

# Family Planning, Pregnancy, and Birth in Guatemala: Maya Women and Modern Healthcare

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# Introduction

- Guatemala is a country that is defined by the highest rates of maternal and infant mortality in Latin America
- Maternal mortality: 156.2 per 100,000 births  
Infant mortality: 41-49 per 1,000 births
- These rates almost double for Maya women
- Although there is an increasing availability of reproductive health services, resistance to these services is observed within these populations

# History of the Maya in Guatemala

- “Heritage of conquest”
- Spanish conquest began in 1524
  - First decade emphasized devices of *encomienda* and *repartimiento*, enabled Spaniards to receive goods/services from Maya communities without seigneurial rights
  - *Compoición de tierras*, raised funds by selling lands that were thought to belong to the Crown throughout Spanish America

# History of the Maya in Guatemala

- Guatemala gained independence from Spain in 1821
- Governed by a series of conservative authorities until 1870
- Liberals returned to power in 1871, being led by Justo Rufino Barrios
  - Promoted Liberal Reforms
  - Maya farmers lost nearly half of the land originally claimed during colonial times
  - Structural inequalities that resulted from ethnic manipulation are still present in Guatemala today

# History of the Maya in Guatemala

- 1944-1954: “Ten Years of Spring”
  - Initiated by the country’s first democratic elections
  - CIA-led takeover put an end to
  - Due to Arbenz government began to requisition unused land that was owned by the forceful U.S. based United Fruit Company
- Early 1960s, guerilla resistance broke out. Resulted in overreaction of army to threats.
- By 1968, force of military increased greatly and overpowered the dawning rebellion

# History of the Maya in Guatemala

- 1970s and 1980s in Guatemala were very dangerous
- Escalating civil war between the state and army against many guerilla groups
  - Reasons behind murders and kidnappings remained unclear, therefore constant and widespread fear
- Guatemala declared war on its own citizens, primarily the indigenous
  - Government intent was to inhibit community initiatives
  - ~440 villages in rural areas destroyed
  - Between 1981 and 1985, tens and thousands of Maya lives claimed
  - Effective for traumatizing survivors in submission

# Guatemala Populations

- Maya inhabit five hundred square kilometers
  - Four Central American countries
  - Five Mexican States



<http://mistsopalenque.com/maps/>



# Guatemalan Populations

- Guatemala is home to the largest population of Maya (4.4 million)
- Maya = refers to speakers of the 31 languages
  - Descendants of ancient Maya civilizations that thrived in prehispanic times
  - Ethnic consciousness, language, and culture vary due to nation states and historic routes

# Guatemalan Populations

- Indigenous Maya and Ladino populations
  - Ladino = apart of national Guatemalan culture, speak Spanish, and wear Westernized clothing



[www.paxgaea.com](http://www.paxgaea.com)

# Guatemalan Populations

- Ladinos dominate the structure of Guatemala
  - Politics
  - Military
  - Upper class of society
  - Higher levels of income
  - Higher levels of education
  - Primarily urban
- Indigenous Maya are characterized by disadvantages and are labeled as poor

# Demographic Transition Theory

- Societies that participate in modernization will progress from a pre-modern pattern of high fertility and mortality to a post-modern one, where both are low
- How does modernization result in a decline of fertility and mortality rates?
  - Active governments
    - Pure water
    - Vaccination services
    - Control of epidemics
    - Other public health measures

# Demographic Transition Theory

- Decline in fertility rates
  - Increased contraception use
    - Motivation for birth restriction
    - Changes in religious beliefs and practices
    - Increasing education
    - Raising women's status
    - Overall improvement of child health
    - Diffusion

# Ladino/Maya Health Dynamics

- Guatemala is home to one of the highest levels of health inequalities in Latin America
  - Ladinos: TFR- 3.3, Infant mortality rate- 33 per 1,000
  - Maya: TFR- 4.5, Infant mortality rate- 51 per 1,000
- May be due to:
  - Healthcare primarily in urban areas
  - Socioeconomic and regional disadvantages
  - Language barriers and low education levels may also play a role
  - Distrust

# Traditional Contraception

- Modern contraception use increase in the last decade:
  - Ladino women- 22% to 34%
  - Maya women- 4% to 6%
- Many Maya couples attempt to engage in traditional methods:
  - “Natural” or rhythm method
  - Abortifacants
  - Celibacy
  - Postpartum neglect

# Traditional Birthing

- Estimated that 75-85% of Maya births occur in the home with a traditional birthing attendant (TBA)
- A *Comadrone* is the most common TBA in Guatemala
  - Especially prevalent in Maya communities
  - Trusted woman within community
  - Thought to be wise
  - Have a sacred calling to be a midwife



