for ourselves. Man, this quality of life, having a healthy body, a healthy life, to face fears, the risk of violence.” (TS 28)

By highlighting the meaning of each element present in the central axis and which is important for what they think about quality of life, the discourses confirm that the representations of this group are consensual. Especially with regard to the positive aspects of quality of life, despite a certain distance from the lives of the participants.

By cross-referencing the results, based on the analysis of the words displayed in the factor map produced by Tri-Deux-Mots, it was possible to consider that the terms evoked resemble and complement the lexical analysis performed by the interpretation of the classes in the CFA of the Iramuteq factor plan. Thus, both the intersection of the classes and the proximity of the words to the central point of the axes/factors of both graphs converge to the formation and confirmation of a group of belonging, whose consensus is based on items that are important for achieving quality of life (money, income and comfort) and where they acquire these items (street and work).

## DISUCSSION

The results presented revealed that the representational contents that make up the consensual universe on the quality of life by female sex workers permeate the experiences and learning lived, shared and disseminated in everyday life, both related to their intimate/private lives and to their work and the street.

It is important to point out that the variable that most contributed to the distancing and, mainly, the approximation regarding the representational consensus was religion. While those who declared themselves to be Catholic and/or of other religions, other than Evangelical, were preponderant in the understanding that female sex work is a profession and is where they obtain their livelihood and income, fundamental for a positive representation of quality of life.

It is worth noting that Catholics and women of other religions (Spiritists, Candomblé followers and/or Umbanda followers) view female sex work as a profession, to the point that sexual pleasure is not achieved with clients (another



group of women that was important for understanding the consensus), since the money from „renting the body“ is the motivation and orgasm/sexual satisfaction is achieved with their partners or with the man for whom they have feelings of affection(Couto et al., 2020), this aspect being important for quality of life, but it was not at the center of the factors.

Religions and their doctrines function as devices that control bodies and human sexuality, as a result of the rigid norms that value female submission to men in patriarchal societies (Lopes, 2017; Beauvoir, 2016; Pasini, 2015). Although female sex workers maintain their beliefs and faith, they do not fit into this moral rule of control, since socially the idea of freedom that they experience in their bodies, with the work they perform, is recognized as a means of guaranteeing income and personal profit(Lopes, 2017; Alves et al., 2017; França, 2017a).

This situation is linked, by several religions, such as Christianity, to the sin that leads to the destruction of families and spiritual death (Lopes, 2017; Alves et al., 2017). Thus, in Brazil, evangelical people and, possibly, sex workers who call themselves that, have more difficulty in understanding the service as a profession, due to fear, guilt, stigma, and the repression that some religious denominations impose on the practice of prostitution(Lopes, 2017;França, 2017a).

A semantic network was found in the central axis of both graphs that reveals positive aspects for the acquisition and positive evaluation of quality of life. However, at the same time, it shows that it is still something distant or difficult to achieve. Such evidence shows that the consensual universe refers to aspects that permeate the daily lives of women in sexual services and are the reasons why they experience the profession, through the words money (income and being financially well-off), security and family(Prada, 2018; Pasini, 2015). The findings are consistent with those presented by studies developed both in Brazil and in other countries, which present these issues as important points for the subsistence and survival of the group, revealing themselves as synonyms for quality of life(Couto et al., 2020; Thng et al., 2018; Pasini, 2015; Broqua; Deschamps, 2014).

In this regard, understanding this process is essential to understanding the networks of meanings constructed by sex workers, whose meanings are multiple as a result of their professional experience and the way they represent quality of life. From this perspective, they are always seeking better socioeconomic conditions for themselves and their families and, consequently, their work primarily contributes to meeting their needs and achieving their goals (Prada, 2018; Broqua; Deschamps, 2014).

Quality of life goes beyond issues involving the health-disease process, as it encompasses other socioeconomic factors, psychosocial well-being, positive self-image and health conditions, safety and protection to develop their service and reduce social stigmas. It can also include feeling accepted by society, in addition to other aspects that complement the human being as a complex and multifaceted being, such as maintaining the home and ensuring the survival of the family (Carter, 2018; Belém et al., 2018; Leite; Murray; Lenz, 2015).

It is in this sphere that money is revealed as the most important aspect associated with the quality of life for sex workers, since they attribute financial meaning to sexual practice as work, as it is the way they found to earn an income that meets their needs and those of their families Prada, 2018). This evidence



corroborates a study that highlighted the meanings of prostitution in the life trajectories of some women in relation to money, since it would provide comfort to their families and meet their needs (Silva; Cappelle, 2015).

