

INSTITUTE OF CURRENT WORLD AFFAIRS

WW-22 Childbirth in San Pedro

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EE. UU.

Dear Mr. Nolte:

In the first of these two newsletters, I want to record my impressions of one of the five births I have attended over the past eight months in San Pedro Mixtepec (Miahuatlán).

Domitia lies in a nest of clean blankets on a straw mat on the brick floor at one end of a large adobe room. It is four o'clock in the afternoon on a bright day in November. Sun shines in through a single glass brick in the cement roof, filling the room with a thin yellow light. She is propped against two cotton flour sacks filled with rags. These she has collected through the years for just these occasions.

Domitia's head is wrapped in a faded, machine-made bandana. Her face is flushed, her nose and upper lip beaded with sweat. As we talk, she often smiles, showing perfect teeth and gums.

She is 27 years old. She has been married to Eugenio since she was 18. She has been pregnant five times. Three pregnancies ended in live births, two girls and one boy. The girls survived; the boy died within 12 hours. The other two pregnancies ended in stillbirths, both males. Domitia and Eugenio both say they hope this child will be a boy.

As she talks about the previous pregnancies, she dwells on the three males. I wonder if she really wants this one to be a boy.

"When I was sick with this little one," she says, motioning to her five-year-old daughter in the doorway, "I hardly felt anything. Not like the first two, the two little fellows that were born dead. Ooh, Holy Mother, I thought I would die with them. And then the last time (the liveborn male), truly I was going to die. He was born 'standing up' (breech presentation), and could not bear it. Is that not so, mama?"

"Yes, you almost died with those little males." Her mother is stout and round-faced like Domitia, with apple cheeks and eyes that twinkle. Her face shows lines of laughter even when she is serious, as she is now. "Boys always make more trouble. Is that not so, Don Adán?" She calls me by the Spanish rendition of my middle name Adams. I adopted it after concluding that "Woody" was too foreign and difficult for Spanish-speakers to remember and pronounce. Domitia's mother does not give me time to answer. "When I was sick with Efrén here, it lasted two days, and we thought he was dead. When he was born, he was blue, completely blue."

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"You are Efrén?" I ask the man sitting in the chair next to mine. He has been watching us talk.

"Yes, I am Domitia's brother." He is the fairest in a fair-skinned family. In his sisters and mother, one sees a pinkness beneath the patina of Zapotec brown. In Efrén one sees only pinkness. His eyes do not fix on me as he talks, the way his mother's and Domitia's do. Efrén's eyes dart about. His lips jerk as he talks. He stammers a little. "Is it true, Adán, that little boys make more trouble than little girls?"

"Well, I don't know. That is what people say here, isn't it?"

"Now when I was sick with you," says the mother in a brassy voice, looking toward Domitia and throwing me glances from time to time, "Most Holy Mother, that was a miracle. All alone in Miahuatlán, just me and the midwife, but how easy that was. Two hours it lasted, and she gave me an injection, and right away you were born." A glance in my direction. "What was I going to do, all alone in Miahuatlán? I went to the midwife, and right away it was finished."

"Yes," I say. "Sometimes it happens that way." The mother keeps looking at me, expectantly. I look away from her, first to Efrén, who averts his gaze, and then to Domitia. I see she is in the middle of a contraction. We had not noticed its onset as we talked. Now she has rolled onto her side, face to the wall. She makes a straining, whimpering noise as she exhales. It has been three and a half minutes since the previous contraction.

The mother, who has been standing in the middle of the room with her hands on her hips, kneels by Domitia and dries her face again and again with a towel. "Ah, my poor girl, do you want the gentleman to give you the injection now?" she asks.

There is a pause. Domitia rolls back towards us. "No. I can bear it."

On her feet again, the mother looks at me, and says: "Yes, there in Miahuatlán, there they have medicines, and a doctor. But if a person is here, well, here we are very sad. A woman sickens, her hour comes, sometimes she suffers with the baby for days. Why, that woman up there in her rancho (outlying hut), she suffered for four days, they say, before she died. And the baby, too. We are sad people. Thank God you have come, Don Adán." She is quiet a moment. "Will you save her now?"

