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Medicalization and its Discontents: Gender, the History of Medicine, and Nora Jaffary's *Reproduction and Its Discontents*

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See table of contents

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Medicalization and its Discontents: Gender, the History of Medicine, and Nora Jaffary's Reproduction and Its Discontents

CHRISTINA RAMOS

Abstract

This essay discusses Jaffary's award-winning book in light of its contribution to the history of medicine. Reproducton and Its Discontents makes crucial scholarly inroads in two fundamental ways: first, by building on feminist scholarship that has examined the rise of male expertise on matters of reproduction and gynecology, while simultaneously rejecting narratives of a "golden age" in women's healthcare; second, by inserting discussions of medicine and gender into Latin America's burgeoning medical history. At its heart, Jaffary's book meticulously deals with the medicalization of the female body, its national and local manifestations, and its striking limitations and costs.

Résumé

Cet article évoque l'ouvrage de Jaffary sous l'angle de sa contribution à l'histoire de la médecine. Reproduction and Its Discontents fait des percées savantes cruciales sous deux aspects fondamentaux : premièrement, en bonifiant la recherche féministe qui a examiné la montée de l'expertise masculine en matière de reproduction et de gynécologie, tout en rejetant les récits d'un « âge d'or » dans le domaine des soins de santé des femmes ; deuxièmement, en intégrant des discussions sur la médecine et le genre dans l'histoire médicale de l'Amérique latine qui est en plein essor. Le livre de Jaffary repose principalement sur une analyse méticuleuse de la médicalisation du corps féminin, ses manifestations nationales et locales ainsi que ses limites et ses coûts qui étonnent.

"A woman bearing her first child would sometimes be so debilitated by the delivery that she died: she would then be numbered among the goddesses in heaven ... and later worshipped with a cult dedicated to goddesses."³ So wrote the famous sixteenth-century Spanish physician and naturalist Francisco Hernández when commentating extensively on the birthing practices and rituals of the Nahua of central Mexico. Elsewhere the *protomédico* assiduously recorded Indigenous knowledge of New World *materia medica*, including exotic plants and herbs that he informed his readers were used by Indigenous women to aid in conception and, more sinisterly, to promote infertility or abort fetuses. Reading Hernández's works years ago in graduate school, I distinctly recall wondering what a history of women's healthcare in Mexico would look like. While studies of medicine in Latin America were sparse, for the European context a robust literature had examined the issue of when and how medical men claimed authority over women's bodies and reproduction, from Katharine Park's study of the role of gender in the shaping of early dissection and anatomy, to Adrian Wilson's account of the rise of man-midwifery. Did certain elements of this narrative map on to the Spanish American experience? And how would this history differ given the region's rich Indigenous past, legacy of colonialism, and rocky transition to modernity? Nora Jaffary has fully responded to my queries. Moreover, she has done so in an award-winning, meticulously researched, and subtly argued book that breaks new ground in Latin America's now burgeoning medical history.

Historians of medicine might expect Reproduction and its Discontents to rehash the familiar story of the rise of modern obstetrics and the concomitant encroachment of male expertise into a sphere once defined by female hegemony. In this distinctly Mexican retelling of a narrative first popularized by feminists Barbara Ehrenreich and Deidre English, Indigenous midwives - purveyors of an organic wisdom that was doubly suspicious as both feminine and non-European would suffer growing marginalization and eventual extinction; first, as zealous inquisitors ruthlessly targeted their practices as hechicería or witchcraft and, much later, as university-trained physicians secured a monopoly on the delivery of routine births. However, this is not the history Jaffary relates. Much as Monica Green has recently done for medieval Europe, Jaffary eschews nostalgic narratives concerned with a "golden age" in women's healthcare and its demise at the hands of misogynist clerics or a self-serving male medical profession.⁴ She likewise challenges their outdated if stubbornly enduring counterpoint: positivist histories that celebrate the medicalization of childbirth as the triumph of modern science and technology over the superstition and folk wisdom of midwives. Moving beyond these polarizing frameworks, Reproduction and Its Discontents delivers a more comprehensive and nuanced discussion, one that relegates the professionalizing ambitions of medical men to the background and centres instead on the bodies and experiences of women themselves. Admirably, the book casts its net widely, covering a broad range of issues pertaining to

