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Publication Date

1996

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Storied Health, Embodied Care: Mexican American Women in the Borderlands

by

MarySue V. Heilemann

DISSERTATION

Submitted in partial satisfaction of the requirements for the degree of

DOCTOR OF PHILOSOPHY

in

Nursing

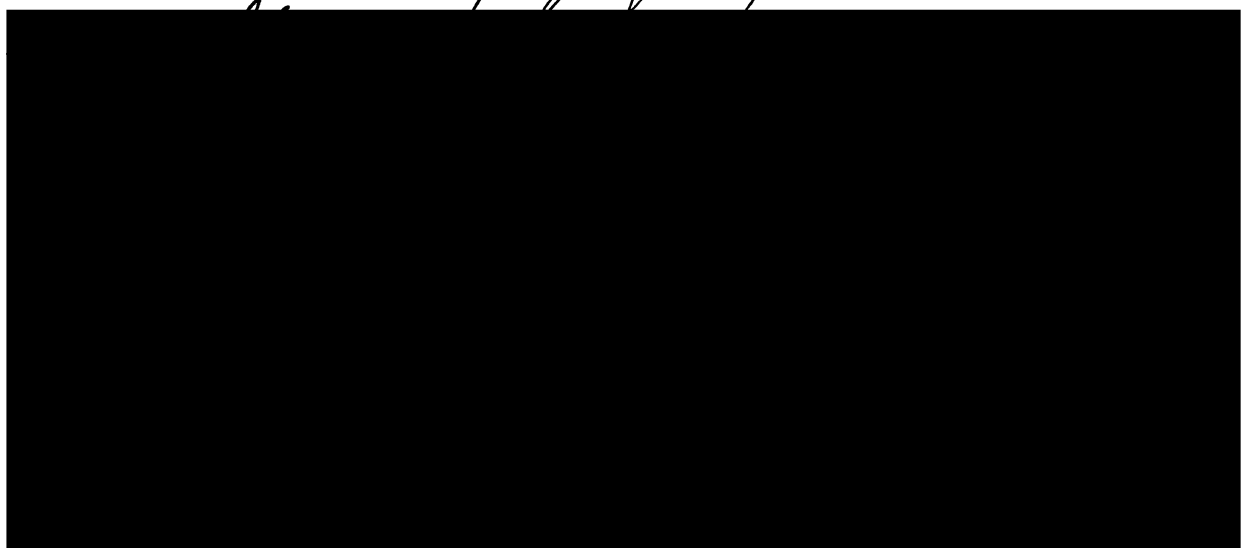
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This is respectfully dedicated to

Veronica Estrella Murillo

**whose intercultural way of living has challenged and inspired me
and whose friendship has been the source of many blessings;**

and

to the memory of

Virginia R. Heilemann

**whose being-in-my-world has influenced me in ways
too numerous to list.**

Acknowledgements

I would like to acknowledge the women who participated in this research first and foremost. Their willingness to share their worlds with me made this project a reality. Secondly, I am indebted to the staff of the two community health centers who facilitated the recruitment of participants for this research. Their support and efforts were invaluable to this project.

Together my committee provided challenge, critique, and encouragement. I am sincerely grateful for their mentoring. Jeanne DeJoseph, my dissertation chair and advisor interpellated me as a doctoral student while I was in the second month of my Master's program. Then, I was astonished! Now, I am grateful for the important role she has played in my journey and growth. Her teaching, insightful encouragement, and support of my ways of thinking have been timely and absolutely invaluable.

Kit Chesla, my primary methodologist and teacher, has challenged me to think more deeply than I knew was possible. Her rigorous scholarship and valuable affirmations have strengthened this research immeasurably. I am grateful to her for her tremendous investment in my growth as an interpretive scientist and scholar.

Adele Clarke taught me how to grapple with "multiple simultaneous realities" and introduced me to many "new" worlds of academia. Her guidance on my pilot study and excitement about scholarship and teaching have been priceless gifts.

Adelaida Del Castillo has had a pivotal impact on my

work, perspective, and my vision for provocative, creative scholarship. I am sincerely grateful that I have had the honor to work with her and for the ways that her life, her thinking, and her style-in-the-world has changed me.

