EDUCATION, VIOLENCE AND CONTRACEPTION IN UNWANTED PREGNANCY. *MESTIZA WOMEN IN SAN CRISTOBAL DE LAS CASAS, CHIAPAS, MEXICO*

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ABSTRACT

This study is part of a qualitative investigation in San Cristobal de Las Casas, Chiapas, Mexico. This investigation is based on interviews with Mestizo (having Spanish and Indigenous ethnicity) women who were born in San Cristobal or had immigrated to the city and who have a high school or higher degree, who have experienced relationships of power related to unwanted pregnancy. The expectations of marriage as a social mandate, emotional dependence and submission in order to avoid violence are among the reasons that lead to non-consensual sex that includes difficulties in negotiating anti-conceptive methods.

Keywords: Gender, violence, education, contraception, unintended pregnancy, abortion.
The Alan Guttmacher Institute noted that in Mexico in the 1990s, 40% of pregnancies were unintended while 17% of them ended in induced abortions (Guillaume and Lerner, 2006). As a result of demographic changes in the country, which led to a declining fertility rate of 5.6 children per woman in 1970 to 2.2 in 2006, the proportion of unwanted pregnancies would nevertheless increase despite family planning policy, registering an increase of 64% in the number of induced abortions which rose from 533,000 in 1990 to 875,000 in 2006. There was also an increased abortion rate from 25 per 1000 women aged 15-44 to 33 per 1000 in the same period (Juarez et al, 2008: 2-12). Refined estimates grouping all states by region indicate that the rate would be 38 per 1000 women for Region 6, which the least developed region where Chiapas is located, it was found to be between 25-27 per 1000 women- one of the lowest rates when compared with the rest of the country (Juárez and Signh 2013, 25-35). It can be said that in general, induced abortion is evidence that the pregnancy was unwanted by the woman, without the fact that continuing through to delivery is guaranteed that was desired.

From a demographic perspective, unintended pregnancy is defined as one that occurs when it is not wanted, regardless if contraceptive protection was used or not. It must be distinguished whether a pregnancy was desired by inopportune or if it was absolutely not desired (Committe on Unintended Pregnancy, 1995: 22). This way of conceptualizing the problem, however, has been criticized because it is not applicable to all contexts. In addition, the intention of the pregnancy and desire is poorly correlated when it comes to knowing what happens at the individual level (Zabin, et al, 2000: 39-45, Sable and Libbus, 2000: 191-196, Poole, et al, 2000: 179-182, Stanford, 2000: 183-189, Santelli et al. 2003: 94-101).

Some studies have documented the role of ambivalence that leads some women to be inconsistent with contraceptive use or its absolute absence. (Sable and Libus, 2000: 191-196; Zabin, 2000:
39-45). In this regard, eroticism of risk, fantasies about the desire to have a child with a particular partner linked to sexual pleasure and therefore unprotected sex in both women and men, reveal the importance of the satisfaction of immediate emotional needs at the expense of long-term goals such as avoiding pregnancy (Higgins, 2008: 130-137). Several studies have highlighted the important role of men and stability of the relationship as determinants of desire and the destiny of pregnancy by women, so that if there was no emotional or financial support, it was more likely that the pregnancy was rejected (Kroelinger, et al., 2000: 112-119, Zabin, et al., 2000: 39-45). Desire can also change during pregnancy in response to what happens in context and significance for women, so a pregnancy that was initially desired may become unwanted or in contrast may be accepted later (Sable and Libus, 2000; Kroelinger, et al, 2000; Poole, et al. 2003: 179-182, Zabin, et al, 2000)...

