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The impacts of sex work regulations and implementation of immigration policies on Central American sex workers' safety and health along the Mexico-Guatemala border

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The impacts of sex work regulations and implementation of immigration policies on Central American sex workers’ safety and health along the Mexico-Guatemala border

A thesis submitted in partial satisfaction of the requirements for the degree Master of Arts

in

Latin American Studies (International Migration)

by

Teresita Rocha Jiménez

Committee in charge:

Professor Kimberly C., Chair
Professor Jay G. Silverman
Professor Alberto Diaz Cayeros

2013
The thesis of Teresita Rocha Jiménez is approved, and it is acceptable in quality and form for publication on microfilm and electronically:

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Chair

University of California, San Diego

2013
DEDICATION

To all the sex workers who shared their experiences with me,
EPIGRAPH

“A mi no me asusta nada, porque nos enfrentamos a la realidad, nosotras somos realistas no somos como las mujeres de hogar. Somos mujeres de la calle”

[Guatemalan sex worker]
# TABLE OF CONTENTS

Signature Page………………………………………………………………………………………… iii

Dedication………………………………………………………………………………………… iv

Epigraph………………………………………………………………………………………… v

Table of Contents………………………………………………………………………………… vi

List of Table and Maps………………………………………………………………………… ix

Acknowledgements ……………………………………………………………………………… x

Abstract…………………………………………………………………………………………… xii

Introduction…………………………………………………………………………………… 1

1. **THE MEXICO-GUATEMALA BORDER**…………………………………… 4
   1.1 Central American civil conflicts: the first wave of migrants to the Mexico-Guatemala border ........................................ 5
   1.2 Poverty and violence: current migration push factors from Central America to northern countries........................................... 9
   1.3 The Mexico-Guatemala border: the gateway to the United States... 15
   1.4 Violence against migrants along the Mexico-Guatemala border.... 17
      1.4.1 Gender roles and Gender-Based Violence............................. 19
   1.5 Sex work along the Mexico-Guatemala border....................... 26

2. **METHODOLOGY**………………………………………………………………………... 29
   2.1 Study Setting................................................................. 29
   2.2 Data Collection............................................................. 32
2.3 Data Analysis................................................................. 39

3. IMMIGRATION POLICIES AND SEX WORK REGULATIONS.... 39

3.1 Immigration Policies..................................................... 39

3.1.1 Mexico Immigration Policies........................................ 42

3.1.2 Guatemala Immigration Policies.................................... 43

3.2 Sex Work Regulations.................................................. 43

3.2.1 Sex Work Regulations in Mexico................................. 43

3.2.2 Sex Work Regulations in Guatemala............................. 45

4. FINDINGS......................................................................... 47

4.1 Socio-demographic characteristics of FSW (N=20) in Tecun Uman and Quetzaltenango, Guatemala ..................... 47

4.2 Consequences of implementation of immigration policies: impacts on FSWs’ human rights and safety.......................... 50

4.2.1 Diverse circumstances of migration journeys.................... 51

4.2.2 Interaction with authorities and immigration officer’s role...... 55

4.2.3 Sex work entry as a consequence of structural factors: poverty and migration status.................................... 58

4.3 Consequences of implementation of sex work regulations: the unintended consequences of policies............................. 60

4.3.1 The use of cartilla or libreto: impacts on sex worker’s health and safety................................................................. 61

4.3.2 The role of police in sex work context.............................. 66

4.3.3 Sex work venues’ characteristics: impacts on sex workers’ personal safety, HIV prevention and susceptibility to exploitation ............................................................................. 71

5. DISCUSSION..................................................................... 77
5.1 Immigration Policies Discussion

5.1.1 Diverse circumstances of migration journeys: age, experience and information

5.1.2 Interaction with authorities and police role: Subjective and arbitrary practices toward Central American migrants

5.1.3 Sex work entry as consequence of structural factors

5.2 Sex Work Regulation Discussion

5.2.1 The use of cartilla or libretto: impacts on sex worker’s health and safety

5.2.2 The role of police in health regulations implementation

5.3.3 Sex work venue’s characteristics: impacts on sex workers’ personal safety, HIV prevention and susceptibility to violence

6. CONCLUSIONS AND POSSIBLE INTERVENTIONS

6.1 Strengths and Limitations

APPENDICES

REFERENCES
LIST OF TABLES AND MAPS

Table I. Mexican Refugee National Commission, COMAR. Asylum Applications and Applications Granted, 2012 ................................................................. 13

Table II. Socio-demographic characteristics of (N=20) FSW in Tecun Uman and Quetzaltenango, Guatemala ................................................................. 48

Table III. Socio-demographic characteristics of (N=20) FSW in Tecun Uman and Quetzaltenango, Guatemala [Mean, Std. Dev., Min, Max, and quartiles] .......... 49

Map I. Geography and Regions in Chiapas ................................................................... 7

Map II. Study Setting. Tecun Uman and Quetzaltenango, Guatemala and Tapachula and Ciudad Hidalgo, Mexico ................................................................. 30
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A paper titled *Migration, Violence, & Exploitation among Central American Sex Workers along the Mexico-Guatemala Border: A Qualitative Study* that has sections from the introduction, chapter 1, 2, 3 and 4; is being review by the co-authors: Kimberly C. Brouwer, Shira Goldenberg, Jay G. Silverman, Sonia Morales-Miranda and Gabriela Paz-Bailey to be submitted for publication. The dissertation author was the primary investigator and author of this material.
ABSTRACT OF THE THESIS

The impacts of sex work regulations and implementation of immigration policies on Central American sex workers’ safety and health along the Mexico-Guatemala border

by

Teresita Rocha Jiménez
Master in Latin American Studies (International Migration)

University of California, San Diego, 2013

Professor, Kimberly C. Brouwer, Chair

The overall goal of this study is to describe the context of migration and sex work along the Mexico-Guatemala border, highlighting its complexities and nuances. The specific goals of this research are to identify and analyze the consequences of the implementation of immigration policies and sex work regulations for Central American
sex workers living in the Mexico-Guatemala border, and to address public policy implications and further actions that can be done to improve migrant sex workers’ lives in this region based on a qualitative analysis of ethnographic fieldwork and in-depth interviews.

Diverse migration journeys, immigration officers’ arbitrary practices and sex work entry as a consequence of structural factors were the main consequences of immigration policy implementation. Information, experience, and age were the main elements that determine these factors. Positive and negative impacts of owning a health card, subjective police role and sex work venue’s characteristics were the main themes analyzed as consequences of sex work regulations implementation.

Workshops about migrant’s rights within the sex work context, sex trafficking awareness in the origin and destination place; sex work venue’s regulations and fighting stigma and discrimination could improve female sex workers’ health and safety in this region.
INTRODUCTION

Because of its complexity and numerous embedded elements, sex work in the context of migration along the Mexico-Guatemala border has been scarcely documented (Magali, Leyva, Hernández-Rosete, & Bronfman, 2002; Ogren, 2007). Furthermore, few studies investigate how the implementation of public policy affects female sex workers’ (FSW) safety and health. Rather, existing literature focuses on access to health care and HIV risk (Bronfman, Leyva, Negroni, & Rueda, 2002; Goldenberg, Statthee, Perez-Rosales, & Sued, 2012; Infante, Aggleton, & Pridmore, 2009; Porras et al., 2008).

The overall goal of this study is to describe the context of migration and sex work along the Mexico-Guatemala border, highlighting its complexities and nuances; specifically, why people migrate to this region and why female migrants engage in the sex work industry. The specific goals of this research are to identify and analyze the consequences of the implementation of immigration policies and sex work regulations for Central American sex workers’ safety [physical safety] and health [sexual health, mental health] on the Mexico-Guatemala border, based on a qualitative analysis of ethnographic fieldwork and in-depth interviews. Finally, these study aims address public policy implications and further actions that can be implemented to improve migrant sex workers’ lives and sex work circumstances in this region.

The original aim of this study was to perform a bi-national analysis by conducting in-depth interviews in Mexico and in Guatemala. However, delays in Human Subject Protections Program approval in Mexico allowed us to only conduct interviews in Guatemala. Nonetheless, Mexican policies and border cities are still described in the study setting because some women interviewed in Guatemala had experiences migrating
to Mexico. Chapter one describes the migration dynamics of the Mexico-Guatemala border and how structural factors help explain migration from Central America northwards, introducing sex work as a job alternative for many female migrants in this region. Chapter two presents the methodology used in the data collection and analysis. Chapters three and four show, based on the interviews conducted, the consequences of implementing immigration policies and sex work regulations on the lives of sex workers. After identifying issues from the perspectives and experiences of sex workers, chapter four discusses the themes identified and lists elements that could be addressed. Chapter five discusses the implications of the findings and recommendations for further policies and interventions (United Nations General Assembly, 1948).

This study holds great significance for a variety of reasons. First, in comparison to the Mexico-United States border, the Mexico-Guatemala border has been named “the invisible border” or “the other border” (Castillo Hernández, 2011; Hernández Palacios & Sandoval, 1989; Proceso, 2011). For decades this border has been ignored by the Mexico and Guatemalan governments and has been socially, politically and economically understudied. Despite scholars’ (Alba & Castillo, 2012; Armijo, 2010; Carreón-Diez, Herrera-Lasso, & Córdova-Alcaraz, 2006; Casillas & Castillo, 1994; Fernández-Casanueva, 2009; Kauffer, 2002) efforts to document and illustrate the importance of the Mexico-Guatemala border and to understand its complexities, there are still research questions to be explored. Additionally, this study is significant because it takes into account female agency when documenting migration experiences- a topic that has only
recently been explored (Boyd & Griego, 2003; Caritas Internationalis, 2012; International Organization for Migration, 2002).

Next, this study contributes to the newly growing body of empirical research documenting female sex workers at the Mexico-Guatemala border (Bronfman, Leyva, & Negroni, 2004; Infante et al., 2009; Rojas Wiesner, 2007) from an HIV and health perspective. However, migration experiences, sex work entry, and consequences of policy implementation on women’s lives have not been extensively documented (Casillas, 2011; Fernández-Casanueva, 2009). Finally, although Guatemala is not considered an important migration destination, I address Guatemala in this thesis as a destination for Central American migrants and analyze how this shapes women’s migration experiences and migration journeys. The role of authorities and their interaction with migrant women is also a scarcely explored theme, especially regarding the repercussions on women’s lives and the protection human rights.

Overall, an analysis of impacts of recently implemented immigration policies and sex work regulations is relevant to evaluate and assess the effects and consequences of new policies such as The Regulation of Prevention, Diagnosis, Treatment and Management of STI and HIV (2012) and the Anti-Trafficking Law (2009) in Guatemala (Gobierno de Guatemala, 2009; Ministerio de Salud Pública y Asistencia Social Guatemala, 2012).
1. THE MEXICO-GUATEMALA BORDER

Mexico bears witness to three distinct migratory dynamics: origin, transit and destination of migrants. As a migrant-sending country, Mexico started exporting its labor force to the United States in 1880, institutionalizing this relationship from 1942-64 with the Bracero Program\(^1\) (Andreas, 2001). The Bracero Program was a bilateral agreement between Mexico and the United States that facilitated the migration of approximately 5 million Mexican temporary workers to the United States (Durand, 2007). As a neighbor to the United States, Mexico is also the main crossing path for thousands (200,000-400,000) of Central Americans who want to enter the U.S. labor market. However, Mexico is also an important destination for this Central American population, mainly attracting those from Guatemala, Honduras and El Salvador (E. Rodríguez, Berumen, & Ramos, 2011). This phenomenon is explained mainly by the better work opportunities, higher quality of life and, overall, less violent environment found in Mexico.

The regions on either side of the Mexico-Guatemala border share similar cultural and ethnic characteristics.\(^2\) Central Americans, especially Guatemalans, have a long history of migration to Mexico, becoming even more pronounced during the periods of Civil Wars in Guatemala (1960-1990), El Salvador (1980-1992) and Nicaragua (Revolución Sandinista 1978-1990). Even though Mexico shares its southern border with Guatemala and Belize, the cultural and historical proximity to Guatemala is stronger than

---

1. The Bracero Program was a bilateral agreement between Mexico and the United States that implied the migration of approximately 5 million Mexican temporary workers to the United States (Durand, 2007)

2. Mexico’s southern border is defined by the 1,149 kilometers shared between the Mexican states: Chiapas, Tabasco, Campeche and Quintana Roo and Guatemala and Belize (El Colegio de la Frontera Norte, 2009; Instituto Nacional de Estadística y Geografía, 2008). For the purpose of this study I will concentrate in the Chiapas-Guatemala border.
with Belize. For the purpose of this study, I will concentrate on the Mexico-Guatemala border, while also acknowledging the importance of other Central American countries in migration flows and in public policies that affect the region as a whole.

1.1 Central American civil conflicts: the first wave of migrants to the Mexico-Guatemala border

In 1981, thousands of Guatemalans fled to the Mexico-Guatemala border as a result of persecution and violence. A number of scholars claim that this refugee situation created a sudden need for Mexican institutions and authorities to protect their Southern territory; indeed, this was the first time in history that the Mexican government paid attention to this border from the national security point of view (Aguayo, Aguilar Irigoyen, & Velázquez, 1985). Because of its geographical proximity to Central America, most refugees [defined as people who, owing to well-founded fear of persecution for reasons of race, religion, nationality, membership of a particular social group or political opinions, are outside the country of nationality and are unable or unwilling to avail themselves of the protection of that country (International Organization for Migration, 2004)] fled to Mexico and Belize, while others reached the United States and in less extent to Honduras and Costa Rica (Comisión para el Esclarecimiento Histórico de Guatemala, 1999; Office of the United Nations High Commissioner for Refugees, 2001; L. Rodríguez, 2008; Torres-Rivas & Jiménez, 1985).

The United Nations High Commissioner for Refugees (UNHCR) data affirms that in total approximately 150,000 Guatemalans fled to Mexico (Goldberg, 2001; United Nations Office on Drugs and Crime, 2007). However, in 1984 there were only 46,000
refugees registered in 36 camps distributed in Chiapas, Campeche and Quintana Roo [three of the 32 states of Mexico. The three of them share border to Guatemala] (Office of the United Nations High Commissioner for Refugees, 2001). This was the first time that Mexico faced a massive influx of people into its territory (Freyermuth Enciso & Godfrey, 1993). In response to this massive inundation with refugees, the Mexican government funded the Mexican Commission for Refugees in 1981, COMAR (Comisión Mexicana de Ayuda a Refugiados, 2011). Because of the geographical proximity of Guatemala to Mexico, Guatemalan refugees began to establish themselves as a community in Chiapas, but pressure from the Mexican government (largely induced by the government of Guatemala) to deport the refugees and the inability of the state of Chiapas to include all the Guatemalan refugees in the economy lead to the redistribution of Guatemalan refugees to the states of Campeche and Quintana Roo (Freyermuth Enciso & Godfrey, 1993; Kauffer, 2005; Stølen, 2007).

The presence of Guatemalans in isolated areas, mainly in Chiapas, had as a main consequence an important process of populating and colonizing of areas into municipalities in Chiapas such as Las Margaritas (zone III), Maravilla Tenejapa (zone III) and Marqués de Comillas (zone VI), the three of them border towns (Freyermuth Enciso & Godfrey, 1993).
This situation created a continuous flow of people moving between both sides of the border that can be seen today. As a result, the Guatemalan identity was built around their status as refugees and their interaction with the Mexican population (Kauffer, 2005). However, it is important to note that although the Mexico-Guatemala border was as porous then as it is today, restrictive immigration policies were considerably less implemented and migrants could easily cross from the Guatemalan to the Mexican side of the border.

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3 Chiapas is one of Mexico’s 32 states. It is located in Southwestern Mexico and shares a 365 mile-border with Guatemala.
However, the process of returning to Guatemala from Mexico for those who desired to do so was more arduous than leaving. Some Guatemalan refugees chose to return to Guatemala because of Chiapas’ precarious economic conditions or due to the desire to own land—a process that was easier in Guatemala than in Mexico (Freyermuth Enciso & Godfrey, 1993; Stølen, 2007). The first wave of returnees began in 1984, with official government involvement following soon after in 1987. A tripartite commission formed and constituted by the Mexican and Guatemalan governments and the UNHCR closely coordinated the process of return to Guatemala.

By 1998 approximately 43,000 Guatemalans returned to Guatemala through the process of assisted voluntary return, which gave logistical and financial support to migrants unable or unwilling to remain in the host country and volunteered to return to their countries of origin (International Organization for Migration, 2004).

When the civil conflict ended in Guatemala, the Mexican government offered permanent residence and citizenship to those who decided to stay in Mexico; in 1998 Mexico granted visas to 18,402 refugees, giving them legal status and the opportunity to apply for naturalization after five years of residency (Aguilar Zinser, 1991; Kauffer, 2002; Office of the United Nations High Commissioner for Refugees, 2001).

This highly involved and regulated process surrounding return migration to Guatemala had significant implications for female Guatemalan refugees. Patricia Pessar’s 2001 ethnographic research in Guatemala with returned refugees explores the female perspective when the war ended and some refugees returned to Guatemala with different
ideas about their role in society (Pessar, 2001). Several academics who worked in post-civil conflict Guatemala affirm that, as a consequence of their interaction with international organizations and feminist groups, Guatemalan refugee women returned with innovative ideas, “confident that they could repatriate new ideas and practices regarding gender parity”, or at least participate actively in other activities of which they were not a part before the war. However, these women returned to a “highly patriarchal Guatemalan state”, resistant to a sociopolitical gender change. (Blue, 2005; Menjívar, 2006; Nakaya, 2003; Pessar, 2001).

1.2 Poverty and violence: current migration push factors from Central America to northern countries

Migration is inherent in Central American civil conflicts, but also a consequence of globalization and the opening of new markets. According to the 2011 United Nations Development Program (United Nations Development Program, 2011), Mexico has a Human Development Index of 0.770 (57th position among 176 countries evaluated); Guatemala occupies the 131st place with an HDI of 0.574, Nicaragua the 129th with 0.589, Honduras the 121st place with 0.625 and El Salvador the 105th place with 0.674. Mexico is a country of “high human development” while Guatemala, El Salvador,

4 Pessar’s goal in this study was “to facilitate an understanding of how gender operates in multiplicity of geographical contexts”.
5 In her paper, Sarah Blue uses the case of the Guatemalan NGO Mama Maquin to illustrate how the “conservative societal attitudes about gender role and responsibilities were subtly reflected in absence of feminist development goals among aid agencies in Guatemala”.
6 The Human Development Index measures income, life expectancy and education. An HDI of 1 represents high human development, while an index of 0 implies null levels of human development. Countries are classified in four groups: “very high development”, “high human development”, “medium human development” and “low human development”.
Honduras and Nicaragua are among the countries of “medium human development”. Ranking fourth out of 176 countries, The United States is part of the “very high development” countries, with an HDI of 0.910.

