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Résumé de l'article

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A Brief Comment on Nora Jaffary's *Reproduction and Its Discontents*

LUZ MARÍA HERNÁNDEZ SÁENZ

Abstract

*This article offers a brief commentary on *Reproduction and Its Discontents* by Nora Jaffary. It includes a short summary and analysis of the work's main points, with an emphasis on the section on monstrous births and its historical context.*

Résumé

*Il s'agit d'un bref commentaire de *Reproduction and Its Discontents* de Nora Jaffary, qui comprend un court résumé et une analyse des principaux points de l'ouvrage en se penchant particulièrement sur la section des naissances monstrueuses et de leur contexte historique.*

I want to start by thanking Dr. Jacqueline Holler, the panel organizers and the Journal of the *Canadian Historical Association/Revue de la Société Historique du Canada* for the opportunity to offer a few comments on the excellent work of Dr. Nora Jaffary, *Reproduction and Its Discontents*.

I also want to extend my sincere congratulations to Jaffary; first, for writing this remarkable book that is a welcome addition to the medical, legal and social history of Mexico and Latin America; and second, for being one of only two scholars of Latin America ever awarded the Wallace K. Ferguson Prize.

It is important to emphasize that, for us historians of Latin America, the recognition of Jaffary as the recipient of this important award twenty-two years after Richard Boyer's *Lives of the Bigamist: Marriage, Family and Community in Colonial Mexico* received the same honour is a cause for celebration. Thus, Jaffary must be credited not only for her work, but for bringing to the attention of our Canadian colleagues, once again, the rich and interesting field of Latin American history, a field that has been largely neglected in Canada.

Reproduction and Its Discontents deserves this distinction for many reasons. The challenges in researching the book's main theme, its social, legal, and religious context as well as the contemporary perceptions of reproduction, birth, and abortion forces the author to expand

her scope and weave together information contained in documents as varied as criminal and church legislation, popular and scientific publications, judicial records, medical diagnoses, and religious sermons. The result is a fascinating book that questions traditional historical beliefs, such as the degree of control the colonial clergy and civil authorities exercised on society; the divergence between the same authorities' theoretical and *de facto* positions on conception, contraception, abortion, and infanticide as well as, consequently, on women's morality; and the relative independence that, up to the late eighteenth century, women enjoyed over their bodies. At the root of these questions was the understanding, or the lack of it, over questions such as how could a seventeenth-century woman know she was pregnant? How could a miscarriage or abortion be distinguished from menstrual irregularities? Lack of knowledge on the part of the authorities and the public in general abetted the moral flexibility that characterized this period. With the nineteenth century came the development of medicine and physicians' increasing knowledge of embryology and the mechanics of childbirth, factors that resulted in stricter regulations and monitoring of women's lives. Jaffary's findings complement Dr. Ana María Carrillo's work on Mexican healthcare workers as well as my own research on nineteenth century midwives in Mexico.¹⁰ The same intellectual, professional, and social currents that affected nineteenth century society: the development of medicine as a science, the formalization of professional standards, the emphasis on scientific education, and the restrictions placed on women to acquire such knowledge as well as physicians' growing control over licensed health practitioners, narrowed the field of midwifery and placed formally trained midwives under the firm control of male practitioners. Unlicensed midwives did not disappear, but they were reduced to illegal practitioners and gradually marginalized by the élite and middle classes.

The triumph of science over traditional practices was not immediate nor complete. As Jaffary points out, regardless of training or licensing, midwives continue to attend births, especially in rural areas to this day. Nonetheless, scientific medicine gained considerable ground as part of the country's gradual modernization. The economic changes that Mexico began to witness in the second half of the nineteenth century affected women, their control over reproduction, and their perceived role in society. In the colonial period, a woman's virginity and marriage were a primary concern among élite families who wished to maintain the social status that their "pure blood" and eco-

conomic resources granted them. Honour to a colonial woman meant refraining from sexual activity before marriage, living according to the prescribed norms, and being a loyal wife. However, in the nineteenth century, economic development, urbanization, and the influence of liberal and more democratic ideas resulted in an expanding middle class and a more fluid and racially inclusive society. These middle levels held precariously to their recently earned status, which they guarded jealously. Thus, the concerns of the colonial élite women now became a preoccupation of the middle classes who wished to differentiate themselves from the racially mixed masses.

During the Porfiriato these trends continued and combined with the regime's nationalistic ideals. Nationalism became a priority for a government who needed to unify a country fragmented by civil war, political and regional interests, and class divisions. One of the results was the democratization of the female standards of morality and social acceptance. The middle sectors of society had adopted the concerns about virginity and abortion that became equated with promiscuity or adultery. These same values were now imposed on the popular classes, who, in the minds of those in better socio-economic positions, became identified with promiscuity, abortion, infanticide, and other moral ills of society. In the view of the authorities, the unruly masses, especially females, required firm supervision and guidance. Thus, poor women became the objects of scrutiny, condemnation, and control.

