

## INTRODUCTION

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[T]he space for an alternative feminist discourse on maternity can be cleared only after rigorous interrogation of the cultural representations of motherhood.

—Ewa Ziarek, 'At the Limits of Discourse: Heterogeneity, Alterity, and the Maternal Body in Kristeva's Thought'

I spent most mornings during fieldwork in 2013 travelling back and forth between the small *barrio popular* (working-class neighbourhood) la Orilla and city centre on the *combis*, (converted vans) that move people and packages all over the city from daybreak until the day's end. The *combis* move at an alarming speed, navigating the city's colonial streets that grew gradually bumpier and less defined the further out of town we got. These daily journeys were my lifeline during the first few months, they gave my day structure and enabled me to interact with (and then eventually get to know) women from all over la Orilla who otherwise spent a large proportion of their days in household compounds. Before I got to know my neighbours well the *combi* journeys were essential for the type of 'mother-watching' I wanted to do for fieldwork. This type of public transport was familiar ground for me, having spent the previous years travelling around the city with my eldest child Emilia. On these earlier journeys, women would ask me where and how I had given birth, offer ways to improve my milk supply, check my baby was wrapped up correctly and scold me for not giving her water to drink from a bottle. As a new mother these interactions taught me how to 'perform' motherhood in a way that was acceptable to that environment. On those quick journeys I was offered countless snippets of advice and commentary that I could choose to take or discard the moment I climbed out of the vehicle and merged into the crowds on the street.

When I returned to the city for doctoral fieldwork I was accompanied by Emilia, now five years old and I was seven months pregnant with my third child. We arrived at the beginning of the rainy season. Sunny mornings would give way to the air becoming gradually more oppressive and as the day wore on as the sky would turn black erupting with thunderstorms by early afternoon. One particularly humid morning I was travelling home from the centre having just dropped Emilia off at school. It was just after 8.30am and the *combi* was full of women on their way home from the market. We were squeezed onto the narrow benches lining the sides of the van, colourful shopping bags bursting with vegetables and fresh aromatic bunches of coriander and parsley. Passengers sat with warm sweet breads and tomatoes sweating in plastic bags grasped by the calloused fingers of one hand, whilst another hand gripped onto the bench or dipped into an apron pocket for change to pay the fare. As the *combi* bounced along the dusty road, swerving every few seconds to avoid massive potholes, beep at dogs or narrowly avoid head-on collisions with oncoming lorries, I listened absentmindedly to the conversations as women went about their day. A middle-aged señora was chatting to a younger woman sat opposite who was cradling an infant in one arm and a litre bottle of coke in the other. The señora leaned forward, tickling the baby's legs with her free hand.

'A dónde vas chula?' (where are you going my love?)

'It's my turn to queue for my mum, my sister is with her now, but she has to go to work and my mum has to look after the little ones', she shifted on her seat and opened her blouse slightly so the child could turn its head to feed. 'It's signing on day and she's been there since eight o'clock waiting for her money. Are you going today? I'm told there's a big queue'. She was referring to the periodic signing on process for the pension provision of the conditional cash transfer programme IMSS-BIENESTAR (previously IMSS-PROSPERA).<sup>1</sup>

The señora shook her head, 'no I have too much to do at home, the gas ran out this morning and I have to wait for them to deliver more otherwise there'll be no dinner. I've sent my granddaughter to queue for me'. The *combi* screeched to a halt as another driver jumped out in front to warn ours there was a police check point ahead. The road through la Orilla was the main highway between the highlands and the city, and there were often random police checks for migrants, contraband or arms trafficking. As the van jolted to a halt, a bucket of chayotes spilled out onto the floor, its owner tutted and rolled her eyes at the driver muttering, '*ay joven* we are not cattle in here!' Everybody stretched out with a hand or

a foot to rescue one of the spikey vegetables and return it to the bucket which was now lodged firmly between its owner's legs.

The *combi* set off again and the conversation continued. 'Do you have a message for your granddaughter?' the young woman asked. 'Yes', the señora replied, 'tell her I won't be long, I'm just going to do my jobs and I'll be there to sign'. Her voice quietened. 'Do you know who's there [from the municipal government]? The last time they sent me all the way into the centre because I had one digit missing on a paper. If it's the young one I won't have problems but if it's the other, the red head, uuuurrrgghh!' She shrugged her shoulders and pulled a face.

