Author’s response to reviews

Title: Influence of Indoor Work Environments on Health, Safety, and Human Rights among Migrant Sex Workers at the Guatemala-Mexico Border: A Call for Occupational Health and Safety Interventions

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Version: 1 Date: 22 Sep 2017

Author’s response to reviews:
Philippa Harris
BMC International Health and Human Rights

September 22, 2017

Re: Influence of Indoor Work Environments on Health, Safety, and Human Rights among Migrant Sex Workers at the Guatemala-Mexico Border: A Call for Occupational Health and Safety Interventions

Dear Dr. Harris:

On behalf of myself and my co-authors, we are very pleased to resubmit our manuscript entitled ‘Influence of Indoor Work Environments on Health, Safety, and Human Rights among Migrant Sex Workers at the Guatemala-Mexico Border: A Call for Occupational Health and Safety Interventions’ for consideration for publication in BMC International Health and Human Rights. We were delighted to receive the favorable review of our manuscript and appreciate the constructive comments provided by the reviewer and editors. We have revised our paper to address these comments and are enclosing a point-by-point response to each of the points raised by the reviewers.

We are pleased to confirm that the content of this manuscript has not been published elsewhere, nor is it under consideration in another journal. The authors report no conflicts of interest to declare and all authors have approved the manuscript for submission.
We are very appreciative of the journal’s consideration of our manuscript for publication. We look forward to your response.

Kind Regards,

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Reviewer reports:

Reviewer 1

1. This is an important study which aims to investigate migrant sex workers’ narratives related to structural aspects of their work environment which may shape vulnerability and agency related to HIV/STI prevention and violence at the Guatemala-Mexico border. This paper significantly contributes to the literature as it informs a more detailed understanding of environmental risk and protective factors which can subsequently inform prevention models for this at risk population.

We agree and appreciate this positive feedback from the Reviewer.

2. Intro is well-written and includes relevant literature as well as a clear rationale for the study and use of qual methods.

Thank you, we appreciate this positive feedback.

3. Methods are also well-written and clear. I would suggest the authors add brief section on rigor for qualitative methods, such as explicitly stating how credibility, confirmability, transferability and dependability were determined. Please also clearly state how the interviews and focus groups were conducted, i.e., were they conducted simultaneously or was one used to inform the other? How were participants determined to complete FGD or the interview?

We appreciate these constructive comments to further strengthen the methods section of our manuscript and have added several sentences to the methods (pages 10-11, lines 187-201)
describing the ways in which we ensured rigor throughout the analytic process. For example, we now explain that we maintained a detailed audit trail, sought analytic consensus amongst members of the research team, and compared our findings with previously published and ongoing research on similar topics in other settings to ensure rigor within our analysis. To ensure the representation of diverse perspectives and experiences within our data, we used a purposive sampling strategy and careful attention was paid throughout the analysis to identifying diverse experiences and differences amongst participants (e.g., those working across diverse indoor and outdoor venues) where present. Furthermore, our analysis explicitly sought to explore both positive and negative experiences related to key study themes, including analysing both positive and negative impacts of working conditions by examining data that suggested their potential to increase as well as mitigate exposure to sexual risk and violence. We also note that whereas self-reported data in quantitative study designs are often cited as vulnerable to reporting and recall biases, the insights of migrant sex workers themselves are precisely what we were interested in, which were well illuminated through our data collection and analytic techniques. Finally, we have reviewed our strengths and limitations of the discussion to clearly note that although our qualitative study design does not permit direct generalization of findings to a wider population, the insights offered provide key contextual data regarding the nuanced and intersecting impacts of indoor work environment features on migrant sex workers’ health and safety, which are not well-captured by traditional epidemiologic designs.

Furthermore, we have now clarified in the methods (page 9, lines 151-153) that the interviews and focus groups were conducted simultaneously, allowing the findings of each method to iteratively inform the another (ie, insights gathered from group discussions were used to inform emergent topics addressed in subsequent in-depth interviews, and vice-versa). We have also revised our description of data collection procedures (page 9, lines 143-151) explaining that participants who preferred to share their insights individually were interviewed one-on-one, whereas focus group discussions were conducted with participants who were comfortable and willing to participate in a group discussion in order to generate group insights and broader discussion related to our analytic topics.

4. Results: Overall, the themes/sub-themes are well-articulated and informative. The differences in managerial practices both as potential protective factor and risk was especially informative. With the high amount of trauma/violence was any data captured on psychosocial outcomes/mental health of the participants which has also been associated with HIV risk? This seemed to be discussed somewhat with the pervasive sense of fear some of the women experienced but were there other post trauma outcomes mentioned? I would suggest that the authors also note any steps that were taken to ensure that all of the voices were heard in the data and not over-represented by a few participants.

Thank you for this positive and helpful feedback. We agree that the extensive experiences of trauma and violence faced by our population is alarming, and that this been previously shown to be linked to both mental health concerns as well as HIV and STI risks in other contexts. Although we considered mental health to be somewhat outside the scope of our study objective and therefore did not include this within our primary themes, we agree that psychosocial experiences related to mental health are relevant to understanding participant experiences of violence and HIV/STIs. As such, we have reviewed our data and results to better identify any
areas where this emerged within our analysis (for example, see page 14, lines 263-265; page 25, lines 531-533). We have also updated the strengths and limitations section of our discussion (page X, line X) to identify mental health and trauma as important areas for future research and intervention with this population.

Finally, we have revised our manuscript (page 11, lines 191-198) to clarify steps taken to ensure the representation of diverse perspectives. For example, we used a purposive sampling strategy during data collection and throughout the analysis, careful attention was paid to narratives suggesting diverse experiences and differences amongst participants (e.g., those working across diverse indoor and outdoor venues). Furthermore, our analysis explicitly sought to explore both positive and negative impacts of working conditions by examining data that suggested their potential to increase as well as mitigate exposure to sexual risk and violence.

5. Discussion strongly points out the risk and protective factors and how this can inform interventions on multiple levels. As mentioned previously, I would suggest that the author/s mention psychosocial outcomes or mention this as a limitation to understanding the full experience for this vulnerable population.

We appreciate this positive feedback and very much agree with the Reviewer here. As such, we have updated the discussion (pages 33-34, lines 714-718) to highlight the critical need for future research and interventions addressing intersecting experiences of mental health, trauma, and related issues (e.g., substance use) in relation to health and social inequities as amongst migrant sex workers and other populations of vulnerable women.

1. Editorial Policies

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Please read the following information and revise your manuscript as necessary. If your manuscript does not adhere to our editorial requirements, this may cause a delay while this is addressed. Failure to adhere to our policies may result in rejection of your manuscript.

Our manuscript has been reviewed and revised as necessary to ensure compliance with BMC International Health and Human Rights Editorial Policies. We have reviewed our manuscript to ensure that all required disclosures sections are included. Thank you.