The 2014 media frenzy over the “crisis at the border” that resulted from the arrival of large numbers of Central American children in the United States generated popular as well as academic interest in migration from the Northern Triangle countries of Guatemala, Honduras, and El Salvador. However, there has been little attention given to the diversity of migration pathways within Central America and the importance of intra-regional migration. Nicaragua has the second highest emigration rate in Central America, behind El Salvador, and forty percent of Nicaraguan households receive remittances (Monge-González, Céspedes-Torres, and Vargas-Aguilar 2011; Orozco 2008). In contrast to migrants from the Northern Triangle, though, Nicaraguan migrants are more likely to move within the region to Costa Rica than to the U.S. (Baumeister, Fernández, and Acuña 2008; Baumeister 2006). Indeed, around 250,000 Nicaraguans live in the U.S., while more than 300,000 live in Costa Rica (Baumeister, Fernández, and Acuña 2008). Costa Rica, in turn, is home to two-thirds of all regional migrants, of which Nicaraguans are the largest group (PNUD 2003). This mass movement of Central Americans who are fleeing not just violence but also economic crisis contributes to the reshaping of families, communities, and nation-states throughout the region.

Examining migration within Central America is important because, although around half of all international migration takes place within the developing world, we know relatively little about such flows (De Lombaerde, Guo, and Neto 2014). In terms of family life, migration within
Central America entails different expectations for maintaining family relationships, sending remittances, and return visits than migration to other, farther destinations, like the U.S..

Transnational families represent sites where global concerns about migration, security and the power of nation-states converge with intimate decisions and practices of family connection and disconnection. This remaking occurs not just within households or along kin networks, but in encounters with state agencies, offices, and the law. This paper seeks to examine the complex interactions among members of transnational families and the state in three key areas: 1) marriage informality and extended households 2) immigration policy and legal residency, and 3) care responsibilities and access to public services. These issues are linked not only to decisions about migration and length of stay, but also to reconfigurations of care work and ideas about gender and kinship. In all three areas, Nicaraguan transnational families tend to avoid official, legal channels of residency, custody, and social policy and instead create temporary arrangements for care. However, as family separations extend because of financial needs and legal insecurity, such temporary arrangements become temporarily permanent.

**Methods**

Between 2009 and 2012, I conducted 23 months of ethnographic fieldwork in Costa Rica and Nicaragua as well as two month-long follow up visits in 2015 and 2016. My project aims to understand how migration affects family and care relationships as well as concepts of family and gender. I also examined the impacts of recent immigration reform in Costa Rica on such families (Fouratt 2014; 2016). The study included more than 100 semi-structured interviews of members of transnational families. In Costa Rica, I interviewed Nicaraguan migrants living in the San José metropolitan area. The majority attended a soup kitchen in Rio Azul, a marginal urban
neighborhood outside San José, or were members of ASTRADOMES, a domestic workers’ association. While the interviewees were identified through snowballing, they were chosen to reflect variation in migratory status, family structure, and arrival period in Costa Rica. Semi-structured interviews covered family migration histories and relationships as well as practices of remittance sending and receiving, migrants’ encounters with state institutions, and their understanding of current immigration policies. While all migrants lived in the San José metro area, home to the largest concentration of immigrant population in the country, their families lived in different departments in Nicaragua. The study focused primarily on ten families living between Costa Rica and the Nicaraguan departments of Granada, Masaya, Managua, Chinandega, Estelí and Leon. In Nicaragua, I conducted participant observation in sending households and neighborhoods and conducted semi-structured interviews with the children, parents, and other relatives of migrants. In Costa Rica, the majority of interviewees were women not only because I recruited among domestic workers but because women play key roles in managing households and caring for children and the elderly within families, and, as I’ll discuss below, men’s presence in households is often intermittent at best.

**Nicaraguan Migration to Costa Rica and Transnational Families**

Nicaraguan migration to Costa Rica has deep historical roots in 19th century regional economic developments, including the rise of the Costa Rican coffee industry, the construction of its railroad, and the establishment of the multinational banana industry. Contemporary migration is a consequence of political and economic instability during the second half of the 20th century, including the Contra War, economic restructuring, and natural disasters (Mahler 2000; Fouratt 2014). In the wake of the Contra War of the 1980s and structural adjustment
programs of the 1990s, Nicaragua’s informal sector grew to employ about half the economically active population (Nowalski 2002; PNUD 2003). It was during this period that large-scale migration to Costa Rica accelerated as migration became a key strategy for ensuring family survival. Today, about 10% of Nicaragua's population continues to live outside its borders (Baumeister 2006). While Costa Rica represents the top destination for Nicaraguan migrants, it is only part of a diverse set of migration destinations Nicaraguans use within household or family strategies that attempt to build more stable lives and participate in the global economy. Indeed, in Nicaragua, remittances represent the largest source of national income (Martínez Franzoni and Voorend 2012) and account for almost thirteen percent of GDP and 38 percent of exports (Programa Estado de la Nación-Region 2008).

Most families I interviewed employed some combination of internal and international migration, sending multiple members to different destinations. Very few of those I interviewed had family members in the U.S.. Nicaraguans in the U.S. tend to be of higher socioeconomic status than Nicaraguans who migrate elsewhere. Further, because they were often recognized as refugees in the 1980s, they are more likely to have arrived before 2000 and to have legal status than other Central American immigrants in the U.S. (Baumeister, Fernández, and Acuña 2008). There is also significant migration to Europe, which tends to be permanent, and temporary migration to El Salvador.

Still, Costa Rica is the most common destination for Nicaraguans and this flow is comprised of temporary, semi-permanent, and permanent migrants. Nicaraguans, the largest immigrant group, represent around 7% of the Costa Rican population and fill low-paying jobs that form the basis of the country’s agricultural and service sectors (Castro Valverde 2007; INEC 2011). In Costa Rica, men work primarily in agriculture or construction and women as domestic
workers for periods ranging from a few months to several years. Remittances from Costa Rica represent one quarter of all remittances received in Nicaragua, despite the fact that Nicaraguans in Costa Rica make much less money compared to those in the U.S. or Europe (Orozco 2008). And, although studies show that less than half of all Nicaraguans in Costa Rica send remittances through formal channels, many more probably send through informal means (Baumeister, Fernández, and Acuña 2008).

