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A typology of female sex work in the Metropolitan Region of Santiago, Chile

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ABSTRACT

In Chile, sex work takes place covertly in a variety of venues and locations. Formative research using time-location sampling methods is important in order to understand the nature of this diversity. This study used qualitative methods to develop a typology of female sex work in the Metropolitan Region of Santiago, Chile, using semi-structured interviews, focus groups and ethnographic fieldwork during visits to sex work venues. The study identified seven types of venue, which reflect the context and regulatory framework of the country and the structural vulnerabilities that affect female sex workers in Chile. These venues and locations include: *cafés con piernas* (coffee with legs); nightclubs, topless bars and cabarets; brothels; hotels; street and highway soliciting; massage parlours; and private residences. Formative research methods were helpful in identifying and characterising the venues and locations in which sex work occurred. Barriers to accessing and mapping specific locations were also identified. Recommendations for addressing these barriers include working with non-governmental organisations to map venues and initiate contact with the populations of interest. A comprehensive typology of sex work in the Metropolitan Region of Santiago, Chile, is an essential element for future time-location sampling and bio-behavioural research in the context of second-generation surveillance for HIV and sexually transmitted infections in Chile.

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Introduction

Epidemiological surveillance of HIV in Chile has traditionally focused on identifying newly-diagnosed cases to measure the extent of the epidemic within a given population. Second-generation surveillance, on the other hand, seeks to estimate rates of undiagnosed infection and identifies behavioural and structural factors underlying local transmission of HIV and other STIs (ONUSIDA 2005). A key goal of second-generation surveillance is to

support the design and evaluation of prevention initiatives by providing relevant data. Bio-behavioural second-generation surveillance techniques include repeat cross-sectional surveys of behaviours associated with HIV/STI transmission in vulnerable populations. Survey results can be used to determine the prevalence of these behaviours (ONUSIDA 2005) and identify associated sociodemographic and clinical-epidemiological factors (Folch et al. 2010).

Bio-behavioural studies in the context of second-generation surveillance for HIV and other STIs require particular methodologies to access specific segments of the population. Because these studies are typically performed on hard-to-reach populations, there exists no *a priori* sampling framework from which to extract a representative sample (Johnston, Sabin, and Prybylski 2010; Magnani et al. 2005). In Chile, data from first-generation surveillance or specific prevalence studies do not identify sex workers as a population with a high prevalence of HIV and STIs (Barrientos et al. 2007). However, there are several important reasons why it is necessary to investigate both the prevalence of these conditions as well as practices and beliefs related to the sexual and reproductive health of female sex workers. Firstly, and despite the fact that there is no evidence to suggest sex workers are a population that is particularly affected by HIV and STIs, public opinion and the general health system continue to identify sex workers as agents of transmission to the general population, with resulting stigmatisation, discrimination and violence (Hakre et al. 2013; Merrigan et al. 2015; Platt et al. 2013). Secondly, the low numbers of female sex workers attending for sexual health check-ups underlines the importance of having up-to-date information regarding the contexts in which women work in order to generate strategies aimed at prevention.

Time-location sampling

One strategy for working with hard-to-reach populations is time-location sampling, a probabilistic method used to recruit members of a target population at specific venues (V), days (D) and times (T) (VDT units) where the population of interest typically gathers (Karon and Wejnert 2012; Semaan 2010). Once these units have been identified, the specific VDT and the individuals to be studied are randomly selected (Miller et al. 2013). To study populations such as female sex workers, we must first identify the times and locations in which sex work takes place, as well as the number and type of persons present in these settings. With this goal in mind, a process known as formative research may be used to gather and analyse information of interest. The formative research associated with the time-location sampling method involves a variety of forms of data collection (including focus groups, in-depth interviews and reviews of primary and secondary data) that help define the population and determine means of access (Karon and Wejnert 2012).

Time-location sampling has been applied in many contexts internationally, including in Latin America (Gayet et al. 2007; Gios et al. 2016; Hakre et al. 2013; Miller et al. 2013). However, no local or international study has provided a detailed report of the techniques to map and describe the gathering places for these specific populations.

