

# Sociodemographic and psychosocial characteristics of female sex workers enrolled in “MAS por nosotras” cohort in Buenos Aires, Argentina

THPED457

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## BACKGROUND

Female sex workers (FSW) experience stigma and discrimination, social inequalities, precarious working conditions, and economic difficulties, resulting in limited healthcare access and health disparities, which were further worsened during the COVID pandemic.

“MAS por Nosotras” is an ongoing prospective cohort study of cisgender (CGW) and transgender (TGW) FSW organized at a non-governmental research organization in Argentina, through collaboration with the Ministry of Health of Buenos Aires City, and a Canadian research team. The objective of this study is to evaluate the sexual and reproductive health and rights status of FSW in Argentina and determine the feasibility of implementing a comprehensive healthcare package for future emergencies.

## AIM

This work describes and compares baseline sociodemographic and psychosocial characteristics of CGW and TGW participants enrolled between June and December 2023.

## METHODS

After providing written informed consent, they completed psychosocial questionnaires and underwent medical assessments.

We performed a descriptive analysis of the women socio-demographic characteristics and psychosocial factors and stratify this analysis by gender (CGW and TGW). Chi-square test was used to compare CGW and TGW, with cut-off points applied to each scale.

### Measures:

- Sociodemographic (place of birth, educational level, food security- item of Canadian Community Health Survey)
- HIV status
- Sex Work-related stigma (yes, experienced at least once in their lifetime), adapted version of Grosso et al 2019, 4 dimensions: Experienced and Perceived Stigma in a Healthcare Setting, Stigma from Family and Friends, and Stigma from Law Enforcement.
- Post-traumatic Stress Symptoms (PCL-5  $\geq 33$ )
- Depressive symptoms (CES-10  $\geq 16$ )
- Alcohol use (Brief 3-item AUDIT  $\geq 3$ )
- Substance Use (DAST-10  $\geq 3$ )
- Condom Use (while using alcohol or drugs and in the last sexual intercourse).

## RESULTS

N=116

CGW ♀ = 55  
TGW ♀ = 61

AGE 33.5 years  
(IQR= 26.8-44.3)

CGW: 41 years (IQR 33-50)  
TGW: 29 years (IQR 24-37)

## Sociodemographics

### PLACE OF BIRTH

71% were born in Argentina (CGW 67%; TGW 74%)  
61% were born outside Buenos Aires city (CGW 32%; TGW 84%)

### EDUCATION LEVEL

42.2% attained secondary school or higher (TGW 40.7%; CGW 44%).

### FOOD SECURITY

28.9% perceived they had enough food and the kind they wanted in the last 12 months (TGW 30.8%, CGW 27%).

### HIV

18.1% (TGW 32.8%, n=20; CGW 1.8%, n=1) had previous HIV diagnosis.  
18% (TGW 7%; n=3; CGW 26%; n=14) tested for the first time.  
2.6% of participants who tested at baseline (TGW: 4.9%, n=3; CGW: 0%, n=0) had a new HIV diagnosis.

Table 1. Sex work-related stigma among cis and trans women sex workers

	Total N=92* % (n)	CGW n=47 % (n)	TGW n=45 % (n)	p-value
STIGMA EXPERIENCED IN HEALTHCARE SERVICES	21.7 (20)	23.4 (11)	20 (9)	0.692
PERCEIVED STIGMA IN HEALTHCARE SERVICES	29.3 (27)	29.8 (14)	28.9 (13)	0.925
STIGMA FROM FAMILY AND FRIENDS	38 (35)	31.9 (15)	44.4 (20)	0.216
STIGMA FROM LAW ENFORCEMENT	30.4 (28)	31.9 (15)	28.9 (13)	0.753
TOTAL SEX WORK STIGMA SCORE	58.7 (54)	55.3 (26)	62.2 (28)	0.501

\*Total number of completed scales.

Table 2. Psychological factors among cis and trans women sex workers

	Total % (n)	CGW % (n)	TGW % (n)	p-value
POST-TRAUMATIC STRESS SYMPTOMS <sup>A</sup>	10.4 (10)	12 (6)	8.7 (4)	0.596
DEPRESSIVE SYMPTOMS <sup>B</sup>	62.4 (63)	59.1 (26)	64.9 (37)	0.549
HAZARDOUS DRINKING <sup>C</sup>	70.3 (64)	53.8 (21)	82.7 (43)	0.003
ILLICIT DRUG DEPENDENCE <sup>D</sup>	29 (29)	19.1 (9)	37.7 (20)	0.041
SEXUALIZED DRUG AND ALCOHOL USE (LAST INTERCOURSE) <sup>E</sup>	21(18)	7.3 (3)	33.3(15)	0.002

Note: % calculated based on the total number of completed scales.

a. PCL-5  $\geq 33$ , n=96

b. CES-10  $\geq 16$ , n=101

c. Brief 3-item AUDIT  $\geq 3$ , n=91

d. DAST-10  $\geq 3$ , n=100

e. n=86

## CONCLUSIONS

Psychosocial health determinants were similarly high and negative for both CGW and TGW, likely due to similar work and living conditions. TGW reported higher substance use, emphasizing the need for both common and targeted interventions to improve health conditions for all FWS. These issues could significantly hinder access to sexual and reproductive healthcare and increase the risk of HIV. The findings highlight the importance of considering variables beyond gender identity when designing comprehensive healthcare packages for this population.