In addition, Alex Saragoza was an important teacher and consultant of my work. His standards for excellence as well as his enthusiastic approach to scholarship and community has been an inspiration. Afaf Meleis and Barbara Van Oss Marin gave me crucial input on the development of the concept of interculturations. Their insights and perspectives helped in strategic ways.

Coursework at other campuses afforded me the chance to work with various professors who have influenced my work. These include Roberto Rivera, Felix Kury, Norma Alarcon, Renato Rosaldo, Herbert Dreyfus, and teaching assistant Sean Kelly. All of these scholars met with me individually, investing in the development of my ideas in ways that advanced my learning. I gratefully acknowledge their influence.

I am grateful to several colleagues including Daphne Stannard, Karel Koenig, Monica Casper, Teresa Drought, Lisa Moore, Deanne Messias, and Veronica E. Murillo. They have been important critics of my work, models of intellectual and professional excellence, and comrades during the long journey.

Several friends donated much in the way of support, encouragement, as well as critical feedback. Among them are Jane Bacon, Wade Baynham, Celia Bergh, Rebecca Carabez, Steve Cole,

Elizabeth Dougherty, Nury Enciso, John Gomes, Marcos Gonzalez, Enriqueta Hinojos, Lisa Hoyte, Carla Huffman, Omana Kaliangara; Janice, Kristy, and Jaime Lemon; Mary Lopez, Debbie Marquez, Mary Mulhardt, Gozil Oxley, Sharon Parmenter, Drew Robilio, Elizabeth Robinson, Maria Elena Sotelo, Tracy Ware, and Noriko Yamamoto. I am deeply grateful to each. Without them, I could not have survived this incredible process.

The encouragement of key people well before I ever dreamed of getting a PhD had abiding influence on my confidence and self respect. I am especially grateful to Kelly Colbert Baynham, Jeannie Crumly Cole, Rene Toolson Doran, Laughlin McCullough, Ken Morris, and John Quincy Young for their generous encouragement and their belief in me.

Very special thanks go to Cheryl Fraser, Jeannette Law, Catherine Turner Paul, John Paul, James Watt as well as my cousin and confidante, Annie Johnson. Their very precious friendship and support became even more valuable as the process intensified and became more challenging.

Finally, I would like to acknowledge my father Ralph W. Heilemann, along with my family: Peggy Heilemann, Paul Heilemann, Heidi, Tom, Krista, and Laura Bavlnka. Their lives, love, support, and respect has meant more to me than I could ever express. And, lastly, from Wisconsin to Chicago to Hollywood and back to Racine: my 99 year old Great-Aunt Clara has been an inspiration to me. Her strength, practical wisdom, sharp mind, and personal encouragement have been blessings to me.

STORIED HEALTH, EMBODIED CARE:

MEXICAN AMERICAN WOMEN IN THE BORDERLANDS

MarySue V. Heilemann

University of California, San Francisco, 1996

The trend towards reduced health for second generation Mexican American women when compared to Mexican women who are immigrants to the U.S. has not been adequately explained. To fill this gap, I employed the methodology of interpretive phenomenology along with "new" ethnographic techniques to explore the ways that second generation Mexican American women worked out their gendered identities as strategies for "taking care." My focus was on the contexts of women who were mixing socio-cultural practices in the "Borderlands" of the U.S. In place of the commonly used unidirectional concept of acculturation, I developed the concept of "interculturations" to describe the multi-directional changes experienced by the twelve women of this study who utilized community health centers serving women with low income. "Interculturations" was useful to understand the ways that cultural meanings both mixed and clashed for these women, all daughters of Mexican immigrants, who were balancing traditional Mexican, alternative Mexican American, and mainstream Anglo-American expectations and practices related to gender. To ground this exploration of gendered positions in the daily practices of Mexican American women, I drew on the work of gender theorist Judith Butler (1990, 1993) and Chicana

anthropologist Adelaida Del Castillo (1993). I also expanded Marxist philosopher Louis Althusser's (1979) concept of "interpellations" to address power dynamics within personal relationships. From in depth interviews and limited participant observation I learned that some of the women invoked alternative gender codes to sanction untraditional behavior and to maneuver within complex socio-cultural power dynamics in order to subvert oppression in relationships. They employed practices of negotiation, defensive resistance, and contestation of traditional expectations to "take care." This research focused on Mexican American women, however the concepts of gendered identities, interculturations, and interpellations could be extended to research among others who are living amidst shifting cultural processes and practices. This project reflects contemporary postmodern scholarship in nursing, cultural studies, and gender studies.