These numbers show one of the several reasons for the movement of people from these Central American countries to Mexico, to the United States, and to a lesser extent, to other Latin American countries such as Guatemala. In most Central American countries, income from traditional exports such as agricultural products and textiles is concentrated in the hands of relatively few people – large-scale landowners and entrepreneurs. Half of Central America’s population lives below the poverty line, and in rural areas two out of three people are poor.7 “Honduras is the most dramatically affected country, with 75% of its rural population living in poverty and 63% of them in extreme poverty. Next in rank is Guatemala, with 54% of rural people living in poverty, and Nicaragua and El Salvador with 47% of rural poor people” (International Fund for Agriculture and Development, 2009). The unequal distribution of wealth and the rampant levels of poverty in most Central American countries explain, in part, the constant movement of people to other countries.

Remittances are a good indicator of the economic status of a country and how much it depends on migration. For Honduras the remittances that their nationals working abroad send home in 2011 represented 15% of the GDP. In El Salvador this represented 16%, of the GDP and in Guatemala 10%. For Mexico remittances only represent

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7 The Poverty Line defined by The World Bank is when the income of an individual is less than 2 USD per day. Extreme poverty is when the income of an individual is below 1.25 USD per day (The World Bank, 2012).
approximately 2% of the GDP (Centro de Estudios Monetarios Latinoamericanos, 2012). This shows dependence of these countries on remittances and the role of migration in their economic and social development.

Poverty is not the only reason why Central Americans migrate to northern countries; it has been documented that violence is another important push factor for migration from this region (Archibold, 2013; Gammage, 2007; United Nations Office on Drugs and Crime, 2007). According to the 2011 Global Study on Homicide, Central America is the second most violent region in the world (with 25 homicides per 100,000 habitants) after Southern Africa\(^8\) (with 32 homicides per 100,000 habitants). The third place is occupied by South America with approximately 21 homicides per 100,000 habitants\(^9\) (United Nations Office on Drugs and Crime, 2011). The rate of homicides for every 100,000 inhabitants in each country of the region was: Honduras, 82; El Salvador, 66; Belize, 41; Guatemala, 49; Nicaragua 12, Panama 21, Costa Rica 12 and 18 in Mexico (United Nations Office on Drugs and Crime, 2010).

Gangs and organized crime violence are the main sources of violence in this region. The origin of youth gangs in Central America stems from the 1990s United States policy of massive deportation of undocumented migrants [someone who, owing to illegal entry or the expiry of his or her visa, lacks legal status in a transit or host country, migrants who infringe a country’s admission rules and any other person not authorized to remain in the host country (International Organization for Migration, 2004)] to their

---

\(^8\) Southern Africa is composed of Botswana, Lesotho, Namibia, South Africa and Swaziland.
\(^9\) This reports includes Mexico in Central America along with Guatemala, Honduras, El Salvador, Belize, Costa Rica, Nicaragua and Panama. South America is composed of Argentina, Bolivia, Brazil, Chile, Colombia, Ecuador, French Guyana, Guyana, Paraguay, Perú, Suriname, Uruguay and Venezuela.
country of origin who had committed any crime. Most of them were from the gangs “Mara Salvatrucha” and “18th Street Gang”, which both originated in Los Angeles in the 1980s. These deportees went back to their home countries without any criminal record to show to their home government countries but with a criminal training.\textsuperscript{10} A 2007 United Nations report states that between 1998 and 2005 almost 46,000 convicts were deported to Central America (United Nations Office on Drugs and Crime, 2007). The compilation of poverty, violence, and access to a surplus of civil conflict arms was a lethal mix for the development of youth gangs in the region.

The social context of insecurity that has created the presence of gangs, like the “Mara Salvatrucha” and “18th Street Gang”, and the drug cartel operations, has compelled thousands of Central Americans to migrate to other countries. A cross-sectional study combining quantitative and qualitative analysis conducted in Mexico by the National Institute of Public Health, Cuernavaca, México shows that some migrants flee from their home countries because they were gang extortion targets (Servan-Mori, Leyva-Flores, Infante-Xibille, Torres-Pereda, & García-Cerde, 2013). Mexican and Guatemalan press has documented violence against migrants in their journey from drug related groups such as the Zetas (El Orbe, 2013; La Prensa, 2012; Notimex, 2009; Zúñiga, 2013). In 2011, the Mexican National Immigration Institute documented 150 cases of refugees from Central America (88 from El Salvador, 31 from Honduras, 28 from Guatemala and

\begin{footnote}
\textsuperscript{10} They were charged with crimes in the United States but they were not extradited within a formal process they were just massively deported.
\end{footnote}
only 2 from Nicaragua). There is no official available information on the reasons why people apply for asylum in Mexico, but many press releases from Central America and Mexico affirm that thousands of people every year are fleeing to Mexico and the United States from violence perpetrated by gangs and organized crime (Cámara de Diputados del H. Congreso de la Unión. México, 2009; Departamento 19, 2012; La Prensa, 2012).

In 2012, Mexican Refugee National Commission received 4,251 asylum applications and only 845 were recognized as refugees (Comisión Mexicana de Ayuda a Refugiados, 2010). Central Americans made up 32% of these applications and only 112 visas were granted.

Table I. Mexican Refugee National Commission, COMAR. Asylum Applications and Applications Granted, 2012

<table>
<thead>
<tr>
<th>Country</th>
<th>Applications</th>
<th>Applications granted (N,%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Honduras</td>
<td>578</td>
<td>35,3%</td>
</tr>
<tr>
<td>El Salvador</td>
<td>454</td>
<td>50,4%</td>
</tr>
<tr>
<td>Guatemala</td>
<td>257</td>
<td>24,2%</td>
</tr>
<tr>
<td>Nicaragua</td>
<td>88</td>
<td>3,0.21%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>1,377</strong></td>
<td><strong>112</strong></td>
</tr>
</tbody>
</table>

Extreme gang violence, such as extortion, kidnapping, assault, robbery and selling drugs, have severely affected Central American society. Unfortunately, the governments of each Central American country have not been able to help the deportee gang members

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11 The data from the Mexican National Immigration Institute does not specify the reasons of asylum request.  
12 I submitted a formal petition for this information to the Federal Institute of Information Access (Instituto Federal de Acceso a la Información, IFAI. Petition 0422000000913).
reintegrate into their home society or improve the structural issues out of which gangs emerge. The main responses to this situation have been repressive policies and the imprisonment of any youth if there is suspicion of gang activity.

In 2004 and 2005, the Salvadorian gang Maras was registered in Mexico, especially in Tapachula and around the “Beast” or the “Train of Death” used by migrants to cross through Mexico through gang member assault and extortion of migrants (Armijo, Benítez, & Hristroulas, 2009). This situation changed as consequence of a natural disaster in 2005, when hurricane Stan destroyed the train tracks and migrant routes changed (Armijo, 2010; Casillas, 2008; Villalba Sánchez, 2006).

Central America also represents a strategic point in drug trafficking. Since the beginning of the 1990s, Central America has become “a key pipeline for drug shipments from Colombia northward” (Arana, 2005) The dismantling of Central American militaries created a power vacuum allowing the cartels to use Central American countries, especially Guatemala, to traffic cocaine all the way to the United States (Felba-Brown, 2010; Stewart, 2013).

There is no real evidence of the relationship between drug cartels and gangs in the region; furthermore, scholars such as Joaquin Villalobos maintain that there are key structural differences between these two groups that inhibit cooperation among them (Villalobos, 2012). Even though both groups use brutal violence, violence perpetuated by gangs is a part of their identity and has value in and of itself, while organized crime groups use violence related to ‘illegal business’ (Villalobos, 2012). The context of violence that these two groups have created, mainly in Honduras, El Salvador and
Guatemala, is alarming. The migration flows from Central America to Mexico and to the United States are evidence of the limited economic opportunities and poor security conditions in these countries.

From January to December of 2012, Mexican Migration Authorities deported almost eighty thousand foreigners. Central Americans represented 92.8% of the total deportees. Guatemalans represent 43% (30,098), Hondurans 38%, (26,341) and Salvadorans 16% (11,388) of the deportees (Instituto Nacional de Migración. INM, 2012a). Although we know the number of Central Americans that were deported, there are no real calculations of the people who successfully enter the United States or stay in Mexico. However, these numbers give us an idea of how many people are migrating to Mexico and to the United States. In 2011 the United States Department of Homeland Security DHS removed 392,000 foreigners, with the leading countries of origin of those migrants being Mexico (75%), Guatemala (7.5%- 30,184), Honduras (5.6%- 21,952), and El Salvador (4.4%-17,248) (U.S. Department of Homeland Security, 2011).

1.3 The Mexico-Guatemala border: the gateway to the United States

In order to understand why potential migrants are staying on the Mexico-Guatemala border or in Guatemala, it is important to address the evolution of immigration policies that the United States has been enforcing over the last twenty years.

13 According to official numbers of the National Migration Institute of Mexico from January to December of 2012; 79,426 foreigners were deported to their home countries. (Instituto Nacional de Migración, 2012).
14 The total of foreigners held in 2012 was 88,501; the 93% from Central America.
Given the economic and political situation in Central America more people are migrating from Mexico and Central America to the United States.

Due to the increases in migration flows at the beginning of the 90’s, the United States government implemented a series of anti-immigration policies, such as the 1997 Illegal Immigration Reform, and the Immigrant Responsibility Act (IRIIRA) and operations like Blockade/Hold the Line in El Paso (1993), Gatekeeper in San Diego (1994), Safeguard in Arizona (1994), and Rio Grande in Texas (1997). The strategy behind these policies was named “prevention through deterrence” and its main goal was to push migrants to isolated and hostile zones so they would stop crossing.

However, these policies resulted in a break in circular migration, pushing migrants into more isolated and hostile places and increasing undocumented migrant use of illegal networks of smugglers ("polleros") to cross through Central America and Mexico, and eventually to the United States (Carreón-Diez et al., 2006; Wayne Cornelius, 2005; Wayne Cornelius et al., 2008).

Mexico also improved these policies in an attempt to control migrant flows coming from the south. One of the strategies that the Mexican government followed in the 1990s to try to stop the migrant flows from Guatemala and Belize was to establish checkpoints in the Soconusco area\textsuperscript{15}, an area more feasible to monitor and control than the 764 miles that Mexico shares with Guatemala and Belize. In 2002, the Mexican and Guatemalan governments formed their main security cooperation mechanism, the High-

\textsuperscript{15} The Soconusco is a region in the Southwest corner of the state of Chiapas along its border with Guatemala. It is a narrow strip of land wedged between the Chiapas’ Sierra Madre Mountains and the Pacific Ocean. According to the people that implemented the program this region is geographically easier to control than the rest of Mexico’s Southern border.
Level Group of Border Security (Grupo de Alto Nivel de Seguridad Fronteriza, GANSEF) that aimed to strengthen bilateral security cooperation, facilitate dialogue between national and local authorities in the border area, promote the safe and organized flow of people and goods, prevent illegal flows and terrorist and criminal activities. This bi-national cooperation translated into the securitization of the Mexico-Guatemala border.

Similar to the effects of the restrictive immigration policies on the Mexico-United States border, some scholars and studies affirm that the unique results from these policies were increased migrant detention and deportation from Mexico, relocation of points of entrance through more isolated crossing points, a break of circular migration, and escalation of smugglers’ services.

1.4 Violence against migrants along the Mexico-Guatemala border

The war against drugs in Mexico and the increased restrictive immigration policies in both Mexico and the United States have changed and affected migrant networks. Today the networks needed are highly complex, highly corrupted, and often related to drug cartels or other illegal networks. One of the examples of the change in the way migrant smugglers operate was the discovery of the bodies of 72 Central Americans in San Fernando, Tamaulipas in August 2010. Mexican authorities believe that these migrants were trying to reach the United States, and several press releases affirmed that they “were killed because they did not want to do business and work for the drug cartel” (Ballinas, 2012; Mariscal, 2012; Martínez, 2012; Organización Editorial Mexicana, 2011).
Violence against migrants and the risks of crossing have exponentially increased. Another example in Mexico of the violence against migrants is the kidnapping of undocumented migrants on their path through Mexico. In 2011 Mexico’s National Human Rights Commission (Comisión Nacional de Derechos Humanos, CNDH) published a report that finds that between September 2008 and February 2009 there were 198 cases of kidnapping in which 9,758 migrants were deprived of their freedom (Comisión Nacional de Derechos Humanos, 2011). Fifty-five per cent of these migrants were kidnapped in the southern states of Mexico, 11.8% in the northern states, 1.2% in central Mexico, and the sequestration location of the remaining 32% could not be identified.

This phenomenon can be explained by the cartels’ need to diversify their activities as a consequence of the government’s increased enforcement against drug trafficking. Besides kidnapping, they have committed other violent activities such as “arms trafficking, human trafficking, contraband, organ trafficking, auto theft, and bank assaults” (Castaño, 2009).

Unfortunately, the vulnerabilities of an undocumented migrant increase when the migrant is a woman. Even though women represent half of the people who migrate globally, the risks and challenges that women face on their journeys are greater than for men. In the next section I will explain the increased participation of women in the migration flows around the world and across the Mexico-Guatemala border, and how women are more vulnerable to this process than men.
1.4.1 Gender roles and Gender-Based Violence

The study of migration is by its nature interdisciplinary - hence why it is impossible to explain migration from only one perspective. However, as this study focuses on women, a gender-based analysis is essential to understanding why women migrate, where they migrate, and how their journey and destination shapes women’s lives.

Nowadays, women comprise the 49.6% of the world’s international migrants, with the percentage increasing from 46.7% to 49.6% between 1960 and 2005 (Department of Economic and Social Affairs, 2005). Twentieth century research about migration through the early 1970s focused almost exclusively on the male migrant, while women were presumed to play passive roles as companions. For decades, female migration was not seen as an independent movement but rather as a part of the male migration flow; women were seen as wives, daughters or dependents of men during migration.

Today, women migrants are recognized not only as dependents, but also as independent agents and family supporters or heads of house-holds (International Organization for Migration, 2002, 2005). However, this does not mean that women face the same risks or equal opportunities as men during the process of migration (Caritas Internationalis, 2012). Including gender in the study of migration is important to understanding how “gender relations facilitate or constrain both women’s and men’s immigration and settlement” (Hondagneu-Sotelo, 1994).
Beginning with the global industrial revolution, women started to integrate themselves in the labor market as individuals and income-earning opportunities began to loosen traditional constraints on female mobility (Caritas Internationalis, 2012). Comparatively, Latin American and Caribbean women are highly mobile; by 1990, immigrant women from Latin America were the first in the developing world to reach parity with male migrants and in 2005 they constituted 50.3% of total migration from this region. The main destination of Latin American women migrants is currently the United States; by 2010 they made up more than half of all immigrants living in the U.S. (U.S. Census Bureau, 2010).

It is known that women and men migrate for different reasons; therefore, gender plays an important role in the decision of an individual to migrate. Emigration can be the product of sex imbalances; it also forms them, both in the old country and the new (Parr, 1987). The types of jobs where demand for women migrant workers exists often reflect traditional female roles, sex stereotypes, and cultural practices (International Labor Office, 2007). Globally, immigrant women are occupationally concentrated in domestic service, industry, family enterprises, and most recently in highly skilled service occupations, such as nursing (Pedraza, 1991).

In Mexico and in other parts of Latin America women often will not consider wage labor because of widely held beliefs that a married woman’s “proper” place is at home and because of patriarchal norms that give men power over their wives’ labor (Kanaiaupuni, 2000). Therefore, women look for informal jobs that allow them to also be in charge of the household duties. Gender adds a bias in the work opportunities of
migrants all over the world and in some cases the migration of men determines the role of women in this process (Caritas Internationalis, 2012; International Organization for Migration, 2002; Piper, 2005).

Pessar and Mahler (2001) discuss the case when “men migrate from rural communities to urban communities and women assume male tasks such as farming, gathering firewood, and agricultural duties” (Mahler & Pessar, 2001). Women’s incorporation in the “productive” labor market has not been accompanied by a redistribution of the “reproductive” work that continues to be primarily their responsibility (Ramírez, García-Domínguez, & Míguez-Morais, 2005).

The factors explaining female migration can be found in the nature of destination societies, how the destination society shapes women’s role in the new place, and how this dynamic affects the place of origin (Ramírez et al., 2005). For generations, “immigrant daughters of Mexicans have been expected to remain virtuous and to behave in direct contrast to the sexually loose image of American girls” (Mahler & Pessar, 2001).

The policies of the destination society can also shape male and female migration. As Kanaiaupuni argues, migration from Mexico to the United States is predominantly male because U.S. immigration policies reinforce male-biased migration and power differentials (Kanaiaupuni, 2000). Until 1952, women in the United States could not legally sponsor their husbands as migrants. The 1965 amendment to the Immigration and National Act enabled more women to migrate legally but usually as sponsors or children of male migrants, so they had to engage in informal domestic labor arrangements (Pedraza, 1991).
For the most part, people are born into a social location that confers on them certain advantages and disadvantages; hierarchies of class, race, sexuality, ethnicity, nationality and gender operate at various levels that affect an individual or group’s social location (Mahler & Pessar, 2003). These characteristics, most of them structural, determine why and where a person migrates, the conditions of the migration process, and the experience in the destination.

Most of the women that migrate from Central America to Mexico and the United States experience a continuous string of violence. A large number of them are subject to violence in their place of origin, in their journey to the destination place, and then when they arrive at their destination, whether temporal or final. One of the reasons for women from Central America and Mexico to migrate in the first place is to flee from violence.

Between 1999 and 2005 the United States Supreme Court received 865 petitions for asylum for domestic violence, with 45% of these petitions from Mexican and Central American women. Even though being a subject of domestic violence or gender-based violence [defined as any act that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life] (United Nations, 1993) in the country of origin is not a reason to receive asylum in the United States, the cases that are presented below show that women often migrate because of the violence that they are subject to in their home countries. In 2011, the United States Department of Justice received 41,000 petitions for asylum, granting only 11,000--
Central Americans requested 14.2% of the total.  

Mexico has the second highest number of requests for asylum (6,133) after China (10,717). A recent study published by the United Nations and Mexico Women’s Institute, which gathered information on femicide in Mexico from 1985 to 2009, found that in 2009, 36% of the female deaths presumed to be homicides took place in the woman or girl’s home. Almost the same percentage (35.8%) took place on the street or in a public place (Organización para las Naciones Unidas & Instituto Nacional de las Mujeres, 2011); this shows that women face almost the same level of insecurity in their home as in public. In Central America the situation of gender-based violence is worse than in Mexico. In 2010, El Salvador had the highest number of femicides in the world (United Nations Population Fund, 2010).