Over the last 30 years, Nicaraguan migration to Costa Rica has also shifted from the temporary movement of male laborers to increased migration of women and more permanent settlement that includes the establishment of transnational family ties (Mahler 2000; Chen Mok et al. 2001). Indeed, in 2015, 15.8% of all births were to Nicaraguan mothers, which reflects the population’s concentration in productive and, hence, reproductive ages (INEC 2016). This has created a situation in which many Nicaraguans have children back in Nicaragua as well as children born in Costa Rica. These transnational families, that is those with core members living in two or more countries, are fraught with tensions over separation, cultural expectations about family and parenting, as well as economic strains related to remittances.

The tensions of transnational family-life have often been framed in terms of care and associated specifically with women’s migration (Kofman 2014). For example, a number of scholars have noted that migrant mothers’ absences are especially hard on children left behind (Parreñas 2005; Abrego 2009). The literature on global care chains has critiqued the inequalities in care provision across borders as migrant women from the global South work as nannies and domestic workers abroad while they pay other women to care for their own children back home (Chant 2003; Hochschild 2000). However, the care chain paradigm has focused heavily on flows among households and on women’s paid and unpaid domestic labor, largely ignoring other
institutions, sites, and agents who play a role in structuring or providing care (Kofman and Raghuram 2009; 2012; Yeates 2004; 2009) not to mention men’s roles in care and family life. Further, work focused on the costs of mothers’ migration has rarely taken into account cultural models and practices of care-giving and family configuration prior to migration. This reinforces assumptions of a nuclear, intact, stable family as the norm in sending communities. But transnational families living between Nicaragua and Costa Rica must be understood in the larger context of Nicaraguan kin relations, which feature widespread marriage instability and high levels of single-female headed and extended households and face extreme social and economic instability. In Latin America, families have assumed responsibility for managing public crises such as overburdened healthcare systems, unemployment, and economic crisis through household strategies, including migration (Biehl 2005; Gonzalez De La Rocha 1994; 2001; Han 2012; Ong 2006). The state, through policies and institutions and the lack thereof, shapes the ways families care for each other. Indeed, these shifts create the paradox of migrant families: that migrants leave to create a better life for their loved ones – especially children – but their leaving generates new forms of vulnerability and insecurity for both them and their family members left behind (Boehm 2008). Indeed, restrictive immigration policies that criminalize migrants and restrict their legal status have a profound impact on individual migrants’ well-being and that of their families (Boehm 2008; 2012; Abrego 2014; DeGenova 2005; Gonzales and Chavez 2012). For example, Nicaraguan migrants in Costa Rica encounter increasingly restrictive immigration policies, which generate barriers not only to legal status but also prevent migrants from accessing public services for themselves and their children. In the rest of this paper, I examine three aspects of transnational family life that link care relationships, family-life, and women’s experiences of migration with the state: 1) marriage informality in Nicaragua; 2)
the difficulty of achieving legal status in Costa Rica; and 3) accessing public services on both sides of the border.

**Single Mothers and Absent Fathers: Marriage informality and extended households**

Although Nicaraguan men and women argue that “we migrate thinking of our children and of our families,” migration is often blamed for family instability and breakdown as migrant parents, especially mothers, leave families behind in Nicaragua. In public discourse, this breakdown is often linked to social and political breakdown. However, discourses of family breakdown distract our analysis from the ways in which government policies and legacies of political, economic, and social instability have both pushed Nicaraguans to migrate and changed what it means to be part of a family. For example, migration and transnational family formation are legacies not only of recent crises, but may be tied to the development of colonial agriculture in Nicaragua, which required the migration of male laborers (Randall 1994; Lancaster 1992).

Even in the 19th century, though the patriarchal family was institutionalized as an ideal through religious and political discourse, “for many people in all social strata life did not conform to this ideal” (Dore 1997, 102). In Nicaragua, other family patterns – unmarried cohabitating couples, single-female headed households, illegitimate children, and child abandonment – were seen as aberrations that threatened social stability, but they were also common. Historically, rates of official marriage, and households’ resemblance to patriarchal nuclear family varied greatly with region, class, and ethnicity (Dore 1997).

More recently, despite policy changes in the 1980s under the Sandinistas to hold fathers responsible for children born out of wedlock, the instabilities of economic crisis and war encouraged men to migrate to escape compulsory military service and undermined efforts to create more family stability. Under the UNO administration in the 1990s, traditional patriarchal
family values were re-entrenched and the government encouraged women to leave the labor force (Kampwirth 1996; Kampwirth 2006). The ensuing economic crisis contributed to men’s abandonment and absence, driving men to leave their families to find jobs – inducing migration “to the United States or Canada, where they were far beyond the reach of new family laws and child-support claims” (Lancaster 1992:19).

Thus, examining transnational families sheds light on how absence, separation, and instability are part of larger kinship dynamics in Nicaragua. Today, half of all unions in Nicaragua take place outside the legal and religious frameworks of formal marriage (Castro Martín 2002). Consensual unions or de facto marriages – uniones de hecho or uniones libres in Spanish – are often viewed by state officials and religious leaders as less stable than legal or religious marriages and more prone to breakdown. But if they are seen as problematic, they are also widespread and socially accepted in both Nicaragua and Costa Rica, especially among the working class and poor, who may find the economic costs of marriage prohibitive. Further, in the wake of legal and cultural changes promoting gender equality in the 1980s, the advantages of formal marriage have decreased for many women. In formal marriages, though divorce is possible, it is expensive and can be difficult. Women in formal marriages have little power over their spouse’s infidelity and may find it harder to escape violent relationships (Lancaster 1992). Nor is formal marriage a guarantee of stability. For example, Elena, a Nicaraguan woman in her 50s who migrated to Costa Rica in the 1990s, was abandoned by her legal husband when she was three months pregnant with their third child. They have been separated, but not divorced, for more than 20 years. While he rarely supported his children while they were young, her “ex” has several times tried to claim the house Elena built for her children through her remittances.
Among almost all the families I have interviewed, those who describe themselves as “married” are, in fact, in de facto unions. And such couples use the terms “casados,” that is married, or “juntados,” literally paired or joined, interchangeably. They also interchangeably describe their partners as “parejas” (couple or partner) “marido,” “esposo,” or “esposa” (spouse). Most of the Nicaraguan men and women I have interviewed over the years have been “juntados” several times in their lives and have children from different unions but have never been formally or legally married. Aminta, a neighbor in Granada, for example, has three children by her “ex-esposo” and a baby girl with her current esposo. In both cases, the unions had been “de hecho” and not legal marriage. Further, in Latin America, informal unions have not represented a transitional or trial period before marriage (as we see in the U.S. and Western Europe today), but rather “a large segment of unions are never ‘legalized’, implying that a considerable proportion of families are built outside the traditional marriage framework” (Castro Martín 2002, 35).