FERGUSON PANEL: NORA JAFFARY'S REPRODUCTION AND ITS DISCONTENTS IN MEXICO: CHILDBIRTH AND CONTRACEPTION FROM 1750 TO 1905

women's sexuality and reproductive choices on which public opinion, medical and legal experts, and state authorities came to impinge. Thus, the history of virginity, conception and pregnancy, abortion and infanticide, and monstrous births, along with the emergence of obstetrics and gynecology as medical specialties, all become interwoven into a broader history that is ultimately about the policing of women's bodies by the modern, secular state and by local communities adhering to the patriarchal ideals of honour and sexual purity.

Reproduction and Its Discontents argues for the intensification of public scrutiny over women's sexuality and reproductive practices throughout the course of the long nineteenth century, a period that spans from 1750 to 1905. Whereas during the colonial period the desire to control reproduction centered primarily on the bodies of élite Spanish women with the goal of producing legitimate heirs, following the second half of the eighteenth century, and especially after 1850, these concerns extended to the sexual and reproductive habits of plebeian women, as reproduction and motherhood became increasingly yoked to nation-building. Throughout the period under investigation, Jaffary charts stunning continuity, emphasizing that for the majority of Mexican women the practices and ideas surrounding pregnancy and childbirth remained relatively unchanged. Indeed, nowhere is this stability more apparent than in the enduring presence of unlicensed midwives as birthing attendants. This was surprisingly the case despite energetic efforts by professional obstetricians to transform reproduction into a medical event through, for instance, the introduction of new procedures, such as cervical examinations, to ascertain pregnancy and modern technologies, such as the forceps and maternity hospital. However, if medicalization did little to dramatically alter the experience of pregnancy and childbirth, Jaffary informs us that it did much in the way of generating new ideas and attitudes towards women's bodies. The state of virginity, for example, understood by colonial Mexicans in deeply religious and moral terms, became construed throughout the course of the nineteenth century as a biological category. By the start of the Porfiriato - during the presidencies of Porfirio Díaz, from 1876–1880 and 1884–1911 — experts within the budding field of "hymenology" were touting their abilities to quantify the most intimate interiors of female anatomy, much like contemporary criminologists were laying claim to scientifically measure criminal proclivities. As Jaffary stresses, whether they fixated on the biological basis of virginity or the generation of monsters, medical discussions of women's reproductive anatomy and biology bespoke a newfound and increasingly urgent desire to subject the female body to greater legibility — and thereby to steer the course of the nation.

As the first comprehensive treatment in English of conception, contraception, and childbirth in late colonial and nineteenth-century Mexico, Reproduction and its Discontents has made a timely debut. Its publication coincides with the "global turn" in the humanities and swelling interest among medical historians in non-western societies. Latin America, in particular, has benefited from this geographical decentering. Once a sparse field comprising little more than John Tate Lanning's seminal study of the Royal Protomedicato and the pioneering scholarship of Nancy Leys Stepan, the history of medicine in Latin America now boasts a healthy dose of recent works (and works in progress) on topics ranging from the circulation of New World materia medica to the rise of the medical profession, from the history of psychiatry and its institutions to the management of epidemic disease by colonial or neocolonial interests. Implicitly or explicitly, much of this scholarship has sought to dismantle triumphalist accounts of western medicine's impact on colonial and postcolonial societies, underscoring its uneven spread, often suspicious reception among locals, use as a tool of state formation (echoing Foucault), and critical role in the buttressing of racist ideas. To this blossoming conversation, Jaffary has called attention to the centrality of sex and gender, asking how women's bodies have fared in the making of Mexico's medical modernity. While studies of reproduction and abortion have certainly not been lacking within the Latin American historiography, Reproduction and Its Discontents stands out for its chronological breadth, bridging the colonial and national periods, and for its uncanny ability to historicize reproductive biology and maternity — intensely social constructs that, as the author herself reminds us, are often assumed to be "natural, essential, and beyond history" (p. 211).