Sex work in Chile

Sex work, understood as the provision of sexual favours in exchange for economic reward (Giddens 2000), takes various forms. As in most countries, the nature of sex work in Chile

has been influenced by social, economic and cultural factors as well as by government policies and legislation affecting sex work (Gálvez 2014; Salazar and Pinto 2010). The relationships between these factors have been influential in determining the range of sex work venues that presently exists.

The first reports of sex work in Chile date from the late XVIII century and one of the first locations in which sexual exchange was documented were the so-called *chinganas* – establishments in which single women typically provided food, drink and companionship to travelling workers (Salazar 2011; Salazar and Pinto 2010). Sex work later expanded into new venues such as *cafés chinos* (Chinese cafes) (Peralta 2015) and *burdeles* (brothels). This new landscape, together with poor health conditions and limited advance in the prevention and treatment of sexually transmitted diseases, increased the rate of syphilis in the country, forcing authorities to take steps to regulate and control the sex trade (Gálvez 2014). The result was that in 1896, regulations were introduced to reduce the incidence of venereal diseases in addition to other *males sociales* (social evils).

The later Health Code of 1925 banned all forms of prostitution and established fines for all those who encouraged and practised sex work (Salazar 2011; Salazar and Pinto 2010). Government health service were charged with implementing the municipal regulations of 1929 that demanded that so-called ‘cabaret dancers’ must possess sanitary certification (Gálvez 2014; Salazar 2011). The new Sanitary Code of 1931 prohibited prostitution in closed spaces (including in *casas de tolerancia* [houses of tolerance] and *burdeles*, but continued to allow independent forms of sex trade (Ministerio de Bienestar Social de Chile 1931). Despite the actions taken, however, these regulations had little effect in arresting syphilis and did not bring an end to sex trade venues (Gálvez 2014).

Between 1930 and 1973, rapid industrialisation, modernisation and the growth of the middle class took place in Chile (Salazar and Pinto 2010). In the 1940s and 1950s, there was a growth of *espectáculos revisteriles*, a type of music hall performance in *boites* (nightclubs) and nightclubs. These new venues coexisted with cafes, diners and motels (Salazar 2011; Salazar and Pinto 2010). In 1941, the Ministry of Health introduced mandatory health check-ups for women cabaret workers and the dancers. (Gálvez 2014). In the 1960s, traditional brothels began slowly to disappear (Salazar 2011; Salazar and Pinto 2010), their workers being replaced by younger, more refined and expensive women working as *vedettes* (performers), *copetineras* (waitress) and companions (Salazar and Pinto 2010). In 1968, a new Sanitary Code was introduced (Ministerio de Salud Pública de Chile 1968), which recognised the existence of the sex trade but prohibited female sex workers from congregating in enclosed areas.

The appearance of new types of sex work was accelerated by the military dictatorship (1973–1989), which brought nightlife to an end (Salazar and Pinto 2010), and by the publication of a new set of health regulations in 1983 (Ministerio de Salud de Chile 1983), which prohibited the operation of brothels and other establishments used for sex work.

The emergence of the first HIV cases in the 1980s increased the persecution of female sex workers. According to reports from the leaders of sex work organisations,¹ HIV served as a pretext for raiding and portraying female sex workers as responsible for the epidemic.

In 2005, Supreme Decree No. 206 repealed the earlier 1983 Decree, not establishing any explicit penalty for participation in the sex trade and providing free sexual health services for sex workers, subject to registration for sanitary and statistical purposes.

Currently, there exist two legal codes in Chile applicable to sex work: the Criminal Code of 1874 and the Sanitary Code of 1968. While the first of these does not prohibit the sex trade, except in the case of minors or for those involved in human trafficking, the Health Code prohibits in Article 41 sex work in *casas de tolerancia*. In line with this, sex work can be conducted independently so long as it does not affect public order and is in accordance with the ordinances established by the authorities. According to the above, it might be considered that in Chile the abolitionist model has prevailed, because the Criminal Code has never prohibited sex work explicitly except in the aforementioned cases (Sáez and Aravena 2008), while the Sanitary Code (Ministerio de Bienestar Social de Chile 1931; Ministerio de Higiene de Chile 1925; Ministerio de Salud Pública de Chile 1968) has imposed regulations on sex work designed to prevent the spread of STIs (Gálvez 2014).