Nationalism influenced the Porfirian state's objectives and vision of the country along with the place and role of women in society in other ways. As the government saw the need to increase the country's population in order to promote a national economy, motherhood and childbirth became the state's concern, the supposed domain of scientific medicine. As Jaffary argues, women's control over their bodies diminished as modernity took root. This trend was neither new nor unique to Mexico. Since the late eighteenth century, physicians and surgeons began to encroach on the practice of childbirth. As medicine and science developed and knowledge evolved, medical specializations emerged. Beginning in the year 1833, obstetrics (first labelled "operations and obstetrics" and then "obstetrics and children's illnesses") was a required course in medical school. A simpler, shorter course was available to the few formally trained midwives whose requirements for enrolment were much lower than those of the physician-surgeons. Therefore, most midwives lacked a solid training and relied mainly on their experience. Understandably, among the families who could

afford it, many mothers-to-be preferred the services of a much better trained physician-surgeon. Gradually, more births were monitored by professional, specialised male practitioners instead of “ignorant” and usually informally trained midwives. In Mexico, the same nationalism that promoted economic development and political unity shaped the idea that local women were unique, and the notion that a special medical field and instruments should be developed to ensure safe deliveries. Thus, in the nineteenth century not only social mores but also the perceptions of women’s place and role in the nation changed. During the same period the concept of nationalism also shifted.

The observations of Jaffary may be placed in the wider context of the nationalism that contemporary intellectuals and élites shared. The ascent of the Bourbons to the Spanish throne in 1700 brought a new form of governance and administration to the empire. The new dynasty sought to reform its vast empire by reorganizing it politically and economically. The aim was to have more direct control over the colonies in order to increase their productivity and the revenue of the royal coffers. To achieve its goals, Madrid increased the appointment of *peninsulares* (people born in Spain) to government and church positions and gave preference to peninsular merchants at the expense of *criollos* (people of Spanish heritage born in the colonies). Royal policies put *criollos* on the defensive, encouraging their incipient feelings of nationalism in the colonies and pride in the native land, its peoples, and resources. The colonial reaction to crown policies is illustrated by the attitude of the Royal and Pontifical University of Mexico’s medical faculty. During the last 70 years of colonial rule, the university faculty refused to allow “foreigners” in its midst. In 1787, the crown ordered the establishment of a botanical garden under the direction of the physician Martín Sessé and a botany course to be taught by the pharmacist Vicente Cervantes, both *peninsulares*. Citing university regulations, the medical faculty refused to accept them into the university body. It took a direct viceregal order to reluctantly swear them as *catedráticos* or professors. Even then, the new appointees were ignored by their colleagues and excluded from meetings and decisions.¹¹ The same sense of nationalism resulted in a long quarrel between the *Protomedicato*’s president, *criollo* physician José Ignacio Garcia Jove, and the director of the Royal Surgical School, the *peninsular* Antonio Serrano. Their differences were much more than the typical professional tensions between physicians and surgeons that were characteristic of the time. The root cause was Garcia Jove’s nationalism and his defense of

local practitioners and interests that made him inflexible and hostile to "foreigners." In the words of a resentful Cervantes, Garcia Jove denounced all Spaniards "as if he were Moctezuma's heir and had his crown stolen from his temples."¹²

The suspicion of foreigners continued after independence with discussions on the legality of appointing non-Mexican medical practitioners to government positions or even as volunteers of the municipal health board.¹³ However, in post-independence Mexico, the role of nationalism and the approach to medicine changed. While late colonial doctors, such as Garcia Jove, were discriminating in their acceptance of foreign innovations, such as the Linnean system, their successors embraced European (mainly French) medicine with enthusiasm. Nationalism now implied leaving the colonial past behind and elevating Mexico to the level of the "civilized nations" of western Europe. France served as the role model in the field of medicine and public health. The medical curriculum was shaped by the French *officiat* four-year program, physicians travelled to Paris to "perfect" their studies, and, with a few exceptions, medical textbooks were French. Nationalist ideas persisted, but now with a different face. By the late nineteenth century this face was changing again, influenced by the Porfirian modernization of the country as Jaffary implies.

The evolution of nationalism, a main thread in the author's argument, is fleshed out in the book's fifth section, "Monstrous Births." As its title indicates, this section is based on the news of abnormal births published in the *Gaceta de México*. The *Gaceta* was a turn-of-the-nineteenth-century publication that included political, social, and scientific news with articles on topics as varied as mortality tables, cures for rabies, formulas to kill scorpions, and medicaments to clean and "tighten the teeth."¹⁴ The *Gaceta* also published items of general interest, such as obituaries of important figures, titles of books for sale, and unusual or "monstrous births." Jaffary points out that, to contemporaries, these events proved the uniqueness of the land; the articles in question reflected the writers' (and we may assume readers') nationalistic pride in both these unusual births and their homeland. The birth of these abnormal children, described as "marvels" in articles and letters, was interpreted as God's manifestation of the colony's bounty and singularity. Such unconventional views in today's thinking, rooted in a pre-scientific epoch, changed as medical science developed in the nineteenth century and came to determine the bounds of normality. With time, monstrous births ceased to be marvels that generated

pride and nationalistic feelings and became scientific anomalies and the object of morbid fascination and shame.

Reproduction and Its Discontents goes beyond the study of the history of childbirth and contraception in Mexico. It successfully brings together fields as varied as legal, social, political, medical, and women's history and provides an overarching view of its central topic. Jaffary's analysis is, therefore, not only an invaluable addition to Mexican and Latin American women's and medical historiography, it is obligatory reading for anyone wishing to increase his or her knowledge in the above topics or draw thematic or national comparisons. We must all heartily congratulate Nora Jaffary for her unique analysis and stimulating ideas, for her contribution to Mexican and Latin American history, and for her well-deserved recognition as the winner of the 2017 Wallace K. Ferguson Prize.

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