

The context of drug use among transvestite sex workers¹

O contexto do uso de drogas entre travestis profissionais do sexo

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Resumo

O contexto do uso de drogas aparece desafiador para a saúde pública brasileira. Ao relacioná-lo com a população de travestis, faz-se necessário uma sistematização singular, pela vulnerabilidade característica desse segmento. Considerando o trabalho desenvolvido num serviço de saúde específico para travestis no Estado de Minas Gerais, foi desenvolvida uma pesquisa que teve por objetivo identificar e quantificar o uso e abuso de drogas pelas travestis, profissionais do sexo que frequentam o serviço oferecido. A metodologia é fundamentada em uma pesquisa de levantamento de dados dos prontuários das pacientes e o uso apoiador do caderno de campo. Foram utilizados 59 prontuários analisados por um instrumento de coleta que identificou: características demográficas da amostra, uso de drogas, tipos de drogas utilizadas, frequência de uso. O instrumento de coleta foi revertido para um banco de dados digitalizado que projetou as estatísticas. Como resultado, ressaltou-se um uso significativo para álcool e outras drogas entre essa população, bem como os tipos mais comuns e suas frequências. A análise dos dados prevê uma dissonância entre critérios diagnósticos da síndrome da dependência química e a *autoidentificação* das travestis sobre a própria saúde, relacionando o uso ao contexto de vida. Os desdobramentos desses resultados imprimem a necessidade de maiores levantamentos pela relação marcante entre abuso de substância, transmissão do HIV/Aids, de outras DSTs, bem como de situações de violência e da permanência desse segmento na marginalidade.

Palavras-chave: Drogas; Travestis; Vulnerabilidade.

Abstract

The context of drug use is a challenge for Brazilian public health. A unique system is needed to relate it to the transvestite population, due to the vulnerability which is characteristic of this group. A project was developed which sought to identify and quantify the use and abuse of drugs by transvestite sex workers who used services available to them in a dedicated health clinic in the state of Minas Gerais. The methodology is based on searching through patient records and supported using field notes. Fifty-nine medical records were analyzed using a data collection instrument which identified: demographic characteristics of the sample, types of drugs and frequency of drug use. Data from the instrument was used to create a database from which statistics were then projected. The resulting data showed significant use of alcohol and other drugs by this population, as well as the most common types and frequency of use. Analysis of the data shows a disconnect between the diagnostic criteria of chemical dependency and the transvestites' own self-identification regarding their health, relating use to the context of their daily lives. These results show the need for further study of the remarkable relationship between substance abuse, transmission of HIV/AIDS and other sexually transmitted diseases, as well as violent situations and the continued presence of transvestites on the margins of society.

Keywords: Drugs; Transvestites; Vulnerability.

Introduction

Taking into account the importance of historically and ideologically situating people who abuse drugs, the decision to carry out this study came from an ethical position which seeks to bring the professional context of "assistance" up to date. Interest in studying the topic of drugs among transvestite sex workers came out of work done with this population in a city in Minas Gerais, and the consequent recognition of the need for a more systematized understanding to promote activities which take into account the use and abuse of drugs as well as the specifics of these realities.

This project began with the funding of a program² aimed at promoting the health, education, and citizenship of transvestites. As of this time, around one hundred transvestites have used the services which have been available since 2006. The program is divided into three main projects: the first is devoted to field work in which the transvestites'³ homes and workplaces are visited in order to foster prevention, information and awareness based on the policy of harm reduction⁴ and distribution of supplies. The second project is based on peer education, where open groups are organized in which the transvestites, mediated by a professional coordinator, can choose, discuss and learn about topics of common interest. The last project is the health and citizenship clinic which provides psychology and medical consultations while being attentive to the specific needs and grievances of this population.

The activities are based on the precepts of public health and human rights, in which the values and customs associated with diseases and social habits make up the social complex; in this sense, understanding of people's responses to illness, death and other misfortunes is related to the set of beliefs, which should be understood and valued in order to develop and specific activities (Brasil, 2009).

² The author is a psychologist and technical coordinator in this program, and the co-authors receive funds through the program and participate in the school of medicine.

³ Following the example of other researchers (Benedetti, 2005; Peres, 2005; Pelucio, 2007) and respecting the day-to-day relationship established with the transvestites, we use feminine language and pronouns to refer to these individuals.