According to Ministry of Health statistics from sex workers who attend voluntary sexual health control (Ministerio de Salud de Chile 2015), the Metropolitan Region of Santiago, Chile, currently has about 2000 registered female sex workers. The population of registered female sex workers peaked at 3347 in the year 2006 and then dropped dramatically to 426 in 2014. Studies in the Metropolitan Region between 1997 and 2007 (Lastra 1997; Montecinos, Matus y Donoso 1999; Muñoz, Zamorano, and Alvarado 2007) suggest that sex work nowadays typically takes place at nightclubs or cabarets, topless bars and *cafés con piernas*, brothels, saunas, private residences and agencies and via soliciting either on the street or along the highway in urban areas and in areas on the periphery of the city.

Given that 10 years have passed since the last study characterising the nature of female sex workers in the Metropolitan Region, an updated typology of sex work is needed to reflect Chile's current social and cultural reality. The data from this is crucial for any bio-behavioural study of female sex workers that relies on time-location sampling. The objectives of the present study, therefore, were to identify, describe and map women's sex work venues in the Metropolitan Region of Santiago.

Materials and methods

The study consisted of two parts: the first to identify and describe the different venues and locations in which sex work takes place; and the second to map the different venues in which female sex work occurs. Primary and secondary data were drawn upon in each stage. Primary data sources were six semi-structured interviews with key informants (two members of sex worker organisations in the Metropolitan Region, one municipal authority representative, one police officer, one healthcare worker and one researcher currently working in the field) and one focus group with eight experts (three from sex worker organisations and five from non-governmental organisations working with members of this population). Secondary data sources included relevant previous studies along with information from five online websites and two online client forums that promote or comment on sex services and that include online advertisements and chat rooms.

During the mapping stage of the study, the location and operational details of the various sex work venues were verified and an ethnographic assessment of each was carried out. A spreadsheet was created to record variables of interest, including neighbourhoods and districts, the average number of sex workers present by day of the week, the approximate percentage of non-Chilean female sex workers present, hours of work, type authorisation required for access, and logistical details relevant to future field work. This information was

gathered in collaboration with *Fundación Margen*, an organisation that works closely with female sex workers to promote women's rights and wellbeing. The ethnographic process involved detailed observation of relevant contexts to assess the social dynamics present within sex work venues.

Secondary and qualitative data from interviews with key informants were evaluated using content analysis. The project was approved by the Ethics Committee of the University of Chile's School of Medicine.

Findings

Information sources pointed to the presence of different types of sex work venue within the Metropolitan Region, including nightclubs, cabarets and topless bars; *café con piernas*; brothels; hotels and motels; private residences; massage parlours; soliciting and highway pick-up zones; and saunas. The data were reviewed to determine similarities and differences between venues to develop a theoretical classification comprising seven main types of venue. There was sufficient information to describe each of these seven types, although only five types could later be mapped due to impediments in access to massage parlours or difficulties in locating venues in the case of private residences.

While sex work occurs in different locations, the activity is concentrated in neighbourhoods that have a reputation for housing sex work venues. In terms of operational dynamics, we gathered information on the historical aspects of the venues, hours of operation, the number of workers typically present, the services offered and other characteristics. Data about the characteristics of the female sex workers by typology was collected by interviewers and included age, education, country of origin and the legal status of non-Chilean female sex workers. In terms of the work environment, information was collected on security, alcohol and drug consumption, police presence and activity, available amenities (bathrooms, changing rooms, meals, etc.) and contracts of employment.

The study identified a total of 77 active sex work venues. Research staff were able to access 68 of these venues for an introductory visit; the remaining 9 were closed when researchers attempted to call. After the introductory visit, an invitation was extended to participate in a baseline bio-behavioural study. In all, 54 venues were included in the sampling framework. The remaining venues were excluded, either because workers refused to participate, because the venue was closed during the research staff's follow-up visit, or because there were no female sex workers present during the follow-up visit. The typology of venues is detailed below.