Such configurations weigh into decisions to migrate and who will care for children. For example, it is common for men to maintain more than one family, making it more difficult to fulfill the role of breadwinner or to enforce paternal obligations. This may encourage fathers to migrate to be able to support their families and fulfill their traditional role as breadwinner. As Jason Pribilsky (2007) and others (See for example, Hirsch 2003) have argued, Latin American men often see the key cultural markers of masculine identity – for example, land and house ownership, marriage, and the ability to support a family – as only accessible through the economic opportunities provided by migration. Thus, many migrant men argue that in the context of high unemployment and low wages in Nicaragua, they cannot fulfill this role without leaving Nicaragua. Migration, then, creates a paradox – men may be physically absent from homes, but financially present.
This is not to say that all men who migrate support their families back home. Leisy Abrego (2009; 2014), for instance, notes that Salvadoran men remit less over time and may stop supporting children altogether if their mothers remarry back in El Salvador. Nicaraguan women sometimes expressed similar fears of abandonment, but I rarely observed cases in which fathers had cut off remittances and contact with families in Nicaragua after migration. One rare example is of Mardelí, a Nicaraguan domestic worker who had left Nicaragua for the first time in 1997. She had come because her husband had left her, abandoning her and their children when he himself moved to Costa Rica: “It’s difficult to face the separation of a couple. The distance affected us, but the consequences are suffered by the children. He made his life one way, and I had to remake mine another.” After 14 years of marriage and two years of separation, her husband had found a new partner in Costa Rica. Shortly after, Mardelí made her way to Costa Rica to support the eight children her husband had left behind. However, in most cases that I observed, men’s financial, emotional, and physical absence occurred before migration, as a result of the dissolution of a union. That is, the absence that women and children experience is due to relationship instability and men’s infidelity more than migration itself.

In this sense, such informal relations may also encourage women to migrate as they find themselves without the regular income of a spouse or partner, as in the case of Mardelí. Mardelí also faced criticism from her family and her children for leaving, demonstrating how migrant women often face complex decisions over leaving as well as social criticism for “abandoning” their children because they are often single mothers before migration. In other words, when men migrate, children are left at home with their mothers, but when women migrate, there is rarely another parent present to care for them.
Migration may also represent a way out of violent relationships for women in informal unions. Although Elena’s husband had abandoned her before the birth of their youngest son, it was only by living in Costa Rica that she was able to avoid contact with him, at least until she moved back to Nicaragua. Migration may give women more control over household budgeting and decision-making and more spatial mobility. Further, as discussed below, Nicaraguans often perceive women as less vulnerable to the attention of immigration officials and, thus, to possible detention or deportation. They also find more support in terms of social programs and better enforcement of child support payments.

But this is not to say that migrating to Costa Rica represents emancipation or freedom from intimate violence. The range of migrant women’s experiences demonstrate that some women are better able to take advantage of the opportunities that migration offers depending on legal immigration status, family networks, the point in family formation when they migrate, and employment. Migration does not automatically provide women with social and economic mobility – as those who struggle to find work, obtain documentation, and face xenophobia can attest. Nor is it always an emancipatory or empowering experience for all women vis-à-vis household power dynamics (Chant and Radcliffe 1992; Hirsch 1999; Pessar 1999).

Indeed, violence may follow migrant women across the border. In Costa Rica migrant women are less likely to report abuse to health services, call police on a partner, or leave an aggressor than Costa Rican women (Pacheco Rojas and Arguedas Molina 2011). Such women are also often unfamiliar with Costa Rican laws or legal avenues available for escaping abuse. For example, Diana, who left two teenage children in Nicaragua, migrated to Costa Rica with her abusive partner and younger children. Moving to Costa Rica has made it more difficult for her to leave him. He has an extensive family network in Rio Azul where they live, while Diana has no
relatives nearby. Thus, though her eldest son in Nicaragua urged Diana to go to a Costa Rican police station and report her husband’s abuse, she has resisted reporting or leaving him for years because she fears that he will call Costa Rican child protective services (Patronato Nacional de la Infancia, PANI) and take the children from her. She fears that she would have nowhere to go, even if she were to leave him and take the children. The isolation of being an undocumented migrant in Costa Rica has reinforced the isolation engendered by her abusive relationship. At the same time, the isolation or barriers Nicaraguan women face in leaving violent relationships may be less than in other contexts. Marriage informality may, in some cases, lessen women’s dependency on abusive partners in Costa Rica because rather than claim legal status through a husband, they can claim status through Costa Rican-born children. The isolation Nicaraguan women face in Costa Rica, while not absent, may also be less than for Spanish-speaking Latina immigrants in the U.S., where cultural and language differences make it difficult for undocumented women to seek support.

Migration to Costa Rica may also generate other forms of violence – such as enforced separation from children in Nicaragua. Andrea, another member of the domestic workers association, came to Costa Rica after separating from her unfaithful husband. Eventually, she remarried to another migrant in Costa Rica, but was never able to bring her children over because their father refused to sign their passports and exit permits. When I first met Andrea, she was waiting for her daughter (the youngest child) to turn 18 so that she could come visit without her ex-husband’s permission. Andrea hoped her daughter might decide to stay and live with her. But the years of enforced separation had taken their toll on their relationship. Though her oldest son eventually moved to Costa Rica and now lives just a few blocks from Andrea and her husband, her daughter, Stephanie has never visited. Stephanie explains, “You know, I love them
both [mother and father] equally, but since I’ve grown up more with my father, I’m the only one who hasn’t left the country. But I don’t reproach either of them.” Although scholars have suggested that such refusal to reunite may itself represent a critique of migrant mothers’ absences (Dreby 2010; Boehm 2012), for Stephanie it is more a constraint of her own new family. Although she contemplates visiting her mother and step-father in Costa Rica, she fears asking her own son’s father to sign the child’s passport and exit permit, assuming that he would refuse to let the 2 year old leave the country. Such custody issues were common among women who had left their children behind in Nicaragua. In addition to creating difficulties in bringing children to Costa Rica to reunite with migrant parents, a lack of legal custody could also create problems for the women left to care for children in Nicaragua.