⁴ Harm reduction is a strategy put forth by the National Drug Policy (Brasil, 2005) which proposes activities to minimize risk and harm associated with the use and abuse of drugs without necessarily interfering with consumption.

The Transvestite Health Clinic, located in the city's University Hospital, was at the center of this study. The objective of the study is to identify and quantify the use of drugs by transvestite sex workers who utilize the health services offered.

Daily contact with the transvestites showed that this segment faces many problematic and specific issues, as can also be seen in the ethnographic work done on transvestites in Brazil (Silva, 1993; Benedetti, 2005; Pelúcio, 2007; Bonfim, 2009). In these studies, the authors generally present the construction of the feminine transvestite in her various manifestations which involve creating a language and a specific performance, interlinked with the departure from the family home, which can occur in various ways, leading to life and work in the "battlefield", in other words, prostitution⁵.

These pathways are accompanied by the concept of social vulnerability, which contains a set of factors including social and economic conditions, issues related to human rights, gender, sexuality, race/color and citizenship, which also are connected to advance of the HIV epidemic as well as drug abuse. In this context, the subject of drugs seems to be transversal (Pimenta and Souto, 2003).

Helio Silva (2007) states that what is new about transvestites is their circulation, which brings them into contact with many areas of society; they are present figures with whom other people maintain daily relationships, well-known, but not necessarily accepted. The transvestites end up learning through their daily experience which, by breaking from the heteronormative matrix, produces a rupture in intelligibility, as they are pushed into a space that Butler (1993) introduces into complex gender discussions; she recognizes this space as abjection, in other words, an "uninhabitable zone" in which integration into society appears compromised by the difference

which is made explicit by gender.

As shown by Carrara and Viana (2006), when we refer to transvestites, we tend to think of an image of urban disorder in which twin sexual deviances (homosexuality and prostitution) appear connected to poverty, to drugs, in other words, to the underworld. This representation increases the issue of vulnerability among transvestites, as this is not only about historical difficulties in accessing public health, but also accessing work, leisure, education and exercising citizenship in general. What is left, many times, are hidden and silent street corners.

However, it is important to establish the fact that currently, the social movement around transvestite and transsexual issues has developed on the national scene since 1993, identifying demands and politicizing discourses that move away from victimization⁶. This group is now saying what it wants and why it wants it. We are witnessing a process in which transvestites are understanding and recognizing their gender in fluidity, and questioning the compulsory heterosexuality which classifies them as deviants and part of a pathological social order (Butler, 2003).

The issue of drug use, in turn has frequently been approached in transvestites' narratives. Drug use is mainly associated with the moment of leaving the family home, as has been shown in the principal ethnographies (Silva, 1993; Benedetti, 2005; Pelúcio, 2007). When drugs appear, they are found in the spaces of sociability linked to prostitution through use with clients, violence experienced on the streets and also the use of hormones to modify bodily appearance. Nevertheless, we were not able to find any work specifically on the relationship between drugs and transvestites.

Among the literature which is relevant to this area, the work of Pelúcio (2007, p. 33) treats the issue of drugs in a more explicit manner:

5 It is important to state that 97% of transvestites experience prostitution as work, according to the First National Consultation about STDs/AIDS, Human Rights and Prostitution, conducted in Brasilia in 2008 (Brasil, 2012). Furthermore, although prostitution is not the focus of this study, it should be stressed that it is a fundamental base for thinking in this arena. Therefore, in this context, as Teixeira (2008), Benedetti (2005) and Pelúcio (2007) state, prostitution is an important source of sociabilities for transvestites, although it is not a given that every transvestite is a sex worker. Considering the significant number, we have an impasse and a problem for the transvestites, since they have recognized the profession in the Brazilian Code of Occupations, although it has not yet been regulated. Another factor is the impasse found in the Brazilian Penal Code, which maintains a ban on forming cooperatives and enterprises for practicing prostitution.

6 As a reference, the National Transvestite, Transexual and Transgender Union (ANTRA) which is gaining visibility in the social movement. Information available at the official ANTRA site. Accessed January 21, 2011 at: <http://pessoal.atarde.com.br/marccelus2/antra/index.html>

Another fact which leaps to the forefront for those who visit the places where transvestites work as prostitutes is their use of legal and illegal drugs. Alcohol is widely consumed, especially spirits such as cognac and cachaça, much more than fermented beverages such as beer, which besides being more expensive, is a cold drink, which does little to keep one warm at night when that is needed. Many transvestites relate that crack is the drug of the moment and is what has brought them death and decrepitude. Others who always try to evade inclusion in the groups of the “colocadas” (those who use drugs) and the “bandidas” (those who steal) tell me that this type of behavior attracts repression and thieves to the areas where they work. To this end, many transvestites resort to associating with madames and pimps (this latter group being very rare in transvestite prostitution) to ensure order.

