

INSTITUTE OF CURRENT WORLD AFFAIRS

WW-23 Infant Mortality in San Pedro

Apartado Postal 27  
Ocotlán, Oaxaca  
Mexico  
February, 1975

Mr. Richard H. Nolte  
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EE. UU.

Dear Mr. Nolte:

Twice each year, federal health teams visit isolated communities all over Mexico to administer a comprehensive immunization program. This past year, rumors circulated in the mountains of Oaxaca and Chiapas that the health teams were purposely killing children. In the Chiapas Mayan community of Chenalhó, where I spent six months in 1972, children were hidden away when the immunization teams arrived this past fall. Finally the medics were driven from the village center by hostile locals, including youngsters throwing stones. In San Pedro Mixtepec, where I live now, barely ten per cent of the children due for immunizations were brought in by their parents when the health team visited in November. A few weeks ago, an American dentist flew in to our neighbor village, San Juan Mixtepec, to render free dental services there and in San Pedro. Upon his arrival in San Juan, village mothers assumed he had come to vaccinate. They rushed to the schoolhouse to rescue their children. Meeting up with the resident American linguist, who had invited the dentist, the mothers abused him for bringing this menace to their village.

One afternoon last fall, shortly after the visit of the immunization teams, I was walking to Miahuatlán with two friends from San Pedro. One of them asked me:

"Is it true that the government is sending out people to kill children?"

This friend is young and relatively well traveled. He has worked on coffee fincas in the coastal lowlands and on construction projects in the valley towns. I was amazed that he would not hedge such a question with some innuendo, as so many do, that he himself did not believe such stories.

"No," I answered, "I am sure that is not true. The government would not do such a thing. The people would not stand for it. Anyway, why would the government want to do that?"

"Well, to kill our children."

"But why would the government want to kill your children?"

"Because we are ignorant."

We walked a long way in silence. There is time to think. It is a twelve-hour walk to Miahuatlán. We husband our topics like our oranges, one every few kilometers. What explained the wide popularity of these rumors about the immunization teams? I could understand my friend's rationalization of the alleged genocide— "because we are ignorant." He

said it in just the voice he might have used to say "because the herd is infected with anthrax." Ignorance is the great public enemy in San Pedro. Indian people have had their "ignorance" reflected to them by Colonial and contemporary missionaries-- including secular missionaries like me, by teachers sent to teach their children Spanish, and now by their own relatives, who come home from mestizo Mexico for holidays and treat their unlettered kin with the special condescension and embarrassment of the newly sophisticated.

It did not surprise me, then, that my friend thought ignorance sufficient cause for government action against his people. But the notion that the children might be exterminated with the flick of a vaccination gun, and the wide acceptance of that notion as plausible or probable, these indicated to me some considerable, discomfiting readiness to accept the sudden and capricious death of San Pedro children.

It occurred to me that these rumors might be a distortion of reports that the federal government has begun to support family planning.

"I cannot believe they are killing children," I say after a long wait. "Maybe people have heard of another government program, but do not understand it. It teaches people how to keep from having more children than they want." We talked about birth control measures, the population explosion, and the attitude of the Roman Catholic church. My friends said they had never heard of these things. I pointed out to them the possible significance of the fact that the three richest men in San Pedro had few children. They agreed that a man with many children has trouble getting rich. One of my friends concluded that he wanted some of those pills for his wife. She had borne seven children, of whom three survive. This month she expects another.

Two days later, this same friend pointedly took me aside to talk about birth control. I felt, as he talked, that someone else had been talking to him in the meantime.

"I don't like that," he said. "Those pills are a bad thing."

"How are they bad?"

"We should have as many children as we can. I have three, but if they die? When a person is old, his children take care of him. But if he has no children? Also, we should have many children to make the country strong."

I regularly ask women who come to see me for medical help how many children they have had, and how many survive. By my estimate, more than half the children born in San Pedro in the past ten years have been stillborn or died before reaching age ten. Of all the women in San Pedro, it may be that I see precisely those who, because they tend to be sick, have lost a disproportionately high percentage of their children in birth and infancy. But frankly, morbidity does not seem to be a distinguishing characteristic of the people who come to me for treatment. Instead, as I have reported, they tend to be Spanish-speaking, well-traveled, and prosperous, by San Pedro standards. If they differ from the general population with respect to health, they are sick relatively less often and less seriously. I am fairly confident in my estimate that natal and infant mortality over the past ten years has been over fifty per cent.

Currently the rate of natal and infant death seems to run below fifty per cent. Communication with the valley has improved markedly in the past few years, principally because of the improvement of the lumber roads con-

necting San Pedro with Miahuatlán. The village school has expanded. More Pedrunos speak and write and read Spanish, and have learned arithmetic. These circumstances have put modern Mexico, particularly jobs in valley towns and cities, within reach of San Pedro men. With cash earned in the valley, or gained through the sale of valley manufactured goods to remote villages in the mountains, Pedruno heads of family improve life back home. San Pedro people are still poor, but not so poor as in the past. For weeks at a time, they may eat a bare subsistence diet. I have reported this in detail before. But more often now they can buy fruit and meat. The improvement in the standard of living helps account for the decrease in infant mortality that I detect in the village today.