Indeed, when women migrate to Costa Rica, they prefer to leave children in the care of other female kin. The prevalence of extended family households may contribute to women’s decisions to migrate because female kin are already present in the household. Nicaragua has one of the highest rates of extended family households in Latin America (41.3% in 2006) (Martínez Franzoni and Voorend 2012). In particular, scholars have noted the growth of extended family households in Nicaragua in the 1990s as part of an “accordion effect,” in which households expand to pool resources in times of need and contract when resources allow members to separate (Agurto and Guido 2001). However, in Nicaragua, such households appear to be less a temporary reaction to economic conditions than a temporarily permanent strategy for survival. Multiple mothering, child fostering, and reliance on extended family are not simply responses to transnational migration, but part of a larger repertoire of family-making in places like Nicaragua, where the extended family has played an important role both ideologically and in practice.
This has an impact on decisions about migration and care arrangements when parents leave. Most of the children I interviewed in Nicaragua continued to reside in the same home as they had previously because they lived in extended family households. Ivannia, a 50-something Nicaraguan woman in San José, lived with her mother in Managua before she migrated in the 1990s. Living with her mother had allowed her to work and to pool resources with her mother (who took on small odd jobs in addition to taking care of the girls) and a sister who lived nearby. Ivannia’s three daughters continued to live with her mother when she left for Costa Rica:

For example, my kids. My mom has lived with us forever. Back then, I used to work in Nicaragua. So, the majority of the time, my kids, most of the time, all the time they had to enjoy, they enjoyed it with my mama because I always, since I was a single mother, I always had to work. […] So all this time [their childhood] they lived it with my mama. […] Yes, they were already adapted because she, my mama is their mama. They don’t call my mama abuela, she’s their mama. Yes, So, I think the majority of Nicaraguans live almost always with their mama. So, there isn’t this big blow (golpe) when you leave them [to migrate].

In Nicaragua, Ivannia’s eldest daughter, Rebecca agreed, using a phrase repeated among other children of migrants: “I’ve always lived with my mamita.” In Nicaragua, children use the term “mama” interchangeably for mothers and grandmothers or sometimes other female kin who raise them.¹ Although a child may have one mother, he may call a number of women “mama,” indicating affection, care responsibilities, and inter-generational linkages.

In calling grandmothers “mama,” Nicaraguan children may not be pointing to the interchangeability of mothers and grandmothers, or even suggesting that grandmothers may take mothers’ places. Rather, it emphasizes the ways in which multiple people – primarily women – actively “mother” children by engaging in the everyday work of caring. This use of mama to refer to multiple women caregivers reinforces the gendered nature of care-work in Nicaraguan families, where cooking, cleaning, and child-rearing are synonymous with mothering and with

¹ Though there is a difference in emphasis. When referring to mothers, children use “mamá.” In speaking of grandmothers, they employ “máma” or “mamita.”
women’s work (Nieto 2000; Walmsley 2008). Further, practice of child circulation and fostering were common in the Nicaraguan neighborhoods where these families lived. Grandparents often took in grandchildren after the dissolution of parents’ unions, and many women related the importance of this practice in protecting children from step-parents who might not treat children from previous unions as their own.

While I do not want to suggest that grandmothers and other female kin do not take on additional burdens when mothers or fathers migrate, the experiences of Nicaraguan transnational families point to the flexibility of care relationships within families prior to migration. In many Nicaraguan families, these women have long shouldered such enormous burdens, providing care for grandchildren and buffering various forms of parental absence and instability. Rather than replace or substitute for mothers, grandmothers in such families often serve as intermediaries or “middlewomen” between parents and children (Dreby 2010). In such cases, grandmothers take on the everyday tasks of caring for children – feeding, clothing, ensuring their education and health. Such grandmothering may reinforce gender roles because when female relatives take up the work of raising, feeding, and caring for children, fathers or other male relatives rarely pick up the slack (Parreñas 2005).

The informality of child-care arrangements is linked to the centrality of mothering to Nicaraguan women’s lives and identities. Flexible care arrangements represent the extension of the physical and emotional work of mothering across generations as well as national borders. And yet, both grandmother care-givers and migrant parents see migration and these care arrangements as temporary. As such, they avoid official, legal channels of custody or adoption, and seek to reinforce parent-child bonds. However, as parents’ time in Costa Rica extends because of continual expenses and demands for remittances in Nicaragua or because of legal
insecurity in Costa Rica, such temporary arrangements become temporarily permanent. This temporarily permanent situation is the result not only of migration but of the kinds of economic, political and social instabilities that generate and facilitate flexible care arrangements among Nicaraguan families.

**Temporary Measures: Immigration policy and legal residency in Costa Rica**

The complications of transnational parenting are made even more difficult by Nicaraguan migrant’s legal status in Costa Rica. In Rio Azul, the marginal urban neighborhood outside San Jose, and where I conducted much of my fieldwork, I have met dozens of Nicaraguan women who had the right to residency but were still undocumented. Indeed, fairly expansive family reunification provisions in Costa Rican immigration law allow foreigners to claim residency based on a 1st degree family relation, from the day a child is born in Costa Rica. However, it is common to find Nicaraguans who have a right to residency because of their family links to Costa Rican citizens but who remain undocumented because of the high costs of applying and obtaining the needed documents. This situation makes women particularly vulnerable and reinforces the economic and social marginalization of Nicaraguans in Costa Rica.

Over the past ten years, Costa Rica has passed increasingly restrictive immigration policies. The newest law frames immigration as a problem of both integration and human rights and national security (Fouratt 2014). It expands police powers and border control and increases residency fees and fines. In this simultaneous if contradictory incorporation of restriction and

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2 Under the principle of jus soli, any person born on Costa Rican soil is by right a Costa Rican citizen. While the child’s claim to Costa Rica is a claim through place (being born there), the mother or father’s claim is through blood (having a biological child who is Costa Rican). In Costa Rica, a parent can claim residency through her Costa Rican born child from the day that child is born. This contrasts with say, the United States, where one must wait for the child to turn 21 and petition for the parent.
integration the law mirrors trends in host countries around the world (Calavita 2005; Cornelius and Tsuda 2004). While the law continues to allow foreigners to claim residency based on a number of characteristics, including family relations, its higher fees and fines make achieving residency more difficult for low-income Nicaraguan migrants. While the law promotes integration, it conceptualizes integration as legalization or regularization of status (Fouratt 2016). The onus of legal status and thus integration falls onto migrants themselves, rather than the state or society. At the same time, the procedures and costs entailed in achieving residency are particularly difficult for Nicaraguan women to complete.

