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Research Article

Sociodemographic aspects of transgender men and women in a health service in the city of São Paulo

Aspectos sociodemográficos de homens e mulheres transgêneros em um serviço de saúde no município de São Paulo

Aspectos sociodemográficos de hombres y mujeres transgénero en un servicio de salud del municipio de São Paulo

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Abstract

Introduction: The transgender population in Brazil faces several barriers to accessing education, employment, and health services, among others. In addition, they suffer from social stigmas that lead to prejudice and social harm, further increasing the obstacles and difficulties they face. **Objective:** To compare sociodemographic aspects of transgender men and women in a specialized health service in the city of São Paulo. **Methods:** A retrospective observational study was conducted in a specialized health service in the city of São Paulo (São Paulo, Brazil) with 78 individuals. Thirteen sociodemographic variables were investigated, such as age, skin color, level of education, housing situation, work status, sexual orientation, religion, marital status, age at sexarche, average monthly income, supplementary health insurance, number of sexual partners in the last 12 months, and whether they had ever engaged in sex work. The variables were compared between transgender men and women. The study has some limitations as it is a regional study conducted with a small sample in a single health service, and, therefore, the analysis of this group cannot be generalized to the entire Brazilian transgender population. **Results:** Significant differences were found between the groups in several variables. The level of education was higher among trans women. Housing situation was more favorable among trans men, with a higher proportion owning their own properties. Marital status showed a higher proportion of stable relationships among trans men. Sex work was more prevalent among trans women. The number of partners in the last 12 months differed between the groups, with a higher proportion of trans women having none or more than 15 partners. Access to supplementary health insurance was more common among trans women. **Conclusions:** The results demonstrate that trans women had higher levels of education and greater access to supplementary health insurance than trans men. However, they still experience more marginalization than trans men, particularly regarding sexual health indicators and housing stability. Trans women showed higher rates of sex work (21.7% *vs*. 6.3%) and greater extremes in sexual partner numbers, while trans men demonstrated more favorable housing situations (30.2% property ownership *vs*. 8.0%) and a higher proportion of stable relationships (26.5% married/cohabiting *vs*. 16.0%).

Keywords: Transgender Persons; Sociodemographic Factors; Sexual Behavior; Gender Identity.

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Resumo

Introdução: A população transgênero no Brasil enfrenta diversas barreiras no acesso à educação, ao emprego e aos serviços de saúde, entre outros. Além disso, sofre estigmas sociais que levam ao preconceito e a prejuízos sociais, ampliando ainda mais os obstáculos e dificuldades enfrentados. **Objetivo:** Comparar aspectos sociodemográficos de homens e mulheres transgêneros em um serviço de saúde especializado no município de São Paulo. **Métodos:** Foi conduzido um estudo observacional retrospectivo em um serviço de saúde especializado no município de São Paulo (São Paulo, Brasil), com 78 indivíduos. Foram investigadas treze variáveis sociodemográficas, tais como idade, cor de pele, nível de escolaridade, situação de moradia, situação de trabalho, orientação sexual, religião, estado civil, idade na sexarca, renda mensal média, plano de saúde suplementar, número de parceiros sexuais nos últimos 12 meses e se já realizou trabalho sexual. As variáveis foram comparadas entre homens e mulheres transgêneros. O estudo apresenta como limitações o fato de ser regional, conduzido com amostra pequena em um único serviço de saúde especializado, não sendo, portanto, generalizável para toda a população transgênero brasileira. **Resultados:** Diferenças significativas foram encontradas entre os grupos em diversas variáveis. O nível de escolaridade foi maior entre as mulheres trans. A situação de moradia foi mais favorável entre os homens trans, com maior proporção sendo proprietários de imóveis. O estado civil apresentou maior proporção de relacionamentos estáveis entre os homens trans. O trabalho sexual foi mais prevalente entre as mulheres trans. O número de parceiros nos últimos 12 meses diferiu entre os grupos, com maior proporção de mulheres trans sem parceiros ou com mais de 15 parceiros. O acesso a plano de saúde suplementar foi mais comum entre as mulheres trans. **Conclusões:** Os resultados demonstram que as mulheres trans apresentaram maiores níveis de escolaridade e maior acesso a plano de saúde suplementar do que os homens trans. No entanto, ainda vivenciam maior marginalização, particularmente em relação a indicadores de saúde sexual e estabilidade habitacional. As mulheres trans apresentaram maiores taxas de trabalho sexual (21,7% vs. 6,3%) e distribuição bimodal no número de parceiros sexuais, enquanto os homens trans demonstraram situação de moradia mais favorável (30,2% de proprietários vs. 8,9%) e maior proporção de relacionamentos estáveis (26,5% casados/em união estável vs. 16%).