Around 75% of the female homicides registered in El Salvador (2010), were perpetrated by “a family member or someone close”; in Guatemala this number escalates to 78% (Erazo & Jerez, 2011). According to the World Forum, Global Gender Gap Report 2012, Guatemala is the country with lowest ranking of gender equality in Latin America and the Caribbean (116 of 134), followed by El Salvador (94), Mexico (84) and Honduras (74) (Hausmann Ricardo, Tyson D. Laura, & Zahidi Saadia, 2012).  

Besides a violent context in their country of origin, women face tremendous violence in the process of migration. Mobile populations on the southern border of Mexico are subject to frequent human rights abuses with female sex workers and

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16 The data of each Central American country’s request for asylum are: El Salvador 2,501; Guatemala 2,290; Honduras 841; Nicaragua 204; Costa Rica 16 and Panama 4.

17 The Index benchmarks national gender gaps on economic, political, education- and health-based criteria, and provides country rankings that allow for effective comparisons across regions and income groups, and over time.
undocumented migrants among the most affected (Bronfman et al., 2002; Infante et al., 2004). Migrant status also has had an important influence on the violence perpetrated toward migrant women. Several sources have documented that approximately 46% of the female migrants are subject to some kind sexual assault (ranging from a sexual threat up to rape) in their journey (Bronfman et al., 2002; Chandomí, 2013; Comisión Nacional de Derechos Humanos, 2011; Rojas Wiesner, 2007; Servan-Mori et al., 2013; Shiavon A. & Díaz-Prieto, 2011; Sin Fronteras, 2007).

One of the reasons for these vulnerabilities is the networks and routes that women use to migrate. A report made by the United Nations and the Mexico Women’s Institute affirms that the higher growth rates of female homicides between 2007 and 2009 per 100,000 women were in Chiapas (387%) and in the northern states of Chihuahua (325%), Baja California (423%) and Durango (483%), key states in the migration route to the United States (Organización para las Naciones Unidas & Instituto Nacional de las Mujeres, 2011).

Before the increase in border enforcement along the United States-Mexico border, the “polleros or coyotes” work locally and, sometimes they were members of the migrant’s community or recommended by a friend or family. However, after the increase in control along both borders (1990s) and the increased presence of drug cartels in Mexico and Central America, smugglers were embedded in highly complex networks that profited from the migrants’ needs (Armijo, 2010; Casillas, 2011).

This context has facilitated and increased crime associated with migration such as migrant smuggling [defined by the United Nations, as “the procurement, in order to
obtain, directly or indirectly, a financial or other material benefit, of the illegal entry of a person into a State Party of which the person is not a national or a permanent resident”] and human trafficking [“the recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation] (United Nations, 2000; United Nations Office on Drugs and Crime, 2000).

Migrant smuggling networks and trafficking networks are different in composition and structure although they can intersect on certain levels. Particularly along the Mexico-Guatemala border, the migrant smuggling networks and the human trafficking network are associated through of the informality of the dynamics (Casillas, 2011).

Globally, between 2007 and 2010, women constituted the 59% of the human trafficking victims, and girls [any female under 18 years old] comprised the 17%. Sixty eight per cent of the prosecuted and convicted of human trafficking were males. Trafficking for sexual exploitation represents the 58% of all trafficking cases detected globally and sexual exploitation is the main form of human trafficking in the Americas (51%). Most victims detected in Mexico are Guatemalan, whereas Guatemala reported mainly detecting victims from El Salvador and Nicaragua. North and Central America are from Central American countries and the Caribbean. Structural factors such as poverty, lack of socio-economic opportunities and gender-based violence increase
vulnerabilities to human trafficking situation (United Nations Office on Drugs and Crime, 2012).

1.5 Sex work along the Mexico-Guatemala border

The Mexico-Guatemala border is a highly porous and busy border, with many mobile populations such as seasonal workers, truck drivers, transmigrants, and temporal visitors. Sometimes, in cities such as Tecun Uman, San Marcos, Guatemala, the mobile population comprises three times that of the permanent population (Bronfman et al., 2004). In this context of high mobility, secrecy, and violence, the sex work industry has found a favorable climate in which to flourish.

Structural factors such as the socio-economic reality of female undocumented migrants; institutionalized gender-based violence in the region and networks that profit from the unauthorized migration and from sex work, push female migrants to engage in sex work. “Women engage in sex industry as a long-term financial need generated by their husbands' inadequate earnings, or the total loss of male support due to illness, death, or abandonment that turned these women into heads of households” (Fernández-Kelly, 1983). In the context of national austerity programs, structural adjustment policies, and increased unemployment, many third-World women have been obligated to enter the sex trade to better ensure their household’s survival (Mahler & Pessar, 2001).

Based on his ethnographic fieldwork, Casillas argues that most of the sex workers that work on the Mexico-Guatemala border are from Honduras and El Salvador because: clients are physically attracted to foreigners, many migrants were heading to the United States and for several reasons stayed to work in the area, and because of the stigma
against women that engage in this type of work (Infante et al., 2009). Local people (clients, bar owners and society members) prefer sex workers that that the are outsiders rather than women from the community (Casillas, 2006). Some migrants who engage in sex work were trying to go to the United States and they had to stop to earn some money, and many of them were not able to continue their journey (Bronfman et al., 2004). It is important to acknowledge that there are also female migrants who do not voluntarily engage in sex work but are deceived or tricked into work as sex workers. Some of them receive money for selling or trading sex but some of them do not, falling in cases of sex trafficking (Casillas, 2006; Infante et al., 2009).

Female Sex Workers [FSW] in this context face multiple challenges such as discrimination, stigma, human rights abuses and poor access to health. The high mobility of the sex workers also explains their risky behaviors and higher risk for HIV and STI [sexually transmitted infections], which is another source of stigma toward this population. Discrimination and stigma for being female, undocumented migrants, and sex workers is present along the Mexico-Guatemala border in sex workers’ lives.

In a study constituted by in-depth interviews, non-participant observation and informal conversations made by Infante and colleagues, it was found that between 70% and 80% of respondents from Ciudad Hidalgo, Chiapas, Mexico, said that they would not interact with an HIV-positive person (Infante et al., 2004). Community members blame sex workers and their clients (mostly truck drivers and Central American men) for the presence of AIDS (Infante et al., 2004). In the following chapters I will describe the particularities of each city (Tapachula and Ciudad Hidalgo, Chiapas, Mexico and Tecun
Uman and Quetzaltenango in Guatemala) and the venues where women work. The venues’ characteristics are really important to understanding the vulnerabilities and access to services that the sex workers face in this context.

Sex trafficking is a major issue related with undocumented migration flows and sex work in the Mexico-Guatemala border. Because the complexity of this theme I will not include it as part of this study but I will address the policy implementation related with the sex trafficking battle, in both Mexico and Guatemala.

A section of Chapter 1, is currently being prepared for submission for publication, Rocha Jiménez, Teresita; Goldenberg M., Shira; Brouwer C., Kimberly; Silverman G., Jay, Paz-Bailey Gabriela and Morales-Miranda Sonia, “Migration, Violence, & Exploitation among Central American Sex Workers along the Mexico-Guatemala Border: A Qualitative Study”. The thesis author was the primary investigator and author of this paper.
2. METHODOLOGY

2.1 Study setting

This study was conducted in Tecún Umán, San Marcos and Quetzaltenango, Quetzaltenango in Guatemala. As I mentioned in the introduction, the goal of this study was to conduct interviews also in the Mexican side of the border in Tapachula, Chiapas and Ciudad Hidalgo, Chiapas in Mexico. However, the length of the Mexican Ethics Committee review only permitted us to conduct interviews on the Guatemalan side. I will also include the description of the Mexican side of the border and field notes that I did there to improve the border sex work context and the discussion section. The four cities are shown in Map II as well as Mexico and the Central American neighbors that push migrants to Guatemala and Mexico.
Tecun Uman (Pop: 33,426) is a Guatemalan border city delimited by the Suchiate River, and is one of the most important formal border crossings along the Mexico-Guatemala border (Tecun Uman-Ciudad Hidalgo). There is a daily exchange of goods and people from one city to the other. It is estimated that seasonal workers, truck drivers, deportees, sex workers and transmigrants en route to Mexico and to the United States comprise between 40% and 50% of Tecun Uman’s population (Campos-Delgado & Odgers-Ortiz, 2012; Villafuerte Solís, 2007). International migrants, mainly from Honduras and El Salvador, and internal migrants use this city as a gateway to Mexico and to the United States.

Quetzaltenango, capital of the Guatemalan departamento [state] of Quetzaltenango (Pop: 300,000) is Guatemala’s second largest city. A large proportion of

\(^{18}\) Map made by the author with ArcGI Program.
the total population in this state (60%) is made up of indigenous groups, mainly from the K’iche’ and Mam indigenous groups (Assies & Gundermann, 2007; Programa de Naciones Unidas para el Desarrollo. Guatemala, 2011). Tourists and migrants from other Guatemalan cities and towns are also commonly found in Quetzaltenango, and are often clients of the sex workers (Bronfman et al., 2004). These characteristics shape the sex work context in this city. It is important to address that during our field trips we observed and did three interviews with indigenous sex workers in Quetzaltenango, however, there is a really reduced research done regarding this population.

Tapachula (Pop: 320,452), the second largest city in Chiapas, Mexico, is the busiest crossing point along Mexico’s southern border. It is a city that attracts migrant agricultural workers, is the gateway of the trade sector with Central America and is a key corridor for Central American circular migrants that have everyday activities but also transmigrants that have as final destination the United States or other parts of Mexico (Ordoñez Morales, 1990, 2007; Villafuerte Solís & García Aguilar, 2008). Tapachula has one of the biggest Migrant Detention centers in Latin America (Estación Migratoria, Siglo XXI). In 2012 almost half of all the Central Americans deported from Mexico were deported via Chiapas (Díaz & Kuhner, 2008; Instituto Nacional de Migración, 2012; Sin Fronteras, 2007).

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19 The third ethnic group in Quetzaltenango is the ladinos, which comprise approximately 40% of the population. Ladinos is the term used in Central America to refer to the mestizos or Hispanicized population.
20 I did a extended revision of papers published in PubMed, JStor and did not find papers or studies addressing the indigenous sex workers life experiences or HIV risks in Guatemala.
21 The Mexican National Immigration Institute returned 79,426 migrants and 39,218 were returned through Chiapas. Of the 79,426 deported migrants, 35,033 were from Guatemala, 29,115 from Honduras; 12, 692 from El Salvador and 620 from Nicaragua.
Ciudad Hidalgo (Pop: 12,500), a small town located directly on the border with Guatemala, is the closest city to Tecun Uman and is located 18 miles from Tapachula. Ciudad Hidalgo is an extremely dynamic place where truck drivers, *comerciantes* [merchants], seasonal workers and transmi grants coexist. About half the population of Ciudad Hidalgo does not live there permanently, and there is a prominent commercial trade between Tecun Uman and Ciudad Hidalgo, with approximately 100 cargo trucks crossing the border daily (Villa et al., 2004). Truck drivers, as well as migratory flows, prompt the presence of sex workers in Ciudad Hidalgo.

The context of constant mobility combined with a large sex industry generates a risk environment for HIV and STI. Despite the low prevalence of HIV in the Mexican adult population (0.3%), HIV and STIs are concentrated in vulnerable populations such as sex workers (UNAIDS, 2011). The prevalence of syphilis, Chlamydia, and gonorrhea is 9%, 14%, and 12% respectively among female sex workers along the Mexico-Guatemala border (Uribe-Salas, Conde-Glez, Juárez-Figueroa, & Hernández-Castellanos, 2003). We find a similar situation in Guatemala: the prevalence of HIV in the general population of Guatemala is 0.8% but the HIV prevalence among female sex workers HIV is 4.3% (USAID, 2010).

### 2.2 Data collection

The study was approved by the ethics committees of the University of California, San Diego, UCSD and the Universidad del Valle de Guatemala (UVG).

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was conducted by Teresita Rocha Jimenez and by members of partner organizations (Asociación de Educación para la Vida, EDUCAVIDA in Guatemala), and included ethnographic fieldwork from [05/29/12 to 06/05/2012; from 09/02/12 to 09/07/12; from 11/05/12 to 11/12/12 and from 02/04/12 to 02/14/12] in Tecun Uman and Quetzaltenango. EDUCAVIDA’s collaboration and infrastructure was made possible by the U.S. National Institute of Health R01DA029899 grant.

**Fieldwork:** During fieldwork visits we engaged in participant observation and conducted in-depth interviews with female sex workers in Guatemala (11 in Tecun Uman and 9 in Quetzaltenango); fieldwork included periodic visits to different types of sex work venues and service provision agencies, and informal conversations with sex workers, bar owners, NGO members and community members (e.g., taxi drivers, local and municipal police, clinic staff). We also engaged in health outreach such as condom distribution and information dissemination (resources for sex workers for counseling, HIV tests, shelter and contraceptive information). Fieldwork aided in the recruitment of participants and the contextualization of information gathered during in-depth interviews. Entry into the community in Tecun Uman and Quetzaltenango was successful thanks to our partner organization, Educación para la Vida (EDUCAVIDA) in Guatemala. Their experience working with sex workers in the study setting and the relationship of trust that they have built in the community was crucial for our research.

**In-depth interviews:** Eligible interview participants were females 18 years old or older, who had sold or exchanged sex in the last month, spoke Spanish and had a history of either domestic or international migration. The interviews were semi-structured using a
loosely followed guide, which was iteratively revised across the course of the study. The open-ended questions were mainly about migration history; first experience trading or selling sex, interaction with the authorities and access to health services.²³

**Recruitment:** The team recruited sex workers in their place of work (e.g., bars, s, street, park) while doing condom distribution with our partner organization and health outreach visits; and in Tecun Uman and Quetzaltenango clinics, while the women were waiting for their periodical tests [public health regulations in Guatemala require that all FSW undergo periodical HIV and STI tests at municipal clinics to maintain a control card [cartilla or libreto]. When we recruited the women in venues we first asked the manager or the administrator if we could talk to the women and we broadly explained the goal of the study. For safety reasons and to avoid making the women and their clients uncomfortable, we did the recruitment during the mornings or before the clients started to arrive.²⁴ In some cases we scheduled an appointment with the women so we did not interfere with their work time. In the case of women that were recruited in the clinic or outdoors, they provided us their cell phone numbers to call them and check when they were available.

The team always made clear to the possible participants that we were not affiliated with the government, the clinic or migration authorities. When we were recruiting participants we explained broadly the purpose of the study, procedures, risks and discomforts, compensation, (which was in-kind goods equivalent to $10 USD such as

²³ See Appendix I for Qualitative Interview Guide.
²⁴ Each venue works differently some s open at 9:00 am and close at 10:00 pm, so we did the interviews before 9:00 am but other places open later so we did the recruitment and the interviews according to the women time availability.
a telephone card) confidentiality and benefits. In some cases we spent more time talking with the women about different topics and then we introduced the purpose of the research, trying to build a relationship of trust or at least trying to “break the ice” before inviting them to participate. The relationship of trust that EDUCAVIDA’s team has built over the years was a key factor in the recruitment process. Once the participant agreed, we explained in more detail the purpose of the study and went over the written consent form (Consent to Act as a Research Subject in In-depth Interviews) if they agreed we got their consent to participate and to audio-record the interview.\textsuperscript{25} We asked again if they had questions or concerns about their participation in the study.

On average, each interview took 1 hour, questions focused on migration, sex work entry, HIV knowledge and treatment, interaction with police and immigration authorities, access to health services, and experiences of gender-based violence.\textsuperscript{1} The interviews were conducted by Teresita Rocha (N=11) and members of EDUCAVIDA. We conducted most of the interviews in EDUCAVIDA’s office (Tecun Uman); the rest of the interviews (N=9), especially the ones made in Quetzaltenango, took place in parks, on the street or in the room that the women rent to live or work.\textsuperscript{26}

The team reviewed the interview guide once the first interviews (pilot interviews) were completed; and we found that some terminology was difficult to understand so we replaced them with easier terms. The content of the interview guide was constantly

\textsuperscript{25} See Appendix III for Written Consent Form.
\textsuperscript{26} The context of sex work is different in Quetzaltenango; the bars and cantinas are not concentrated in one place and is harder for the women to get around town. Most of them chose the place for the interviews (park, street, or their own room) and the team made sure that the identity and the confidentiality of the women would not be compromised.
revised and we asked for community partner feedback to improve the content and the accuracy of the questions in terms of our goals.

**Socio-demographic questionnaire:** The participants completed a socio-demographic questionnaire that was used to describe general characteristics of the target population, such as their place of origin, where they were born, where they currently live, their immigration status [status which a migrant is accorded under the immigration law of the host country (International Organization for Migration, 2004)], time in the interview location, age, education, civil status, where they meet with their clients, where they exchange or trade sex with their clients, first time they exchanged or sold sex, average income and if they have ever tested positive for HIV or STI, age of the first time they exchanged or traded sex.²⁷

**Literature review:** Current literature reviewed for this study discusses sex work in the Mexico-Guatemala border region, as well as structural factors (e.g., poverty and violence), migration along the Mexico-Guatemala border, feminization of migration and gender-based violence. This literature revision was included as a part of the analysis and the results because I used it as a tool to support the findings from the women interviews.

To identify relevant information, Google Scholar, Jstor, and PubMed were searched with the following terms: “sex work”, “Mexico-Guatemala border”, “prostitution”, “gender-based violence”, “HIV”, and “sex trafficking”, as well as “poverty”, “violence”, “Central America”, “health services” and “stigma”. The search included articles, case studies, published papers and reports in English and Spanish. I

²⁷ See Appendix II for the Socio-demographic Questionnaire.
engaged in everyday press-monitoring of key journals in Chiapas (El Orbe and Diario del Sur) and in Guatemala (Prensa Libre and El Periodico de Guatemala) for an additional perspective of how policy implementation in both countries impacts the lives of sex workers.

2.3 Data analysis

The software QSR NVivo 10 was used to manage data coding. As data collection progressed, the information was analyzed to understand how the implementation of the affect of policies on sex workers’ lives. My coding strategy was made based on the goals of this study and of revision of the transcriptions in order to find patterns and similar elements (Fetterman, 1998).28

In order to have more tools to analyze the and understand the sex work context, I also made a detailed revision of the field notes of the informal conversations with key informants such as clinic staff, police, human right officers, community members and academics. The discussion and conclusion sections are based on the analysis of the interviews, the reality learned by the multiple fieldwork visits to the study setting, the engaging into the local community, and the elements found in the literature. Personal identifiers were replaced with unique pseudonyms to protect women's identities.