Café con piernas

This type of venue is unique to Chile. The facilities operate mainly as shops in which coffee is served by women wearing revealing clothing. The venues tend to be unmaintained and neglected, very small, with tinted-glass windows and loud music. They may be managed by an owner, manager or a group of female sex workers. Typically, there are four to eight women present per shift, aged 18 to 35 years old, and including Chilean and foreign girls. The standard services are the serving of non-alcoholic beverages and erotic lap dances. Other services such as physical contact with the women or sexual favours may be provided in a private room on-site or at another off-site location.

It depends ... sexual contacts can be performed right there in the café in some place, which can be armchair or a bathroom ... but it's difficult ... they are very small ... other times they go to other places that are close by and are unoccupied ... that's where sexual contact is made ... and well ... they can also meet up later. (Female sex worker 01)

This kind of establishment tends to be open all day, with workers serving in different shifts. However, hours and days of attendance depend on when the workers choose to arrive. In general, there is no formal contract of employment and venues do not possess condom dispensers or provide sexual health information. There is aggressive security present, which serves mainly to protect the venue from frequent visits by inspectors or the police, who may issue fines or arrest managers for sex trafficking or related illegal activities such as human trafficking, drug trafficking or the employment of illegal immigrants. Because just a few owners operate most of these establishments in the Metropolitan Region, when one venue is shut down another café with the same name often opens at another location. Our study mapped 24 *cafés con piernas* venues, of which 22 were included in the sampling framework.

Nightclubs, topless bars and cabarets

These venues tend to be larger and possess an alcohol licence as well as the infrastructure for dance shows (a stage, bars, tables and seats for viewers). The three terms are often used indistinguishably, although some informants suggested that the names may be associated with different opening hours (topless bars are sometimes open during the day as well as at night), different levels of sophistication in terms of the entertainment offered (cabarets provide live dance shows performed by professional dancers) and social class differences (the lowest socioeconomic class is associated with topless bars). Some venues operate with two shifts (day and night), while others are open only at night or only during the day.

Hours and days of operation are generally regular, but the number of women present may vary according to when workers choose to arrive. Managers sometimes offer incentives to come to work, especially for workers who work as dancers, waitresses or escorts. During any given shift, there are generally 10 to 20 workers present, aged 18 to 35 years, mainly Chilean nationals.

The services offered include alcoholic and non-alcoholic beverages, company at a table, a dance show and paid sex. Women are paid based on attendance (arriving at work before a given hour) and for dancing. Women also receive a commission on the drinks that clients purchase. If a female sex workers arranges to have sex with a client on-site, they receive either a percentage of the total payment as agreed with the management, or the total payment minus a fee for use of a private room. In some cases, women leave the premises and head to a motel, previously paying a fee to the management before leaving. In other cases, there is a formal contractual arrangement with specified rates.

In many venues, a female assistant may be present in the dressing room to provide women with meals, condoms, medication, clothing, personal hygiene items and so on. The assistant also monitors attendance and coordinates the shows. In general, these venues are cleaner, safer and more comfortable than the *cafés con piernas*, although conditions vary significantly across the locations identified. Workers tend to consume alcohol and drugs at these venues. We mapped 21 nightclubs, topless bars and cabarets, and 10 were included in the sampling framework.

There are nightclubs of all sorts ... elegant ones that are very expensive and exclusive, middle-range and others very poor. The most elegant have spectacular girls and great shows, the admittance is about \$30.000 CLP [\$70 USD] ... in the bathroom there are like 30 different types of perfumes to wear when you leave ... the dingiest ones are ugly, dark, with a bar and have the stench of booze. (Female sex worker 02)

Brothels

Brothels are one of the oldest types of sex work venue. Our study identified two types of brothels. The first consisted of establishments with a bar area for beverage consumption, conversation and dancing, along with private rooms for sex. These venues are generally unmaintained and neglected. The services offered include alcoholic and non-alcoholic beverages, company at a table, a dance floor and music, paid sex in a private room or at a location off-site (in which case the worker or client pays the manager before leaving the venue). These venues operate mainly at night, although some may provide paid-for sex services during the day. Some women live in the venue or stay at the venue for several days per week.