Palavras-chave: Pessoas Transgênero; Fatores Sociodemográficos; Comportamento Sexual; Identidade de Gênero.

Resumen

Introducción: La población transgénero en Brasil enfrenta diversas barreras para acceder a la educación, al empleo y a los servicios de salud, entre otros. Además, experimenta estigmatización social que conduce a la discriminación y a desventajas sociales, ampliando aún más los obstáculos y las dificultades que enfrenta. **Objetivo:** Comparar los aspectos sociodemográficos de hombres y mujeres transgénero atendidos en un servicio de salud especializado del municipio de São Paulo. **Métodos:** Se realizó un estudio observacional retrospectivo en un servicio de salud especializado del municipio de São Paulo (São Paulo, Brasil), con 78 participantes. Se investigaron trece variables sociodemográficas, entre ellas edad, color de piel, nivel educativo, situación de vivienda, situación laboral, orientación sexual, religión, estado civil, edad de inicio de las relaciones sexuales, ingreso mensual promedio, cobertura de seguro privado de salud, número de parejas sexuales en los últimos 12 meses y antecedente de trabajo sexual. Las variables se compararon entre hombres y mujeres transgénero. Entre las limitaciones del estudio se encuentran su carácter regional, el pequeño tamaño de la muestra y el hecho de haberse realizado en un único servicio de salud especializado, por lo que los resultados no pueden generalizarse a toda la población transgénero brasileña. **Resultados:** Se encontraron diferencias significativas entre los grupos en diversas variables. El nivel educativo fue mayor entre las mujeres trans. La situación de vivienda fue más favorable entre los hombres trans, con una mayor proporción de propietarios de vivienda. El estado civil mostró una mayor proporción de relaciones estables entre los hombres trans. El trabajo sexual fue más prevalente entre las mujeres trans. El número de parejas sexuales en los últimos 12 meses difirió entre los grupos, observándose una mayor proporción de mujeres trans sin parejas o con más de 15 parejas. El acceso a un seguro privado de salud fue más frecuente entre las mujeres trans. **Conclusiones:** Los resultados muestran que las mujeres trans presentaron mayores niveles educativos y un mayor acceso al seguro privado de salud que los hombres trans. Sin embargo, continúan experimentando una mayor marginación, particularmente con relación a los indicadores de salud sexual y estabilidad habitacional. Las mujeres trans presentaron mayores tasas de trabajo sexual (21,7% frente a 6,3%) y una distribución bimodal en el número de parejas sexuales, mientras que los hombres trans mostraron una situación de vivienda más favorable (30,2% propietarios frente a 8,9%) y una mayor proporción de relaciones estables (26,5% casados o en unión estable frente a 16%).

Palabras clave: Personas Transgénero; Factores Sociodemográficos; Conducta Sexual; Identidad de Género.

INTRODUCTION

Many terms are used to refer to people whose gender differs from the one they were assigned at birth. There are political and academic disputes over the defense and justification of the use of different nomenclatures.[1] The most recent term coined to classify the condition experienced by transgender people was “gender incongruence”, as published in the eleventh edition of the International Classification of Diseases (ICD-11) at the beginning of 2023. Currently, gender incongruence is a condition linked to

the individual's sexual health and is no longer considered a pathological condition.[2] Sociodemographic aspects refer to a wide range of characteristics and information related to the population of a given country or region. Among the sociodemographic aspects, there are those considered to be social determinants of health, which are the non-medical factors that influence health outcomes.[3]