As the *combi* came to an abrupt halt another señora, looking to be in her mid-sixties, plump with two long plaits down to her waist, got on. She was accompanied by two teenage girls who now stood holding onto the handrail as the *combi* continued its way to the entrance to the *barrio*. The smell of warm empanadas wafted from her wicker basket and there was a bucket of *atole* (maize drink) covered with a cloth held steady between her feet. 'Buenos días', she greeted everyone as she shuffled her bottom to make space on the bench. 'Buenos días', echoed various voices in a customary reply.

'Buenos días comadre, what a miracle!' said the first señora to the new passenger. 'Are you off to sign or to sell?'

'Well, a bit of both', she chuckled, 'if I'm going to spend all day waiting in line I may as well make some money whilst I'm there'.

Over time daily life in the *barrio* and around the city taught me that motherwork, intimate relationships and everyday health are never far from engagement with colonial legacy and the global political economy. The lives of people with low incomes are tightly regulated, whether directly or indirectly, by state apparatus, including the unfeasible bureaucracy of identity proof and access to basic health and social services. As such, it is impossible to write about gender and maternal health politics in Mexico without mention of the state and its various apparitions in daily life. Women (as it is predominantly women who partake in this activity and who are the targets of anti-poverty campaigns in Mexico) treat these (dys) functional elements of the state as a *molestia* (an annoyance), a necessary evil that takes time away from crucial economic activity and managing families, but that nevertheless must be done. Yet, at the same time, women collectively invent ways of dealing with the bureaucracy so that their time devoted to the system does not end in vain. In doing so they learn what Auyero (2012) describes

as the ‘opposite of citizenship’, or alternatively what I would define as acquiring an anti-state citizenship characteristic of over-managed populations. Women’s positioning (young and old) as mothers, principal caregivers and perceived heads of poor households is what has historically defined their gendered relationship to the Mexican state (as far as the state is concerned). However, what I have come to learn after spending thirty months of fieldwork over a seven-year period (2008–2015), in a region undergoing rapid socio-economic change, is that for most women the state is at the periphery of what gives their maternal identity meaning.

At its heart, this book is a study of Mexican women’s experiences of maternal transformation.<sup>2</sup> Yet rather than re-colonizing women as mothers, my aim is to understand this process of becoming as a broader way in which human beings respond to change. This study is a critique of homogenous representations of motherhood and global maternal health logic that exclude the intersection of sexual and reproductive health and that indirectly perpetuate a maternal homogeneity. This book is a project that celebrates ordinary maternal devotion, while castigating the toxic canonization of the mother figure that social systems have historically used to punish and shame women across the globe. I develop my ideas about being a ‘good enough’ mother in Mexico from the women whose stories shape the chapters in this book, and the hundreds of other conversations I have had with people since I first arrived in Mexico seventeen years ago.

I take theoretical inspiration from María Lugones’ writings on decolonial feminism and the coloniality of gender. Lugones’ work on the coloniality of gender emphasizes ‘the concept of intersectionality and has exposed the historical and the theoretico-practical exclusion of non-white women from liberatory struggles in the name of “Women”’ (Lugones 2016). Along with the work of Anibal Quijano (2000) and Mara Viveros Vigoya (2018), Lugones provides my work with the intersectional thinking contextualized in the colonial legacies of Latin America. Her writings strive to make visible the ‘instrumentality of the colonial/modern gender system in subjecting – both women and men of color – in all domains of existence’ (Lugones 2016). Lugones argued that ‘the semantic consequence of the coloniality of gender is that “colonized woman” is an empty category: no women are colonized; no colonized females are women’ (2010: 745). Instead, coloniality (rather than post-colonialism) as a process is what lies at the intersection of gender/class/race as central constructs of the capitalist world system of power. The systemic and social oppression of Mexican women in the mother role (and arguably the

non-maternal role) is constructed via the coloniality of gender, and this cannot be unstuck from the modernizing efforts of the global health project.

Stereotypical representations of lower income Mexican mothers, as economically tied to the home and dependent upon the state, come about because of the power relations that resonate in transnational feminist critiques of development discourse. Such critiques argue that power relations between state and society maintain homogeneous, hierarchal, dichotomous colonial logic (Lugones 2003; Rivera Cuisicanqui 2012; Mohanty 2013). My broader project of challenging the coloniality of motherhood in Mexico does not aim to deny or replace current representations of Mexican women as mothers, but instead seeks to create a dialogue between what exists and what is possible in how we understand the lives of women who are principal caregivers. In doing so I understand my project as a work of creative activism as much as scholarship. With this study I aim to work away from overly ambitious generalizations of what it is to be a mother in Southeast Mexico and instead embrace the instability of the everchanging experience of personhood. The ethnographic material in these chapters highlights how relentlessly emergent contextual variations exist and clash in everyday life, making it impossible to stereotype the archetypal maternal figure in any fixed sense.