A study carried out with French sex workers revealed that their pleasure did not reside in the orgasm itself, but in the monetary remuneration for the personal satisfaction of being able to consume what they want and thus achieve self-fulfillment. These same participants in France revealed that being able to acquire material goods, have autonomy and improve the quality of life for themselves and their families are reasons for working in sex work and revealing themselves in order to satisfy their clients (Broqua; Deschamps, 2014).

Although there are several factors that influence women to start sex work, there are social determinants that also favor women's decision to enter this job market. Among them are the uses of drugs, family breakdown and the experience of domestic violence and sexual abuse, but above all, access to minimum essential goods and services for survival and unemployment of relatives who are the family's breadwinners, which always interfere in the negative evaluation of quality of life (Couto et al., 2020; Magalhães et al., 2019; Ramá; Tamariti, 2017; Graça; Gonçalves, 2015; França, 2017b).

A study carried out with sex workers from a populous city in Southeast Asia showed that the financial independence and autonomy achieved through sexual service allows, in addition to satisfying their personal needs, those of their children and family. In this same study, it was pointed out that their demand lies in the intervention of the State, with public policies and recognition of the profession that guarantees legal support with guarantees of labor rights, safety and protection against violence, in order to achieve a good quality of life (Carter, 2018).

Regarding healthy living and, mainly, self-care (physical, emotional and spiritual aspects), one of the consensuses obtained in this study is also the achievements resulting from obtaining financial resources through sex work. The money earned through this occupation subsidizes the livelihood of these women and their families, facilitating the acquisition of consumer goods that allow them to take care of their bodies, access health services, and purchase food, clothing, medicines and other supplies (Belém et al., 2018; Magalhães et al., 2019; Karamouzian et al., 2016). These notions corroborate what was presented in studies with female sex workers from the interior of state Bahia and Belo Horizonte city and France (Couto et al., 2020; França, 2017b; Karamouzian et al., 2016; Broqua; Deschamps, 2014).

Furthermore, the results discussed here revealed that female sex work is seen by women as an employment opportunity, so that they can meet their needs. The issue of money is synonymous with pleasure (not sexual pleasure, but rather with maintaining survival) and a source of sustenance as it enables access to basic needs and provides an opportunity for a better assessment of quality of life (Couto et al., 2020; Ramá; Tamarati, 2017).

The conceptual debate on quality of life under the aegis of social representations is anchored in arguments that go beyond the reductionist and restricted view associated with health, the biological focus or the absence of pathologies. The various indicators that permeate quality of life, such as biopsychosocial aspects, culture, life expectancy, education, leisure and interpersonal dynamics (Domingues; Oliveira; Marques, 2018), are anchored, even if

indirectly or as something still distant from everyday life, in the meanings of sex workers.

The consensual universe of meanings that contribute to the formation of social representations by female sex workers about quality of life originates in the latent aspects of cognition and collective memory, which enable the procedural construction of the representation of this phenomenon.

Because this is a qualitative study based on the Theory of Social Representations, some interpretations may have been overly generalized, since even if there were a consensus, many experiences and learning tend to be more individualized, in addition to the theoretical gap on the subject when it comes to quality of life and female sex workers, which may constitute limitations for this study.

Its applicability becomes unique in that it favors evidence of how these women understand their quality of life, an important item for the creation of strategies that can positively interfere in the health-disease process. Furthermore, by reflecting on the representations that female sex workers construct about quality of life, nursing professionals will be able to rethink their health promotion actions beyond the prevention of STI, privileging subjective aspects, which are predominant for facing situations that make them vulnerable. This vulnerability, as previously highlighted, is related, in particular, to the absence of the state in the formulation of public protection and security policies, as well as in guaranteeing the regulation of the profession, main demands of the organized social movement, which will certainly reverberate in the positive evaluation of quality of life.

### CONCLUSION

The consensual universe in the social representations of women in sexual practice, regarding quality of life, was shown to be associated with relevant aspects that constitute means to obtain it, which are pre-defined by characteristics considered essential for well-being and dignity in the day-to-day life of the family and in the daily routine of sexual service, which are achieved as they profit from the money earned, feel good and healthy and benefit their family members. Nevertheless, the words that permeated the semantic universe of the discourses and were latent in the cognitive field were money, income, comfort, work, street, child, family, care and safety.

It is proposed that other studies to be developed with the object in question focus on an approach that allows the understanding of mental health, an inseparable factor for human beings, and quality of life, in view of the extreme situations they experience in the daily routine by female sex work and which were latent in the discourses of the participating women.

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