A section of Chapter 2, is currently being prepared for submission for publication, Rocha Jiménez, Teresita; Goldenberg M., Shira; Brouwer C., Kimberly; Silverman G., Jay, Paz-Bailey Gabriela and Morales-Miranda Sonia, “Migration, Violence, &

28 See Appendix IV for Coding.
Exploitation among Central American Sex Workers along the Mexico-Guatemala Border: A Qualitative Study”. The thesis author was the primary investigator and author of this paper.
3. IMMIGRATION POLICIES AND SEX WORK REGULATIONS

3.1 Immigration Policies

For the purpose of this study, I will describe the immigration policies both in Mexico and in Guatemala that apply directly to the target population (FSW of Central American origin). As I mentioned at the beginning of this dissertation, no interviews with sex workers were conducted on the Mexican side of the border. However, the regulations in Mexico affect women that have migrated to Mexico or that are trying to migrate to the United States; therefore, I will briefly describe the immigration policies and sex work regulations in both Mexico and Guatemala. In this section I will describe what the written law establishes regarding immigration policies in both countries, in chapter four, I will describe how these policies are implemented, and how these implementations affect FSW’s lives.

3.1.1 Mexico Immigration Policies

Migration in Mexico is regulated by a series of laws and regulations, the most important and most recently passed is The Immigration Law (2011) and Migration Regulation (2012). Before 2009, Mexico’s immigration law was 1974 General Population Law. For a long time this law did not represent migration context reality in Mexico and did not address migrants protection (Ballinas & Becerril, 2009). The first reform in 2009, decriminalized undocumented migration and turned it into an


The Migration Law was approved in 2011 and in 2012 the Migration Law Regulations Book, which contains important administrative procedures, was approved and enforced. Before the 2012 Regulations were approved, only Guatemalans from the departments of Quetzaltenango, San Marcos, Huehuetenango, Quiché, Petén, Retalhuleu and Alta Verapaz could enter to Mexico’s border towns (Instituto Nacional de Migración, 2011). The recent approved regulations (2012) established that all Guatemalans and Belizeans can be in Mexican territory 62 miles from the Mexican border for up to 72 hours with a Regional Visitor Permit, and cannot work or engage in any profitable activities. The Regional Guest Worker Permit allows Guatemalans and Belizeans to work in the Mexican states of Chiapas, Tabasco, Campeche and Quintana Roo for one year if they have a job offer letter from a registered contractor (Instituto Nacional de Migración, 2012). Nationals from Honduras, El Salvador, Nicaragua and Nicaragua willing to enter Mexico need to have a valid tourist visa, a student visa, a temporary resident visa or a permanent resident visa (Secretaría de Gobernación. México, 2012).

Only immigration officers from the Mexican National Immigration Institute have authority to detain and deport irregular migrants [synonym for undocumented migrants

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30 This regional card is valid for five years and it can be extended. Owners can make innumerous trips as long as they are through a formal crossing point, do not combine two different permits or visas, and do not engage in any labor or illegal activities.
31 This permit allows permit holders to obtain the same permit for the worker’s family.
32 Before the Migration Regulation passed (2012) only Guatemalans from border cities could enter to Chiapas with a temporary visitor permit, currently the regional card is valid for all Guatemalan departments and Belize that want to enter. People from Costa Rica and Panama do not need a visa to enter to Mexico.
A migrant will be subject to deportation if he entered the country without proper documentation or through a non-authorized crossing point; if a deported migrant enters without a readmission permit; if a migrant falsely affirms that s/he is a Mexican National to an Immigration Officer; if the migrant is in a criminal process and his presence entails a national or public security issue, and if the migrant presents false or fraudulent information to immigration authorities [Article 144 of the National Migration Law (Congreso de Diputados del H. Congreso de la Unión. México, 2011)].

After a migrant is identified as committing any irregularity, s/he will be taken within the following 24 hours to an estación migratoria [Migrants Detention Center].

According to article 111 a person cannot be held more than 15 days in the estación migratoria, although there are some exceptions to this period. However, according to the immigration law, the maximum period that a foreigner can be held is 60 days. It is specifically established that migrant’s human rights must be guaranteed in Mexico.

It is important to address the recently approved anti-trafficking regulations to understand the overlapping between sex work and migration. In 2007 the Law to Prevent and Human Trafficking was approved (Ley para Prevenir y Sancionar la Trata de

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32 Depending on migrant flows, some Mexican states have more than one Estación Migratoria. There are approximately 58 estaciones migratorias all over the country (Global Detention Project, 2013)
33 The estaciones migratorias need to fulfill important requirements, such as guaranteeing foreigner’s human rights, allowing access to lawyers and legal representatives and consulate assistance and access to medical care if needed. Article 117 (Congreso de Diputados del H. Congreso de la Unión. México, 2011).
34 The exceptions for holding a migrant for more than 15 days are: not having valid information to determine the migrant’s identity or nationality; that the consulate of migrant's country take longer to issue the foreigner documents; that a third party establishes impediments for migrant’s trip; illness or disability, and presence of a legal resource such as an habeas corpus that prevent migrant’s deportation.
personas) (Congreso de Diputados del H. Congreso de la Unión. México, 2007), in 2011 a reform was made to include the use of media (e.g., newspaper announcements) as a mean to perpetrate trafficking and to sanction it. In 2012 the Law for Prevention, Punishment and Eradication of Crimes on Trafficking in Persons and for the Protection and Assistance to Victims of these Crimes (Ley General para Prevenir, Sancionar y Erradicar los Delitos en Materia de Trata de Personas y para la Protección y Asistencia a Víctimas) was approved that included among other several measures, protect victims and avoid deportation when sex trafficking victims are migrants.

### 3.1.2 Guatemala Immigration Policies

Migration flows, specifically transit flows, are regulated through the Regional Agreement CA4, signed by Guatemala, Honduras, El Salvador and Nicaragua in 2005. This agreement establishes free transit between these countries and permission to stay in any of these countries for up to three months (Sistema de la Integración Centroamericana, 2005). Any person with a valid identification from their country can transit through these countries without a passport. They need to use any formal point of entry and show their ID to the migration authorities.\(^{37}\)

Non-residents, tourists or visitors, need to have “sufficient financial means to live decently in the country and do not engage in any profitable occupation” (Gobierno de Guatemala, 2008). Only Guatemalan immigration authorities (Dirección General de

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\(^{37}\) The name of the official ID varies between countries: Documento Único de Identidad (DUI) is used in Guatemala and El Salvador, Documento Nacional de Identidad (DNI) is used in Honduras and the Cédula de Identidad in Nicaragua.
Migración) have the authority to deport irregular migrants. The punishment for foreigners that stay in Guatemala without authorization will be either a fine or deportation. The cases in which foreigners will have to pay a fine include: entering through an unauthorized crossing point, re-entering the country when the person has been deported or staying for longer periods than the allowed (Gobierno de Guatemala, 1998).38

Regarding the due process of detention and deportation, the foreigners should have a hearing in a maximum period of 10 days, and then authorities will receive and gather information about the regulation that the migrant has broke [from other Guatemalan authorities or a third party] in the following five days; and decide the case 72 hours after of the reception of the information or after the hearing (Gobierno de Guatemala, 1999).

In chapter four, I will describe how these regulations are being implemented and the differences between what the law establishes and how in reality these policies are being implemented based on FSW interviews.

3.2 Sex Work Regulations

3.2.1 Sex Work Regulations in Mexico

For the purpose of this study I will only describe sex work regulations in Chiapas, México, as it borders Guatemala. As in the previous section, I will describe what the written law establishes regarding sex work regulations in both countries, in chapter four, I

38 According to the article 95 of the Regulation document of the Migration Law the fine for staying over time will be 10Q per day, 200Q for not crossing through a formal point and 700Q for evasion migration checkpoints.
will describe how these policies are implemented, and how these implementations affect FSW’s lives.

Sex work in Mexico is not regulated by any federal law and is not allowed nor forbidden, but some states like Chiapas quasi-regulate sex work through health regulations. Article 204 of the Chiapas Health Law establishes that sex work is only permitted in venues located in tolerance zones [zones situated outside the urban zone where sex venues are located (Gobierno Constitucional del Estado de Chiapas, 2009)]; these venues need to have a license issued by the municipality. People who engage in sex work need to have a “sanitary control card” or *tarjeta* [people who trade sex as a way to make a living need to have a card issued by the municipality clinic which requires them to go to periodic gynecological exams and HIV and STI testing], which works as a clinic record issued by the municipality. The card requires periodic gynecological exams and HIV and STI testing.

Tolerance zones and venues where sex work is traded will be under vigilance and under direct supervision of sanitary and municipality authorities. The law explicitly forbids sex work by those: underage (<18 years old), pregnant, without a sanitary control card, STI or HIV positive, drug users, with any physical or psychological disability, irregular migrants and people with criminal records. Sex work is not allowed in venues outside the tolerance zone, venues that allow entry to minors, in outdoor settings and

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39 The law does not specify which population needs to undergo to periodical tests, it only establishes that all persons who trade sex as a way of leaving need to have a card issued by the municipality clinic [Article 203] (Gobierno Constitucional del Estado de Chiapas, 2009). At national level, HIV/STI control and prevention is regulated by Mexican Official Regulation for the Prevention and Control of Human Immunodeficiency Virus which establishes that prevention efforts should be concentrated on the segment of vulnerable population, such as men who have sex with men (MSM); workers and commercial sex workers (CSWs), injecting drug users (IDU’s), persons deprived of their liberty and children living on the street.
massage rooms (Gobierno Constitucional del Estado de Chiapas, 2009). The venues where trade or selling of sex is allowed should promote condom use and give information regarding sexual health. The law does not specify the cost of the tarjeta, or how venues or FSW are monitored.

3.2.2 Sex Work Regulations in Guatemala

Sex work regulations in Guatemala are similar to Mexico’s, where sex work is also quasi-regulated through health regulations. The difference is that the Guatemalan law that regulates sex work applies for all the departments [states] in Guatemala while the Mexican laws vary from state to state. The Regulation of Prevention, Diagnosis, Treatment and Management of STI and HIV-published in March, 2012 establishes that high risk populations [PEMARV. Población en más alto riesgo y vulnerabilidad] defined by this law as: “sex workers, homosexuals, transgender, transsexuals, bisexuals and other men that have sex with men”, need to engage in periodical HIV and STI examinations in the local clinic”. However, this law does not establish that undergoing to periodical tests allows FSW and other population to engage into sex work industry, contrary to Chiapas Health Law.

The clinic provides a health card [locally named as cartilla or libreto] that confirms the expedient number and their periodical visits. The regulation explicitly establishes that the main use of the card is “to make the testing process faster; that in no case the card should be used by authorities to coerce the population in any sense, and that having a card is not equivalent to having a certificate of good health” (Ministerio de
Salud Pública y Asistencia Social Guatemala, 2012). The law does not specify the cost of the card, how often women have to go and how this is enforced. In 2009, the Guatemalan government approved the Law Against Sexual Violence, Exploitation and Trafficking [Ley Contra la Violencia Sexual, Explotación y Trata de Personas], besides including anti-trafficking regulations, this law abolished article 191th of the section “VI Crimes against Decency” [De los Delitos contra el Pudor] of Guatemala Criminal Code which established that “if a person engage in prostitution will be fine with a fined of 300Q to 1,000Q”. This section was substituted with section “VI Sexual Exploitation Crimes” (Gobierno de Guatemala, 2009).

A section of Chapter 3, is currently being prepared for submission for publication, Rocha Jiménez, Teresita; Goldenberg M., Shira; Brouwer C., Kimberly; Silverman G., Jay, Paz-Bailey Gabriela and Morales-Miranda Sonia, “Migration, Violence, & Exploitation among Central American Sex Workers along the Mexico-Guatemala Border: A Qualitative Study”. The thesis author was the primary investigator and author of this paper.
4. FINDINGS

4.1 Socio-demographic characteristics of FSW in Tecun Uman and Quetzaltenango, Guatemala (N=20)

Most FSW reported being single (65%) and the two women who reported being in current relationship did not express income support from their partners. Salvadoran women represented 35% of the participants, 30% were from Honduras, 25% from other cities in Guatemala and 10% from Nicaragua. Twelve participants had a home country ID as their identification, two of them also had a passport; and the other two mentioned that they had 3-month permit. Three participants reported not having any type of documents, either because they lost them or left them in their home country. Five participants were from Guatemala, therefore internal migrants.
Table II. Socio-demographic characteristics of (N=20) FSW in Tecun Uman and Quetzaltenango, Guatemala

<table>
<thead>
<tr>
<th>MEASURE</th>
<th>N (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age, in years, mean (range)</strong></td>
<td>34 (21-47)</td>
</tr>
<tr>
<td><strong>Age at sex work entry, in years, mean (range)</strong></td>
<td>24 (15-45)</td>
</tr>
<tr>
<td><strong>Civil Status</strong></td>
<td></td>
</tr>
<tr>
<td>• Single</td>
<td>13 (65%)</td>
</tr>
<tr>
<td>• Married/Partnership</td>
<td>2 (10%)</td>
</tr>
<tr>
<td>• Widow</td>
<td>4 (20%)</td>
</tr>
<tr>
<td>• Divorced</td>
<td>1 (5%)</td>
</tr>
<tr>
<td><strong>Country of Origin</strong></td>
<td></td>
</tr>
<tr>
<td>• El Salvador</td>
<td>7 (35%)</td>
</tr>
<tr>
<td>• Honduras</td>
<td>6 (30%)</td>
</tr>
<tr>
<td>• Guatemala</td>
<td>5 (25%)</td>
</tr>
<tr>
<td>• Nicaragua</td>
<td>2 (10%)</td>
</tr>
<tr>
<td><strong>Migration Status</strong></td>
<td></td>
</tr>
<tr>
<td>• Migrated with home country ID or passport*</td>
<td>12 (60%)</td>
</tr>
<tr>
<td>• Migrated without documents**</td>
<td>3 (15%)</td>
</tr>
<tr>
<td>• Migrated internally</td>
<td>5 (25%)</td>
</tr>
<tr>
<td><strong>Deportation History</strong></td>
<td></td>
</tr>
<tr>
<td>• Previously deported from Guatemala</td>
<td>8 (40%)</td>
</tr>
<tr>
<td>• Previously deported from Mexico</td>
<td>3 (15%)</td>
</tr>
<tr>
<td>• Previously deported from both countries</td>
<td>3 (15%)</td>
</tr>
<tr>
<td><strong>Place of solicitation</strong></td>
<td></td>
</tr>
<tr>
<td>• Bar</td>
<td>8 (40%)</td>
</tr>
<tr>
<td>• Outdoor (park, street, by phone)</td>
<td>8 (40%)</td>
</tr>
<tr>
<td><strong>Main trading sex location</strong></td>
<td></td>
</tr>
<tr>
<td>• Bar</td>
<td>8 (40%)</td>
</tr>
<tr>
<td>• Hotel/Motel</td>
<td>6 (30%)</td>
</tr>
<tr>
<td>• Rented room</td>
<td>2 (10%)</td>
</tr>
</tbody>
</table>

*Refers to authorized entry into Guatemala under the Central American Free Trade Agreement, but lack of work authorization.
**Refers to undocumented migration (i.e., foreign-born participants who reported not having any type of immigration documents).

Forty percent of participants had ever been deported from Guatemala, 10% were ever deported from Mexico and 15% were deported from both countries. Four participants mentioned the desire to migrate to Mexico or to the United States. We interviewed women from three different places of solicitation and four different locations where women traded sex. Eight women met and traded sex with their clients in bars; four met and traded sex in s, and the other eight met clients outdoors such as the park, on
streets or by phone. Among these final eight, four traded sex at hotels/motels and two at their own rented rooms. There are differences between bars and s, which are not established in any law but are institutionalized in the study setting. The main differences between bars and s, are the alcoholic beverages prices, the type of clients and the hours of operation. Alcoholic beverages prices are lower in s than in bars, clients with less money go to s and the s close earlier, around 9pm, while bars are open until 12am. According to local practices, women are not allowed to sale or trade sex in s whereas in bars is permitted.

All the participants had children; most of them had their first child when around 19 years old. Time in interview location has an outlier in its standard deviation because one of the participants had been living her entire life in the interview location. The monthly average income was $443 USD. Income fluctuates considerably; the lowest salary was $128 USD and the highest was $1,061 USD monthly. Most women who work at bars or s engage in ficheo or fichear as part of their work and to make more money. Fichear means that FSW have to drink with the clients in the sala or main room.

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Table III. Socio-demographic characteristics of FSW in Tecun Uman and Quetzaltenango, Guatemala (N=20) [Mean, Std. Dev., Min, Max, and quartiles]

<table>
<thead>
<tr>
<th>Variable</th>
<th>Obs</th>
<th>Mean</th>
<th>Std. Dev.</th>
<th>Min</th>
<th>Max</th>
<th>q1</th>
<th>q2</th>
<th>q3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>20</td>
<td>34.3</td>
<td>8.1</td>
<td>21.0</td>
<td>47.0</td>
<td>27.0</td>
<td>34.5</td>
<td>41.5</td>
</tr>
<tr>
<td>Years in Location</td>
<td>20</td>
<td>8.0</td>
<td>11.6</td>
<td>0.0</td>
<td>46.0</td>
<td>0.4</td>
<td>3.0</td>
<td>13.0</td>
</tr>
<tr>
<td>Years of education</td>
<td>20</td>
<td>3.7</td>
<td>2.7</td>
<td>0.0</td>
<td>9.0</td>
<td>1.5</td>
<td>3.5</td>
<td>6.0</td>
</tr>
<tr>
<td>First time traded sex</td>
<td>20</td>
<td>23.8</td>
<td>8.8</td>
<td>15.0</td>
<td>45.0</td>
<td>17.0</td>
<td>21.5</td>
<td>28.0</td>
</tr>
<tr>
<td>Age First Child</td>
<td>20</td>
<td>19.2</td>
<td>3.6</td>
<td>15.0</td>
<td>28.0</td>
<td>17.0</td>
<td>18.0</td>
<td>20.0</td>
</tr>
<tr>
<td>Children</td>
<td>20</td>
<td>2.4</td>
<td>1.2</td>
<td>1.0</td>
<td>6.0</td>
<td>2.0</td>
<td>2.0</td>
<td>3.0</td>
</tr>
<tr>
<td>Income USD</td>
<td>20</td>
<td>443.1</td>
<td>275.6</td>
<td>102.0</td>
<td>1061.0</td>
<td>230.5</td>
<td>396.5</td>
<td>575.5</td>
</tr>
</tbody>
</table>

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40 One dollar is approximately equivalent to 7.8 Quetzales (Q).
before having sex with them. Women receive a commission for each beer or soda that the client invites them.