Pelúcio (2007) develops her analysis around the relationship between transvestites and the country's AIDS prevention model. The author comments that the strategies for the services and projects which guide and facilitate this public's access to health, clarifying transvestites' rights and citizenship, seem to make no sense in the context where they are immersed into other determining factors such as drug abuse, violence, repression, discrimination, loss of documents and records, etc.

Through an analogy with Pelúcio's reading of the AIDS-prevention model, we can approach the manner in which the issue of drugs has been brought into the context of transvestites. There is still a distance between the transvestites and the services which are available, even though efforts have been made towards bringing them together and critically looking at the limitations of the available services, as can be seen in the creation of the National Integral Health Policy for lesbians, gays, transvestites and transsexuals in 2010⁷.

What we can consider, *a priori*, is that the connection between transvestites and drugs invokes the existence of variable states of vulnerability,

which form a vicious cycle in which a transvestite who uses drugs can work, which involves her in cases of violence, where she is more susceptible to contracting and transmitting sexually transmitted diseases due to the distance which is often present between drugs and safe sex (Pelúcio, 2007; Garcia, 2007; Kulick, 2008). These circumstances often end up stigmatizing this group as “lost causes”. As seen in the work by Carrara and Viana (2006) quoted above, many cases where transvestites are murdered are ignored due to the assumption that the victim was connected to drug trafficking.

Taking into account prevention with relation to risk and protection factors, transvestites face aggravating circumstances as these factors have an inverse relationship. The risk factors represent those which are linked to a greater propensity to use, while characteristics related to protection factors reduce the subject's likelihood of using drugs. In other words, among transvestites, risk factors are elevated while protection factors are low. Among the risk factors we can identify lack of family support, marginality, availability of drugs in life and work contexts and, inversely, the scarcity of protection factors such as, for example, a social and affective support network.

Another aggravating factor involves the effectiveness rates of prevention measures which are generally available. According to a study conducted in Europe that has not yet been replicated in this country, courses or lectures in schools, counseling in emergency situations, or even social service programs show low effectiveness rates with regards to alcohol use. What stands out in terms of efficacy by the study's criteria is brief counseling in general care services (Anderson and Baumberg, 2006).

The Brazilian drug situation involves a complexity of factors which are at play in educational, social, political, public security and health activities. When we add the specifics of transvestites to this complexity, we get an entirely new and still-challenging equation.

7 The National Integrated LGBT Health Policy establishes directives for the qualification of health services in order to end discrimination against these populations. It also integrates other efforts, such as the Brazil Without Homophobia Program of 2004 in the struggle for respect for the other. The program was reiterated in the launching of the National Plan for LGBT Human Rights in 2009. This is besides the Plan for Confronting HIV/AIDS among the Lesbian, Gay, Bisexual, Transvestite and Transexual (LGBT) community, which was published in March 2008.

Among the challenges is the ideological dimension, which brings us to consider what Cruz (2002) shows, that the way we talk about and conduct prevention and intervention practices is far from neutral; these practices should take into account the historical and social context of the person who misuses drugs. Together with the historical context, there is the importance of associating the ethical dimension while recognizing individuals in their plurality; in other words, not allowing moral judgments and familiar notions of right and wrong to block activities and distance the user from a potential cooperative attitude.

Prevention and intervention with relation to drug abuse yield better results when they are not limited to policies with emphatic positions such as “saying no”, but instead are based on activities based on ethics which seek the autonomy and responsibility of the users, which value the individual, her productivity and creativity, as well as the variety of conceptions which exist in the reality where preventative actions are conducted (Bucher, 2007).

This positioning goes to the heart of harm reduction⁸ strategy, which presents a more inviting approach to the topic of drugs among transvestites through actions which seek to minimize the biological, psycho-social and economic risks and harm which are associated with the use and abuse of drugs (Mello and Andrade, 2001). With this base, the policy implies that the question of consumption is no longer central, though it still is part of a the process, a factor which facilitates contact with and later compliance by transvestite sex workers. For the transvestite population, the suggestion to stop using *a priori* does not seem to be effective (Pelúcio, 2007), mainly for the forms of sociability and the context which are permeated by drug use.