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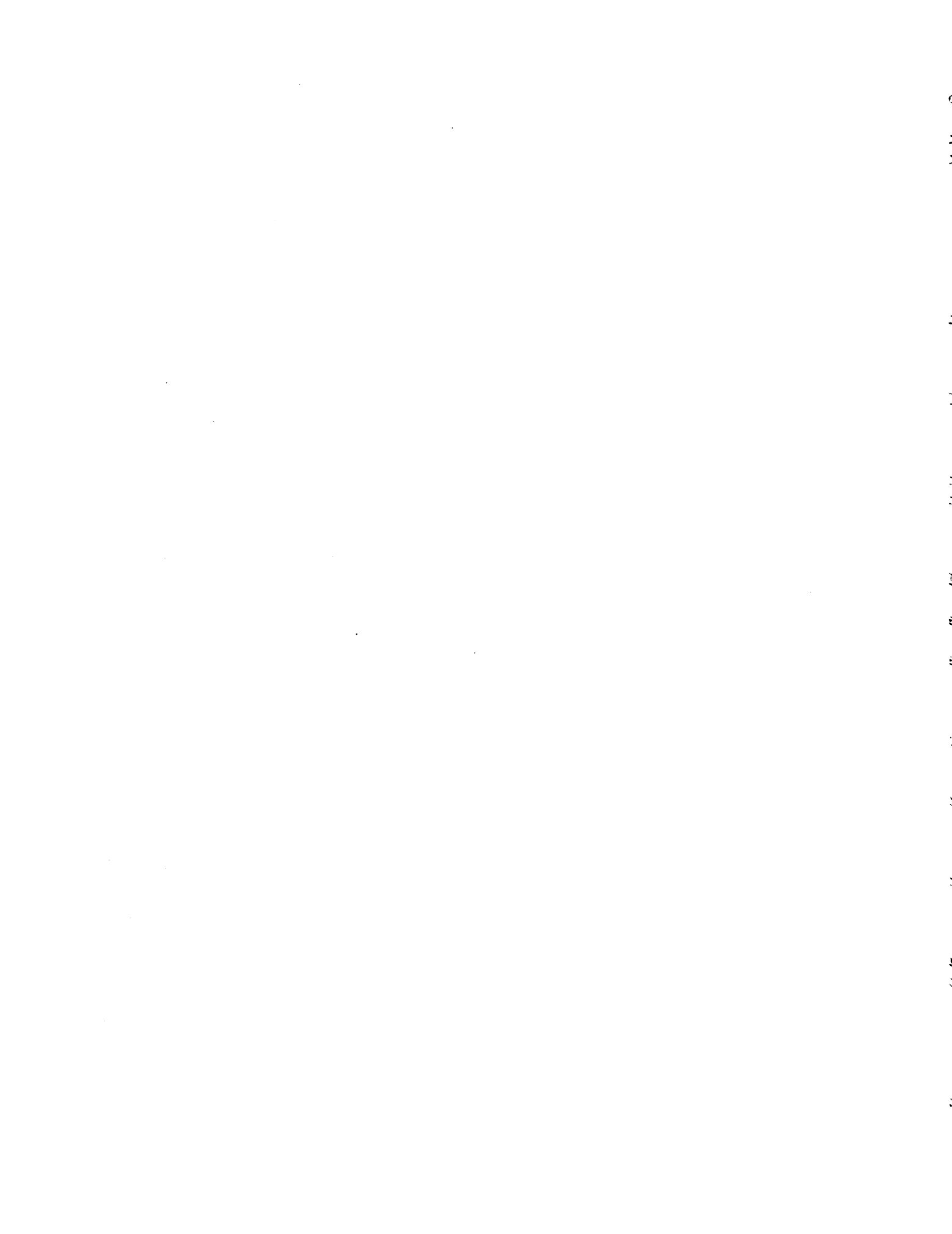
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Chapter 1