When I was first asked to attend a delivery, the husband who came to get me did not say that his wife was pregnant, but that she was sick (enferma), and that he wanted me to save her (salvarla) with an injection. Speaking of pregnancy, I use the Spanish word for pregnant, and I am understood. Occasionally San Pedro people switch to that usage when we talk together, apparently believing my term somehow more correct. But ordinarily they call pregnancy sickness. I ask them why. They say that is what they call it. It is the same, they say, in Zapotec. In the rest of rural Mexico, one encounters the same usage. Domitia's mother was asking me to "save" her daughter from the illness of pregnancy by administering an injection that she believed would hasten the delivery and eliminate further pain.

"As I said when I came in," I answer, "I will give Domitia the injection as soon as she asks for it. But I should only give her one, and the effect will last only four or five hours. She should wait until she really needs it. She seems strong. She may not need it. It would be better not to give it to her at all. It will make her sleepy, and the baby, too. But I have explained this already. You all understand. I will give it to her as soon as she asks for it."

"Ah, a thousand thanks, Don Adán," says the mother, and sits on Domitia's mat.

The sun has dropped behind the mountain now. The contractions come every two minutes. The mother lights a candle and stands it in a puddle of its own wax near Domitia's head. On the floor with the candle are an egg, a printed picture of the Virgin of Juquila, an amulet of green plastic beads, a feather, and a tin cross. Domitia's husband Eugenio comes in, greets me, and sits in a low chair near Domitia's head. Halfway down the room, near the door, a small woman in traditional dress sits without saying much. Like most women in San Pedro, she sits on the floor. She speaks only in Zapotec. Now she gets up and moves close to Domitia. As each contraction begins, she scoops up alcohol from a gourd-half and reaches up under Domitia's skirts to massage her belly. She is the midwife.

When she has sat down again, I speak to her in Spanish. "You must have attended a great many births, Doña Celia."

"Yes, many, many. I have been here for all of this girl's babies." She is thin, with long fingers and steel-gray hair. She looks between fifty and sixty. The mother has spread another straw mat near Domitia's feet. There the midwife sits quietly, her legs tucked under her blue-black wool skirt. One hand rests on the other in her lap.

People arrive now in twos and threes, casting the room into darkness as they come in the door. The mother produces another mat, and another. She spreads them in the far end of the room, near the table that serves as an altar. Most of the guests are women, two with nursing infants. While the women settle in clumps on the mats, the few men mill about the door, and soon leave. The midwife greets people and chats with them in a quiet voice across the empty space between her and the visitors at the far end of the room. Still chatting, she rolls up onto her feet to massage Domitia's belly, firmly, routinely. The contractions come every minute now.

Domitia moans and thrashes. She lies on her side, changes to the other side, now heaves up onto her knees, looking for the posture that will ease the pain. Three little boys look in at the door. Domitia's mother shoos them away. A contraction takes Domitia suddenly. She cries a short, shrill note, grinds her teeth, and finally settles onto her side again, weeping. There are fifteen women in the far end of the room now. The midwife remains still. Efrén engages me in a conversation I have had a hundred times at least, about the distance from Oaxaca to my country, the price of corn there, and the possibility of a Mexican's finding work.

Domitia is on her hands and knees again, a hulk of blankets heaving like a winded beast. She is fretting, begins to talk with her mother, and a contraction overtakes her. It is dark and cold outside. Heads are pressing in at the door. Eugenio joins our conversation about Mexicans who work in the United States. The mother brings Domitia a cup of corn gruel (atole). Between contractions she sips it.

Another contraction comes. Domitia takes the weight off her arms and hands, rests entirely on her knees, and as the contraction intensifies, stretches out her arms spread-eagle. Her mother holds her up beneath one arm, and her husband Eugenio beneath the other. Domitia does not hold herself back from crying out. The contraction passes. She joins in the women's chatter. A little more than a minute later, another contraction, a loud wail, arms spread wide. The room is noisy and warm. The women raise their voices over her cries.

"And is it true that there in your country one is paid a hundred pesos a day?"

"Yes," I answer, "but life there is very expensive. One earns a lot, but one must also spend a lot to live."

The midwife sits placidly unfolding and folding rags from one of the bags Domitia had been using as a pillow. In the other end of the room, some little girls are giggling loud. Domitia lies on her side, moaning. Her mother stands over her watching without speaking. Domitia says something inaudible. Her mother kneels next to her, and puts her ear to her daughter's mouth. Then the mother turns to me.

"She says she wants the injection now."