The second type of establishment is a private residence where the landlord rents out multiple rooms to a group of regular female sex workers for sex work. Women wait for clients at the house entrance. In both subtypes, women are predominately over 30 years old, but it is common to observe the presence of women over the age of 45, mainly Chileans. No condom dispensers nor sexual health information were found at these venues, which operate at night. The study mapped four brothels, all of which were included in the sampling framework:

Casas de tolerancia are very old ... there are not many left ... in these places the girls live there isolated ... I mean live there ... not all ... you can go during day or night, but at night there is more movement ... there is a lady who is in charge and she rents the rooms ... also sometimes there are spaces to have a drink or listen to music. In others, there are only the rooms and the girls outside ... they are women of many years ... older. (Female sex worker 01)

Hotels

These hotels are typically open to regular guests as well as female sex workers who use the rooms for sexual encounters. The rooms are equipped with basic furniture and tend to be unmaintained and run-down. Some female sex workers contact or wait for clients outside the hotel while others work at nearby nightclubs. Some women live in the hotel or spend several nights a week there:

The hotels are just that ... a hotel where the girls pay for a room where they go with their customers ... some come directly to the place and others meet them at a night club ... several girls live there, all week or some days or on weekends. (Female sex worker 03)

Female sex workers in these establishments typically do not have a contract of employment; in fact, they must pay the hotel owner to use one of the rooms. The typical age range of female sex workers using these venues is 35–50 years, mainly Chileans. No condom dispensers or sexual health information exist in these venues. These venues are open during the day and at night. This study mapped four hotels, all of which were included in the sampling framework.

Street-based sex work

The study identified three main hubs for soliciting as well as three major pick-up zones along the highway. The first location was observed in downtown Santiago and operates during the day and at night. Women who work in this zone are of different ages, but there is a predominance of older women, including female sex workers up to 80 years of age. Sex services are provided in nearby apartments or houses, where the workers pay to use a room. At night, services may also be provided in the street.

The second location is a public park in downtown Santiago, which operates only at night and includes several high-traffic areas for soliciting, including sex services provided by transgender women, who work separately from the other female sex workers peers. The workers in this zone are generally non-Chilean women from 25 to 35 years of age, mainly from Colombia, Dominican Republic, Peru and Ecuador. Sex services are often provided in the street, in a car or at a nearby motel.

The third location is an old neighbourhood in Santiago, which operates only at night. Sex workers in this zone are generally Chilean women over the age of 35 years. Services are provided in a room at nearby brothels, in a car or in the street. There are no amenities in terms of hygiene or meals and the venues do not possess condom dispensers nor provide sexual health information. However, these locations are those most visited by sex worker organisations, which provide educational material, condoms and in some cases meals to female sex workers.

The highway pick-up zones frequented by female sex workers are located in the Puente Alto district in the southeastern area of the Metropolitan Region. There are generally fewer than four sex workers present at a given location and they typically work only late at night. Our study mapped 14 street and highway pick-up areas, all of which were included in the sampling framework:

The sex trade is in downtown Santiago ... also on some highways ... in downtown, work starts early ... at 10 in the morning you can see girls ... and throughout the day. There are other sectors ... where you only work at night ... there you have to go like 11 or 12 at night ... until 4 am ... there cars arrive and the girls get in. Or go to dark places or to a motel ... its depends.
(Female sex worker 03)

Massage parlours

These venues are typically advertised as erotic massage centres and/or spas. They are typically open during the daytime, in apartment buildings or in buildings under the front of a regular massage centre. The standard service is a regular massage followed by manual genital stimulation, with an average duration of an hour. It is standard practice for clients to provide women with a tip according to their level of satisfaction or according to any extra services that were provided. In general, visits are arranged via prior appointment. The ages of female sex workers in these settings varies between 18 and 25 years of age and they include Chileans and foreign girls. This type of venue was not mapped:

Massage houses seem like just that but are actually places of sex trade. There are massage table and everything ... but they offer erotic massages or sexual intercourse ... on the same massage table or off the premises if you arrange that with the girl She decides. (Police officer)

Private residences

These venues are private apartments or houses that serve as a location for the sex services advertised via websites, online chat rooms, print advertisements or, more rarely, television advertisements. Female sex workers in these settings often refer to themselves as 'escorts' or 'call girls' and may work either independently or through an 'agency'. Independent female sex workers are in charge of promotion, contacting clients and determining the location where the sex services are provided. For others, an agency is responsible for the arrangement details in addition to also providing security. Agencies typically impose policies regarding the type of services offered, work hours and the use of condoms:

At private residences, there are women who work alone and others have a boss or for a company or ... administrators. If she works, alone the money is all for her, but it is more dangerous. The agency gives security ... in an apartment there are several girls and a person who receives the client, who takes care of them. (Healthcare worker)

Escort services may be provided in many settings: at an apartment owned by the worker or at an apartment owned by the agency, at a hotel or at the client's home. Some escort venues are advertised as saunas and include private facilities operated by an agency or a group of sex workers. The ages of those working there vary between 18 and 35 years old and include Chilean and non-Chilean girls. This type of venue was not mapped:

Girls are at risk, because sometimes some unhinged person can arrive there and hit them ... that's the bad thing about apartments ... sometimes they work together and they take care of themselves a little. They rent an apartment and pay it for all to use ... they contact them by phone or by other means ... it depends. (Female sex worker 02)

Discussion

Three aspects of the current Chilean sex market that are particularly noteworthy: first, sex work takes place under an unclear legal framework that does not criminalise sex work itself so long as the activity does not involve minors or human trafficking, although it does explicitly prohibit brothels; second, sex work is associated with strong social discrimination (Gálvez 2014); and, third, healthcare services for sex workers are not mandatory. Consequentially, not all female sex workers receive reproductive health care, and those who do sometimes fail to disclose the nature of their work for fear of being mistreated or discriminated against (Gálvez 2014; Montecinos, Matus, and Donoso 1999; Redtrasex and Fundación Margen 2013; RedTraSex 2014).

This study identified a wide range of venues and types of sex work in the Metropolitan Region of Santiago, Chile. Access to some of these venues can be difficult due to their clandestine nature and of the reluctance of female sex workers to be contacted. There exists no accurate statistical data that can be used to assess the number of female sex workers in the Metropolitan Region, document the number of women who receive healthcare services through the public system or support initiatives to address the social issues that affect this group of workers. However, collaboration with a relevant non-governmental organisation and careful fieldwork planning, together with the desire of female sex workers to protect their own health and receive preventive care, allowed us to access and characterise many sex work venues in this preliminary study.

Techniques to identify, describe and map sex work venues

Various approaches and techniques can be used to capture the nature and dynamics of female sex work, including risk factors and prevention for HIV and STIs (Conners et al. 2016; Harcourt and Donovan 2005; Pitpitan et al. 2013). Studies using a time-location sampling method depend, however, on thorough formative research to exhaustively map female sex work venues, as these locations are typically clandestine and difficult to access (Conners et al. 2016; Gayet et al. 2007).

However, most published studies of female sex workers to date using a time-location sampling method describe the mapping process in general terms, without adequately accounting for the various techniques used (Gios et al. 2016; Kerrigan et al. 2015; Merrigan et al. 2015). We found only two studies (Gayet et al. 2007; Hakre et al. 2013) that have done this.

With respect to the primary data sources used in this study, it is important to note that the applied techniques were largely qualitative in nature and allowed us to capture the multifactorial nature of the phenomenon and the diversity of behaviours and situations studied (Conde and Pérez 1995).

Although the key informants who provided the most useful information were members of sex worker organisations and healthcare providers from sexual health clinics, it is essential to include sex workers themselves in future studies of sex work; their contributions are fundamental to the correct application of the methodologies, reflections and analysis. Their contribution provides 'expert' insight for future theoretical enquiry as well as policy and practice work.

Barriers and facilitators for description and mapping

Mapping specific sex work venues within each element of the typology described here was a complicated task mainly due to the size of the Metropolitan Region of Santiago as well as the fact that many of the locations are clandestine. It was particularly difficult to access the private residences in which some forms of sex work take place as these facilities are not explicitly identified as such.

An additional obstacle was the security and intimidation used to 'protect' sex work venues. The collaboration of key players with access to female sex workers or the managers of particular sex work venues was crucial for obtaining access. As reported by another time-location sampling study on this population (Gayet et al. 2007), the lack of a contact or means to connect makes it effectively impossible to access certain venues.