It is my aim in this book to take the reader from the ethnographic site of the singular – urban Chiapas – to a deeper critique of the universal by identifying the role that sustainable and healthier development (brought together under the umbrella of the Sustainable Development Goals) plays in shaping aspects of maternity amongst Mexican women. Fertility issues and informal economic activity have long been the focus of poorer women's lives in development and global health discourse, resulting in a homogenous 'frozen' figure of the developing world woman as someone continuously in her reproductive years and striving economically, and in need of regulation. In this way development initiatives exclude other aspects of adult women's social and private lives throughout their life-course. Moreover, understandings of nurture are reduced to a specific period between birth and early motherhood and focus on a distinct care contract between biological mother and child. As the chapters in this book will show, nurture practices are collective, locally constituted and intergenerational.

Though this study adds to the existing body of anthropological literature about families and motherhood in Mexico, a country which straddles the low to middle income economic divide, it does so in an

effort to challenge how a narrow positioning of women as reproductive entities recreates a colonial endeavour to keep Mexican women from ever being understood as anything but ‘women in developing contexts’. A continuous understanding of motherhood in relation to biosocial reproduction in Mexico remains pertinent. Without such studies untroubled narratives about homogenous female populations without pre- and post-reproductive histories will persist and continue to form the misguided basis of development programmes.

As Indigenous feminist and Zapatista leader la Comandanta Ramona stated firmly often in her speeches, Indigenous women face a triple intersection of oppression: ‘Ser Indígena, Ser Mujer y Ser Pobre’ (being Indigenous, being a woman and being poor).<sup>3</sup> My thinking is influenced by the feminism of Indigenous women and activists across Latin America. I am preoccupied with how we understand the multiple oppressions together with the writings on intersectionality of Lugones, Quijano and Viveros Vigoya. The collections of Latin American feminist work invite me to ask the following questions: how do we think about the intersecting oppressions of all women of Chiapas across the social strata? And how are women’s sexual and reproductive lives affected by the structural violence and misogyny enacted by Mexican men who are also subject to the historical coloniality of violence? With these questions I aim to avoid the destructive and illusionary binaries that wrongly place Indigenous Mexican women on the one hand as other, devoid of class nuance and power, and non-Indigenous Mexican women on the other as one homogenous socio-economic and ethnic group.

The women who appear in the following chapters straddle the public and private divides of the healthcare system; their daily existence focuses on the struggle for economic survival and the pressures of keeping an intergenerational household together. The women in la Orilla do not benefit from the political discourse of the Zapatista movement or transnational NGOs, they represent the households that make up the urban statistics about illiteracy and teenage pregnancy. These women’s interests and desires are shaped by sisters, cousins and mothers-in-law, *telenovelas* and the church. Women in la Orilla are ignored by the state until it is time to buy their vote. Most are wives and/or mothers who feed large families on tiny budgets, manage the angers and frustrations of childrearing, they tolerate husbands demands and mother-in-law’s interferences. They run businesses from home and account for every centavo that comes into the home and they work the bureaucracy of local government with the skill of a social secretary.

## Coloniality of Gender and Critical Global Health

Medical anthropologists have been grappling with what Didier Fassin (2012) terms that ‘obscure object of global health’ for decades. However, the addition of a ‘critical’ element is a somewhat newer development brought about by scholars deeply engaged in the intersectional politics of health inequalities and interventions targeted at the Global South (Biehl and Petryna 2013; Adams and Pigg 2005; Biehl and Adams 2016). On the one hand, the turn to critical global health is the renewal of a long-held concern within anthropology: the need for close attention to the broader knowledge field of public health policy and practice. On the other hand, ‘critical global health’ itself is a construct that emerges specifically through engagement with contemporary biopolitical configurations in which working towards ‘something called health’ (Pigg 2013: 128) is now shaped, characterized by a ‘multiplicity of actors, all vying for resources and influence in the political field of global health’ (Biehl and Petryna 2013: 6).