As I prepare, everyone falls silent. I administer it, a half dose of a standard combination of tranquilizer and narcotic. "In a few minutes," I tell Domitia, "you will feel very sleepy, almost as if you were a little drunk. That is the effect of the injection. It will let you rest between pains. All right?"

Domitia smiles up at me, her face running with sweat. "Yes, thank you, Don Adán." Her mother seems to be explaining the injection to the midwife. The other women are listening carefully. There is much nodding and clucking.

Another contraction comes and goes. With it the level of noise rises and falls. Domitia keeps whimpering. Her mother sits holding her daughter's hand. Suddenly Domitia is asleep. The room grows quiet.

"She has fainted. She is unconscious," says Eugenio. He looks alarmed.

The mother rubs Domitia's wrist hard. "Her strength has run out. Oh, my God, my poor girl," she cries. "Domitia! Domitia! Answer, Domitia." The mother begins to slap her daughter's cheeks.

I have watched a brother weep quietly beside his sister in labor for hours, and then break into hysterical sobbing when the injection takes effect. The word used to describe the unconscious state in these moments is privada, which in San Pedro means "insensate and incapable of being awakened." It is associated with the dying. To be privado is to be all but dead. I can feel panic growing in the husband Eugenio and the mother. It is infectious. The women are clucking and whispering. I begin to sweat.

"The medicine is taking effect now. You see," I say to Eugenio and the mother, "she is resting. When another pain comes, she will wake up. But now we should just let her rest." Almost immediately Domitia is startled awake, rears up on her knees, wails, groans, and sinks back to her nest of blankets, asleep. The people around me seem comforted.

Efrén brings in a Coleman lantern and lights it. Eugenio sits in his low chair at the head of his wife's mat, facing her. The mother talks to the midwife in Spanish of the long, long labor of the woman in her rancho. She is flushed still, and talking fast. The midwife responds softly in Zapotec. She seems to have changed the subject. I ask the mother to translate. She says the midwife thinks the baby will be a boy. The midwife hopes the baby will be a boy, because Domitia already has two girls. And she hopes the boy will be born this evening, because boys born at dawn are likely to turn out lazy. Women at the far end join the talk about the correlation between time of birth and personal character. The talk is calm and soothing. Domitia is sleeping, breathing deeply. Efrén and Eugenio tell me about their new business venture, beekeeping.

It is quarter to seven. A cold draft comes in at the door. It carries the voices of men in the patio outside. Domitia wakens and clambers to her knees. The mother speaks sharply to the husband Eugenio. She holds her daughter upright while Eugenio pulls his low chair towards his wife. This time when the contraction subsides, she

slumps forward into her husband's lap.

Now the contractions come every thirty seconds or so. They are intense. One senses that Domitia's guard is down now. She cries out with abandon. Through each one she is kneeling, her head on Eugenio's shoulder, her arms around him, his around her. Again she wakes and rises to get hold of Eugenio as the contraction mounts. The room is still quiet. The atmosphere has been tranquil and literally cooler since the injection took effect. Now the quiet is broken by the sharp, startling "pop" of bursting membranes. The midwife drops the gourd-half of alcohol, takes up a square of folded cotton, and reaches up under Domitia's skirts. The midwife kneels behind the kneeling Domitia, who clings to Eugenio, seated, facing her. The midwife will stay at her post, cloth held with both hands, out of sight beneath the skirts, ready to catch the child.

The next contraction comes hard on the one before. Domitia is biting Eugenio's forearm, now his shirtsleeve. The next day he will show the teeth-marks. Domitia arches her head and neck up and back with the peaking of the contraction. Her mouth opens to begin wailing. Her mother takes up a calla lily with a stalk as long as my forearm and forces it gently down Domitia's throat until it will enter no further. The wail changes to a muffled gagging. The midwife and mother yell "Push, push!" at Domitia in Spanish and Zapotec. The women and girls in the far end of the room are saying "Poor girl," and "Now, yes, now," and sit up straight to see. The blossom of the lily, creamy white with a rampant orange spadix, just touches Domitia's nose. The contraction passes, the lily is removed, and Domitia collapses onto Eugenio's knees. After four of these, the midwife brings out from beneath Domitia's skirts the cotton cloth cradling a baby girl.

The baby is distinctly blue, does not cry, and breathes spasmodically. I think of the injection. The midwife wipes the baby with a cloth. The umbilical cord remains intact. The baby is getting bluer. The mother is shouting at Efrén, who is on his feet, frantic, the pinkness drained from his cheeks.