An association between unintended pregnancy and violence in the relationship has also been documented. Results of a large sample obtained from the database of the Pregnancy Risk Assessment Monitoring System (PRAMS) in the United States, showed that the birth of the child verses the desire of women was higher among those who had reported violence 12 months prior to and during the pregnancy, as opposed to those who did not, and it is more common in socially vulnerable women, African Americans, minors, the unmarried, those living in overcrowded conditions or those who had less schooling (Goodwin et al, 2000: 85-92; Saltzman et al. 2003: 31-43.). Violence is also more frequent among those who decided to abort and did not report their decision to the man or who had induced repeated abortions (Woo et al, 2005: 1329-1334; Fisher et al., 2005: 637-641.). Physical or sexual abuses suffered in childhood, as well as growing up in a dysfunctional home, were also associated with the presence of unwanted pregnancy in adulthood (Dietz et al., 1999: 1359-1364).
In Latin America, supportive role or the of males according to material, normative and symbolic context in which occur intimate relationships, conditions their co responsibility in contraceptive protection as well as the desire or lack thereof of women due to the pregnancy (Tolbert et al., 1999, Llovet and Ramos, 2001, Bankole et al., 1998 cited by Guillaume and Lerner, 2006). According to a study conducted in Colombia, dating violence remains a significant association with unintended pregnancy, so much so that each year approximately 32,500 to 45,000 of unintended pregnancies would not occur if the first were eliminated (Pallito and O ‘Campos 2004: 165-173). While Mexico has not investigated the association between violence and intended pregnancy, the information that is available has shown that there is a continuum between the abuse suffered in childhood and later in adulthood, so that the pregnancy would have been rarely the initiator of violence (Castro et al, 2003: 110-1116; Cuevas et al., 2006: 239-24.).

The association between unwanted pregnancy and partner violence has been documented mainly among women with more social disadvantages and those with less education (Geldstein, et al., 1997: 121-131, Rickert, et al., 2002: 178-183, McCloskey, et al, 2005, Dan Vung, et al, 2008). A few studies, however, found that violence can also occur among more educated women as the traditional gender roles for women has transitioned. (Burazeri, et al., 2005; Gómez Dantes, et al., 2006).

What circumstances could put women with an average of higher education, and apparently with more power, in the position to live with an unwanted pregnancy? The study presented below was part of a project with qualitative methodology that aimed to help clarify this issue between indigenous and mestizo women in a medium city in Chiapas, in southern Mexico.
METHOD AND SUBJECTS

Following informed consent, twelve mestizo women were interviewed in the period from 2006 to 2008. Seven of them were born in San Cristóbal, and five were immigrants from various Chiapas municipalities and states, who generally grew up in this city. The key question was “how do you think this unwanted pregnancy happened?” Of the twelve women, nine decided to terminate the pregnancy and three continued until the birth of the child.

CONTEXT

San Cristóbal de Las Casas, Chiapas

Throughout the last century the need for land and the generally difficult living conditions coupled with structural violence imposed on the indigenous peasants migration in the region of “Los Altos” ( “The Highlands”) with a high population density, to other regions of the state, and to the city of San Cristóbal de Las Casas. This migration soared starting in the 1970’s, (Viqueira, 2005: 219-236, Aubry, 2008: 111-146, INEGI, 2003: 21-36). During that process, indigenous women came to this city in many cases alone and to escape domestic violence, but also with the idea of improving their lives and breaking away from the customs of their hometowns (Freyermuth and Manca, 2000: 203-228 ; Álvarez al, 2012: 395-423). At the same time, mestizo women came from other municipalities as well as from other states to study or work, according to the narrative of the interviewees.

The Catholic religion has played a major role in a relatively isolated region of Los Altos and San Cristóbal de Las Casas, its principal urban center (Aubry, 2008: 111-146), influencing the rules of coexistence, whose rigid sexual division of work
legitimizes gender inequities. However, this has been modified in varying degrees before the strength of the economic and cultural transformations. The continuous migratory flow of different social groups and even different nationalities toward San Cristobal from the second half of the twentieth century, has turned the city into a cosmopolitan space that along with the mass media have contributed to the secularization of local customs.

The development of the municipality of San Cristobal, has an average annual rate of population growth from 2000 to 2010 of 3.3%, and is one of the highest in the state (INEGI, 2011: 4). The increase in the proportion of women with basic education and are incorporated into the labor market and have access to contraception, have led to a significant change in family size and probably a lowered desire for pregnancy. According to the XII General Census of Population and Housing 2000 and main results of the Census of Population and Housing 2010, the average number of children in Chiapas of women aged 15-49 years decreased in those years from 2.40 to 2.0. A similar situation has been recorded in the municipality which went from 2.05 to 1.8 within the same period, which would have occurred primarily among women with secondary or higher level of education (INEGI, 2008: 41).