The law raises the costs of gaining residency by increasing application fees and establishing a $100/month fine for each month a migrant has been in the country in “irregular” status. But the average Nicaraguan migrant only earns somewhere between $160 as a domestic worker to $390 in some construction jobs (Leon Segura 2012). At the time I completed fieldwork in 2012, Nicaraguan migrants had to present a variety of documents – including a criminal history check and birth certificate – emitted in their home country, authenticated by the Costa Rican consulate there, and then brought to Costa Rica, where they are again authenticated by the Ministry of Foreign Relations. Thus, the process can entail up to $500 to obtain documents, plus the cost of the journey to Nicaragua, and absence from work in Costa Rica, resulting in lost wages and sometimes lost jobs. Here, it is important to note that the costs of residency are due, not only to Costa Rican law but also to the under-registration of births in Nicaragua, the loss of documents in war or natural disasters over the past 40 years, and the bureaucratic procedures of the Nicaraguan state. There has been some improvement on this front, since in 2011, Costa Rica signed on to the Apostille convention and Nicaragua followed in 2013. Still, the incredible costs
relative to income, coupled with the complicated process of obtaining documents and applying for residency make legalization incredibly difficult for low-income Nicaraguan migrants.

For instance, Gloria, a 35-year old mother of four Costa Rican-born children, identifies the confusing process of applying for residency, the incredible cost to gather the documents needed, and the financial strains on her growing family as barriers to legalization. Although many times over the course of the last ten years she had thought about applying for residency, her unstable economic situation and lack of familiarity with Costa Rican immigration procedures have impeded her. Gloria estimates that by the time she could pull together her documents and pay the fees, she would accrue thousands of dollars in fines, an amount impossible to pay on her husband’s $300/month salary. Indeed, as Pilar, an immigrant rights lawyer who works for a national NGO, argues, “what [the law] is doing is maintaining the population undocumented.” Thus, although migrant advocates in Costa Rica often exhorted migrants to get documented, such an investment was often both an economic and practical impossibility for Nicaraguans.

The law also includes a number of requirements that make accessing residency more complicated. The 2010 law requires migrants to pay into the social security system popularly referred to as la Caja (Caja Costarricense de Seguro Social) (Art. 7, 78, 97), but a series of miscommunication and lack of coordination has plagued the state among the state institutions involved in the residency and insurance application processes (Fouratt 2016). This has translated into a bureaucratic nightmare for migrants trying to navigate the system and has put a lot of discretion in the hands of counter-level officials. For example, Pilar cites the confusion generated when migrants attempted to pay their $50 application fee in a Costa Rican bank. However, the bureaucratic process entailed in paying the enrollment fees made it almost impossible to comply with the law. “And it’s not so simple to go to the bank [to pay the fee] because they don’t have
insurance. […] So, they arrive at the bank and [bank employees] tell [the migrants] that they can’t [pay] because they don’t have insurance. And when they go to the insurance office, they say [the migrants] can’t [enroll] because their residency is expired.” As each step in the process requires immigrants to have fulfilled other requirements, the lack of coordination among banks, the Caja, and immigration offices creates unresolvable conflicts. Although the Costa Rican Supreme Court has addressed this catch-22 twice since 2011 (Sala Constitucional de Costa Rica, Resolution 2011-003705; 2012-015155), there is still no clear path to fulfilling the mutual requirements. In practice, this means more power is given to the discretion of counter-level bureaucrats and immigration authorities.

Migrants and their families in Costa Rica find ways to deal with the uncertainty of their status in creative ways that generate a temporary sense of security for family-members. For the most part, women bear the brunt of this uncertainty. Families prioritize legal status for some members over others, and Nicaraguan women are often the last to gain residency. For example, Yolanda, a mother of four, explained that her husband had residency, her 17-year-old, Nicaraguan-born daughter had residency, and her two Costa Rican born children had citizenship, but she remained undocumented:

He got his residence permit almost three years ago, because, you know, he was working. We did it on purpose, so that he would earn better. He works in construction. In domestic work, one does not earn that well, and they don’t demand [the residence permit]. In construction they do.3 According to migrants, men are more vulnerable to the attention of migration authorities because they work in highly visible sites like construction sites and agricultural fields. Women, on the other hand, tend to work as domestic workers inside private homes, where they are not exposed to the same scrutiny, and thus feel less vulnerable to detention and deportation. Further, men

3 Yolanda, Interview, Rio Azul, February 14, 2012
with legal status can earn more than women, so families often prioritize maximizing income by investing in men’s residency. Women also felt protected in their roles as mothers, and a common refrain among the women I work with is, “Who’s going to detain me with a baby?” As newborn Costa Ricans, infants index their mothers’ right to residency. Still, Nicaraguan women restrict their movements, avoiding public spaces beyond their neighborhoods as well as morally suspect behaviors that might draw the attention of authorities (Fouratt 2016). Gloria, for instance, avoided leaving her house to sell her tortillas in the neighborhood, instead sending her oldest son, who is Costa Rican-born, to deliver tortillas to customers.

These strategies offer a precarious sense of security at best. For Nicaraguans in Costa Rica, waiting for some way to regularize their immigration status in Costa Rica implies creating temporary strategies for dealing with the uncertainties of their status. They often resort to waiting it out for better circumstances or new laws, for Costa Rican-born children or the money to pay residency fees. However, given the shifting legal landscape, the complicated bureaucratic processes of applying for residency, and the high costs of documents, many Nicaraguan migrants find no easy way out of their immigration problems. Further, the temporary and piece meal administration and enforcement measures mean that both state immigration officials, who implement and enforce the law, and migrants themselves, as subjects of the law, must work out what immigration law means at a particular time.

Caring for Children, Side-stepping the State

The impact of irregular status on Nicaraguan women extends beyond restricting their movements or affecting their sense of home to the very well-being of their families, especially children. In Nicaragua and Costa Rica, as in many places around the world, women act as mediators between state institutions and agencies and families. This is perhaps particularly true
in the wake of neoliberal reforms in Latin America that impacted social spending in these countries and shifted the burden of care from state-provided public services to families (Biehl 2005; Ong 2006). Here, I examine migrants’ and their families’ access to healthcare because of the central role it has played in Costa Rican social spending and national identity, its key role in regulating integration under the new immigration law, and the importance families place on access to healthcare for children in Nicaragua. However, similar barriers to access exist in other areas of care, including education, childcare, housing, etc.