"Una lata!" shouts his mother. "A can, a can, get a can, quick." The room we are in, the sleeping house of Domitia and Eugenio, abuts the main trail into town. Given that location, the family naturally had, at some earlier time, run a small shop through a window that gives onto the trail. All that is left of the shop now is the dusty remainder of their inventory-- batteries, plastic jugs, ribbons, etc.-- scattered on floor-to-ceiling shelves. Efrén scales the shelves, reaches into the upper shadows, and produces a large, square tin in which animal crackers are sold wholesale. He brings it to the baby's side and beats out a loud tattoo with a tablespoon. The baby starts and bawls a little. She is still blue.

"Alcohol, alcohol," shouts the mother now. Efrén drops the tin, which the mother takes up and keeps beating. He fetches a quart of alcohol and hands it to the midwife. She rubs plenty of it over the baby's chest and face. I have cleaned the baby's nostrils and throat of mucous with a rubber bulb syringe. I tip her body, head down, and pat her chest. The midwife keeps on with the alcohol. The baby begins to cry, sputter, and flail. She is turning pink.

Still the cord is uncut. The baby has been with us for four minutes. I ask the mother about the cord. She says it is customary to leave it uncut until "everything else has come down." As if on cue, the midwife reaches under Domitia's skirts and recovers the afterbirth. Now she ties the cord in two places with white, multi-strand embroidery floss, and cuts it with a razorblade.

I ask the mother if she wants me to give Domitia an injection to help her womb return to its normal size and location. She says she does. I give her the injection. I ask if I should put medication in the baby's eyes to guard against blindness, and the mother says yes. I do that, pack up my things, and depart. Eugenio and Efrén walk me home. The air is cold and clean. The moon has risen. We are buoyant.

The birth of Domitia's daughter is one of five I have attended. These five are presumably not representative of childbirth in general in San Pedro. The most striking difference between these five and others was my presence. Why was I invited to attend these five and not others? In Domitia's case, I was invited because Domitia's mother had once been delivered with drugs by a mid-wife in the market-town, Miahuatlán. She remembers the delivery as painless, just as Domitia now remembers this birth as painless. They both believe that the injection eliminates pain and hastens delivery. In fact, both women probably felt virtually the full force of the contractions, and the injection probably slowed the labor if it influenced its pace at all. I have told Domitia and her mother that the injection does not act as they say it does. But because of the amnesic effects of the tranquilizer, they remember nothing of their deliveries, and claim that they were truly "saved" by the injections.

I was invited to attend another birth precisely because Domitia and her mother had persuaded an expectant cousin to invite me. In the other three cases, the families of women in labor sent for me because they thought the women were dying. In one case, the woman had been in labor, as San Pedro people define it, for 20 hours. Her family asked me to give her an injection to give her strength. Another woman had been in labor for 24 hours. I found them exhausted. They had been "pushing" from the first contractions. In the third case, a younger sister to the pregnant woman came to my house to ask if I would come and cure her older sister. She said she had headaches and a fever. I made a note to drop by in the afternoon. The little girl did not mention the woman was pregnant or in labor. I arrived some hours later to find her unconscious and having convulsions every twenty minutes. She was suffering from eclampsia, toxemia of pregnancy. I fetched an American doctor friend from Miahuatlán that night. We arrived in time to deliver the fetus, stillborn, and "save" the mother.

To summarize, the five births I have attended vary from most in San Pedro in one of two ways: either the family is relatively more informed about and accepting of Western obstetrical practices, particularly the administration of tranquilizers and narcotics, and therefore probably a family with higher-than-average income, greater-than-average contact with mestizo Mexico, and greater-than-average literacy; or, the mother's condition has deteriorated to such an extent, or appears to the family to have become so grave, that extreme measures are taken, like calling the gringo.

Within this sample of five births, I chose to report Domitia's because it is the one for which I have the most extensive notes. It also comes near to being representative of the other four. In some ways, it is unique.

The physical setting for Domitia's delivery varies little from the others. If anything, it is slightly more "civilized." Most women deliver in their own sleeping houses. Some families, the poorest, have only a cooking house. In this case, a woman delivers in her mother's sleeping house or her mother-in-law's sleeping house. The building is usually of adobe, with roof of cement (rare), curved tiles (tejas), or thatch. The floor is dirt in perhaps half the sleeping

houses, and brick or cement in the others. Electricity has not reached San Pedro. Fuel and candles are expensive. The usual source of light is a stick of pitch-pine (ocote). For special events like births, the usual light is a Coleman lamp. I usually work with just a flashlight and candlelight when I make medical calls at night.