The question: “Is it possible to stop using drugs without leaving the streets?” asked by a transvestite at work one day brought about, among other things, the search for an integrated understanding of the issue. We are establishing this study as a first re-

flective movement; although we recognize the multiplicity of factors beyond this proposal, we hope it is a starting point for contextual and non-restrictive approaches to the transvestites’ ways of life.

Through the research encompassed in this study, we also took the opportunity to amplify our services in the area of drugs in our activities, relating public drug policy into the national and state contexts⁹, as well as identifying and mapping the relationship between transvestites and drug abuse in a personalized manner.

Methods

General Objective: To identify and quantify the use and abuse of drugs by transvestite sex workers who use the health services available in the city of Uberlândia.

Specific Objective: Collect information about the frequency of use and the substances most commonly used, as well as reflect about the connection between drug abuse and the context of life and work.

This study fits into the field of descriptive research projects which span not only the quantitative but the qualitative aspects surrounding the phenomenon under study. According to Silva and Menezes (2001), the objective of descriptive research is to describe the characteristics of a particular segment of the population or social phenomenon or even some institution. Furthermore, it seeks to relate aspects and variables of the limits of the study, generally assuming that the study will be conducted by collecting data, observation, participative observation and questionnaires.

Despite the fact that qualitative and quantitative perspectives are located in different epistemologies, in this study we attempt to establish limits, without discarding the interaction of the researcher with the identified data.

Initially, the study was based on the collection of data which were present in the files of transvestites who already frequented the researcher’s work loca-

8 The National Drug Policy (Brasil, 2005) established the promotion of harm-reducing strategies and actions aimed at public health and human rights, which should be conducted in an intra- and intersectorial manner to reduce the risks, adverse effects and harm associated with the use of alcohol and drugs for individuals, families and society.

9 National Drug Policy (Brasil, 2005) and National Alcohol Policy, 2007. Also the Ministry of Health Policy for Integral Attention for Users of Alcohol and Other Drugs (Brasil, 2004).

tion, respecting confidentiality and not identifying the patient, as well as guaranteeing that qualified service and care would not be linked to participation in studies. The ethical concepts were attempted in this complex manner due to the connection between research and assistance work, which are regulated in Resolution 196 for human studies (Brasil, 1996).

In this way, only the case records of those people who used the transvestite clinic services and signed the free and informed consent terms were used; this added up to 59 patient files. Under the terms of consent, we made every attempt to use participants' chosen names in the signature portion, as was done in the institution's patient files, guaranteeing respect for the patients' gender identities.

Data collection was conducted through the construction of a data collection instrument which included age, drug use, the types of drugs used and frequency of use. After careful reading of the available medical records and the completion of the collection instrument, the data was put into the Epi Info database¹⁰ for statistical data projection.

Considering that the theoretical perspective of the researchers does not include neutrality in constructing of the body of research, nor in the process of analysis, another instrument used is the field notebook which served as a place to record important reflections in analyzing the drug-transvestite connection. The field notebook, or field diary, according to Weber (2009) is associated with participant observation, in which the researcher-observer lives together with the society under study. It is a technique which is based on the direct observation of the culture and behavior of a social group, begun by Malinowski and chiefly continued in anthropological studies of ethnography, in the social sciences, history and psychology.

Keeping in mind that the researchers have spent time together with the group participants since 2006, all the history which has been shared will travel through the reading and into the construction of the research corpus. The field notebook will serve as a support for the reflections which were constructed based on the data which represent the main focus of the study. From the field notebook, the

language used by the transvestites to refer to drugs and the connections resulting from this interaction can be presented.

Results and Discussion

Regarding Use and Abuse

Before beginning the report on the frequency of drug use according to study of the patient charts, it was fundamental to make the data viable by contextualizing the targeted group. As a result, before adding up the use of drugs and alcohol and the most common types of drugs, the first moment of this study was dedicated to identifying the characteristics of this population through some demographic data to determine who was being represented.

To this end, data regarding age, race, origins, hormone use, etc. were quantified in order to situate the transvestites.