Regarding the sociodemographic aspects evaluated, a literature review identified some relevant data. In 2021, 100 transgender people were evaluated in a Brazilian study and, regarding skin color, 62.0% considered themselves white and 30.0% black.[4] Defreyne et al.[5] observed an estimated proportion of 21.5% heterosexual, 29.2% bisexual, and 20.0% homosexual transgender people. A survey carried out by the National Association of Transvestites and Transsexuals[6] in 2021 obtained information through reports, news, and its own research, showing that 90.0% of the trans population in Brazil resorts or has resorted to prostitution as a primary form of remuneration and work. According to Motmans et al.,[7] 63.0% of the trans population evaluated had a job, with a similar proportion between trans men and trans women. Ferreira Jr. et al.,[8] reported that 10 out of 56 trans women evaluated were homeless. Silva et al.[4] evaluated 113 transgender people in the city of Porto Alegre (Rio Grande do Sul, Brazil) and observed that 71.7% had never been married and 13.7% were divorced. In addition, a study published by São Paulo State University assessed the marital status of transgender people, revealing that the majority of the survey participants were not in a relationship at the time (64.7%).[9]

No data were found in the literature on religion, age at the onset of sexual activity, supplementary health insurance, or average monthly income of trans people. To date, no published studies have been found comparing sociodemographic data series between transgender men and women. This study aimed to compare sociodemographic aspects of transgender men and women in a specialized health service in the city of São Paulo, elucidating relevant differences that may inform healthcare policies and interventions tailored to each group's specific needs.

METHODS

This is a retrospective cross-sectional study, based on a review of data from transgender men and women who receive or have received hormone therapy for gender reassignment, at the Barra Funda School Health Center, a partner unit of the Primary Care Department of the Santa Casa de São Paulo School of Medical Sciences, from 2020 to 2023. The study was approved by the Human Research Ethics Committee of the Santa Casa de São Paulo School of Medical Sciences, in accordance with Item IX of Resolution/CNS number 196/96, under CAAE 69239723.2.0000.5479 and Opinion No. 6,060.670. All patients were invited to take part in the study by e-mail, using addresses obtained from outpatient records in a database of the specialized center. The invitations were sent individually or with hidden addresses, so that those invited could not be identified. A total of 24 responses were obtained, with all the respondents agreeing to participate in the research.

A survey of medical records was carried out, and the following sociodemographic data routinely collected in the outpatient clinic were obtained: age, skin color, religious beliefs, level of education, sexual orientation (the enduring pattern of emotional, romantic and/or sexual attraction that a person experiences towards other people),[10] age of sexarche (first sexual intercourse), sexual work, work status, supplementary health insurance (policies or plans that provide additional coverage beyond what is offered by government-sponsored health insurance),[11] housing situation, average monthly income, number of sexual partners in the last 12 months, and marital status. Data from individuals who met the following

criteria were included: transgender man or woman, aged 18 years or over, undergoing gender-affirming hormone therapy offered by the public health system. Individuals with more than 20% of missing variables in their medical records were excluded.

The study population comprised 120 individuals, based on the records of patients attending the trans clinic at the Barra Funda School Health Center. A total of 42 participants were excluded from the study. The final sample consisted of 78 individuals.

Based on the data obtained from medical records, mean and standard deviation values were calculated for numerical variables, and frequencies and percentages for categorical variables. For statistical analysis, tests were used to compare means and standard deviations, such as the t-test or analysis of variance (ANOVA), depending on the number of groups assessed. In addition, Fisher's exact test and the chi-square (x^2) test were used for comparisons of percentages. Values of $p<0.05$ were considered statistically significant.

The sample was characterized as a whole; i.e., for quantitative variables, summary measures (means, standard deviations, medians) were obtained, and for qualitative variables, absolute (n) and relative (%) frequencies were used. Regarding bivariate analysis, proportions were compared by normal approximation, with a significance level of $p<0.05$, and 95% confidence intervals were constructed for differences in proportions. The Statistical Package for the Social Sciences (SPSS), version 13.0 for Windows, was used to create the database and perform the statistical analysis.

The limitations of the study are related to its regional scope, small sample, and single-center setting. Additionally, since participants are individuals receiving healthcare at a specialized transgender health service, the findings may not be generalizable to the entire Brazilian transgender population, particularly regarding variables such as sexuality, educational level, and housing situation. The population accessing specialized healthcare may differ from the general transgender population in terms of socioeconomic status, health-seeking behavior, and social support networks.

RESULTS

At the end of the study, 78 participants were included, between 2021 and 2023. No statistically significant differences were observed in the mean values for age (p=0.549), sexarche (p=0.298), and average monthly income when comparing trans men and trans women. Furthermore, no associations were found between gender identity and religion, work status, skin color, and sexual orientation.