Whether in childbirth or infancy, the deaths of San Pedro children are often sudden and, from the point of view of San Pedro parents, inevitable. A child begins vomiting one morning, and the next evening he dies of unrelenting dysentery. A fever strikes a ten-year-old boy one day, and three days later he is dead. A mother has what seems to be a normal pregnancy, begins labor as usual, gives birth to a child in breech position, and-- in most cases-- it does not survive. The first 24 hours after birth are the most dangerous for liveborn infants. A great percentage die within the first three days. The mystery and suddenness of natal and infant death engender fear and insecurity about pregnancy and parturition, and the high likelihood that a child will not live to adulthood makes the death of children more a part of a Pedruno's expectations that it can possibly be of ours. Perhaps this explains the apparently hysterical credulity of San Pedro people confronted with rumors of pedocidal immunization teams. The notion of a planned government campaign of extermination at least imposes some order on infant deaths that otherwise seem to occur randomly and beyond human control. And against the background of fifty per cent infant mortality, the insatiable desire of Pedrunos (and poor Mexicans generally) to have more and more children makes some sense. "I have three, but if they die?"

Pregnancy, as I have said, is considered a sickness. A pregnant woman follows many of the rules established for the ill. From what San Pedro people believe to be the beginning of pregnancy, the time when the swelling of the womb becomes visible, a woman is expected to refuse sexual intercourse. She follows the diet of the ill: no spicy foods, no greasy foods, no foods thought to be especially hot or cold. In the last six weeks of pregnancy, she does not bathe. She is expected to live within narrow limits. If she errs, she endangers herself and the unborn child. After quickening, the criatura (offspring) is especially vulnerable. If a mother is frightened by a drunk, for example, or sees an animal slaughtered, the criatura may perish. There is a general prohibition against the presence of women around open wounds. This is strictly enforced respecting pregnant women. It is thought that should she remain in the vicinity of a wound, both the wounded and the criatura risk injury. If milk leaks from the mother's breast during pregnancy, it is believed that the criatura has died.

One effect of the restrictions on the pregnant woman is to limit her diet when it should be increased. The phenomenon exactly parallels-- perhaps it is identical with-- the treatment of virtually all illness in San Pedro. Believing that foods influence the course of disease, and subject to wildly

conflicting advice about what food is healing and what food is dangerous, they reduce the intake and variety of food of all kinds. The malnourished become weaker. The malnourished pregnant woman languishes, and often falls prey to other sickness besides pregnancy.

When "her hour arrives," as they say, an expression also used with respect to the hour of death, a woman has been eating badly for six months, shut away from public view and potential hazards for three months, and imbued with the belief that she is suffering a mortal sickness. This combination of influences cannot but increase the risk of death to mother or fetus in delivery.

The risk is further increased by the custom of urging mothers to "push" from the onset of the first sensible contractions. When what we call "false labor" begins, a woman begins to bear down. By the time the fetus has descended to the extent that it would be visible at the introitus, the time at which Western obstetricians ordinarily recommend that a woman begin pushing, she is already exhausted. Two women I attended had been bearing down for 20 and 24 hours. This custom proceeds from the San Pedro conception of pregnancy and delivery: a woman is sick. To cure herself, she must forcefully expel the fetus. (The purpose of stimulating gagging is to help the woman set her expelling equipment in motion.) Pushing from the first contraction particularly endangers older mothers. A woman of, say, 40 years, veteran of ten or more births, the muscles of her uterus now nearly atonic, cannot muster sufficient force in the crucial minutes after full cervical dilation if she has been pushing for 24 hours.

The midwife seems to have an admirable, soothing effect on the family of the expectant mother. But in my experience she is not equipped or disposed to intervene in high-risk deliveries so as to save mother or child. The midwife told me that she had checked the position of the criatura in one case, and had found it properly placed. It was born breech-first, and died. As far as I know, midwives do not perform visual or manual examinations of the expectant woman, apart from palpation and massage of the abdomen. There is no intermittent measurement of cervical dilation, for instance. I assume the midwife shares with other San Pedro people the belief that contact with the body and blood of a sick (pregnant) woman is dangerous to all parties.

After birth, the newborn infant is wrapped and placed at its mother's side. It does not nurse for two days. Meantime it is fed, when it cries, a mixture of vegetable oil and honey. It is bathed daily in lukewarm water and bar soap by the midwife.

As the child matures, it invariably suffers from periodic dysentery. Treatment for diarrhea begins with vegetable oil purges, and includes feeding coffee and corn gruel.

There is some comfort for San Pedro people when their criaturas perish. A death of a child less than six years old is announced to the village by the fast tolling of the four small bells that hang beside the two huge, solemn bells in the churchtowers. They toll a bright sound. The child is now referred to as an angelito, a little angel. By Mexican Catholic belief, an angelito, because it is still innocent, goes straight to heaven after death. Instead of the nine days mourning customary for the death of an adult, the family holds a dance for teenagers on the evening of the day of the child's death.

Sincerely,



Woodward A. Wickham