With regards to age, according to the data collected, the average age of the transvestites was 24.9 years, as can be seen in the following table:

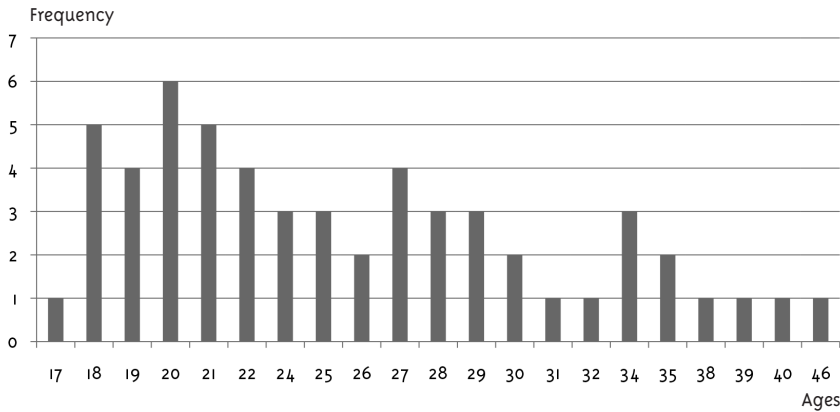
With regards to civil status, 94% identified themselves as single, 4% married and 2% dating. As for race, 47% are white, 40% mixed race and 12,5% Black. Regarding housing, nearly 75% reside in houses with other transvestites, 15% live with family, 4% live with a partner and 2% live alone.

Forty-nine percent of the transvestites in question come from the city of Uberlandia; the rest come from various areas of Brazil, with 10% coming from the north, 8% from the northeast region, 15% from the state of São Paulo, 6% from the state of Goiás and 10% from cities near Uberlandia. The fact that 52% of transvestites come from other regions speaks to the literature that indicates a striking movement of transvestite sex workers in Brazil as well as in other countries such as Italy.

The predominant amount of schooling is the first eight years of primary education, which supports the school evasion identified in the literature and the near-absence of the topic in the segment's discursive repertory (Rocha, 2011). This characteristic could be associated with the vivid discrimination in the educational setting and the silence regarding

¹⁰ A database in the public domain created by the Centers for Disease Control and Prevention. Available at: <http://www.cdc.gov/>

Graph 1 - Target population age

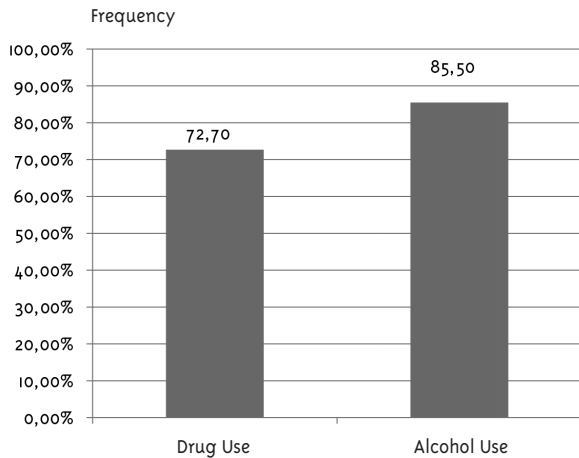


themes involving gender diversity in school and in teaching staff (Louro, 1997).

In general terms, 98% of the transvestites reported having unprotected sex, and 92% use or have used hormones to modify their appearance.

After establishing the context of the population, the study moved to questions specific to drug use. Below we see the frequency of drug and alcohol use (in general terms) among transvestites who related the information in their files, according to the yes/no proposition. It is important to stress that the frequency was calculated according to the presence of a response. Accordingly, although 59 records were analyzed, the values were calculated based on how many responses were present, which in some cases could produce total numbers which are less than 59.

Graph 2 - Frequency of alcohol and drug use among transvestites

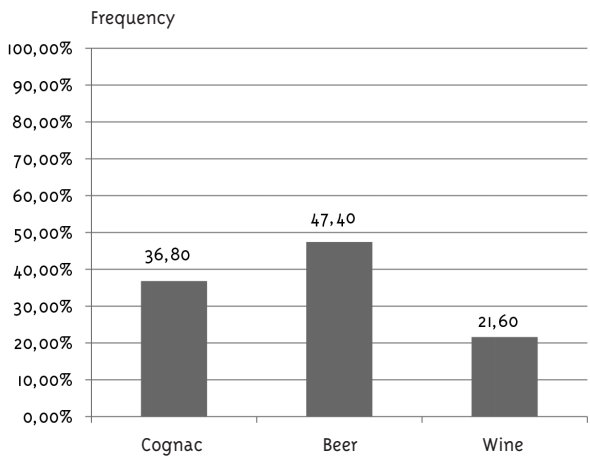


Alcohol Use

Of the 85% who used alcohol, 45% reported daily use, generally mixing drinks such as cognac, vermouth and wine. Nearly 20% reported heavy weekend use, adding up to nearly 30 cans of beer, 3 to 4 shots of cognac and bottles of wine.