An association between gender identity and housing situation (x^2, p=0.014) was identified. Regarding trans women, the following were observed:

- rented property 48.0%;
- owned property 8.0%;
- lent property 40.0%; and
- other housing situation 4.0%.

Regarding trans men, the following were found:

- rented property: 40.0%;
- owned property 30.2%;
- lent property 11.3%; and
- other housing situation 5.7%.

An association between gender and level of education was observed (χ^2, p=0.039), with trans women tending to have a higher level of education than trans men (Table 1).

Table 1. Comparison of trans women and trans men in terms of housing situation. Comprehensive Trans Health Outpatient Clinic, Barra Funda School Health Center (Santa Casa de São Paulo School of Medical Sciences), 2023.

Housing situation	Gender				Total	
	Trans women		Trans men			
	(n)	(%)	(n)	(%)	(n)	(%)
Rented property	12	48.0	28	52.8	40	51.3
Owned property	2	8.0	16	30.2	18	23.1
Lent property, free of charge	10	40.0	6	11.3	16	20.5
Other	1	4.0	3	5.7	4	5.1
Total	25	100.0	53	100.0	78	100.0
(Test x^2, p=0.014)						

There was an association between gender and marital status (x^2, p=0.014): around 76.0% of trans women were single, 16.0% were married or cohabiting with a partner, and only 4.0% were dating. Regarding transgender men, 44.9% were single, 28.6% were dating, and 26.5% were married or cohabiting with a partner (Table 2).

Table 2. Comparison of trans women and trans men in terms of level of education and marital status. Comprehensive Trans Health Outpatient Clinic, Barra Funda School Health Center (Santa Casa de São Paulo School of Medical Sciences), 2023.

Level of education	Gender				Total	
	Trans women		Trans men			
	(n)	(%)	(n)	(%)	(n)	(%)
Incomplete primary education	1	4.0	0	0.0	1	1.4
Complete primary education	0	0.0	1	2.1	1	1.4
Incomplete high school	3	12.0	3	6.4	6	8.3
Complete high school	8	32.0	26	55.3	34	47.2
Incomplete higher education	3	12.0	12	25.5	15	20.8
Complete higher education	7	28.0	4	8.5	11	15.3
Postgraduate	3	12.0	1	2.1	4	5.6
Total	25	100.0	47	100.0	72	100.0
(Test x^2, p=0.039)						
Marital status (n=74)	**Trans women**		**Trans men**		**Total**	
	(n)	**(%)**	**(n)**	**(%)**	**(n)**	**(%)**
Married or cohabiting	4	16.0	13	26.5	17	23.0
Dating	1	4.0	14	28.6	15	20.3
Single	19	76.0	22	44.9	41	55.4
Separated or divorced	1	4.0	0	0.0	1	1.3
Total	25	100.0	49	100.0	74	100.0
(Test x^2, p=0.014)						

An association was observed between gender and the number of sexual partners in the last 12 months (x^2, p=0.043). Although the majority of trans women (61.1%) and men (67.4%) had between one and five sexual partners in the last 12 months, higher percentages of trans women reported having either no sexual partners (16.7%) or more than 15 partners (11.1%) in the last 12 months (Table 3). An association was also found between gender and sex work (x^2, p=0.049), as trans women (21.7%) reported engaging in sex work more often than trans men did (6.3%). In addition, an association was observed between gender and having supplementary health insurance (x^2, p=0.028), with a higher proportion of trans women (36.0%) having supplementary health insurance than trans men (14.0%) (Table 3).

Table 3. Comparison between trans women and trans men regarding the number of sexual partners in the last 12 months, sex work, and supplementary health insurance. Comprehensive Trans Health Outpatient Clinic, Barra Funda School Health Center (Santa Casa de São Paulo School of Medical Sciences), 2023.