Nicaraguans’ practices of accessing social services as migrants in Costa Rica vary according to several factors, including legal status, social insurance, the presence of children, and extra-legal processes of discrimination. Before 2010, migrants were able to get insurance relatively easily through employers or voluntary affiliation regardless of immigration status. Cost, more than eligibility limited immigrants’ access to insurance and thus care. However, under current law, which requires would-be residents to purchase insurance through la Caja, those without legal status are no longer able to pay into the system, even through voluntary contributions. Perhaps the most concerning aspect of recent policy changes is a shift towards restricting access to women with irregular status. Without legal status or insurance, undocumented women have no access to preventative care, including cervical cancer screenings or contraception. In 2013, the CCSS took these restrictions even farther, drafting a resolution to restrict pregnant women with irregular status to only emergency care (Sandoval G. 2015). Disagreement within the CCSS and advocacy by academic, NGO, and civil society networks pushed the CCSS for clarification and eventually reaffirmed women’s right to prenatal care no matter their legal status. However, once women give birth, they are no longer eligible for care within the public system (Sandoval G. 2015).
This conflict over access to care for pregnant women highlights the importance of legal status for access to services and rights for migrants in Costa Rica. Without legal status, immigrants cannot register with la Caja and, through this, access healthcare services beyond prenatal care. For example, Mariela explained that when her elderly mother’s residency expired, she was unable to get treatment when she suffered a major burn in a cooking accident. ‘Her papers expired. She was burned; they didn’t give her the medication and treatment she needed because she didn’t have her papers.’. Her mother received emergency care in a public hospital but was forced to pay for medications and follow up treatment at a private clinic.

The conflict over access for pregnant women also demonstrates that, as with immigration law, implementation of the restrictions is plagued by lack of clarity within and across state institutions, which translates in more degrees of freedom for counter clerks and other public sector employees working at the operational level to determine their own criteria for obtaining insurance or care. Further, as with legal status, incorporation into public health insurance seems to be gendered. Women who work in the informal sector have trouble gaining insurance coverage. Many domestic workers report that employers regularly did not report their full hours in order to pay into the CCSS at a lower level, which in turn affects their access to social insurance, disability, and pension benefits. In my observations, Nicaraguan women again obtain insurance after their spouses and children, if at all (cf Goldade 2009). Like the calculus of legal residence, families prioritize children and men’s access to services over women’s.

However, even when women have their legal paperwork in order and manage to insure themselves, they encounter discrimination and exclusion due to widespread xenophobia. As Mariela, noted, ‘With papers it is a bit better, but I feel that there is still that discrimination. Maybe not for not having papers, because even with papers there still is [discrimination], just
because of our country [of origin]. I have my papers in order, but I have had problems.’ Ruth, who had a Costa Rican born daughter and was insured by the Caja, described the attention she received during her pregnancy in 2010:

I feel that there’s also a terrible medical attention for immigrants. Yes, when I was pregnant...I got pregnant soon after arriving [in Costa Rica], and the doctor spoke to me like I was stupid. They think that because you’re Nicaraguan you’re illiterate, ignorant, stupid, and it’s not true. As these interviewees suggest, poor treatment migrants encounter in public clinics is more closely linked to nationality than legal status. Such widespread xenophobia may lead migrants to feel that they do not “deserve” to use services (Spesny Dos Santos 2015).

Although adult migrants face significant barriers in accessing care, they are often able to access public services for their children. Costa Rican law guarantees children’s access to healthcare and education regardless of immigration status, and this access has not faced the same challenges as women’s access. Further, many Nicaraguan migrants have Costa Rican born children, who are citizens. While these children may face discrimination in accessing services (Spesny Dos Santos 2015), their legal citizenship gives them a legal advantage over Nicaraguan born children.

However, even access for children is not always straightforward. In some instances, such mistreatment included being set extra requirements or steps not required by law. For example, children must present an identity document – either their passport or one issued by the Nicaraguan consulate – to access health services without legal status or insurance. However, a social worker in Rio Azul reported that mothers often came to her distressed because clinic or school officials were demanding extra steps and paperwork to enroll their children or receive care. Others were unable to obtain the documents needed because of the costs of returning to Nicaragua.
Faced with difficulties in accessing public social services, many migrants find alternatives in the private sector. Turning to the private sector is a strategy used not only by immigrants, but by Costa Ricans as well, who turn to the private sector for specialists, diagnostic tests, and ultrasounds that have long waits in the CCSS system. Indeed, private spending in healthcare has grown to 1/3 of all healthcare spending in Costa Rica (Martínez Franzoni and Ancochea 2013). However, turning to the private sector is expensive, and migrants often only go when very ill. As Rafaela, a member of a migrant women’s network, notes that she had struggled to explain to her children back in Nicaragua, “That when we get sick, and it’s between going to a doctor and sending a remittance. We prefer to send a remittances. It’s that, I sent all my salary and was left with just a tiny part.” To minimize healthcare expenses, migrant women often self-medicated, either going to the corner store for over the counter medications or going to a pharmacy to explain their symptoms to a pharmacist who then makes a recommendation. Another relatively common option is to have medicines sent from Nicaragua. Other buy them on the black market in the La Merced Park in San José, where many Nicaraguans gather.

In the case of severe illness, many migrants opt to return to Nicaragua, even though the quality of care is much worse than in Costa Rica. As Rafaela explained starkly:

We are like elephants, who, when we feel sick return to our place of birth. [...] Yes, an elephant may wander and wander and wander, right? But when he feels sick and that he’s going to die, he returns to the place where he was born. And he dies there. Yes, that’s how we [migrant women] are. When we get sick and we feel that it’s, well, we go with terminal illnesses, because since we don’t have insurance here to take care of us, when we go to the clinic they won’t attend us. [...] We have 6 compañeras that have died of cancer, because they didn’t have access to healthcare, they didn’t have timely access. And so, yes, most of us choose to return to our country. To die there. Over the course of my fieldwork, three women I interviewed returned to Nicaragua for health-related reasons. Some emergency situations, however, leave migrants with no choice but to seek
emergency care in the Costa Rican public sector, where, as in the private, they receive an invoice and end up paying.