The following graph shows the relationship between use and types of beverages reported by the transvestites:

Graph 3 - Frequency of alcohol use according to reported beverage types



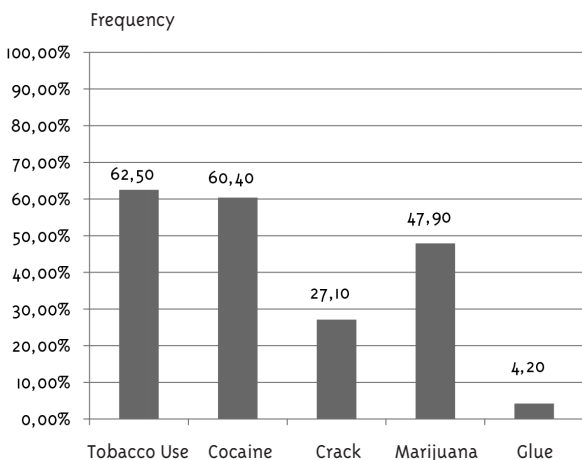
According to the results shown, we see that the use of alcohol, despite its predominance, becomes intense and can be considered to be abusive, but not one of the transvestites indicated that it should be considered as relating to the term “dependence”.

Beer and cognac were the most commonly utilized beverages. Another common drink among transvestites is what is called “Maria-Mole”, a mix of cognac and vermouth. However, this term did not appear in any of the records, and tends to be used only in close daily contact with transvestites, or expressed among themselves.

Drug Use

In terms of drug use, the survey was carried out using the same yes/no response criteria. Considering the large number of participants who use legal or illegal drugs, the frequency of the types of drugs used and reported by the transvestites is shown in the following graph:

Graph 4 - Frequency of drug use according to stated types



It is interesting to note that around 50% of the tobacco users reported more than 10 years of use; in other words, considering that the average age of the population was 24.9 years, use began during adolescence.

As for the frequency of use, it is important to point out that 36% of the transvestites who use drugs reported using for a year with no pauses.

Besides the types of drugs shown in the graph, there was only one report of use of *datura* tea and propellants. Other substances such as heroin or LSD were not reported.

The frequencies show that drug use is associated with alcohol consumption. This demands strategies for orienting this population about the consequences of, say, using crack together with alcohol, a behavior which might lead to acute dehydration.

Looking at the systematized data, it is also possible to perceive that drug use among transvestites is common and routine. However, it is important to consider how this use is intelligible for health professionals as well as for the transvestites themselves.

From the case file information, chemical dependency is not a presenting complaint that the transvestites seek treatment for. The subject of drugs only comes up when the professionals ask about use.

At this moment, a significant portion of the transvestites who report using drugs question whether they are dependent or users. One explicitly asked: “I want to know then, if I’m addicted!”. When the question is analyzed and the difference between a user and a person in a state of dependency is clearly explained, the transvestites tend to situate themselves in the user category, arguing that one day they will leave the “battlefield”, the work spaces associated with prostitution where they are vulnerable, and will be able to stop using drugs.

When, however, we analyze the data and see the high rate of use mainly associated with alcohol, cocaine, marijuana and crack together with the time of use, we can make a significant connection to drugs, despite the fact that the manner of usage is not recognized or described as dependency.

According to the ICD-10, the criteria for substance dependence (for alcohol and other drugs) are three or more of the following items being described or manifested during the previous year: 1. A strong desire or sense of compulsion to take the substance; 2. Difficulties in controlling substance-taking behavior in terms of its onset, termination, or levels of use; 3. A physiological withdrawal state when substance use has ceased or been reduced, as evidenced by: the characteristic withdrawal syndrome for the substance; or use of the same

(or a closely related) substance with the intention of relieving or avoiding withdrawal symptoms; 4. Evidence of tolerance, such that increased doses of the psychoactive substance are required in order to achieve effects originally produced by lower doses; 5. Progressive neglect of alternative pleasures or interests because of psychoactive substance use, increased amount of time necessary to obtain or take the substance or to recover from its effects ; 6. Persisting with substance use despite clear evidence of overtly harmful consequences, such as harm to the liver through excessive drinking, depressive mood states consequent to heavy substance use, or substance-related impairment of cognitive functioning (OMS, 2009).