Number of sexual partners (last 12 months)	Gender				Total	
	Trans women		Trans men			
	(n)	(%)	(n)	(%)	(n)	(%)
None	3	16.7	0	0.0	3	4.7
1 to 5	11	61.1	31	67.4	42	65.6
6 to 10	1	5.6	6	13.0	7	10.9
11 to 15	0	0.0	3	6.5	3	4.7
More than 15	2	11.1	1	2.2	3	4.7
Not sure	1	5.6	5	10.9	6	9.4
Total	18	100.0	46	100.0	64	100.0
(Test x^2, p=0.043)						
Sex work (n=72)	**Trans women**		**Trans men**		**Total**	
	(n)	(%)	(n)	(%)	(n)	(%)
No	18	78.3	45	93.8	63	88.7
Yes	5	21.7	3	6.3	8	11.3
Total	23	100.0	48	100.0	71	100.0
(Test x^2, p=0.049)						
Supplementary health insurance (n=75)	**Trans women**		**Trans men**		**Total**	
	(n)	(%)	(n)	(%)	(n)	(%)
Yes	9	36.0	7	14.0	16	21.3
No	16	64.0	43	86.0	59	78.7%
Total	25	100.0	50	100.0	75	100.0
(Test x^2, p=0.028)						

DISCUSSION

The results showed that there were no statistically significant differences between trans men and trans women in terms of average age, religion, work status, skin color, sexual orientation, age at sexarche, and average monthly income. This suggests that, from a statistical point of view, these variables are not associated with gender identity.

There was an association between gender and level of education, with trans women tending to have a higher level of education than trans men, especially among those with complete higher education. Such

results may therefore reflect an even greater effort on the part of trans women to occupy places in society through their studies, in order to overcome the process of marginalization and stigmatization to which they are often subjected.

The marginalization of the transgender population can lead individuals to resort to forms of remuneration and sources of income that expose them to serious vulnerability, such as sex work. In general, this type of activity should not be criminalized, but it is necessary to understand that it cannot be the only work option for any population.[12] The data indicated a higher proportion of transgender women who had performed sex work. Although the majority of trans women and men had between one and five sexual partners in the last 12 months, higher proportions of trans women reported not having any sexual partners or more than 15 partners in the last 12 months. The differences observed may reflect social pressures, stigmatization, and cultural norms affecting the subjects' experiences of their identities.[13] These factors can influence both their willingness to seek partners and the ways in which they have sexual relations.

The data revealed that trans men are more likely to own a home than trans women. This difference may be associated with social norms and how they influence economic and housing opportunities for different genders.[1] An association between gender and marital status was observed. The figures indicate that a significant proportion of trans men were involved in stable affective relationships, which may reflect a greater social acceptance of their gender identities or possible differences in their relationship-seeking patterns compared to trans women.

In terms of access to supplementary healthcare, more trans women (36.0%) reported having supplementary health insurance than trans men (14.0%). It can be inferred that there is a greater tendency for transmasculine individuals to seek out the public health system because few trans men bear the cost of testosterone formulations (testosterone undecanoate) outside the Brazilian government healthcare system, due to their high price and regulations that make them difficult to purchase.[1] Conversely, estradiol and progesterone tablets are easily accessible in pharmacies.

According to a survey conducted by the United Nations, 85.0% of the global population demonstrated some form of prejudice against women.[14] This prejudice may also be reflected in the transgender population, with transgender women in turn experiencing greater exclusion and marginalization in important sectors of society.

The limitations of the study are its regional scope, small sample size, and being conducted in a single health service, which limits the generalizability of the findings to the entire Brazilian transgender population.

CONCLUSION

When comparing sociodemographic aspects according to gender identity (trans men *versus* trans women), some variables showed significant differences. The level of education was higher among trans women. The housing situation was more favorable among trans men, with a higher proportion owning their own properties. Marital status showed a higher proportion of stable relationships among trans men. Sex work was more prevalent among trans women. The number of partners in the last 12 months differed between the groups, with a higher number of trans women having none or more than 15 partners. Additionally, access to supplementary health insurance was more common among trans women. No differences were found between genders in the following variables: age, average monthly income, employment status, religion, skin color, and sexual orientation.

The study findings demonstrate sociodemographic disparities between transgender men and women receiving care at a specialized health service. Trans women showed significantly higher educational attainment, yet faced greater housing instability, with only 8.0% owning a property compared to 30.2% of trans men. The nearly four-fold higher prevalence of sex work among trans women (21.7% *vs*. 6.3%) and the bimodal distribution of sexual partners (higher proportions with either no sexual partners or more than 15 partners) indicate greater social and economic vulnerability in this group. These empirical findings align with broader patterns of gender-based discrimination documented in the literature, suggesting that transgender women face compounded marginalization at the intersection of gender identity and societal prejudice against women.

CONFLICT OF INTERESTS

Nothing to declare.