In Nicaragua, migrants’ families adopt similar strategies by turning to the private sector for care. There, barriers to access are related not to citizenship status but to the poor coverage and quality of public services. Indeed, migrants in Costa Rica frequently remark positively on the quality of services in Costa Rica, in direct contrast to the lack of quality services in Nicaragua. However, they largely see the contrast between the two countries as a catch-22. As Claudia, a 44 year old mother of three who lived in San José explains:

In the case of health, the attention is better [in Costa Rica] than there. Because [in Nicaragua], if you don’t have money, well, it goes badly for you because medicines and everything. Even if the doctors treat you for free, the cost is the medications. Here [in Costa Rica], we have voluntary insurance and it’s much better treatment. Here, the education too. Cheaper there. But it’s better here. So, there are lots of things that on one side are better, but on the other side, you, you deprive yourself.

As Claudia’s comment notes, in Nicaragua the public healthcare system has never provided the coverage or quality of services that the Costa Rican system has. Indeed, the Nicaraguan state plays only a marginal role in public social service provision, and instead, depend on international cooperation and family strategies (Franzoni and Voorend 2011; 2012). While per capita public social expenditure has increased considerably between 2000 and 2009, from US$ 91 to $157, this still the lowest in absolute terms in all of Central America (ECLAC 2015). And while most social programs in Nicaragua are universal on paper, in practice they are only aimed at the poor (Martínez Franzoni and Voorend 2012).

Voluntary contributions – either of labor or money – are often requisites for accessing services in Nicaragua. During the Sandinista Revolution campaigns to provide services and programs for the poor depended on the unpaid work of volunteer brigades, staffed primarily by women. Such volunteer work was both a revolutionary ideal and a way for the overstretched,
under-resourced government to provide such services to the population. The 1990s saw the continued reliance on voluntary or community work in the provision of social services and programs, as cuts to state spending made the provision of care more difficult. In childcare and educational institutions, families became responsible for remodeling buildings, digging latrines, and fundraising to cover operating costs and teacher wages (Martínez Franzoni 2008). And, while the current administration under Daniel Ortega has done much to improve health and education coverage, services are still “not for everyday life,” as one woman put it. Women in Nicaragua talked about having to take their own sheets and purchase syringes and other medical supplies for hospitalized relatives. In this sense, reliance on extended family – and particularly women’s care-work – has underwritten and made possible the transformation of state and economic policies in Nicaragua, buffering if not ameliorating the devastating consequences of ineffective government policies and social services, political instability, war, and economic crisis. Given the poor coverage and quality of public services, Nicaraguans often access services through clinics staffed by international volunteers or organizations. However, as one woman noted, such clinics are “only temporary.”

Instead, Nicaraguans develop a range of strategies to ensure access to care. For the most part, the families I worked with used public services in emergencies, just as their relatives did in Costa Rica. However, they supplemented emergency attention in the public sector by paying for specialists or medications in the private sector. For example, Kenneth, a 19 year old in Granada whose mother was in Costa Rica, talked about how traumatizing it was to take his pregnant girlfriend to the local hospital for a kidney infection. At the public hospital, medical staff warned them of the chance of miscarriage because of the infection, but refused to perform an ultrasound to check on the fetus:
So there in the hospital they do ultrasounds, but they said that one of the machines was broken and they were only doing ultrasounds for pregnancies in later stages, like 7 or 8 months. So, I didn’t know what to do. I went and borrowed money to pay for an ultrasound outside [the hospital]. In this case, Kenneth borrowed money from his employer, took his girlfriend to a private clinic for the ultrasound, and then returned to the hospital for treatment of her kidney infection. Others complained about the high costs of medicines not provided through the public health system or the need to pay specialists outside of the system for tests and procedures not covered or with a long wait list in the public system. While few migrants name healthcare as an explicit reason for migration, healthcare costs factor into the economic needs that poor Nicaraguan families face. The debt for his girlfriend’s ultrasound and other expenses related to her pregnancy factored in to Kenneth’s plans to move to Costa Rica after the baby’s birth.

As a result, remittances, which represented 9.8 per cent of GDP in the first two trimesters of 2015, play an important role in facilitating access to social services (BCN 2015). Remittances are key in Nicaraguan families’ social provisioning and almost half of all remittances to Nicaragua are spent on medicine, housing and education (Martínez Franzoni and Voorend 2012). Migrants often send back money for medicine because the variety of free public medicines is limited. Other families report using remittances to pay for services ranging from ultrasounds and medication to appointments in private clinics.

Remittances are particularly important in ensuring healthcare, education, and other needs for the children of migrants. Marina, a grandmother raising two grandchildren in Managua while her daughter works in Costa Rica, noted that she used her daughter’s remittances primarily for education, food, and healthcare:

I have two of her children. And I pay the schools, because I have them in paid [private] schools. And her school, I pay for her [her granddaughter] because I have her in computer class, she’s going to complete a year and a half long computer course. That’s another school I pay. And I say, their expenses, the food,
when they get sick I have to take them to the doctor, the medicine, shoes, I mean, their clothes. However, parents’ remittances are usually earmarked for education, food, and other necessities, so their use for emergency medical care can put a strain on caregivers’ tight budgets. Marina explained that when the children get sick, she almost always takes them to a private clinic:

When they get sick, I take them...especially since they don’t have insurance here. So, I take them to a doctor. If you take them to a health center, right? A public one, and they don’t take care of them, then you have to take them to a paid doctor. [...] I have to take them to a private doctor so that they pay more attention to the illness. So, all this I have to think about and is my responsibility.

While dissatisfaction with public healthcare services in Nicaragua is widespread, migration and the remittances it provides offer a way for families to side-step state sponsored services and purchase care in the private sector. However, given the high costs of such services and the general unreliability of remittances, families often combine basic care in the public sector with the purchase of medication or specialist appointments or exams in the private sector.

When migrants are unable to send remittances, it can significantly impact children’s access to healthcare. For example, Esther, who is raising her 13-year-old granddaughter, Jessy, reports frustration that the child’s father has not sent money recently, even though Jessy has been suffering from recurring headaches and needs tests outside the public hospital:

I don’t know. It looks like things are going badly for him economically. That’s what I feel. Because Jessy has been very sick, she was in the hospital, and his help has been minimal, almost absent. The difference a CT scan would make. But that costs almost $200. And he couldn’t send that. So, we haven’t been able to get the scan for her.