It is important to note that in the area of reproduction, inequitable gender norms have remained since tubal ligation in the state has been registered at the highest prevalence with 55.6%, while the use of condoms, withdrawal and vasectomy have had the lowest prevalence, 3.7%, 1.7% and 0.9% respectively (INEGI, 2005: 52-67). Regarding the desire for pregnancy, a study in slums of the state capital of Tuxtla Gutierrez and San Cristobal de Las Casas, showed that up to 50% were outright rejection, disagreement or indifference to it by the members of the couple, without the knowledge to if contraceptive methods would have been an obstacle in the occurrence of the pregnancies (Nazar and Salvatierra, 2008: 1-16).
RESULTS

Mestizo women residents in the city

In this study the age of the respondents were located in a range between 20-37 years old. Most had a high school education especially among immigrants, and some had performed graduate work in public institutions. More than half were employed, some according to their profession. Those who took care of household chores were almost all students with a child (a) or had a family member in their charge. Only five were in a relationship, two were in the process of separation and the remaining five were single, most were dating. All were self-described as Catholic.

Women from the city come from homes where their parents were mostly teachers- one of the few professions that has allowed an improvement in living conditions in a marginalized region- or they were small local entrepreneurs who lived with some comforts, or small scale artisans. Immigrant women from families of peasants, workers and government employees, were from border towns and the coast of Chiapas and the states of Puebla and Oaxaca. Although there was an explicit prohibition of engaging with a partner before finishing studies, the majority of those originating from San Cristobal became sexually active before age 20, while immigrants generally after that age.

The fact that they were women with a high school education or higher, having sometimes a job and own income, as well as having the support of their family, did not exempt them from being abused by an intimate partner (jealousy and control by the male, threats to their security, have felt pressured to drink alcohol, having been humiliated, receiving slapping or shoving, that the man cheated with another woman, suffering from his lack of emotional and financial commitment towards them and their children, even abandonment). In general in the group of women from San Cristobal, all with a high school education or higher, it
was often that the men would impose their conditions and they assumed hegemonic and unequal gender roles. Among women with a university education or higher, especially with immigrants, the above situation was less common and in more than half of these they negotiated so that in crises they could impose varying degrees on their own terms.

Regarding sex life, only four of the respondents, a third of all, mentioned that their relations were consensual and therefore respectful of their wishes and were pleasant, which corresponded with those who maintained a relatively fair relationship. Two were from San Cristobal and two were immigrants, usually among those that had higher levels of education within their respective group. For the rest, sex was accepted as another example of attention by the man, and in order to avoid rejection or even violence.

It is noteworthy that half of the respondents, especially those who were from San Cristobal, reported having used oral contraceptives that sometimes they forgot to take. On the other hand immigrants with higher education predominantly used condoms and the rhythm method with some variation such as Billings or withdrawal. Two of the women were born in the city, one sixth of the entire sample. One had already had two children and did not use any form of contraceptive protection, while only one respondent of the total, an immigrant, used the emergency contraception pill.

Regarding unwanted pregnancy

Regardless of the level of education, in the aspects of sex and reproduction, three quarters reported abuse of power by men who imposed their conditions and they were subordinated, therefore they were not always able to control the timing of sex. This, coupled with the inconsistent use of effective contraception and trusting in other less secure methods such as rhythm, withdrawal
or simply not using any contraception occurred in a situation where they hardly had control, which was also complemented by the low responsibility of men, who were inconsistent with the use of condom or who simply refused to use them.

—“Yes, I never had problems of that I wouldn’t want to have sex or not. Always. So sometimes felt tired, I would tell him, for the sleeplessness [for the care of small children], but always, I mean ... I was with him “ If he did not want a third child, did he do something to take care of the situation, meaning that he use a condom? (interviewer).

—No. No, no, no ... I mean ... I had to do everything because he could not do anything. “(Alicia, San Cristóbal, 26 years old).

—“Yes. Really ... even until today ... I do not know how to say no and do not know why. Although ... although I do not want to, even though I don’t want to, even though I really ... I don’t feel comfortable ... no. I only used pills, but I did know what to say to him ... I would not tell him.

I think I failed, or maybe not ... or being so worried, sometimes I was I was already really crazy. “(Cristina, San Cristóbal, 20 years old).