On this last note, Jaffary's book could very well have been entitled "medicalization and its discontents," for it wrestles with the costs and conflicts produced by the expansion of medical control over women's bodies and reproduction. For nineteenth-century Mexican women experiencing the transition from colony to nation the costs were not insignificant: the professionalization of obstetrics and gynecology, and the medical knowledge these fields generated, went hand-in-hand with new ideals of essentialist and virtuous motherhood that tethered women to their biological destiny, recast as a political rather than

FERGUSON PANEL: NORA JAFFARY'S REPRODUCTION AND ITS DISCONTENTS IN MEXICO: CHILDBIRTH AND CONTRACEPTION FROM 1750 TO 1905

purely familial imperative. While similar developments have been documented elsewhere, in Mexico reproduction became inextricably intermeshed with state officials' long-standing preoccupation with the nation's distinctive identity and its status on the global stage. As Jaffary documents in her chapter on monstrous births, the connection between reproduction and identity was first articulated in the late colonial period when self-conscious creoles began to interpret aberrant births through a patriotic lens. Whether they attributed monsters to divine intervention or "natural errors," late colonial newspapers depicted them in a way that endorsed the creole discourse of American superiority and of the New World as a "land of health, prodigy, and fertility not only equal but surpassing that of the Old World" (p. 151).

These discussions not only intensified as the nineteenth century progressed and the new nation struggled for stability and economic prosperity; their tone also shifted and came to register deep-seated fears of Mexican inferiority. By the Porfiriato, monstrous births were no longer seen as sources of regional pride. Rather, defined as deviations from normalcy, they served as irrefutable proof of the "inherent pathology" of Mexican women's reproductive anatomy (p. 143). Meanwhile, obstetrics and gynecology rose to become one of the most fervent expressions of Mexico's own unique brand of "medical nationalism" as a proliferating number of medical periodicals and newspapers voiced interest, if not obsession, with the "gynecological distinctiveness of Mexican women" (p. 198). As the era of pseudo-scientific racism came into full swing, Porfirian physicians advanced the claim that Mexican women possessed defective and pathologically narrow pelvises that not only rendered childbirth dangerous and extremely difficult but was likely the unfortunate outcome of the country's racially mixed inheritance. In one of the most fascinating parts of the book, Jaffary shows that Mexican obstetrics was hardly derivative or mimetic of its European counterpart. Quite to the contrary, Porfirian obstetricians responded to the "defective" features of Mexican women's reproductive anatomy by devising a unique and distinctly national form of interventionist childbirth that, in spite of disturbingly high rates of death due to infection, was hailed by medical élites and state officials as far superior to the uncouth practices of traditional midwives.

While reading *Reproduction and Discontents*, I could not help but detect the hint of a declensionist narrative and wonder if for the average plebeian woman, the colonial obsession with legitimacy and status might not have been preferable to the late nineteenth-century conflation of femininity with biology. Jaffary's long-durée approach consistently contrasts a colonial period marked by relative privacy in matters of childbirth and surprising laxity and ambivalence on the issue of abortion and infanticide, with a post-independence era characterized by the heightened surveillance of these activities. As Jacqueline Holler discusses in her commentary, the contrast between "colonial silences" and "republican publicities" also speaks to the fragmentary nature of the colonial archive and the way in which we interpret archival absences. Certainly, New Spain lacked the vibrant print culture enjoyed in many parts of Europe, especially England where, as Mary Fissell and Lisa Forman Cody have shown, women's bodies and reproduction were frequently interpreted in light of religious and political upheavals.⁵