A lack of remittances, then, may translate into a lack of access to healthcare, especially for children. It is particularly interesting that, despite the different circumstances, similar strategies for accessing health care among migrants and their families can be observed in both countries, with the use of the private sector as a strategy to deal with exclusion from or the inadequacy of public services.
The cases of Marina and Esther also highlight the important role of grandmother caregivers in managing remittances within transnational families and ensuring access to services for migrants’ children in Nicaragua. As noted above, grandmother caregivers have long played an important role in Nicaraguan families and in welfare strategies they pursue. However, migration adds new dimensions of responsibilities to their carework. They must negotiate not only the emotional separations between their children and grandchildren, but also take on the added burden of care responsibilities and the administration of remittances. For Nicaraguan grandmothers, the shifting responsibilities and expectations they face as care-givers in the context of migration represent new responsibilities within extended families.

In particular, their day-to-day caring activities are compounded by new responsibilities to explain and manage parental absence, manage remittances, and act as intermediaries between children and the state. Marina argued, “Even though [my daughter] sends money, it’s the one at home who knows how to make that money last.” Here, Marina asserts the value of the labor involved in managing remittances, a particularly invisible aspect of the care labor involved in grandmothering. For many, this means not simply advocating for children for access to state services, but bypassing the state altogether to purchase services in the private sector. Thus, when families side-step the state, it is often female caregivers who take on new responsibilities.

Even when parents send money regularly, it is often not enough to cover children’s expenses and grandmothers must figure out ways to get by and make do. For example, Elena’s daughter recalls that her grandmother sometimes drew from her own money when the children needed something, rather than bother Elena in Costa Rica. “When she saw that we were missing something, she spent her own money so as not to bother my mama. Because she would say, how could we bother her [my mother] because she had her own expenses too.” Some grandmothers
try to avoid upsetting their migrant children with the reality of how thinly stretched the household budget was or of unforeseen expenses. However, when remittances “don’t measure up,” they neither make up for parents’ absences nor supply the income needed to care for children left behind. And, indeed, in failing to send remittances, parents themselves fail to measure up to care-givers’ and children’s expectations. Such emotion work has important consequences for care-givers’ health and well-being. Kristin Yarris (2011), who worked with Nicaraguan grandmother caregivers and children of migrant mothers, notes that the stress of care-giving contributed to embodied distress among grandmothers, a condition characterized by frequent physical ailments and particularly dolor de cerebro (“brain-ache”).

Conclusion

As this paper has briefly examined, state institutions and practices shape the ways in which people understand themselves and their intimate relations of care and kin. For Nicaraguan migrants and their families in both Costa Rica and Nicaragua, encounters with the state shape their experiences with marriage, care work, and parenting, as well as legal status and public services. These encounters, in turn, may be linked to reconfigurations of ideas about gender and family roles.

In Nicaragua, reconfigurations of family have represented a resource for care in a context of failed or non-existent forms of state care. For my Nicaraguan interlocutors, migration represents a key strategy to care for family. Women’s care-work has been a fundamental element in sustaining and maintaining not only families but the nation. This reliance on women’s care-work has naturalized both gendered expectations of care provision and the family as the primary site of care-giving, devaluing this work and shifting focus from public forms of care to the domestic space of the home. In Latin America today, policies that have cut social spending and
programs have placed enormous pressures on families to cope with and make do, generating uncertainty about the future in the face of prolonged crisis. Indeed, in some ways, migration and the remittances it generates underwrite the continued inadequacy of public care in Nicaragua. It is, at least in part, the flexibility of transnational kin and care that allow public discourses of solidarity and equality to continue their purchase in the national imaginary despite growing inequality and deep poverty.

Transnational families represent one of myriad kin configurations that Nicaraguans draw on in their efforts to create and maintain relationships of meaningful care for loved ones they recognize as family. For both men and women, migration offers both opportunities to fulfill parenting roles and challenges to their relationships with children as the links between economic and emotional support become more strained. For women in particular, paternal absence and marriage instability have expanded the expectations for mothering to include both emotional and financial support for children. Further, while grandmothers may take on new burdens in raising grandchildren in transnational families, their grandmothering must be understood in the context of intergenerational expectations for care in Nicaragua. Fostering by grandparents is a common strategy that allows families to pool incomes and increase the number of members employed in income-earning labor, to protect children from parents’ marriage instability, and to strengthen intergenerational linkages.

As thousands of Nicaraguans choose to migrate to Costa Rica as part of family strategies of making do, they encounter new uncertainties that are tied to other forms of state power. Immigration law conditions families by defining families and who is eligible for family-based migration as well as by restricting who can migrate. In Costa Rica, the conditions of the legal immigration system have been compounded not only by increasing restriction and repression but
by frequent legal changes and a complicated bureaucratic system for attaining residency. The result has been to make residency more difficult to achieve for most low-income Nicaraguans. The difficulty and expense of obtaining documents in Nicaragua contributes to migrants’ legal vulnerability in Costa Rica, even as the country’s economic and social conditions encourage migration as a way to compensate for the lack of effective state forms of care. In Costa Rica, the high cost of immigration procedures, the complex bureaucratic process involved, and frequently changing immigration regulations creates another barrier to migrants’ legal and social integration, despite principles that promote family reunification and social integration. In creating uncertainty for Nicaraguans, such state policies maintain the vulnerability of the migrant population.

However, Nicaraguans’ own temporary measures show that people do not passively face state policies, procedures, or institutions. Rather, they employ a range of strategies to resist criminalization, assert forms of belonging, and care for one another. In all forming families, migrating, and accessing services, Nicaraguan transnational families tend to avoid official, legal channels and instead create temporary arrangements for care. More and more, as families find themselves outside the benefits of uneven economic development, they turn to alternate ways of making do and making a living – this includes irregular migration and strategies for avoiding expensive, confusing legalization processes as well as using hard-earned income to side-step the state and purchase services in the private sector. But, as family separations extend because of financial needs and legal insecurity, such temporary arrangements become temporarily permanent. Accounts of transnational family-life, then, must take into account the changing geographic locations, marital or relationship statuses, and shifting loyalties of family members. In caring for family through migration, Nicaraguans enact not only provisional understandings of
what it means to be related, but particular visions of the shifting states and nations in which these relationships unfold.

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