Regarding HIV and STIs, only one participant said that she tested positive for the initial HIV test and was waiting for the confirmatory test. Only one woman said that she had a curable STI, and 85% of the participants have a sanitary control card, undergoing periodical clinic visits. Two participants mentioned that they get tested in a private doctor, and only one participant had not being tested at the time the interview took place because she did not have any identification with her.

4.2 Consequences of the implementation of immigration policies: impacts on FSW’s human rights and safety

Women’s reasons for migrating included economic needs as sole household providers, gendered vulnerabilities related to partner abandonment or death and the desire to flee violence in home countries. Women expressed diverse circumstances of migration journeys such as volunteer dangerous crossing experiences; abandonment, deception and coercion into migrating; but also documented regular and circular migration flows. These circumstances were related with women’s age, experience, destination and third parties involvement. Immigration authorities play an important role in migrant’s experiences not only in their migration journey but also in the destination place. Structural factors such as socio-economic and migration status, were key factors in women’s sex work entry.
4.2.1 Diverse circumstances of migration journeys

All of the women in this study have either internal or international migration histories. The circumstances of how they traveled and, in some cases, how they crossed borders from one state to another, varied. Some women who migrated to Guatemala from other Central American countries engaged voluntarily in dangerous crossing circumstances to avoid detention and deportation from authorities, despite the free transit agreement (CA4), such as hiding in trucks by themselves and crossing through unauthorized entries which are normally isolated places. Sometimes these circumstances were related with underage migration.

No, I came by myself. I was asking for a ride and they [the truck drivers] brought me here. They hid me inside the truck and that is how I was able to cross the border to this side [Guatemala].

[Carmen, 26 years old, El Salvador]

When I came to Guatemala [from Nicaragua] we crossed as a *mojados* [clandestine] through the river, I had to pass through the river because I couldn’t cross through the border since I was underage

[Marlen, 27 years old, Honduras]

In some cases, the involvement of third parties heightened the vulnerability of women as they migrated. Some women, especially ones that were trying to migrate to the United States, paid a *pollero* [smuggler] to cross through Mexico and to their final destination, finding themselves in abandoned or in vulnerable situations.

I left with other girls who told me that some guys could help us get there [United States] but they tricked us, we paid and they never came to get us. We paid 500Q each, and we had to cross in a boat through the river to Ciudad Hidalgo [Mexico] but *migración* [migration authorities] were there…
[Marlen, 27 years old, Nicaragua]

Yes I tried to go there [United States] but they only left us in Mexico… In the Distrito Federal [Mexico’s capital] the coyote [smuggler], left us in a hotel, he disappeared. We lost 5,000Q [640 USD] and what were we going to do? We came back, we didn’t stay because we couldn’t find what to do, we didn’t know anyone, he left us lost there.

[Justina, 46 years old, Guatemala]

Some women (N=6) mentioned their desire or told their experiences about trying to migrate to Mexico or to the United States but some of them were deported from Mexico (N=3) and others mentioned that it was too dangerous to crossing to through Mexico and make it to the United States, or too difficult due migration authorities presence:

I got my passport because I would like to go to work to Mexico maybe, because going to the United States but is really dangerous right now

[Celeste, 47 years old, Honduras]

When I came here [Tecun Uman] from Honduras I had the intention of crossing the border [to the United States] But I haven’t even left here [Tecun Uman]… I haven’t even gone to Tapachula [Chiapas, Mexico] or any of those places. I’ve only stayed here. I can’t find the courage, I’m scared of the Zetas [violent group of the Gulf cartel in Mexico]…I don’t know, I thinks is too dangerous

[Yoselin, 33 years old, Honduras]

I wanted to go to the United States but I just went to Mexico to Puerto Madero [Chiapas, México] but we came back [Guatemala] because we heard that it was too dangerous to cross, and there were too many officers [immigration authorities]… too much control.

[Sonia, 37 years old, El Salvador]
Contrary to these previous experiences, some women migrated from Central American countries to Guatemala through the formal crossing points and using conventional conveyance by showing their home country ID or passport, showing their local documents and responding correctly to migration authorities.

I crossed through the border, by bus, overland. I crossed with my identification with my DPI [Honduras’ ID] and last year I got my passport...

[Celeste, 47 years old, Honduras]

I had my documents; I had my Honduran ID and my passport. We could only stay for three months here [Guatemala] so every three months I went back to Honduras to renew the permit.

[Teresa, 38 years old, Honduras]

Interestingly, a number of women that had more experience described engaging in circular migration, regularly traveling back to their home countries to visit their children and bring them money, as well as to avoid overstaying their visa:

I live and work here [Quetzaltenango] but every two months I go back to El Salvador to see my family and my children, I’m always in touch with them because I’m the only one that supports them.

[Verónica, 27 years old, El Salvador]

I go often see my kids [to El Salvador] I have been here like three weeks but before that I staid here 11 days and then I went back home.

[Rosa, 30 years old, El Salvador]

I go back to El Salvador every three months, to get my passport stamped, I have permission to be here 90 days and then I go back...

[Karla, 43 years old, El Salvador]
I have my documents; I have my Honduran ID and my passport. We could only stay for three months here [Guatemala] so every three months I went back to Honduras to renew the permit.

[Teresa, 38 years old, Honduras]

There are other cases where the migration journey and the border crossing processes entailed coercion or deception on some level. Some participants (n=3) described having been tricked or deceived into migrating by traffickers in women’s home communities and were forced to trade sex.

I suffered a lot because I came without documents, because I was a minor. But the señora [lady] tricked me. They crossed me through the river because I couldn’t cross through the border because I was a minor, and when I arrived here to Guatemala I found with the surprise that I was going to work in the sex work… She told me that I was going to work in a diner cleaning and doing dishes, but it was not true, it was not like that.

[Marlen, 27 years old, Nicaragua]

They brought me [to Guatemala] with lies, because the bar’s owner told me that I was going to babysit two children...as one is young and ignorant, and I needed money so I came with them and they crossed me, but I don’t even know how because I didn’t have any documents. I was 16 years old, almost 17, so maybe they paid to migración [immigration authorities]. They hid me in the back of the pick up, the guys from migración didn’t even see me... It was horrible I suffered a lot, not only me but others too.

[Itzel, 31 years old, El Salvador]

Additionally, six other women reported having been deceived by a friend, a family member or a stranger who had promised them a different job outside the sex work industry, some of these third parties did not exploit them for sexual purposes. Most of these participants thought that they were going to work as baby-sitters, waitress or cleaning:
I came here after my husband died I was like 22 years old and I didn’t know where I was going to work, the mister’s wife [bar owner wife] told me that I was going to work in a diner but it wasn’t like that, when I went there and I started to fíche and work in sex [sex work], it was hard and I didn’t at the beginning because I was ashamed...

[Vilma, 41 years old, Guatemala]

I came [to Guatemala] with a cousin, she told me that we were going to work in a diner, “we are going to make a lot of tips, and you are going be able to help your mom, that’s besides your salary”. When we got to the diner I saw that it was a bar and I started crying when I saw that after a few weeks I decided to stay to support my family

[Sonia, 37 years old, El Salvador]

These participants mentioned that as they needed to help their family they staid working in the sex work industry.

4.2.2 Interaction with authorities and immigration officer’s role

Immigration authorities (Dirección General de Migración) engage in different practices toward Central American sex workers in Guatemala. These practices entail different elements and vary between cities, between venues where women work and authorities involved. These practices include deportation without the due process, arbitrary detentions and abuse of power.

Detention and deportation were less common practices in the border city, Tecun Uman than in Quetzaltenango or Guatemala City. However, to avoid any trouble, some participants who worked in this city said that whenever police are around managers, owners tell them to hide or leave from the venue so they do not get caught.
What I’m most worried about is that migración [immigration authorities] will get here and deport me for not being from here [Guatemala]. I always live with that fear. The other day the señora [manager], asked me ‘you don’t have documents, right?’ Go inside for a while because the police are coming.

[Marlen, 27 years old, Nicaragua]

Raids, detention, and deportation were reported more commonly in bigger cities like Quetzaltenango and Guatemala City. The circumstances differ in which detention and deportation occurs, but a common element is that authorities do not respect due process. One participant mentioned being arbitrary detained by police even though she had her documents (e.g. home country ID or passport) and her actualized sanitary control card with a police stamp on it.

Yes, yes they treat us really bad, to the foreigners, they detained us, we were around six, I never thought migración [immigration authorities] was that hateful and sanidad [health authorities] too. The police, sanidad and migración the three of them, treated us terribly. They took us almost naked, like putas [whores]. And we told them ‘why they were taking us if we had our ID, we had the libreto [sanitary control card] and the police stamp’?

[Ana, 36 years old, Nicaragua]

The conditions in which women are being held and deported included several days or weeks of being held in a detention center and/or dangerous deportation situations.

I had five days working in this bar when migration got there, and we were detained and deported. After all those days, they deported us. When we were in the border [Guatemala-El Salvador border] they left us there, in the middle of the night, and we didn’t know what to do…we had to ask for a jalón [ride] from a truck driver.

[Rosa, 30 years old, El Salvador]

I had a problem in Mazate, [Mazatenango, municipality of Suchitepéquez, Guatemala] police came [to the bar] in the middle of the night and took us
all. I was deported with other women from El Salvador, but at some point the van where we were in stopped and we managed to escape. We knocked on a house and asked them to let us stay there at night. We came back next morning [to Xela, Guatemala].

[Claudia, 39 years old, El Salvador]

Some testimonies reported immigration authorities asking for money and sex in exchange for sex workers’ freedom. Most detention and deportation cases expressed humiliation and mistreatment, and in other cases physical violence was also involved.

Yes, they [immigration authorities] took us as if we were dogs…and they took us to a center [migrants detention center], where they had all the migrants, and held us for 18 days…some officers told us ‘if you give us 1,000Q and you let chimar [have sex] with us we’ll release you’…We told them that we preferred to be held then do that with them, ‘you are officers, you should be more respectful’…

[Ana, 36 years old, Nicaragua]

Some participants that had been detained or deported mentioned immigration authorities are abusing and bothering foreigners, and disregarding their documents (either their home country ID or passport). They even said that immigration authorities have ripped their passports to be able to detain them and deport them.

I think that we, who are foreigners, and who come from other countries, we are always bothered. Even, I, when they ask for my passport, I don’t show it to them, because what does migración [immigration] do? For us it’s expensive to get a passport, between 50 and 60 USD depending on the time that we want to stay here. And then they come [immigration authorities], and they rip your passport

[Alejandra, 25 years old, Honduras]

Corruption among authorities in the sex industry was a practice mentioned by some participants. As the following quote illustrates, a FSW mentioned that when
immigration authorities raided the first bar where she was taken, sex workers showed them false passports provided by owners. She said she does not know if the owners paid immigration authorities, but she thinks there was corruption involved, because all sex workers in that venue were underage and the migració did not do anything about it.

Look, migració [immigration officers] went often to the bar and as I told you the owners gave us fake documents...they showed them our fake documents. Once, when I was drunk I ripped it [fake passport] because I knew it was not my real name and I was drunk and angry and I broke it and ripped it... He paid a fine to the police, so they never took us, I think it was all very corrupted because we were all underage and migración never took anyone or detained them [owners]

[Itzel, 25 years old, Honduras]

4.2.3 Sex work entry as a consequence of structural factors: poverty, and migration status

The 20 women interviewed all have children and the money that they make is their only source of income -, only two of the participants reported being married but they didn’t mention if their spouse helps them with the household expenses. Ninety per cent of the participants send money to their home country, and some women also support their parents and siblings. They stated they engaged in sex work because they needed money to support their family and could not earn sufficient money either in their local town or home country. Some have large debts to pay and have no other source of financial aid.

I feel terrible, I would like a different job where I could make good money, but I’m here because of that large debt...I have to pay 950[Q] monthly and I’m a woman and I have six children and I don’t have anyone else’s support

[Justina, 46 years old, Guatemala]
In El Salvador, I borrowed money and when I fell in love, I didn’t want to work [informal work] anymore but I left a debt pending. I didn’t know how to pay it and the interests kept increasing and increasing...until I had to start working in this [sex work].

[Rosa, 30 years old, El Salvador]

I traveled with my sister and we didn’t want to work in this [sex work] but we decided to start because I had my children with me and we were not making enough money, I didn’t know what to do. So I decided to work in this [sex work] and here I am.

[Rocío, 31 years old, Nicaragua]

Some participants perceived discrimination and xenophobia towards migrants. Consequently, some interviewees started to work in the sex industry as a last resort, once other job options had been exhausted:

I realized they needed help [my family], and now I support them, after they [her family] mistreated me. That is why I’m working in this [sex work] if I looked for a job here [Guatemala] people say: ‘give me your documents’, and I don’t have them so I cannot work here...I would like to keep studying and I can’t do that either.

[Carmen, 26 years old, El Salvador]

I did try to find other work in the capital [Guatemala City] washing dishes and cleaning, so the lady asked for my papers, ‘Where are your documents? Where are your letters of recommendation?’ I showed her my Nicaragua ID, and she said right away, ‘no, no people from other countries can’t work here’. Forcedly I had to start working in this [sex work] even though I didn’t want to.

[Ana, 36 years old, Nicaragua]

Expressions like “I wanted to find an honorable job or a decent job” were common in the participants’ conversations. Most didn’t feel they have a dignifying occupation but pointed out that they didn’t have other employment options. Another element that arose in the interviews was income. The women mentioned that they
couldn’t change jobs or work in other places because they would not make enough money to cover household expenses.

Yes, I wanted to work in something different, in something dignifying but I couldn’t find any job that paid enough. I had to leave my children [while I was working] and pay for someone to babysit them and treat them well. The money that I had left no me daba [it was not enough].

[Rocio, 31 years old, Nicaragua]

4.3 Consequences of implementation of sex work regulations: the unintended consequences of policies

As I described in the Guatemala Sex Work Regulations section, the Reglamento para la Prevención, Diagnóstico, Tratamiento y Control de Infecciones de Transmisión Sexual y del Virus de Inmunodeficiencia Humana [Regulation of Prevention, Diagnosis, Treatment and Management of STI and HIV] establishes that female sex workers are a vulnerable population in Guatemala and need to undergo to periodical HIV and STI tests to prevent, attend and control HIV and STI (Ministerio de Salud Pública y Asistencia Social Guatemala, 2012). This is the only law that “regulates” sex work in Guatemala. High risk and vulnerable populations, sex workers included, need to have an up to date cartilla or libreto [sanitary control card] in order to be able to work. In the discussion section I will describe how and by whom these regulations are enforced, and the nuances and contradictions of this system.

Carrying a cartilla or libreto has positive and negative impacts on women’s health and safety. The role of the police in sex workers’ periodic clinical revisions is closely linked with the implementation of libreto regulations. The implementation of regulations
varies by venue and city for sex workers and can determine the health and safety of sex workers as well as susceptibility to violence and exploitation.

4.3.1 The use of cartilla or libreto: impacts on sex worker's health

Seventeen of twenty women interviewed had a current valid cartilla or libreto, meaning they had gone within the last 15 days to the clinic to be tested for STI and have the clinic stamp their notebook. Even though stamping is not an established practice in the law, both the clinic and the police stamps women’s cartillas.

Women expressed mostly positive feelings towards owning a cartilla or libreto characteristics such as that it is free, owning a card means having access to information about their sexual health, information about HIV and STI, condoms, and that it protects them from police and other authorities troubling them.

Q: Do you have a cartilla?

A: Yes, a cartilla, and with it I receive the results where it says that it came out negative [HIV test] and they don’t charge us anything [to receive testing at the municipal clinic]. It’s good because they [HIV/STI tests] are all free.

[Maria, 44 years old, Guatemala, ]

Q: And they ask you to stamp your cartilla [sanitary control card] at the clinic?

A: Yes, I go to the clinic. In fact they just gave us some tests [HIV/STI], which from what I’ve heard are excellent...I feel happy that I got tested because I'm interested in knowing if I’m healthy so I can take care of myself”

[Rosa, 30 years old, El Salvador, bar]
Well, I have the cartilla [sanitary card] and the HIV card and the vaginal exam after every eight days miss, and that’s where they give us the condoms.

[Eva, 44 years old, Guatemala, ]

Well yes, let’s say that if something happens [police arrives to the bar] you can present the cartilla and they can see that you have a health card and leave you alone.

[Yoselin, 33 years old, Honduras, ]

Even though most women felt positively about having a card, they mentioned that clinic resources were not sufficient and they often need to provide supplies like gloves and syringes to get tested.

The uncomfortable part is when we go to the clinic to get tested, there are no syringes or gloves, so we have to go and buy them and then start the queue again.

[Carmen, 26 years old, Honduras, ]

We need to buy everything we need: gloves, swabs, a folder [for medical records] even toilet paper, they [clinic staff] only test us.

[Ana, 33 years old, Honduras, bar]

A Nicaraguan sex worker expressed discontent toward the clinic’s rules against receiving women without an ID.

I went to Honduras and came back here [Tecun Uman] and the Doctor didn’t receive me. They didn’t want to test me because I got robbed and I didn’t have any ID with me. I think that’s wrong because they [clinic staff] affect you, because I would like to know if I have any infection or so...

[Marlen, 27 years old, Nicaragua, bar]
FSWs that do not have their *cartilla* mainly work outdoors [street, parks, rented rooms] in Quetzaltenango. Some of these women mentioned that they do get tested but either by a private doctor or when they go back to their home country; they don’t think they need to have a *cartilla* with the clinic stamp if they are working on their own. Most of the women that currently work outdoors worked first in an indoor venue. One participant mentioned that when she was working in a bar she used go to the clinic but when she left and moved to the street she stopped going.

I don’t go anymore [to the clinic], because I don’t need to if I work here [room]...now that I don’t work in a bar I go with a private doctor [to get an HIV test] every six months.

[Karla, 43 years old, El Salvador, outdoor]

Q: Do you have a card here [Quetzaltenango]?

A: No, I don’t go to the clinic here [Quetzaltenango] I have never felt the necessity to go, but I go to the hospital every time I go to El Salvador, every month or month and a half. I get tested for HIV and I get a pap smear.

[Claudia, 39 years old, El Salvador, outdoor]

However, other women that work at the park or on the streets mentioned that they do have a card and go periodically to the clinic.