The lack of good lighting might be more troublesome if the birth were visible. It is not. Except for the stillbirth attended by the American doctor, all the births I have seen, and, I am confident, all the births in San Pedro, occur shrouded by the mother's skirts. The drama itself is surprisingly public. As when a person is dying, relatives and ritual kin, including children, are expected to attend. The men and boys generally stay outside, but close men relatives often help with the work of supporting the mother during labor and delivery. In one case, a curtain was pulled across the room to shield the mother from the visitors' view at the moment of parturition. I do not know why.

The dramatis personae were similar in all five, except that the husband was absent in one case. In addition to the expectant woman, her mother or mother-in-law, and her husband, I found the following to be directly involved with supporting the woman in labor in one or another case: father-in-law, brother, sister, sister-in-law. A midwife was present at all five deliveries.

Women and midwives talk of many different techniques for hastening delivery, including lowering the mother into warm water up to her waist, and tightening a sash around her just below the sternum. I have seen only three techniques in use: inducing wretching with a lily stem, candle, or the woman's own hair lathered up with laundry soap; rubbing alcohol on the abdomen; and holding the woman up by placing both one's arms under her armpits, and then shaking her up and down with something like the motion one uses to dislodge a pillow from a tight pillowslip.

As labor advances and the woman is thought to be losing vital force, she is ordinarily plied with foods thought to be fortifying: chicken and turkey broths, soft-boiled and raw eggs, corn gruel (atole), and a particular brand of soda pop (Manzanita). I have heard of several tonics specially prepared to give strength during labor, and I have seen two made and served. One was a mixture of hot water and pulverized horn of the local mountain deer. The other was a mixture of lukewarm water and the pulverized carapace of an armadillo. The women I saw in labor accepted these foods and tonics just a spoonful at a time, except the soda pop, which they drank thirstily. They also drank plain water and the local coffee, a weak, sweet brew.

In the conversation during hours of labor before delivery, I have generally been asked how women have babies in my country. When I describe the custom of lying supine or slightly propped up, people nod approvingly. They observe that in that position the mother can rest, does not use up vital force. At two of the births I attended, the mothers lay supine during most of their labor. But when the pains intensified and the intervals between them diminished, they tried other positions, finally ending up kneeling before their husbands, and proceeded as I have described above. (Only the woman with eclampsia, who was semi-conscious throughout the birth, delivered supine. This she did in part because the attending doctor urged it, and in part, I suspect, because she was too weak to do otherwise.)

Before these experiences with childbirth in San Pedro, I think I allowed myself some romantic expectations about Indian childbirth. I think I had the notion that it would be a simple, businesslike event, couched in comforting ritual. What I have found is an atmosphere of uncertainty, fear, and mystery. The visitors gather and behave as they do at the bedside of the dying. The immediate family and the midwife speak of birth as a crisis in the sickness of the pregnant woman, and act, in the moment of parturition, as if they were rescuing her from death.

Among my friends in the United States, childbirth is becoming less and less a medical emergency, more and more a positive personal event and social ceremony. Prepared by the exercises and instruction of natural childbirth classes, couples approach childbirth with a degree of confidence. Women have their babies at home, while friends sing and chant in the living room.

So far what I have seen in San Pedro scarcely supports the theory that childbirth among Indians living isolated from hospitals and Western obstetrics provides some ideal of natural childbirth. Some features of childbirth in San Pedro may teach us something, of course. The support a husband lends his wife at delivery is impressive, the more so because affectionate physical contact between husband wife is almost never seen in San Pedro except in childbirth. I have seen husband strike wife in public during drunken brawls. And I have seen a wife help her son drag husband home, violently drunk, with a heavy rope wrapped round his legs. But at the times when loving physical gestures might be expected, as when husband returns from a four-week journey in the mountains, they greet each other as if he had just returned from a day in the cornfields. A husband's physical contact with his wife in public is so consistently violent, in fact, that I could not help interpreting her biting his arms and shoulders during labor as public revenge embedded in socially justifiable ritual.

Sincerely,



Woodward A. Wickham

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