Global health praxis is driven by a data intensive technocratic approach that ‘can undermine our ability to think through complex problem solving around evidence that does not lend itself to statistical forms’ (Adams et al. 2014: 190). As such, no matter what the intentions are for an all-inclusive agenda in global health, the reliance on measurable outcomes, no matter what area of health is under scrutiny, will always trump alternative ways of targeting what is relevant to any given population at a specific moment in history. Metrics inherent to global health arise from what Lugones described as the ‘categorical logic of colonial modernity’. Colonial modernity organizes the world ontologically in terms of atomic homogenous separate categories. Lugones argues that ‘[t]o see non-white women is to exceed categorical logic’ and that involving such categories evades the possibility of intersectional interrogation (Lugones 2010: 742). For meaningful change to occur we must enquire critically into the nature of this thing we call ‘global health’, examine its historical motives and instigators, and ask why a universal desire for equity in health and wellbeing must come at a cost of devaluing difference between and within populations. What is it about the way in which global health is conceived and constituted that has gone unquestioned? Why do interventions change but the ways in which they come about do not? And what can ethnography of intimate family lives and their relation to institutions tell us about this?

Whilst global health praxis concerns itself with homogenous binary forms of gender, race, poverty and increasingly age, it remains bereft of a contextualized and intersectional analysis, and therefore its politics (gendered or otherwise) are obscured. The colonial roots of this 'bunch of problems'<sup>4</sup> called global health must be examined using a framework that reveals what is hidden from our current understanding of race, gender and sexuality that are themselves a result of colonial and post-colonial modernity. Furthermore, there is a disconnect between the universal ideology of 'equity and justice' and how people live in the ordinariness of the everyday. Many Euro-US ethnographic perspectives continue to overlook variations in the causal processes of inequalities in post-colonial societies. As such, they do not deal with the root causes that are inherently more complex than gender inequalities alone. Whilst contributing to the newer drive for gender equality as a variable in global health, anthropological research has seldom addressed the following questions: how is global health as praxis gendered? In what ways is gender (when reduced to binary categories) prioritized over other inequality indicators and social categories, and to what cost? And whilst global health actors apply universal concepts of gender, wellbeing and health on top of local contexts, does medical anthropology have an appropriate framework that allows us to question these terms from an epistemological perspective?

In this book I confront these questions through two inter-related ethnographic studies: the *barrío popular* la Orilla and a midwifery-led birth centre in the highland city of San Cristóbal de Las Casas, Chiapas. My ethnographic enquiry is about understanding everyday life in the *barrío* through the biosocial process of becoming (m)other with a focus on how young women negotiate the political economy of local health systems and broader societal expectations. The book is organized around three interlocking themes: childbearing, nurture work and globalized health. These themes run centrally throughout the book, including in the third and concluding part which picks up on the issues explored in the ethnographic material and presents a framework for intersectional transnational approaches to global maternal health. Though all the chapters move in and out of the underlying themes they do so at diverse levels. Therefore, they serve as standalone discussions/readings as well an interwoven narrative. I leave my theoretical discussion to the end because I believe it must be foregrounded by knowledge and experience of what it means to become a mother for women of different social classes in the Chiapanecan context.



## Notes

1. IMSS-BIENESTAR (known as IMSS-OPORTUNIDADES and then IMSS-PROSPERA at the time of my fieldwork) is a conditional cash transfer programme that has had numerous guises and was started in rural areas in 1997 (titled originally PROGRESA). It was later extended to urban areas. Its aim is to improve education, health, nutrition and living conditions of population groups in extreme poverty, as well as to break the intergenerational cycle of poverty. IMSS-BIENESTAR is the second most extensive programme of its kind in Latin America. Under its implementation as IMSS\_OPORTUNIDADES it is also considered to be the most successfully developed example of the region's national public health inspired anti-poverty programmes. It has formed a template for cash transfer programmes in many other low-income countries.
2. The women who appear throughout this book self-identify as Mexican unless stated otherwise. I refrain from using the word *mestiza* as it is not an ethnographic category. *Mestiza* is a problematic term debated mainly in US and some Mexican scholarship. Rather than enter into this debate I choose instead to listen to how the women I meet in Chiapas describe their ethnicity, as noted in the following chapter.
3. Ejército Zapatista de Liberación Nacional (EZLN), or Zapatistas for short, is a political movement and army founded by the Maya Indigenous peoples of Chiapas with Mexican intellectuals who were in hiding from the Mexican government in the 1980s. They staged a well-documented armed uprising in January 1994 in the Chiapas cities of San Cristóbal de Las Casas and Ocosingo. La Comandanta Ramona (deceased in 2006) was a key military figure in the EZLN and a vocal advocate for Indigenous rights and Indigenous women's rights. This phrase of triple oppression appears numerous times in her recorded speeches and has appeared countless times in publications and news articles discussing the position of Indigenous women across Mexico. As such its actual source is unknown though generally attributed to Ramona.
4. As Arthur Kleinman (1997) describes international health.