That said, and as noted earlier, Jaffary is far too talented a historian to make facile claims about women's spiraling loss of reproductive agency. In Mexico, as she points out, among the "discontented" were not just women upon whose bodies and reproductive choices greater scrutiny fell, but also university-trained physicians and state officials who failed to fully oust traditional midwifery and Indigenous medicine, which formed an integral part of what Steven Palmer and Marcos Cueto have identified as Latin America's "medical pluralism" and what Martha Few has termed a "medical *mestizaje*."⁶ This is perhaps (for me) one of the book's most rewarding and compelling insights: Jaffary insists that in spite of the expansion of European medical thought and the introduction of modern technologies, such as the forceps, surgical anesthesia, and the maternity hospital, Indigenous medical practices and reproductive knowledge not only survived well into the twentieth century, but enjoyed currency among a broad spectrum of Mexican society. The case of Indigenous abortifacients is especially illustrative of this point. If sixteenth-century Spanish physicians like Francisco Hernández enthusiastically assimilated local knowledge of New World materia medica, divesting it when necessary of its less savory spiritual components, Mexican women of all ethnicities and classes likewise consumed and disseminated information of a hefty arsenal of cures for treating sterility and aiding in pregnancy, as well as more illicit concoctions for regulating menstruation and inducing miscarriage. Jaffary stresses that, by and large, these practices went undetected by authorities or were only superficially monitored in the colonial period. And, even when, in the nineteenth century, legal and medical authorities vociferously decried the use of contraceptives and abortifacients as the

most gruesome and unpatriotic of practices, the strict regulation of these substances was tempered by judicial reluctance to impose harsh convictions on guilty mothers and their procurers.

In keeping with its topical and chronological breath, Reproduction and Its Discontents draws on a broad and rich source base, including criminal cases from Mexico City's Tribunal Superior de Justicia del Distrito Federal. As a historian of medicine, I found Jaffary's use of criminal records especially refreshing; not only do they interject the voices (albeit mediated) of women and their communities in a book that could have otherwise privileged the highly documented views of physicians, but they too speak to the contested nature of medical evidence. Arguably, what we might refer to as the "medical turn"⁷ within the courts took place in the late eighteenth century, as my own work with inquisition cases involving madness and Jaffary's first book, False Mystics, would suggest.8 It was during this time that inquisitors came to rely increasingly on the testimony of medical experts to explain strange and irrational behaviour that, in earlier periods, might have been attributed to divine or demonic causes. While inquisitors found medical evidence compelling, it was hardly conclusive and could even delay the issuing of a verdict. I was therefore struck to learn that, nearly a century later — and in the era of scientific positivism — medical experts called upon to testify in cases of abortion and infanticide exerted only modest sway in the shaping of verdicts. Like pelvic examinations carried out in cases of rape, medical inspections of the mother's body and of the fetal corpse could provide the courts with tangible proof of criminal activity. However, nineteenth-century judges rarely found such evidence persuasive and were even inclined to favor anecdotal evidence, especially if the latter upheld the public face of female honour. Here, again, Jaffary exposes medicalization for what was and is: a truly messy and contested process that must be analyzed from both "top down" and "bottom up" perspectives.

By way of conclusion, I want to emphasize that Jaffary has not only written a robustly researched and crucially important book; she has also produced a fine work of feminist scholarship that does not shy away from connecting Mexico's reproductive history to present-day concerns. For all their shortcomings, the earliest studies of women's healthcare (I am thinking here again of Ehrenreich and English's *Witches, Midwives, and Nurses*) drew inspiration from the political debates that raged in the 1960s and 1970s, and held steadfast to their feminist agenda for greater reproductive autonomy. As the history of science and medicine have professionalized (and some would argue "hyperprofessionalized"),⁹ we have certainly gained more accurate renderings of the past devoid of presentism, but we have also lost that sense of urgency that, to my mind, made the earlier scholarship so exciting. I therefore appreciated Jaffary's frank confession in her preface that she wanted to "write a book that mattered to women" — *all* women — and her assertions in the conclusion that Mexico's reproductive history, particularly its colonial past, calls into question common assumptions of our present era as being the most liberated when it comes to women's reproductive freedoms and rights more generally. (pp. xiii, 210) As current debates over abortion become ever more polarized and politically and emotionally charged, Jaffary teaches us that our society perhaps shares more in common with Mexico's late nineteenth-century than with its colonial precursor.

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