Moreover, attempting to access certain sex work venues can be dangerous for individuals who are not clients. In other venues, the operating characteristics may be dynamic, making it difficult to map or characterise the location (Gayet et al. 2007). Because of variations in the nature of the work undertaken, it is crucial to understand the dynamics of each venue and to carefully plan the strategies to approach each of them so that they can be included in a sampling framework.

Typology

Sex work in the Metropolitan Region of Santiago is the product of changes in regulations, market tendencies and cultural, economic and even geographic factors (Gálvez 2014; Salazar

2011; Salazar and Pinto 2010). For instance, the ban on sex work in brothels and the challenges of operating a venue at night have resulted in increased street-based sex work, the use of private residences, the daytime operation of topless bars and the tendency to disguise sex work venues as legitimate businesses such as massage parlours or coffee shops (Salazar 2011). The neighbourhoods in which such venues currently operate are largely the same as those in earlier periods, although some new sites have emerged in the eastern area of the Metropolitan Region (Salazar 2011).

Findings from this study suggest that there exists a broad variety of sex work venues, differentiated by operational details and public front. The study identified seven principal types of sex work venues: 'recreational' venues such as nightclubs, topless bars, cabarets and brothels, often with for dance shows and serving beverages; 'motel-type' venues such as hotels and private residences, which rent out rooms for sex services; 'front-type,' venues, which tend to provide hidden forms of sex work while publicly promoting a different kind service (e.g. *cafés con piernas* and massage parlours); and 'pick-up sites' on the streets and highways, where sex services are offered or solicited, to be performed elsewhere.

In recent years, research has demonstrated the importance of studying how sex work venues and their underlying operational structures impact on the risk of transmission of HIV and STIs within this population (Pitpitan et al. 2013; Platt et al. 2013; Shannon et al. 2015). Research shows how health, legislation, context and discourse, as well as the broader socio-cultural context, impact on vulnerabilities and risks (Allman and Dittmore 2016). In Chile, current regulations fail to support the rights of female sex workers. The law does not recognise sex work as a legitimate form of work and therefore fails to protect the social and labour rights of female sex workers. Because women work covertly they are at risk of being victims of arbitrary mistreatment by the police; face barriers to self-organising or creating unions; and lack effective means of self-protection. According to some authors (Bekker et al. 2015; Shannon et al. 2015), the regulation of sex work can result in improved peer support; community empowerment; reduction of violence and police abuse; and higher rates of behaviours that prevent HIV/STI transmission and protect the health of female sex workers.

In Chile the sex work types that attract the largest number of clients are nightclubs, cabarets, *café con piernas* and street soliciting. Nightclubs, cabarets and massage parlours are the environments that tend to place female sex workers at the lowest risk, especially venues tailored to appeal to men of a higher socioeconomic class. These venues generally have better infrastructure, better security and lower levels of violence. In some such venues, female sex workers have a contract of employment, which may provide some degree of social welfare protection. The main risk factor in these venues is that workers tend to be very young and therefore may not have developed the habit of using preventive healthcare or have access to a healthcare provider who specialises in female sex workers.

Consistent with findings from previous studies in Chile and elsewhere in Latin America (Hakre et al. 2013; Montecinos, Matus, and Donoso 1999; Muñoz, Zamorano, and Alvarado 2007), as well as international studies (Folch et al. 2013; Platt et al. 2013), street sex work places female sex workers at the greatest social and physical risk. Street-based sex workers are vulnerable to violence perpetrated by clients and to suffer abuse by the police.

Sex work in Chile is carried out in a variety of high-risk contexts and there is also a low level of communication and attendance between female sex workers and sexual health centres, which renders some female sex workers vulnerable to contracting HIV. Although HIV and STIs indicators show the situation is under relative control, a change in any one

factor within the precarious balance of prevention may be enough to increase the risk exposure and vulnerability of female sex workers. Therefore, it is necessary to carefully adapt surveillance and future intervention strategies to the context described. The research described here may offer a first step towards doing so.

Note

1. Interview between Herminda González, President of *Fundación Margen* sex worker organisation and Julieta Belmar, 23 May 2015, Santiago de Chile.

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