Gender and Generations: Reproductive Behavior of the Maya People of Yucatán, Mexico

J Ortega

Follow this and additional works at: http://digitalrepository.unm.edu/lasm_cucs_en

Recommended Citation
http://digitalrepository.unm.edu/lasm_cucs_en/137

Objectives: To describe and analyze the transformation of social representations on health/disease/care experienced by three generations of Mayan, from observation of their participation in the process of pregnancy/childbirth/post-partum, and from a gender perspective.

Methodology: Qualitative, participant observation and semi-structured interviews with 12 women and 9 men, belonging to 4 household groups and 3 different generations.

Results: The author describes the attitudes of men and women from three different generations during the process of pregnancy/childbirth/post-partum. For the Maya, blood constitutes a landmark in the development of meanings related to health/disease/care. In the conception of both genders, pregnancy is synonymous with "good blood". For the Mayan people, pregnancy is a matter of male pride and is linked to the male's obligation to care for women and baby and to assure that they survive and are healthy. Males are present from the moment of birth. But the author finds a change in the representations of men of the present generation. While men of the early generations know details of childbirth and prioritize the welfare and emotional care of the child, the current generation prioritizes the physical welfare of the child and is not involved in childbirth. She attributed this change to the influence of biomedical knowledge, which prevents husbands from accompanying their wives in prenatal exams or childbirth.

She denounced the increasing medicalization of childbirth in recent generations, since three of four women interviewed in the third generation had their births by caesarean section. As for the postpartum stage, the interviewees of the three generations and both sexes are still considered traditional recommendations valid, which are to maintain the heat of the female body with the so-called "hot medicine," based on the use of medicinal plants, beverages, rest and fresh food. This stage is one that retains the most popular wealth of knowledge.

The author points out that traditional knowledge is threatened by the spread of biomedical knowledge and the gradual disappearance of midwives. Midwives are depositories of knowledge of Mayan culture, which supports the full participation of males in the process of pregnancy, childbirth and postpartum care.

Conclusions: For the author, biomedical health services exclude the participation of men in key stages of the reproductive process. Such services are opposed to the practices of popular Yucatan culture, whose recovery is essential for health practice. The mixed gender and intergenerational experience provides a more holistic vision of reproductive processes. Medical care during pregnancy, childbirth and the postpartum period should be comprehensive and should not be exclusive of health services in the Yucatan.