

## CODING SHEET FOR QUANTITATIVE STUDIES

### Explanation

Tables represent supplementary material for the file Sex work globally, 2022. Table 1 explains the coding of reviewed quantitative studies. Table 2 shows the identified stigma-related occupational risks in sex work and their grouping in main domains.

### Reference:

Markelj, L., Šori, I., Bajt, V., Bolko, B., Hrženjak M. in Učakar, T. (2023). **Sex work globally, 2022: A systematic review of the international literature on the impact of stigma on occupational risks** [Data file]. Ljubljana: University of Ljubljana, Slovenian Social Science Data Archives. ADP - IDNo: SDSLO22. [https://doi.org/10.17898/ADP\\_SDSLO22\\_V1](https://doi.org/10.17898/ADP_SDSLO22_V1)

Table 1: Coding sheet for quantitative studies.

| CATEGORY                   | CODE                  | EXPLANATION   |
|----------------------------|-----------------------|---|
| <b>ADMINISTRATIVE DATA</b> |                       |   |
| Nr.                        | [Nr.]                 | Entrance number according to the alphabetical order of the author.  |
| Author, year               | [Surname, year]       | Surname of the first author; et all if several authors. The year of publishing of the study.  |
| Country                    | [Name of the country] | The name of the country where the study was conducted.  |
| Legislation model          | [Name of the model]   | Legislation model in place in country when the study was conducted:<br>- Full criminalization (FC) means criminalizing all aspects of sex work, including the sale and purchase of sexual services and all related activities.<br>- The criminalization of clients (CP) model criminalizes the purchase of sex but omits punitive measures against the sellers.<br>- Partial criminalization (PC) model, criminalizes only some aspects of sex work, e.g. soliciting or advertising sexual services, collective work, or third party involvement.<br>- Regulatory model (RM) regulates or permits some, but not necessarily all, forms or settings of sex work.<br>- Full decriminalization (FD) removes all punitive measures against selling, buying, or organizing commercial sex. (Phoenix, 2009) |

| <b>METHODOLOGY</b>    |  |  |
|-----------------------|--|--|
| Methods & Sample      | [Type of study/methods/nr. and gender] | Type of the study (qualitative, quantitative, or mixed), research methods used, number and gender of sex workers included in the sample of the study. FSW – female sex workers, MSW – male sex workers, TSW – trans sex workers.   |
| Stigma measurement    | [Analysis technique(s)]                | Analysis techniques used in the study to measure the impact of stigma.   |
| Stigma type           | [Stigma type]                          | Stigma type(s) measured in the study:<br>- Anticipated stigma is the expectation or fear of discriminatory attitudes and behaviours from society (e.g. family, community, medical professionals) if sex work is disclosed; this often leads to avoidance of disclosure (Jain & Nyblade, 2012; Lekas, Siegel & Leider, 2011).<br>- Experienced or enacted stigma refers to the experiences of discrimination that result from the stigmatizing attribution of sex work (Lekas et al., 2011).<br>- Internalized stigma refers to a form of self-stigma, wherein SWs accept or internalize negative judgements, stereotypes, or attitudes of others regarding sex work, e.g. by feeling guilt or shame (Jain & Nyblade, 2012).<br>- Layered stigma refers to the experience of multiple stigmas (e.g. due to sex work and drug use, HIV, or homosexuality) (Reidpath & Chan, 2005).<br>- Perceived stigma means SWs' awareness of their devalued social status as a result of engaging in sex work (Wu et al., 2015).<br>- Secondary stigma is the stigma experienced by people associated with the stigmatized persons, e.g. SWs' family members or clients (Smit et al., 2012). |
| <b>RESULTS</b>        |  |  |
| Results (numeric)     | [Data from results]                    | Summary of key data from results.  |
| Results (description) | [Description of results]               | Short description of key results.  |
| Occupational Domain   | [Occupational Domain]                  | Occupational domain affected by stigma: access to services, private life, violence, health, career.  |
| Occupational risk(s)  | [Occupational risk]                    | Occupational risk affected by stigma.  |
| Main domain           | [Main domain]                          | The main domain in which occupational risk is placed. See the table below with occupational risks and main domains.  |

Table 2: Grouping of stigma-associated occupational risks in main domains.

| <b>OCCUPATIONAL RISKS</b>  | <b>MAIN DOMAIN</b> |
|--|--------------------|
| <ul style="list-style-type: none"> <li>• leading double lives</li> </ul>   | double life        |
| <ul style="list-style-type: none"> <li>• additional costs for treatment</li> <li>• children of sex workers receive poor treatment</li> </ul> | discrimination     |

|   |  |
|---|--|
| <ul style="list-style-type: none"> <li>denied or delayed services</li> <li>denied or limited job opportunities</li> <li>difficulties with obtaining secure housing</li> <li>discriminatory treatment (services)</li> </ul>  |  |
| <ul style="list-style-type: none"> <li>difficulties with maintaining relationships</li> <li>feelings of guilt (towards partner)</li> <li>inability to form friendships outside the industry</li> <li>negative consequences of disclosure (private lives)</li> <li>negative impact on friendships</li> <li>negative impact on relationships (in the family)</li> <li>social isolation</li> <li>termination of relationships</li> </ul> | negative effect on relationships             |
| <ul style="list-style-type: none"> <li>inadequate services</li> <li>prejudiced or biased services</li> </ul>  | prejudiced or inadequate treatment           |
| <ul style="list-style-type: none"> <li>disclosure by professionals</li> <li>increased vulnerability to violence</li> <li>source of intimate partner violence</li> <li>harassment, surveillance or eviction (from neighbourhoods)</li> <li>targeted raids</li> <li>threat of disclosure by intimate partner</li> <li>violence and harassment (by the police or clients)</li> </ul>   | violence and harassment                      |
| <ul style="list-style-type: none"> <li>stigma as a barrier to utilization of services</li> </ul>  | barriers to utilization of services          |
| <ul style="list-style-type: none"> <li>mental distress</li> <li>psychological vulnerability</li> </ul>  | mental distress                              |
| <ul style="list-style-type: none"> <li>(drugs and alcohol) as form of self-medication</li> </ul>  | self-medication with drugs and alcohol       |
| <ul style="list-style-type: none"> <li>fear for children custody</li> <li>role conflict (motherhood)</li> </ul>   | role conflict                                |
| <ul style="list-style-type: none"> <li>endorsement of client's behaviour</li> <li>normalization of client violence</li> <li>normalization of discrimination</li> <li>stigma as a barrier to leaving unhealthy relationship</li> </ul>   | normalization of discrimination and violence |
| <ul style="list-style-type: none"> <li>lower job aspirations</li> <li>negative impact on sense of self/self-esteem</li> </ul>   | negative impact on sense of self/self-esteem |
| <ul style="list-style-type: none"> <li>increased vulnerability for STI</li> <li>threat of HIV increases stigma</li> </ul>   | STIs   |
| <ul style="list-style-type: none"> <li>stigmatization of children</li> <li>stigmatization of partners</li> </ul>  | stigmatization of close persons              |
| <ul style="list-style-type: none"> <li>intra-industry hierarchies</li> </ul>  | intra-industry stigmatization                |
| <ul style="list-style-type: none"> <li>negative impact on job satisfaction</li> </ul>   | lower job satisfaction                       |