Introduction

In this research, I focused on the experiences of twelve women who were daughters of Mexican immigrants living amidst mixing cultural influences in the United States (U.S.). The lived experiences of the women included the mundane and the complex because Mexican American women deal with multiple forces as part of daily living in the U.S. They encounter both physical and figurative borders every day. The physical and symbolic borders of actual geographic places as well as abstract spaces of significance form landscapes of meaning in the "borderlands" (Anzaldua, 1987) of the lives of Mexican American women. As both a place and a process, the metaphor of the borderlands is useful to describe the phenomena of mixing cultural practices, shifting relational dynamics, inconsistent family expectations, and uneven understandings of identity for second generation Mexican American women. In the processes and places of the borderlands, women participate in complex processes of cultural negotiations that evolve within relationships that include multiple generations.

Rooted by the rich histories of parents and grandparents who lived in borderlands of years past, Mexican American women are situated in contexts that both constrain and open up avenues for thriving. Boundaries, borders, and bridges show up to different women in different ways as each

cope with everyday socio-cultural mixings. In the midst of shifting and evolving processes, women are engaged in agendas for "taking care" of themselves, their families, and their relationships.

However, despite participation in strategies for coping with changing cultural elements, research data shows that second and third generation Mexican American women experience poorer health than immigrants or women living in Mexico. The following discussion will provide background information about this phenomena.

Background

Although the United States of America has one of the highest standards of living in the world, Latinas who leave their home in a third world country to come to the U.S. have been noted to experience poorer health once they arrive (Novello, Wise, & Kleinman, 1991). The Council on Scientific Affairs of the Journal of the American Medical Association noted in their 1991 Report on Hispanic Health in the United States that as Latinos become more acculturated, their health status worsens.

The trend towards poorer health for second generation Mexican Americans as compared to immigrants who were born in Mexico is striking. Studies reveal that Mexican Americans born in the U.S. have higher rates of depression (Golding & Burnam, 1990), suicide ideation and suicide attempts (Sorenson & Golding, 1988), phobia (Burnam, Hough, Karno,

Escobar, Telles, 1987), multiple sexual partners (Marin, Gomez, & Tschann, 1993), sexual activity among teens (Aneshensel, Becerra, Fielder, & Schuler, 1990), drug use among teens (Swanson, Linskey, Quintero-Salinas, Pumariega, & Holzer, 1992), and drug abuse in general (Burnam, Hough, Karno, Escobar, Telles, 1987) than Mexican Americans who were born in Mexico. Second generation Mexican American women have a greater chance to deliver an infant of low birth weight than do first generation women (Guendelman, Gould, Hudes, & Eskenazi, 1990) or women in Mexico (JAMA Council on Scientific Affairs, 1991). That is, an infant born in Mexico has a better chance for a higher birth weight than a Latino infant born in the U.S. (Ventura, 1992). Second generation Mexican American women drink more alcohol (Caetano & Mora, 1988) and are at higher risk for alcohol misuse than are immigrants or Mexican women (Cervantes, Gilbert, Synder, & Padilla, 1991). They also smoke more cigarettes than do Mexican women (Perez-Stable, Marin, & Marin, 1994). During pregnancy, second generation Mexican American teens engage in more high risk behaviors such as alcohol and drug use than do pregnant teens in Mexico (Mendoza and Litt, personal communication, April 28, 1992). As teen mothers, Latinas in the U.S. have higher interpersonal stress than do teen mothers living in Mexico (DeAnda, 1985). Mexican Americans born in the U.S. in general have higher depression scores than those born in

Mexico (Golding & Burnam, 1990). Amidst these processes of poorer health, Latinas are also dealing with more pregnancies than the general U.S. population. They have a birth rate that is 54% higher than the non-Latino population in the U.S. (Ventura, 1992).