Considering these classification criteria, we can make an association between the transvestites who related drug use and items one through six in a more explicit way, for both drug use as well as alcohol consumption. Item two appeared in a more subtle manner.

These are readings that both approach and move away. For the transvestites, heavy use is recognized, but this does not necessarily constitute dependency. On the other hand, if we consider the criteria and the psychiatric literature, dependence can be recognized. This observation reaffirms the importance of subjective and contextual criteria to plan care actions related to drug abuse.

In the case files we only encountered one request for chemical dependency treatment, which was not carried out in its entirety due to the patient's departure from the city.

Approaches Regarding Methods of Discussing Drugs

One relevant aspect to note in the case files and in the reflective annotations in this project is the way transvestites talk about drugs. Chart 1 shows the nomenclature used by this population for drugs, even though some of these were not referred to in the case files:

Chart 1 - Nomenclature

Usual name	Name used by the transvestites
<i>Crack</i>	Lary gary fary
Cocaine	Cote / padê
Marijuana	Taba
Cognac+vermouth	Maria-Mole
Addicted	Colocada
Any alcoholic beverage	Otim

These denominations echo the peculiar and individual ways that transvestites converse without others discerning the subject of these conversations. They also use a language called “bajubá” which mixes Portuguese words with words descended from Yoruba (Pelúcio, 2007).

Drugs are placed into this universe of peculiar names and descriptions, creating possibilities of interactions with the transvestites, and also between them and their clients. A job itself might come out of a client’s request for someone to keep him company while he “uses”. At the same, “taba” is a companion with the afternoon cup of coffee. Beyond the pejorative view of drugs, among transvestites they occupy social functions, by establishing contacts and forms of existence in the group; these ideas could be more deeply explored in qualitative studies on this topic.

Final Considerations

Through this first more systematized study, we went to the heart of what was indicated by the literature (Pelúcio, 2007; Benedetti, 2005): that there is significant drug use associated with other situations of vulnerability among transvestites. There is an association between the use of alcohol and other drugs and, considering the time of use, we recognize a process which could come to configure a dependency if we associate it with medical discourse. But this criteria is not solid, as the transvestites express their experience with drugs as a relationship of use.

This had an important effect on the conclusion, a sign that strategies should be constructed which take into account the view that this population takes of their own use despite what health professionals may consider.

The main issue is use which is explicitly justified by the context of vulnerability; usage is established, but if the context were to change, it would be possible to dissociate oneself from drugs.

Occupying the frontier of sex and being classified as a subversive gender by expressing something different to what a society marked by compulsory heterosexuality prescribes, the transvestites also occupy the frontier where drugs are concerned: user-dependents.

In this sense, it is a challenge to establish action strategies which are connected to decreasing vulnerability without getting involved in the transvestites' way of life. As stated above, the significance of substance users defines the daily life of transvestite sex workers and constitutes forms of sociability.

Nevertheless, it is fundamental that an integrated policy be developed to increase the repertoires of these people, in terms of education, health, and work which have historically been restricted. The use of drugs in the setting of prostitution should be understood as a catalyst for the notorious vulnerability faced by transvestites who are sex workers.

But to connect drugs-transvestites-prostitution would also support the significant prejudice that this group already faces. The repercussions of data collection will lead to exposing the work context as well as the precarious nature of relationships and the networks which protect the prostitutes; this requires consideration of how to minimize damage such as, for example, encouraging discussions with the aim of regulating professional practice as already recognized in the Brazilian Code of Occupations.

The results also go to the heart of the National and State Drug Policy, showing the wide range of actions which need to be established for prevention and attention to risk and protection factors. Among the transvestites, drug use is a facet of the many results of a vulnerable situation due to their gender choice. In the shared negotiation of the many feelings that permeate this field, we can see the possibility of building other pathways towards addressing the topic of drug use by transvestites and the other professionals who occupy this space.

Identifying the influence and the breadth of drug use among transvestites directly supported the work carried out by this program, in terms of

prevention and treatment to reduce harm. This harm has already begun to be identified, and has encouraged reflection when it was communicated to the transvestites.

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