I go to the clinic every two weeks because I like to take care of myself and have my papers in order.

[Celeste, 47 years old, Honduras, outdoor]
I go to the clinic and have a card that says that I’m ambulante [itinerant]; because I work here [park] I go every 15 days so I can get tested because people have diseases and germs.

[Justina, 39 years old, El Salvador, outdoor]

Participants that were underage the first time they sold/traded sex or were forced or coerced had different cartilla use experiences. Some participants did not have access to HIV and STI information or tests until their first clinic visit, which for some of them was months after starting to trade sex.

In that place [bar] they never asked for our libreto, we didn’t have anything [card or information], we were all underage...until later, when I went to the clinic they explained everything to me, about HIV, STI and they gave us condoms there [clinic].

[Itzel, 16 years old first time, 31 years old, El Salvador]

When I started working [sex work] I didn’t know what a libreto was, I never saw one or went to the clinic.

[Rocio, 15 years old first time traded sex, 31 years old, Honduras]

Look, the first time that I ocupe [traded sex] I was really young [15 years old] and HIV didn’t exist yet, but you needed to be careful with STI. I used to check the clients [for STI]...my cousin that also worked in this [sex work] showed me how to check the clients [to be sure they didn’t have any diseases].

[Sonia, 15 years old first time traded sex, 37 years old, El Salvador]
Participants often related forced or deceived entry into sex work with being young and ignorant and with poor information about HIV and STI.

I was young and ignorant and I needed to work and needed money so I came with them, I was going to baby sit two children but the fact is that they brought me to that bar to work against my will ... I thank God that despite being ignorant I didn’t get any diseases or HIV.

[Itzel, 16 years old first time traded sex, 31 years old, El Salvador]

“We were four minors, and you know when you are young it’s easier to get brain washed because you don’t know anything about life... I just prayed so I wouldn’t get a disease but I didn’t know about all the diseases that exist”

[Marlen, 17 years old first time traded sex, 27 years old, Honduras]

Only one participant reported that she might be HIV positive and she was waiting for the confirmatory test when the interviews took place. However, 18 out of the 20 answered HIV as their main health concern. As the following quotes illustrate:

As I told you everything else [abuse, violence, pregnancy, mental health] has a cure but not HIV, and as I told you I can take care of myself but I don’t know how others [clients] are. What I’m most afraid of is HIV.

[Verónica, 27 years old, El Salvador]

What I’m most worried about is to get sick, to get HIV and die. HIV is the most jodida [screwed up].

[Eva, 44 years old, Guatemala]

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41 See question 12 of the Qualitative Interview Guide (Appendix I).
Most participants reported currently using condoms with their clients even though some of them do not want to or offer more money to trade sex without protection. HIV/STI awareness increased condom use and women’s agency toward their sexual health.

Q: Were you able to negotiate condom use with your clients?

A: Yes, they would tell you about that [that they wanted to do it without a condom] and even one told me “I’ll give you 200Q without a condom”. And I told him no, not even if he gave me 1000Q because I'm not doing anything with that, imagine if I get one of those sicknesses. What would I do with my kids?

[Rosa, 24 years old, El Salvador]

Some clients don’t want to use them [condoms] but I always them when we are outside the room that they need to use it and if they don’t want to then I don’t do it. Some [clients] say yes but when they are inside they try to take it off, what I do to protect myself is give their money back and leave the room.

[Rocio, 31 years old, Honduras]

4.3.2 The role of police in sex work context

One of the main differences between study setting cities is the role of police within the context of sex work. The police have an important role in the implementation of the cartilla and in supervising periodical visits to the clinic. This is a practice in Tecun Uman but not in Quetzaltenango, however this is not established in any law or regulation. After going to the clinic for revision, women go to the police office [that is next to the Tecun Uman local clinic] to get a stamp in their libretos that confirms, or validates sex workers’ visit to the clinic.
Police have a notebook with sex worker’s name, picture, bar name and date that they went to the clinic. According to several informal conversations that I had with local police in Tecun Uman, they verified and stamped sex workers’ *cartilla* to make sure they are healthy. They also said that they do it to make sure there are not minors working in the bars. In informal conversations with clinic staff we learned that they do not issue a *cartilla* to underage sex workers. Interviews with women revealed different perspectives towards going to the police and various reasons why they do or do not go. Migrants that go with the police mentioned that police does not bother them even though they are foreigners; others even mentioned that if you get a stamp from the police they would not detain you in police bar raids.

Q: After going to the clinic, do you have to go with the police?

A: Yes, to stamp the *cartilla*, they only stamp it and that’s it... they don’t care if you are not from here [Guatemala] sometimes they do ask “where are you from?” and you only show your ID but there are any problems with them [police] here [Tecun Uman].

[Rosa, 30 years old, El Salvador]

“They [clinic staff] test you [clinic] and then stamp it [*cartilla*] and then you go with the police. In case they [police] arrive to the bar you have your *cartilla* stamped and you don’t have any problems... We only need to tell them [police] the bar where we work, and they search our name and they have our records there, they even have picture of us... I think it is good because if the police gets to the bar they can’t detain you because you have their [police] stamp and the clinic’s”.

[María, 44 years old, Guatemala]
Women that do not go to get a police stamp mentioned that they don’t want their family to find out where they are working or that is not necessary to get a stamp from the police, as reasons to skip their visit to the police.

I don’t go over there [police] I go to the clinic, but not with the police because I don’t want my family to know that I’m working here [sex work]. There are a lot of people I know over there that knew that I was [name of her husband] wife, and I don’t want my kids to find out... I think the others [sex workers] go because they are not from Guatemala, they are from other countries, so in case of death, people would able to tell where they are from, due to the picture and name they [police] have.

[María, 44 years old, Guatemala]

The only thing that I don’t do is go with the police...if they ask for my libroto I show it to them but I don’t have their stamp... because I have heard that you don’t need to go with them [police] and I have never had any trouble.

[Nayeli, 22 years old, Honduras]

There is an overlap between the authority of local police and immigration officers but it is not clear if women confuse them, or police sometimes deport women without having the authority to do so; nonetheless another reason for not going to the police was to avoid deportation.

I don’t go to the police because I’m scared. Now that I have my kids I get scared because I think to myself, ‘If I go to the police and they take me [deport me], my kids will be left behind.’ One coworker had three kids and they detained her for three months and during that time she didn’t hear anything about her kids and once she got back to El Salvador she quickly returned [to Guatemala] . . . So that’s why I get scared. My kids are small, and what are they going to do if I disappear for three months?

[Carmen, 26 years old, El Salvador]
The police came to the bar and they took all the foreigners that were there, they didn’t ask for anything, nor the clinic stamp or our documents they just took us, it was the police, the PNC [Policía Nacional Civil].

[Claudia, 39 years old, El Salvador]

Two participants mentioned that as “prostitution is illegal” immigration and the police could have detained them, mostly in bigger cities, regardless of having their card and documents with them.

Q: What happened if you had your card up to date and your documents?
A: It didn’t matter because prostitution is illegal, they [immigration authorities] will always arrive and deport women [migrants FSW] and in a while they [FSW] came back again [Guatemala City].

[Celeste 47 years old, Honduras]

Even though we have our card, they [immigration authorities] always come and detain us because we are not supposed to be doing this [sex work] here [Guatemala].

[Ana, 36 years old, Nicaragua]

In Tecun Uman, there is a relationship between the police and the venue where women work; few women mentioned that they go to stamp their libreto but they lie when the police asked them where [name of bar or cantina] they work. We learned from women’s testimonies and from fieldwork that women are allowed to ocuparse [sex work] in bars but not in s.

FSWs mentioned that only bars are registered in police books. “Well they don’t come to check this business because here it’s a cantina and not a bar and so we are not
registered on the police books, only the bars are registered” [María, 44 years old, Guatemala]. However, a common practice found among women who work at cantinas give the name of a bar when asked to avoid a problem with bar’s owners or managers.

I don’t tell the police where I work because I can’t get the bosses in trouble. Because the truth is since it’s a cantina they can’t [have women selling or trading sex] the employers can get fined... Since I arrived here [] the owner told me to say that I was working in a bar.

[Yoselin, 33 years old, Honduras]

Abuse by police was reported in different cities and in different situations and it was not always related to the fact that women need to go with the police after their visit to the clinic. A Guatemalan sex worker that was working in Chicacao [municipality of Suchitepéquez, Guatemala], before migrating to Tecun Uman was detained despite having her cartilla up to date.

Well, you see, one time, . . . mmm . . . they were taking women away even though we had our libreto and everything, but they told us the order [of detaining women] came from the Captain of the capital [police from the city of Guatemala] they took us away. They held us for two days and we had to pay a fine of 400Q.

[Eva, 44 years old, Guatemala]

Another woman that was working in Chiquimula before migrating to Quetzaltenango was a subject of abuse of power by a policeman.

After going to the clinic [in Chiquimula] we went to the police and one day one policeman wanted to have sex with me without paying and without using a condom, he told me that they [police] were the ones who ordered. He tried to hit me several times and I defended myself...I wanted
to sue him but he threatened me and told me that he would deport me if I sued him...after that, every time I went there he didn’t want to stamp my cartilla.

[Alejandra, 25 years old, Honduras]

4.3.3 Sex work venues’ characteristics: impacts on sex workers’ personal safety, HIV prevention and susceptibility to exploitation

The characteristics, rules and interactions with managers and owners of sex work venues determine many factors in the context of sex workers, such as personal safety, condom negotiation and susceptibility to violence and exploitation. A common characteristic in bars and in Tecun Uman and in Quetzaltenango is that women can live in the same room where they sell or trade work. As a lot of women do not have money to pay rent, it is easier for them to live in the venue.

Rooms are often located in the back of venues or upstairs far from where the manager/owner and other FSWs are. Some women expressed concern about being alone with clients in the rooms because they are too far from the sala [where the tables, manager, cashier and other sex workers are]. Violence from clients was the second highest health concern for most of the participants.

I feel safe when I’m in the sala [the main area of the bar where the tables and music is] one feels safe because the coworkers, and the people in charge are there, but it’s hard when one goes to the room and locks themselves [inside] with them [clients] and with the music going on downstairs, you cannot hear anything.

[Carmen, 26 years old, El Salvador]
I'm scared because when I was working here [Tecun Uman], one of the girls who was working here... the girl left with a client to the room and then when she came out, she was crying and then we asked, asked her why she was crying and she said that the guy had put a gun to her head if she didn’t perform oral sex, so then the girl came and said she had to do it because she thought he could kill her inside the room, the bar is so big that it’s difficult for anyone to hear you. Those are some of the things that worry us the most because you never know what kind of person you’re going to bring in [the room].

[Rosa, 30 years old, El Salvador]

Yes, one time [a client] wanted to do it anal [anal sex] and I didn’t want to because I only work doing it normal and he tried grabbing me by force and I got a glass bottle, because I always have a glass bottle [in the room]. And I got the vase and hit him in the forehead and I was just very scared with all the blood that the man had on his forehead. And I was able to leave with a towel and he still tried to grab me by the hair, but I was able to escape because otherwise, he would have beaten me inside the room and done what ever he wanted with me.

[Carmen, 26 years old, El Salvador]

I had two bad experiences, once a client told me ‘we are going to do it like this’ [anal], ‘No’ I told him and he took out a knife and he wanted to kill me, If the manager wouldn’t have opened the door, he would have killed me. The second time that a client hit me was also inside [room] because I didn’t want to do what the client wanted.

[Yolanda, 21 years old, Guatemala]

Sometimes violence is related to alcohol and drug use and it can affect condom negotiation with clients and women’s physical and psychological health.

It’s hard when they [clients] are drunk, sometimes is not easier when you are with them in the room, sometimes they tell you ‘I’m drunk so I’m only going to touch you’ [without a condom] but that is enough to get infected, but is hard to deal with them when they are drunk.
“Drugs and alcohol makes people mean, a lot of them [clients] drink and some and then they don’t feel what they are doing sometimes they get really aggressive”

And some of them already go into the room drunk so it’s also hard that way. Sometimes some of them even carry weapons or knifes, when you go into the room you are by yourself and they could just leave you there dead and leave, while nobody is going to find out until later.

One participant that was trafficked [17 years old] mentioned that they [her and other girls] were systematically drugged in the bar [with heroin] so they wouldn’t complain while having sex with clients. She was not aware if she used condoms in a lot of ocupadas.

I didn’t know what happened when I was high, I always prayed so I wouldn’t get a malignant disease, we didn’t know [if we used condom] because we were always drugged.

Alcohol use is common and sometimes part of the job. In most of the indoor places women need to engage in ficheo.

I don’t really like to drink but sometimes I do drink a lot because I’m ficheando and I’m making money, but is not because I like to drink.
Drinking less alcohol was a positive element mentioned by FSW working outdoors. “In bars is too much perdición [excess] for me because in a bar I have to drink with men [fichear] but I feel lost there [bar] I don’t like to drink or smoke or dance” [Justina, 43 years old, Guatemala. This was a reason for this last participant to move to outdoor work.

Mobility between venues and cities is very common among FSW in this region and can be explained for different reasons such as agricultural season, [more clients coming to the border region to work in Chiapas, Mexico’s field] violence in a city, or venue’s characteristic’s or circumstances such as control from the owners. Mobility from indoor to outdoor work was found in Quetzaltenango among participants that are currently working at the streets, they mainly moved from bars to outdoors such as renting their own room or at a hotel.

I left the bar like a moth ago because there were no clients at all, I was in the bar just sitting there and waiting. I already have frequent clients, which know me so I work now in my room...

[Verónica, 43 years old, El Salvador]

Look I don’t like a person that is controlling be or telling me what to do, I always told to the manager that I wanted my freedom...right now I work mostly in this room [which rents only to work].

[Karla, 43 years old, El Salvador]

I came here [to Quetzaltenango] from Guatemala City because they were killing women, they killed six compañeras [peers] because they [gangs] were charging us money to work every day, like 20Q [3 USD] I couldn’t keep working there, it’s too dangerous

[Celeste, 47 years old, Honduras]

Event though some positive characteristics of working outdoors or by their own were mentioned, one woman also mentioned that she felt safer working in a bar.
I feel safer in a bar, because there are more women; here [room] I leave at night all by myself

[Karla, 43 years old, El Salvador]

Another characteristic mentioned by some participants and learned during fieldwork is the fact that most of the venues where women live remain locked at night. Women cannot leave until the manager or owner opens the venue in the morning.

The thing that I don’t like is that they [bar manager] locked us at night, they close until they open the door next day...Maybe they lock because once they were robbed...but that’s the only thing that I don’t like, it makes feel desperate.

[Ana, 36 years old, Nicaragua]

Owners and managers play different roles such as providers of information of HIV and condoms, as guardians but also as exploiters and abusers.

I felt safe in that place the owner, he had security outside and he called us to see if we were fine he offered us money, they explained about HIV and STI... I have never found a bar like that one...

[Alejandra, 35 years old, Honduras]

The cashier says always told us, ‘If you guys want to, you can leave [with a client outside the bar] but if you don’t want to, then don’t leave because we’re not going to force you guys so that then you guys never return, think about it’.

[Carmen, 26 years old, Honduras]

The owner’s wife, she explained to us [sex workers] and showed us how we needed to work [with a condom] and that we needed to do exactly what the client wanted to...Once a client wanted to do it from behind [anal] and I wrestled with him and he hit me he left me a purple eye and after that, the owner punished me because I didn’t do what the client wanted.
[Itzel, 31 years old, El Salvador]

Well, you can find good and bad patrones [bar’s owners]. You can find exploited owners that mistreat you, that locked you down, that charge fines, that take your money...Right now I wouldn’t let someone treat me like that but when you are a girl, you get exploited.

[Sonia, 31 years old, El Salvador]

A section of Chapter 4 is currently being prepared for submission for publication, Rocha Jiménez, Teresita; Goldenberg M., Shira; Brouwer C., Kimberly; Silverman G., Jay, Paz-Bailey Gabriela and Morales-Miranda Sonia, “Migration, Violence, & Exploitation among Central American Sex Workers along the Mexico-Guatemala Border: A Qualitative Study”. The thesis author was the primary investigator and author of this paper.
5. DISCUSSION

5.1 Immigration Policies Discussion

5.1.1 Diverse circumstances of migration journeys: age, experience and information

The participants had different migration circumstances, which varied, based on age of migration, conveyance, company during migration journey, knowledge of immigration policies. These circumstances were a response to restrictive immigration regulations, misinformation and the subjective practices of authorities.

Restrictive immigration policies and misinformation lead migration women to find informal border crossing entries [defined as an unauthorized border crossing between two countries (Comisión Internacional de Límites y Aguas entre México y Guatemala, 2000)] This entails more susceptibility to physical risks and violence in their journey. This was demonstrated by the testimonies of women that hired polleros [smugglers] to be able to migrate to the United States and were abandoned or tricked on their trip.

Women that expressed desire to go to Mexico or to the United States were completely aware of the migration risks such as violence from criminal networks but also immigration restrictive measures such as important presence of immigration authorities (Chandomí, 2013; Comisión Nacional de Derechos Humanos, 2011; La Jornada, 2012). Girls who migrated underage [less than 18 years old] faced the most dangerous situations. The combination of underage migration, deception or coercion and inexperience led to some women into sex trafficking circumstances. These women faced deprivation of freedom, agency, and security of person, in addition to gender-based violence,
exploitation, and sexual abuse. The three women that reported these experiences stated that were able to escape from being held against their will by their traffickers, one of them with a client’s help, and the other two by tricking the bar security.

Women who had more information about free transit between Central American countries and a valid ID from their local country were able to cross without obstacles issue and in less risky crossing circumstances. Some older and more experienced sex workers stated going back and forth to their home countries to visit their families, they engaged into circular migration a positive consequence of the free transit agreement. Age and experience are factors that mitigate dangerous circumstances in the migration journeys of women.

5.1.2 Interaction and police role: subjective and arbitrary practices toward Central American migrants

Implemented migration policies differ markedly between cities. The immigration authorities of Tecun Uman were more tolerant of foreigners; this phenomenon might be explained by the large migrant demographic of the population of Tecun Uman (Infante et al., 2004). In contrast, raids and deportations were more common in Quetzaltenango and in Guatemala City. Women that work in Tecun Uman experienced less detention and deportation from Tecun Uman, demonstrating that although the law applies to all the Guatemalan departments [states], practices change due several factors such as being in a border town [Tecun Uman] vs. a bigger city [Quetzaltenango], outdoor sex work [Quetzaltenango, Guatemala City] vs. indoor sex work [Tecun Uman and other cities in
Guatemala like Escuintla, Mazate]. Some women mentioned that when they were present in a raid, the police said the order came from Guatemala City.