—“Right now I’m realizing that sometimes a week before I got pains ... seven, eight days before I got my period, then I would consider ... I think they are still days ... fertile [referring to the rhythm method], but it ... what happened had to happen. And yes I was a little upset with myself and him because ... because it has already happened to us sometimes and ... we continue with the same but that night I could not say “no”, that is “no, I do not want to, I was afraid “... umm ...” Its best that we don’t take the risk “... no” (Elsa, 29 years old, originally from Oaxaca).

Thus unwanted pregnancy is explained (1) by the emotional dependency of women toward their partners and / or (2) to avoid rejection and even to avoid further violence in a regular context where the wife and mother is the natural step and leading role it expected from all women.
When there was a relationship with a relative equality, in this case in a quarter of the respondents who generally had a higher level of education, unwanted pregnancy was a result on some subjective level: (3) an excess of overconfidence and therefore the fact of believing in their own invulnerability, as well as the denial of the risk or perhaps of the probable eroticism of intercourse without contraceptive protection, as noted by Higgins (2008: 130-137).

In the city of San Cristobal de Las Casas, Chiapas the desire for more children seems to have declined, which implies that more women have had to pass a longer period of their reproductive life without conceiving and therefore, have needed to further protect themselves to avoid an unwanted pregnancy. The use of contraceptives, however, would not have had to increase, judging by the continuity in the proportion of Chiapans who use them - 53.5% in 1997 and 54.9% in 2009 (INEGI, 2010). This also explains the fact why family planning policy is no longer a priority for Mexico, when the population is approaching replacement level, as has been suggested by Juárez and his collaborators (2008).

But even when contraceptives were widely available, women have found a barrier to prevent pregnancy in conservative customs of the city and the “should” of hegemonic gender roles, which have been modified, but generally maintain the sexual division of labor and the symbolic violence that legitimizes male domination and its counterpart - the subordination of women. Such subordination does not allow them to position themselves assertively and control their body, which is expressed in a specific way in each social group and would likely result in an increase in unwanted, and perhaps unsafe, pregnancies and induced abortions.
DISCUSSION

For decades it has demonstrated the existence of an association between female education and fertility decline (Cochrane 1979; Caldwell 1982; United Nations 1987, 1995; Cleland and Rodriguez 1988; Jejeebhoy 1995; Jeffery and Basu 1996; National Research Council 1999, cited by Bongaarts, 2003: 321), Jejeebhoy and Sathar (2001: 678-712) suggest that this happens because education generates in women the ability to make decisions, to control various resources, to access knowledge, to free mobility and therefore more equitable relationships in their families. McRobbie (2010: 113-135), however, undermines the egalitarian role of education for women in the context of globalization and the dismantling of social achievements, recreating gender norms under new light.

By relying on education in the economic and sociocultural contexts, the role of norms and values that define the “should” of hegemonic gender roles are internalized in ways of feeling, thinking and doing by women and men, and precisely for not being questioned, would in general be less important in reference to sexual and reproductive behavior. It would not be surprising, then, that despite the level of education, the cause of unwanted pregnancies was primarily female subordinate subjectivity to the sexual desires of men where nonconsensual intimate relationships, would be another unrecognized form of violence, as other studies have shown (Santhya, 2007: 124-132, Goodwin et al. 2003: 31-43, Saltzman et al. 2003: 31-43, Pallito and O’Campo, 2004: 165-173) and (Tolbert et al, 1999; Llovet and Ramos, 2001; Bankole et al, 1998; cited by Guillaume and Lerner, 2006). Nevertheless, through education respondents had an alternative draft of their own lives to the traditional roles- which seems to have played a role in the delay of conceiving and in the making of decision in their own best interests.
CONCLUSIONS

Focusing the solution of the problem only on more information and access to contraceptive protection is insufficient before a context marked by gender inequalities, class and ethnicity. Besides the access of women to all levels of education, it is necessary to socially conditions that enable alternative projects for a wife and mother, that lead to an improvement in their living conditions. Modifying sexist attitudes in all areas of daily life, particularly those having to do with the mass media that largely model those same behaviors to a good degree, as well that violence against women does not go unpunished, are fundamental to changing social norms and erecting new subjectivities between men and women. Finally, since there will still be unwanted pregnancies, it is essential to review the legislation that limits women’s access to safe and legal abortion in Chiapas and currently restricts the exercise of their sexual and reproductive rights.
REFERENCES