AUTHORS' CONTRIBUTIONS

ARE: Conceptualization, Data curation, Formal Analysis, Investigation, Methodology, Project administration, Writing – original draft, Writing – review & editing. GCPB: Data curation, Investigation, Writing – review & editing. SMRRL: Supervision, Validation, Writing – review & editing.

REFERENCES

1. São Paulo. Secretaria Municipal de Saúde. Conheça a rede sampa trans [Internet]. São Paulo: Prefeitura de São Paulo; 2022 [cited on Sep 14, 2023]. Available at: https://prefeitura.sp.gov.br/web/saude/w/noticias/325757
2. World Health Organization. Social determinants of health [Internet]. Geneva: WHO; 2023 [cited on Sep 11, 2023]. Available at: http://www.who.int/health-topics/social-determinants-of-health#tab=tab_1
3. Deutsch MB. Guidelines for the primary and gender-affirming care of transgender and gender nonbinary people. 2ª ed. San Francisco: University of California, Center of Excellence for Transgender Health, Department of Family & Community Medicine; 2016. 99 p.
4. Silva DC, Rabelo-da-Ponte FD, Salati LR, Lobato MIR. Heterogeneity in gender dysphoria in a Brazilian sample awaiting gender-affirming surgery: a data-driven analysis. BMC Psychiatry. 2022;22(1):79. https://doi.org/10.1186/s12888-022-03727-3
5. Defreyne J, Elaut E, Den Heijer M, Kreukels B, Fisher AD, T'Sjoen G. Sexual orientation in transgender individuals: results from the longitudinal ENIGI study. Int J Impot Res. 2021;33(7):694-702. https://doi.org/10.1038/s41443-020-00402-7
6. Associação Nacional de Transexuais e Travestis (ANTRA). Dossiê assassinatos e violência contra travestis e transexuais brasileiras em 2021 [Internet]. Brasília: ANTRA; 2022 [cited on Oct 5, 2022]. Available at: https://antrabrasil.files.wordpress.com/2022/01/dossieantra2022-web.pdf
7. Motmans J, Ponnet K, De Cuypere G. Sociodemographic characteristics of trans persons in Belgium: a secondary data analysis of medical, state, and social data. Arch Sex Behav. 2015;44(5):1289-99. https://doi.org/10.1007/s10508-014-0411-2
8. Ferreira Jr S, Francisco PMSB, Nogueira PA. Perfil de travestis e transgêneros: tuberculose e HIV/Aids na cidade de São Paulo. Rev Panam Salud Publica. 2016;40(6):410-7.
9. Spizzirri G, Eufrásio R, Lima MCP, Nunes HRC, Kreukels BPC, Steensma TD, et al. Proportion of people identified as transgender and non-binary gender in Brazil. Sci Rep. 2021;11:2240. https://doi.org/10.1038/s41598-021-81411-4
10. American Psychological Association. Guidelines for psychological practice with lesbian, gay, and bisexual clients. Am Psychol. 2012;67(1):10-42. https://psycnet.apa.org/doi/10.1037/a0024659
11. Pietrobon L, Prado ML, Caetano JC. Saúde suplementar no Brasil: o papel da Agênciaprato principal Nacional de Saúde Suplementar na regulação do setor. Physis. 2008;18(4):767-83. https://doi.org/10.1590/S0103-73312008000400009
12. Souza HA, Silva GRA, Silva RL, Silva CHF. Pessoas transgêneras e o mundo do trabalho: desafios e reflexões sobre o compromisso ético e político da Psicologia. Cad Psicol Soc Trab. 2020;23(2):175-88. https://doi.org/10.11606/issn.1981-0490.v23i2p175-188
13. São Paulo. Secretaria Municipal de Saúde. Protocolo para o atendimento de pessoas transexuais e travestis no município de São Paulo [Internet]. São Paulo: Prefeitura de São Paulo; 2020 [cited on Sep 14, 2023]. Available at: http://www.prefeitura.sp.gov.br/cidade/secretarias/upload/saude/Protocolo_Saude_de_Transexuais_e_Travestis_SMS_Sao_Paulo_3_de_Julho_2020.pdf
14. United Nations. 2023 Gender Social Norms Index (GSNI): breaking down gender biases: shifting social norms towards gender equality [Internet]. New York: UNDP; 2023 [cited on Sep 15, 2023]. Available at: http://hdr.undp.org/content/2023-gender-social-norms-index-gsni