Some women said that as long as they have their ID [from their country of origin] and their sanitary control card, immigration authorities couldn’t do anything to them, several of them reported never had any trouble with immigration authorities so far. However, other women reported practices like detention, charging fines and subjective deportations perpetrated by authorities.

Arbitrary detention of women by authorities, disregarding their documents (either their home country ID or passport), going so far as to rip them shows complete abuse of power. Some women stated being detained by several days or weeks and after being deported through dangerous and isolated areas. They also mentioned that during the detention/deportation process authorities tried to exchange sex with them and mistreated them.

These situations entail great risk on women physical safety and put them into further vulnerable situations. Some participants were convinced that immigration authorities were involved in or at least had knowledge of the process of transporting underage girls to Guatemala. One sex trafficking victim mentioned that authorities probably were aware of underage women being exploited in bars. Unfortunately it has been extensively documented, especially in Mexico and in Central America, authorities’ corruption and their participation in illegal networks involved in migrants smuggling and human trafficking (Diario del Sur, 2012, 2013; Herrera Ruiz, 2013; United Nations Office on Drugs and Crime, 2011; United Press International, 2013).
5.1.3 Sex work entry as consequence of structural factors

Even though sex work entry is not a direct consequence of a policy or the implementation of one policy, it is a consequence of structural factors, and it is important to address that the combination of these structural factors, such difficult socio-economic, head of house hold, and gender-based violence. These structural factors combined with women’s migration status pushed them into the sex work industry.

Participants mentioned that when they engage in the sex work industry they felt shame, they suffered and expressed that it was a horrible experience, expressed that they wanted a decent job, besides feeling stigmatized. Some participants perceived discrimination and xenophobia towards migrants while looking for work but also as sex workers. This is illustrated by a César Infante and colleagues’ paper, that shows how communities along the Mexico-Guatemala border rejects the presence of mobile population specially risk behavior population such as sex workers because they are seem as HIV and STI carriers. However, they mention that HIV is one more element that contributes to increase repudiation to undocumented migrants (Infante et al., 2004).

5.2 Sex Work Regulation Discussion

5.2.1 The use of cartilla or libreto: impacts on sex worker’s health and safety

As sex worker’ testimonies showed, the use of cartilla or libreto entails different experiences and different consequences of having or not having. Some of these consequences have a positive impact in women’s health, specifically in FSW’s sexual health (e.g., card free cost, sexual health information, condoms) and HIV prevention and
diagnosis; which is the goal of Guatemalan government HIV/STI regulations (Ministerio de Salud Pública y Asistencia Social Guatemala, 2012).

Overall owning cartilla raised women’s awareness about HIV/STI and condom use. Several women mentioned that before going to the clinic to get a cartilla they didn’t know how to protect themselves or that so many diseases existed. Increase awareness and knowledge can lead to an improvement on women’s sexual health and women’s agency.

Only one woman mentioned her discontent toward clinic’s rule of not receiving women without an ID. We learned from our community partner that any person can go to the clinic to get an HIV or STI free test as long as you show any valid ID. A person that only goes to a one-time visit does not need to own a cartilla. With this practice, clinic staff avoids trouble of testing or issuing a cartilla to an underaged girl. If an underage wants to get tested needs to be accompanied with a parent or a legal guardian.

Participants that were underage the first time they traded sex or were coerced/forced mentioned that they didn’t have access or knowledge of HIV/STI, for some of them the first time that they had access to sexual health information and HIV/STI was at the clinic. Women also mentioned that having a card protects them from police and other authorities troubling them.

5.2.2 The role of police in health regulations implementation

Women’s perception that owning a card protects them from authorities bothering them could be built around the active role police play in health regulation implementation in Tecun Uman. There are different reasons why women go with the police to get their
*cartilla* stamp: avoid trouble with police; avoid detention in a police bar raid. And other reasons why they do not go to stamp with the police such as not want their family to know where they are working.

In Tecun Uman, police assume a role that is not established in any law and it confuses police and immigration officer’s authority. Some women mentioned that they do not go to the police because they did not want to get deported. Other mentioned that as prostitution is illegal in Guatemala police could detain them and charge them fines. It is important to address that before 2009 the Ley contra la Violencia Sexual y Explotación y Trata de Personas [Law against Sexual Violence, Exploitation and Human Trafficking] was approved, prostitution was “a crime against decency” and the punishment was a fine of 300Q to 1,000Q (Gobierno de Guatemala, 2008) which can explain some practices from fine charges but does not justify detention and abuse from authorities. Misinformation and subjective police practices put women into vulnerable situations and in a position of disadvantage in front of authorities. Some women experienced abuse of power by police: they tried to have sex with women, without condom or paying, and physically assaulted them. Even though, there are a few studies that document that police role within sex work context has mainly negative impacts on women’s safety and HIV prevention (Shannon et al., 2008; World Health Organization, 2005) this theme needs further study, to have a better understanding of the consequences and how can these be mitigated.
5.3.3 Sex work venue’s characteristics: impacts on sex workers’ personal safety, HIV prevention and susceptibility to violence

We found that a venue’s characteristics such as physical distribution of the bars, rules, hours, and owners and managers’ attitude toward FSW are determinant for women’s safety. Besides the local practices between the differences between bars and s, sex work venues not formally regulated. Women’s testimonies showed that physical characteristics of venues, such as the location of the rooms, could be determinant in women’s personal safety and condom use negotiation. Some women mentioned having their own mechanisms against client’s violence. HVI and violence from clients were the two main women’s health concerns.

Health authorities could regulate this and it could have an important impact in sex worker’s safety, decrease their susceptibility to violence in the work place and increase condom use with clients. Krusi and colleagues discuss how measures taken in unsanctioned indoor venues helped increased condom use negotiation, capacity to refuse unwanted services and violent perpetrators (Krusi et al., 2012).

Alcohol and drug use were mentioned as a risk factor to some women, they mentioned that clients are more aggressive when they drink. One woman was drug injected forced and she mentioned that she couldn’t remember if she used a condom while she was drugged. Even though alcohol would be harder to regulate or to measure because alcohol consume translates into more benefits to bar owners, monitoring client’s consumption could be another measure to protect women’s safety. The relationship between alcohol use and high-risk sexual behavior has been extendedly studied (Fisher,
Bang, & Kapiga, 2007; Fritz et al., 2002; Madhivanan et al., 2005; Zablotska et al., 2006).

Positive and negative opinions toward venues and owners were found in women’s testimonies. Negative behaviors such control and exploitation, were mentioned by some women. Women that were in a sex trafficking situation mentioned experiences such as that forced to do whatever the client wanted; physically abused by owners and one participant was systematically drugged. Other women mentioned that owners treated them well, explained them how to protect themselves against HIV/STI and trying to raise awareness of the risks of going out with clients.
6. CONCLUSIONS AND POSSIBLE INTERVENTIONS

It is difficult to make recommendations when the gap between what the law established and implementation of policies is considerable, and subjective and arbitrary practices are found every day in sex work context. However, as we learned from the interviews there are elements that can be taken into consideration and some existent programs in similar countries [e.g., India, China] that could help to improve Central American FSW safety and health, address sex trafficking (Moriski E. & Urada A., 2011) and interventions that could decrease migrants’ vulnerabilities.

Regarding immigration policies, I have learned that despite having a tolerant immigration policy and free transit agreement (Sistema de la Integración Centroamericana, 2005), authorities are implementing restrictive immigration controls and that in general these restrictive practices are not stopping migration from southern countries to Guatemala. As we learned from the interviews, information and experience were important elements that influence safety when crossing, reduce violence and exploitation, and increase women’s agency in terms of condom negotiation and HIV prevention.

Even though some women knew about the free transit agreement none of the women interviewed mentioned having knowledge of their rights as migrant when detained or deported. A realistic and important local intervention to improve the journeys and experiences of female migrants in their place of destination could be to design workshops about migrant’s rights (e.g., explain the process of detention and deportation, explain their right to call their consulate and ask for help, explain immigration officers authorities in terms of their authority in, detention and deportation process, police roles
and authority).

As FSW and migrants are a highly mobile population, continual visits to venues, street, and parks would be necessary to speak with as many people as possible. Currently, migrant shelters offer this information, but after talking informally with people from the Migrant Shelter in Tecun Uman, Guatemala, we learned that the percentage of women that use these shelters is around 10% of the total population and most of them are with other family members.\(^{42}\) Therefore, these workshops could be implemented by local clinics and organizations that already engage and work with FSW as they move from city to city to work.\(^{43}\) Another important intervention should be done in the origin country, El Salvador, Honduras and Nicaragua, pre-migration education to address the risks of migrating and sex trafficking definition and identification. Even though there are national campaigns rising awareness about sex trafficking, local efforts mainly in small towns were women come from should be also included (Criterio, 2013; Dirección General de Migración y Extranjería, 2012; Embajada de los Estados Unidos en Nicaragua, 2012).

Regarding sex work regulations, as I have indicated sex work is not regulated per se, and the only regulation that includes sex work is the HIV/STI regulation, which it is not focused in regulating sex work but in regulating sex workers sexual health. Different actors such as police, bar owners and managers, have implemented and institutionalized practices that are not part of the HIV/STI regulations, such as police checking FSW cartillas, venues where sex work can be traded and venues where it cannot [bars vs. s],

\(^{42}\) Informal conversations with staff from Migrant’s Shelter [Casa Albergue Migrante] in Tecun Uman, Guatemala in November, 2012.

\(^{43}\) Organizations such as Casa de la Mujer, EDUCAVIDA in Tecun Uman. Asociación Nuevos Horizontes in Quetzaltenango. Proyecto Vida, Coatepeque. Organización de Mujeres en Superación, OMES in Guatemala City, could implement this type of interventions.
venues’ rules, etc. which fulfills sex work regulation vacuums. The current way of regulating sex work is only regulating sex workers but not the entire sex work system [clients, bar’s owners/managers, venues physical characteristics, venue’s rules, etc.].

As we also learned in the interviews certain factors of health regulations implementation such as cartilla use, physical characteristics of venues, alcohol and drug use, and owner’s role can have important impacts on women’s safety in HIV and STI awareness. The cartilla and the periodical visits to the clinic showed mostly positive impacts on women’s health, not only in HIV prevention and sexual education but also in condom use negotiation and increasing women’s agency in a long-term period. Interventions could be implemented using the clinic and the cartilla as platform. Specially enhancing migrant’s human rights, sexual education [which most of them covered] and addressing sex trafficking. Some local organizations in Tecun Uman such as EDUCAVIDA and Casa de la Mujer and others in Quetzaltenango like Fundacion Iturbide use the clinic as a meeting point with sex workers, in Quetzaltenango organizations also go to the streets and to the parks to try to cover all sex work venues. Information as an empowering tool for women and a right-based framework has been documented in India as useful tools in reducing vulnerability to HIV and STI (Misra, Mahal, & Shah, 2000).

According to Stigler’s Theory of Regulation (Stigler, 1971) regulations are passed only for the general benefit and not only for the benefit of a small group. If we use this principle we could argue that measures such as improving the conditions of the bar and increasing women’s security inside the bars to reduce violence from clients, would
translate into positive outcomes for the interest-group and in the end this will entail an improvement in FSW work context (Krusi et al., 2012). Health authorities could be the responsible on enforcing these regulations. Concrete elements could be regulated such as: having a quick and easy mechanism for women to ask for help from the rooms and enforcing condom use inside the sex work venues and providing free condom access could help decrease women’s vulnerabilities, HIV among sex workers and increase safety in the work place. In some countries such as Philippines, have implemented similar interventions have reported improving work environment (Morisky, Peña, Tiglao, & Liu, 2002)

Stigma and discrimination were factors that constantly appeared in the interviews, not only against migrants but also against FSW. Women expressed feeling pointed by immigration authorities, and by society, especially when looking for a job. Stigma, discrimination and gender-based violence are the principle drivers, besides the economic benefits of FSW exploitation. Even though sensitization in a conservative society such as the Guatemalan society (Way, 2004) is difficult, more interventions and efforts should be done to specifically address this discrimination and stigma.

As has been documented throughout this study, authorities and society members such as bar owners/managers, clients, family members, and friends are involved in the dangerous circumstances of female migration, as well as exploitation and force or deception into sex work entry, among other situations that affect women’s safety. Community plays an important role in increasing women’s vulnerability, as we learned from the interviews not all actors involved has as final objective to exploit or affect
women. Society should be included in a violence prevention campaign to be aware of the implications of co-participating and promoting gender-based violence, migrants discrimination and the effect on women’s sex worker’s safety and health. A Mexican NGO, have implemented interventions, individually and in groups mainly in Tlaxcala\textsuperscript{44}, México, to reduce violent attitudes in men and to improve their interpersonal relations, the further goal of this intervention is to “eradicate inequalities between men and women through participatory activities that allow the participants to learn and apprehend affective ways of relating with themselves and their environment” (Gendes, 2013). Providing sex worker’s information, arising awareness of I believe that a combination of community-based intervention with providing empowering tool to women such as information and strong ties with other members of society could improve FSW working conditions and could positively impact on women’s safety and health.

6.1 Strengths and Limitations

It is important to address the limitation of this sample, as the recruitment was done with the help of EDUCAVIDA, more women who were connected to health services were included. Tecun Uman sample (N=11) is larger than Quetzaltenango (N=8), and more women working indoors were interviewed (N=12) vs. women working outdoor (N=8). Although our sample size (N=20) is not large enough to generalize about the consequences of immigration policies and sex work regulations along the Mexico-Guatemala border, these testimonies allow for a better understanding of female migration

\textsuperscript{44} Tlaxcala is a Mexican state miles from Mexico City where one of the main economic activities for men is being pimps, also is one of the states with more sex trafficking documented cases (Zamora Garza, 2011).
experiences from a more integral perspective, including reasons for migration, crossing experiences, and FSW migrants every-day experiences (e.g., interaction with authorities, coexisting with society).

For ethical reasons we were only able to interview women over 18 years of age. However, first experiences shared by women (first time they sold or traded sex, venue mobility) compared with the current project aided us in building histories and to understand how age and sex work experience plays an important role in migration experiences. Empirical evidence of trafficking cases is hard to find; therefore, this paper can help to better understand the context and consequences that these situations entail for women. Comparing FSW experiences in Guatemala and Mexico could be helpful to make a bi-national analysis and to better understand the border dynamic in this context. Further studies that interview a larger sample as underage girls could help to reach a broader understanding of current sex trafficking and to design and improved the current anti-trafficking measures. Tendencies in victims’ characteristics, in strategies of recruitment and actors involved to mention some examples, could be obtained from a larger sample. A possible strategy to assess the efficiency of the recently approved anti-trafficking policies could be to interview women that had sex trafficking experiences before the law was implemented and women with experiences after the law was approved.
Review the informed consent and interview structure:
“This session will be audio taped and will last about 1 hour. Today’s interview will be about your migration history, the reasons that you began to sell or trade sex (have sexual relations in exchange of money or something that you needed) your working conditions and the reasons you continue to do so. During the interview, I’ll be taking a few notes about the events and experiences you describe to me. I want to remind you that we are not affiliated with the Health Center or immigration authorities, and that the information you share with us today is completely confidential. Also, you do not need to provide the names of specific people or work places during this interview. Do you have any questions about how we’re going to spend our time today?”

• Ensure that the participant feels comfortable and safe conducting the interview. For example:
  o “Do you have any concerns about carrying out this interview with me?”
  o “Do you think that talking to me could pose any problems for you, for example, with people you work with, your family, or anyone else?”

Migration History
1. To start, could you please tell me a bit about your background?
   Sample probes:
   • What city and country were you born in?
   • Where is your family?
   • How long have you been living here? Do you live here permanently?

2. I’m interested in hearing more about your migration history. Could you tell me about the reasons that you came here to [interview location]?
   • What was your life like before you came here (employment, family, life, etc)?

3. How did you get to [the interview location]?
   • Who did you travel with? How did you pay for your travel? Did someone help you? If so, what was your relationship to that person?
   • Could you tell me about your interactions with migration authorities?
• Did you have papers when you traveled here? If so, what kind?

4. When you arrived, were things as you expected them to be?
   • For example, did you have a job or know where you could work?
   • What type of work did you think you’d be doing when you arrived?
   • In retrospect, is there anything you wished you had known before coming here?

5. Have you ever migrated or have tried to migrate to another country (such as Mexico or the United States)?
   • If so, could you tell me about your experience there?
   • For example, where did you work?
   • Did you have any interactions with immigration authorities or police?
   • What are the main differences in your work environment between where you work now and these places you previously migrated to/through?

**Context of sex work entry**

“Now I’d like to hear about the first time in your life that you sold or traded sex”

6. Could you please tell me a little bit about the reasons why you started to sell or exchange sex for the first time?
   • How old were you?
   • What city was it in?
   • What did you expect that this kind of work would be like?
   • Whose idea was it for you to sell or trade sex for the first time?

7. When you began to sell or trade sex, where did you live?
   • Was this the same place as where you worked?
   • Were you able to come and go as you liked (e.g., go to the doctor, see friends)?
8. Could you tell me about any use of drugs and alcohol when you began to sell/trade sex?
   - Were drugs or alcohol involved? Tell me about that.
   - At what age did you begin using drugs or alcohol? Why did you start?
   - If ever used drugs: What type of drugs did you use?

9. Could you tell me a little bit about your sexual practices when you first began selling or trading sex?
   - Had you heard about ways of protecting yourself from a sexually transmitted infection (STI) or HIV?
   - Where or from whom did you get this information? Tell me about that.
   - Were you able to decide whether to use condoms with clients and other men?

10. Could you tell me a little bit more about the type of place where you worked when you first started to sell/trade sex?
    - What kind of venue did you work in? E.g., street, bar, “closed house”
    - Did you ever experience violence at work (physical abuse, mistreatment, etc.)?
    - Did anyone from the venue where you worked ever encourage you to use condoms at work? Did anyone ever explain to you how to use the condoms and where you could receive some if you needed them?
    - Could you keep all the money that you earned?

11. Comparing to the first venue when you began sex work to where you work now, do you feel that your working environment has improved or gotten worse? For example, have your safety, earnings, and clients changed? If so, how?
    - What kind of venue do you work in now? E.g., street, bar, “closed house”
    - How do you feel about your safety at work now?
    - Could you tell me about your condom use with clients?
    - Are you able to keep all of the money that you earn?
Access to health services

“Now I’d like to hear about your well-being and the access to health services”

12. Since you started to sell/trade sex, what are the health issues or risks that concern you the most?

- Injuries or abuse in the work place?
- HIV/STIs?
- Unwanted pregnancies or unsafe abortions?
- Mental health? (e.g., nerves, depression)
- What are some of the challenges you face in terms of protecting your sexual health?