# Role of the *Comadrona*

- Childbirth is a spiritual event, not just a physical one
- Gain knowledge through dreams and direct communications with God
- Act of birth is sacred
  - Praying
  - Burning incense
  - Going to church to light candles in front of Holy Virgin
  - Religious artifacts
- Use skills obtained through dreams and previous births aid in labor and delivery

# Maya Perceptions of Biomed Reproductive Services

- Social norm within Maya communities = strong disapproval of biomedical reproductive health services
- Maya extremely opposed to these services, but why?
  - Multifactorial
    - Desire for large families
    - Religious beliefs
    - Disapproval from community leaders
    - Access
    - Widespread distrust of outsiders

# Desire for Large Families

- Use of contraceptives must be preceded by motive for birth restriction (Demographic Transition Theory)
  - Agricultural society
  - Large family is advantageous
    - Economic security for older parents
      - No welfare programs
    - Lack of structured law enforcement; rely on family members for defense

# Religious Beliefs

- Catholic Church is primary source of family planning information
  - Premarital classes: couples learn they should have all the children God blesses them with
  - Women born with all children she will bear in her lifetime within her
  - Sole reason for living is to have children

# Community Leaders

- Community leaders commonly known to oppose family planning services
  - Claim it is a harmful sin
  - Distrust anyone who promotes it
- Results in widespread agreement through Maya population that these services are a sin

# Access

- Biomedical reproductive health services are usually offered in urban areas
  - Ladinos reside here
  - Have better access



[www.pbi  
=  
guatemala  
la.org](http://www.pbi-guatemala.org)

# Access

- Lack of association between proximity of these services and its usage by the Maya
  - Lack of adequate care, □ government spending
  - Limited hours of service
  - Lack of confidence in biomedical care
  - Lack of attention to cultural, social, and structural factors
    - Indigenous languages
    - Ladino staff usually condescending/discriminatory towards poor (Maya)

# Gender Roles & Education

- Most Maya men in complete control of reproductive decisions
  - Some feel it is their right to have sex whenever they want to
- The more educated a woman is, more likely to use biomedical reproductive services
  - Increased freedom in decision-making
  - Self-confidence
  - Greater control over resources, such as finances



# Distrust

- Maya have widespread distrust of outsiders
  - History of violence, social/political oppression
- Suspicious of government-run (by Ladinos) agencies for biomedical reproductive care
  - Genocide
  - Maya believe it is their plot to rid of their population for good
- Conspiracy theories are formulated to explain what the government will not
  - Distrust is attributed to “political-economic underpinnings of the distribution of power, wealth, and violence and of the circulation of public disclosure” (Briggs 2004: 182).

# Distrust

- Reluctance to visit Ladino health clinics
  - Racist intimidation
- Chemical means of regulating birth
  - Poison
  - Dangerous
- Biggest concerns for contraception = the pill
  - Thought to cause weight gain/loss
    - Community attributes weight changes with contraception
    - Might become suspicious and express criticism

# Reaching the Maya; Culturally Appropriate Care

- Increase in recognition of qualitative research for designing programs
- Has led to a better understanding of beliefs and perceptions the Maya have toward family planning and pregnancy care
  - Realizations that the Maya will not adopt modern methods in the near future
  - Demonstrates the need to modify current efforts
  - Will require overcoming social, cultural, political, and language barriers

# Reaching the Maya; Culturally Appropriate Care

- To be credible and reasonable to Maya population:
  - Messages should be delivered by those apart of Maya community
    - High levels of trust
    - Cost-effective
    - Eliminates language-barrier
  - Attention should be focused on those who influence women's decisions
    - Church/community leaders
    - Husbands

# Reaching the Maya; Culturally Appropriate Care

- Most important and successful adjustment: integration of traditional practices into formal health care system
  - Promotion of fertility awareness
  - Traditional birth attendants
    - Training programs that act as a mutual learning experience
    - Cooperation between these women and biomedical providers should provide the most effective and culturally appropriate care to the indigenous Maya

# Conclusion

- Guatemala is characterized by some of the highest maternal and infant mortality rates in Latin America
- Lacking usage of government-run biomedical pregnancy services
  - Lack of attention to community's belief systems
  - Occupying rural areas
  - Inequalities in education, socioeconomic statuses to Ladinos
  - Distrust left by the cycles on conquest, violence, and oppression
- To make services more attractive to Maya population:
  - Integration of traditional beliefs with biomedical services
    - Dissolution of racist intimidation with mutual respect
    - Overcoming social, language, and cultural barriers