13. When you began to sell/trade sex, did you access any services, such as medical care or other services that assist women? (e.g., HIV testing, shelter, counseling)?

- If so, where did you access these services? Did you have to pay for these services?
- What other services would have been helpful to you at the time?
- Were you aware of any other services that you needed but did not use them?
- Did you ever seek help but didn’t get the help you needed? Tell me about that.
- Currently, how is the access to health care? Have you ever need help or assistance and you did not receive it? What do you think it could be improved regarding access to health care (think about your current everyday life)?

14. Do you have a “Sanitary Control Card” or health permit to engage in sex work?

- If so, where did you get it? How much did you pay? Do you have to pay periodically to maintain it? Do you think you receive benefits in exchange for having this card?
- If not, what are the main reasons that you don’t have this card? Have you had any troubles with the authorities or somebody else for not having it? Have you had to change your work venue because you do not have it?
• In the first place where you sell/trade sex, did you have a card or a permit to work?

Health and interactions with the authorities

15. When you first began to sell/trade sex, did you have any interactions with the police or immigration authorities?

• If so, tell me a little bit about that.
• Have you ever been detained or deported by the police or immigration authorities? Have you ever had any problem with any other authorities?

16. In the last year, have you experienced a police raid at your place of work?

• If so, could you tell me a little bit more about that?
• Have you worked in a venue that has been closed or temporary suspended?

17. Could you please describe some of the reasons that you continue to sell/trade sex?

• What are you fears about what will happen to you if you stop selling sex?
• If you had the opportunity to get a different type of job, would you be interested in that? If so, what type of work would you be interested in?

Closing Remarks

• Do you have any other experiences, thoughts or feelings that you would like to share?
• Ensure that the interview ends on a positive note. For example:

“Thank you very much for taking the time and having the strength to tell me about your experiences, you are clearly a strong and courageous woman to have survived everything you have been through.”
Appendix II
Socio-demographic Questionnaire

PARTICIPANT ID CODE: ____________
INTERVIEWER INITIALS: ___ ___ __
DATE OF INTERVIEW: ____/_______/______
   D      M      Y

LOCATION OF INTERVIEW:
   Ciudad Hidalgo……1
   Quetzaltenango…2
   Tapachula………3
   Tecun Uman……4
   Malacatán………5
   Other……………6 Specify:________________

1. What is your nationality?
   Mexican…………………………1
   Guatemalan……………………2
   Honduran………………………3
   Nicaraguan……………………4
   Salvadoran……………………5
   Other……………………………6 Specify COUNTRY:______________
   Decline to answer……………98

2. Which city do you currently live in?
   Ciudad Hidalgo………………1
   Quetzaltenango………………2
   Tapachula…………………3
   Tecun Uman…………………4
3. How long have you lived in this city (since your last trip)?
   _____YEARS and _____MONTHS  _____DAYS_____ or my whole life
   ☐ Do not know
   ☐ Refuse to answer

4. What is your immigration status?
   Doesn't apply - I am not an immigrant….1
   Internal Migrant. ..........................2
   Undocumented .............................3
   Migrant in transit..........................4
   Work visa (FMFT, FM2, FM3).............5  Specify:_______________
   Naturalized..................................5
   Refugee.......................................6
   Documentation in progress...............7
   Don't know...................................97
   Decline to answer..........................98

5. How old are you?
   _____ Years  If <18 years old, participant is NOT ELIGIBLE for this study
   ☐ Do not know
   ☐ Refuse to answer

6. What is the highest level of education that you have completed?
00 None, no formal education
01 Some primary school
02 Finished primary school
03 Some secondary school
04 Finished secondary school
05 Some prep school
06 Finished prep school
07 Technical college
08 University
09 Other Specify: __________________________
97 Don’t Know
98 Decline to Answer

6. What is your marital status?
   Single..........................1
   Married/common law........2
   Divorced.......................3
   Separated.....................4
   Widowed.......................5
   Don’t know...............97
   Decline to answer.........98

Now I’m going to ask questions about your sexual practices, including selling or trading sex. By this, I mean having sexual relations with someone in exchange for money or something else that you needed. Please remember that all of your answers are completely confidential.

7. Have you traded sex for money, drugs, shelter, or other resources in the last month?
☐ Yes
☐ No  Participant is NOT ELIGIBLE for the study

8. In which city do you currently sell or trade sex? (Check all that apply)
   ☐ Tapachula, México
   ☐ Ciudad Hidalgo, México
   ☐ Quetzaltenango, Guatemala
   ☐ Tecun Umán, Guatemala
   ☐ Malacatán, Guatemala
   ☐ Other: City/town______________________________
       Country________________

9. In the last month, where is the main location where you met clients? (PICK ONE)
   ☐ Bar, or botanero
   ☐ Night club
   ☐ "Closed house"
   ☐ Street
   ☐ Hotel or motel
   ☐ Customer's vehicle
   ☐ Park, plaza, or other public location
   Other: _______________________________(SPECIFY)

10. In the past month, where is the main location where you had sex with clients? (PICK ONE)
   ☐ Bar, or botanero
   ☐ Night club
   ☐ "Closed house"
   ☐ Street
   ☐ Hotel or motel
   ☐ Customer's vehicle
   ☐ Park, plaza, or other public location
   Other: _______________________________(SPECIFY)
11. How old were you when you first had sex with someone in exchange for money or something else that you needed?

____ Years If <18 years old, participant is NOT ELIGIBLE for this study

☐ Do not know

☐ Refuse to answer

12. Approximately how much money do you make from selling and trading sex? (to get a more accurate calculation you can ask her how much she charge by each time “ocuparse” and how many clients does she has per week) 1USD = 7.78 quetzales/14.12 pesos

a. On average, how much do you earn each time you have sex with a client? __________

b. On average, how many clients do you have in a week? __________

c. On average, what is your total weekly income from selling/trading sex? __________

☐ Do not know

☐ Refuse to answer

13. Have you ever tested positive for:

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>N/A – Has never been tested</th>
<th>Don’t Know/Refuse to Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>HIV/AIDS</td>
<td></td>
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</tbody>
</table>
| A sexually transmitted infection  |     |    |                             |                             | (e.g., gonorrhea, chlamydia, syphilis, herpes)

14. Where did you go to get tested?

☐ Clinic (local)

☐ Private Doctor

☐ Non-Governmental Institution Specify: ____________________________

15. If you tested positive for HIV or an STI, did you receive any treatment?

☐ Yes Specify where: ____________________________

☐ No
Appendix III

Written Consent Form

El Colegio de la Frontera Sur
Universidad del Valle de Guatemala
University of California, San Diego

Consent to Act as a Research Subject in In-Depth Interviews

Title of Research Project: Crossing Borders: HIV and Substance use at the Gateway to North America

PURPOSE OF STUDY

With the approval of El Colegio de la Frontera Sur, the Universidad del Valle de Guatemala, and the University of California San Diego, Drs. Kimberly Brouwer, Carmen Fernandez-Casanueva, and Sonia Morales Miranda are conducting a research study to find out more about drug use and associated health risks along the Mexico/Guatemala border. They are interested in your personal experiences and knowledge and attitudes about these issues. This study is supported by a grant from the National Institutes of Health of the United States. You have been asked to take part in this study because of your personal or professional knowledge of drug use, sex work, or related health risks, and you currently live in the Mexico/Guatemala border region. Approximately 110 individuals will be invited to participate.

This phase of the study will be carried out over the course of 1 year. Your participation in the study will involve a one and a half hour interview conducted at a single meeting session.

PROCEDURES

As this is a research study, the procedures are experimental. If you agree to participate, you will be interviewed by one of our study staff members for approximately one and a half hours. The interviewer is in no way connected with the police or immigration authorities. During the interview, you will be asked about the drug use scene in this area, behaviors associated with drug use, outside influences on drug use, access to health care, and personal experiences. If applicable, we may also ask some questions regarding your personal opinions and experiences related to sex work, such as how you became involved and possible health risks. This information will only be used as part of this health study and will not be shared for the purposes of any other projects. You will not be asked for information regarding specific sources of drugs; the type of information that will be collected is not related to places where drugs are purchased, or to the
characteristics or names of those who sell drugs. You do not have to answer any question that you do not want to answer.

The interview will be audio recorded. Recording the interview will allow us to spend more time listening to your answers and responding to your questions during the interview instead of taking notes, since we will be able to review your responses again after the interview. Your name will not be identified on audio recordings or notes. You may request to stop the taping at any time or to erase any portions and/or the entire taped recording. The tapes will be destroyed within 90 days of processing.

You do ____ (Reyes), or do NOT ____ (NO) give permission to be tape recorded. (initials): _____

If needed, you will be offered referrals for drug treatment, social support, or psychiatric counseling at a local clinic, hospital or service organization. If you do not live in this area, a staff member will connect you to an organization that can find services available to you or you can instead be referred to health services in your country of origin. Some treatment may be provided for free, but others may be at your own expense. The interviewers can also give you advice about safer sex and drug use. Condoms will also be available to you free of charge.

**RISKS/DISCOMFORTS**

There are no physical risks for participation in this study. The main risk is to your privacy, because you will be answering personal questions or providing your opinion. Although at no time will individual results or responses to questions be available to persons outside the study and forms and recordings will not contain your name, there is a chance that someone may discover that you participated in this study. It is your choice whether or not to tell people that you have taken part in this study. Also, research records may be reviewed by the UCSD, Guatemalan and Mexican Institutional Review Boards as well as the study sponsor as part of their oversight of this study’s compliance with ethical norms.

Through study advertising and data management we will not disclose that this study is focused on drug use and related health issues, however, it is possible that someone outside of this study may learn of your work with drug users and/or your past or current drug use. If you do not want to take this risk, you should not participate in this study.

There may be questions that you find hard to answer or that may make you feel uncomfortable. You may refuse to answer any question that you do not want to answer. The interviewer will try to answer questions you have and discuss any concerns you may have about any part of the survey.
As this is an investigational study, procedures may involve risks that are currently unexpected.

If you are injured as a direct result of participation in this research, the municipal health clinic in Tapachula or Ciudad Hidalgo in Mexico or the health center in Tecún Umán or Quetzaltenango in Guatemala will provide any medical care you need to treat those injuries. The University of California San Diego will not provide any other form of compensation to you if you are injured. UCSD will only be responsible for injuries which are directly related to study participation and caused by UCSD employees performing research activities within the course and scope of their UCSD employment. You may call the UCSD Human Research Protections Program Office at +1-858-657-5100 for more information about this, to inquire about your rights as a research subject or to report research-related problems. For questions about participants’ rights in Guatemala, you may contact Celia Cordón de Rosales, President of the Ethics Committee of la Universidad del Valle de Guatemala, at (502) 2369-0791 ext. 427. In México, you can contact Dr. José Luis Calderón, Secretary of the Ethics Commission of the Centro Nacional para la prevención y el control del VIH/SIDA (CENSIDA) [National Center for the prevention and control of HIV/AIDS], at cajluis@gmail.com or (55) 9150-6071; or Rolando Tinoco Ojanguren, Secretary of the Ethics Committee of El Colegio de la Frontera Sur (ECOSUR) at (967) 674 9000 ext 1514.

COMPENSATION

To compensate you for your time and travel expenses, you will receive non-cash goods (valued at approximately $10 US dollars/125 pesos/75 quetzales) for participating in this interview (e.g., personal hygiene items, lubricant, or telephone cards). You will receive this reimbursement even if you choose not to answer all of the questions.

BENEFITS

There are no direct benefits to you for taking part in this study. However, your participation in this study may help us to learn about drug use and the behaviors that put others like you at risk of becoming infected with HIV or STIs (sexually transmitted infections). We hope to use this information to inform policy makers on ways to improve access to services and reduce disease transmission in this area. In addition, we hope to share this information to contribute to developing appropriate and effective interventions and health programs for at-risk populations along the Mexico/Guatemala border.

CONFIDENTIALITY

Your experiences and opinions are personal. Every effort will be made to protect the confidentiality of the information that you provide. To ensure this:
Everyone working on this study has been trained to respect the privacy of participants. They will never discuss what you have told them in a way that could identify you.

Your name or other identifying information will not be on any notes, audio recordings, or data.

This consent form will be the only form with your name on it. It will be stored separately from other study documents at the research office in Chiapas, Mexico or in Tecún Umán, Guatemala in a locked drawer. The consent form will be kept for 3 years after analyzing and describing the final results of the study, and after that time it will be destroyed through incineration or using a paper shredder.

Identity of research subjects and their responses is respected under both Mexican and Guatemalan law. We will never reveal that you participated or any other information about your visit to anyone else as far as the law will allow us.

Audio recordings will be transcribed and may be translated into English. Once transcribed, translated, and verified the original audio recording will be destroyed.

By law, we are unable to keep confidential instances of child abuse. If we have reason to suspect such abuse is taking place, we are required to report it to the proper authorities for investigation. We are also unable to keep confidential any threats you may make against yourself or others.

**CONTACT INFORMATION**

____________________________ has explained this study to you and answered your questions. If you have other questions or research-related problems, you may speak confidentially with Dr. Kimberly Brouwer in San Diego at 001-858-822-6467 (call collect) or by e-mail at kbrouwer@ucsd.edu. In Tapachula, Mexico you may contact Dr. Carmen Fernandez-Casanueva, the principal investigator in Mexico, at +52 (962) 62 89800 ext. 5431, at cfernandez@ecosur.mx, or at the Colegio de la Frontera Sur, located at Carretera Antiguo Aeropuerto km 2.5, CP 30700 Tapachula, Chiapas. In Guatemala you may contact Dr. Sonia Morales Miranda, a co-investigator in Guatemala, at +502 2364 0336/40. If you would like to receive information regarding the overall study results, you may contact one of the investigators (Dr. Brouwer in San Diego, Dr. Fernandez-Casanueva in Mexico, or Dr. Morales Miranda in Guatemala) to request this information.

It is your decision to join the study or not. Signing the consent form does not imply the loss of individual rights in accordance with the local laws of Mexico and Guatemala. You can drop out of this study at any time without loss of the medical care and benefits to which you normally have access. If you would like to withdraw your participation, you
can do so by informing any of the project staff in person or contacting Drs. Brouwer, Fernandez-Casanueva or Morales Miranda.

If you withdraw from the study you will be asked whether you wish to take back your consent to use information gathered up to that point. You may look at and make a copy of the records of your participation in this project.

Due to the nature of scientific research, the researchers also may withdraw you from the study at any moment.

You will receive a copy of this consent document and a copy of the ‘Experimental Subject's Bill of Rights’ to keep if you so desire.

If you agree to be in this study, please sign your name below:
*(If the participant does not know how to sign, s/he will sign using a fingerprint and designate another person to sign his/her name.)*

Subject’s signature (or legal representative)  Date

*Witnesses to Consent Procedures:*

**Witness 1:**

Signature  Signature

Name  Name

Address  Address

Relation to Subject  Relation to Subject

Date  Date

CHR No.
Appendix IV

Coding Strategy

1. Consequences of the implementation of sex work regulations: the unintended consequences of policies.

1.1 *Cartilla or libreto: impact on HIV and STI prevention.* Although design to prevent HIV and STI sex work are failing to fill this goal. Registered sex workers routinely report poor access to information, ineffective enforcement or health promotion by clinic or health authorities. Regulations potentially undermined HIV and STI prevention efforts.

Discussion of reasons of having or not having a card, perception of having a stamp. Impacts of having card on access to health and health behaviors (positive and negative) Perceived access to care and actual access to care.

1.2 *Lack of safety and protection for sex workers.* Current sex work regulations do not protect the safety of sex worker; instances of physical, sexual, and emotional violence/abuse/mistreatment are common among registered sex workers. Abuse from clients, bar owners, managers.

1.3 *Abuse of power by police/authorities.* Violence from authorities, humiliation, mistreatment. Abuse of police role in the sex regulation process. Sex work regulation and their enforcement give police broad leverage to abuse their power and effectively violate women’s rights and jeopardize their health and safety. Role in women health (stamping their cartilla).

2. Consequences of the implementation of immigration policies: impacts on women human rights and safety.

Existing immigration policies and their enforcement create a more restrictive environment for vulnerable women and in fact make them more susceptible to right violations and violence.

2.1 *Dangerous migration journeys* (e.g., being hidden in trucks, interactions with coyotes). This includes voluntary and involuntary crossing (across or within national boundaries). Immigration policies push women to accept
dangerous circumstances under which they voluntarily or involuntarily migrate.

2.2 **Sex work entry as a consequence of being limited option to work.** Sex work entry due to status as migrants, for example difficulties finding a job, discrimination and rejection and xenophobia. Social, cultural and economic isolation and marginalization.

2.3 **Abuse by authorities.** Abuse by Immigration Authorities, not respecting the due process of detaining and deportation. For e.g., being detained or for long periods or deported without due process, sexual abuse by authorities in exchange for not being deported, deportation procedures that place women at risk. Subjective practices in the sex work context. (Health risks and outcomes).

3. **Health risks and outcomes**

3.1 **Condom negotiation.** Any condom negotiation, barriers/facilitators to condom use. Subject of violence or mistreat from clients because they do not want to use condoms. Indigenous.

3.2 **Insufficient clinic resources to this population.** Looking for other type of medical attention and not receiving it. Clarify access to police or health care…or police. How is this consequence?

3.3 **HIV/STI prevention from venues.** Manager, owner, pimp, brothel or other third party [excluding clinic staff, or other state authorities] provides HIV prevention or resources, including information condoms, testing, etc.

3.4 **HIV/STI prevention from peers, friends, other.**

3.5 **HIV/STI prevention from NGOs**

3.6 **Unsafe work environment** (physical and sexual violence, physical characteristics of the venues, living circumstances). This includes the treatment in the work place circumstances like being locked at night by the encargados.

3.7 **HIV/STI knowledge and awareness**

3.8 **Mental health concerns or problems**

4. **Push factors into sex work industry**
4.1 Survival/subsistence. Need for money, debts.

4.2 Family obligation. Women as sole providers. Non-existent partner or husband. As older daughters have the responsibility of support the entire family.

4.3 Forced, coerced or deceived entry. Women were deceived of they type of job they were going to engage in or they were promised. Deceived about the working conditions. They might have voluntarily go to work somewhere else and then being brought there for sex work against their will.

4.4 Entry after sexual abuse. For example, running away from abuse lead to circumstances where participants started to exchange sex.

4.5 Adolescent entry to sex work. Initiation of sex work prior to age 18 for any reason.
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