Summarizing from these findings, it can be seen that U.S.-born Mexican Americans experience more mental health problems and are involved in more risk taking as well as substance use than are Mexico-born Latinos. Other research has shown that the incidence of differing physiological patterns or pathology between the two groups includes a slightly higher chance for U.S.-born Latinas to give birth to infants of lower birth weight. Acculturation research has provided some information about the mental and general health of Latinos. However, it has failed to reveal the reasons for these trends. Nonetheless most researchers, clinicians, and scholars who focus on Latino communities agree that the mixing of cultural attitudes, values, and behaviors is vitally involved in the process. A variety of research has been done to address the problematic issues related to acculturation and Latino communities although researchers have not been able to agree upon the the specific definition of acculturation (Marin & Marin, 1991). Thus, Chicano researchers and scholars have suggested that other studies are needed to advance understandings of the

intergenerational processes of acculturation (Vega, 1995; Hurtado, 1995, Marin & Marin, 1991).

Statement of the Problem Explored in the Research

Much research with Latinos/as of Mexican descent focuses on immigrants and, consequently, less is understood about the context of the lives of subsequent generations of Mexican Americans who are experiencing poorer health status than immigrants or their peers who remained in Mexico. Little is understood about the phenomena of constantly mixing cultural processes or how it might be related to the experience of declining health.

In addition, although much research focuses on Latinos living in poverty, fewer studies target Latinas who are employed and are receiving Medi-Cal but who are of low income. Specifically related to issues of women's health, Latinas with low income more commonly use federally subsidized, county-run family planning clinics but actually receive less general medical care during clinic visits (Redecki & Bernstein, 1989). Latinas with low income also more often express a desire for a different source of family planning care (Radecki & Bernstein, 1989) and are more likely to receive late or no prenatal care than white women in general when pregnant (Ventura, 1992). Furthermore, Latinas of any/all income groups have twice the rate of cervical cancer than do non-Latina white women (Novello, Wise, & Kleinman, 1991).

It is important to note that the line between living with low income and living in poverty can be precariously thin. Stresses related to living with a low income while supporting children, with or without a spouse, and maintaining a home can aggregate, enhancing the chance for slipping into poverty. The percentage of children living in single-mother families in 1991 increased from previous years. Of these, 60% of Latina single mother families were poor in 1991, as were 60% of African American and 40% of Anglo American single mother families (U.S. Bureau of the Census, 1992 cited in Huston, 1994). Homelessness, violent neighborhoods, poor schools, poor health conditions, inadequate housing, and environmental toxins are just a few of the added stressors that mark the environments within which poor people in the U.S. live (Huston, 1994). Indeed, poverty is a risk factor for a variety of health problems (Huston, 1994). For example, some disease rates are higher for poor women. This is the case for cervical cancer (Najeem & Greer, 1985), a disease that Latinas already have in higher numbers than other ethnic or racial groups.

The problems related to living with a low income, in addition to the trend towards declining health (increased low birth weight, increased mental health problems and risk taking, and increased substance use) for second generation Mexican American women, led me to the focus my research. In addition, my clinical experience as a nurse working with

women from various Latino ethnic and income groups over a 14 year period drew me to focus on second generation Mexican American women with low income. While I have not thoroughly discussed the complex and complicated issues related to class distinctions in the U.S., it is important to note that I focused on women with low income exclusively in this research. I chose to study women with low income BECAUSE of the added stressors they encounter as the "working poor" and because they are of a group that is often overlooked despite the fact that they primarily use community health centers (which are not uncommon sites for research). More in depth discussions of the issue of class are needed in future work.

In this research, I explored the phenomena of "taking care" from the women's perspective because it was a salient theme in the narratives of the Latinas of my pilot study (as will be discussed in Chapter 3) and because it was not evident to me that researchers or clinicians were asking questions that addressed basic interpretations related to health from the perspective of Mexican American women who are of low income (rather than from the perspective of educated, middle class researchers who are often Anglo Americans).

Also, I developed and utilized the concept of "interculturations," (defined in Chapter 2) because the traditional concept of acculturation did not adequately address the experiences women discussed in interviews with

me. I turned to Latino/Chicano scholars for insight and initially drew from the work of Gloria Anzaldua (1987) and Renato Rosaldo (1989) to develop the concept of interculturations. I then used the concept of interculturations to enhance my analysis and to focus my inquiry in relation to what had previously been explored with acculturation frameworks.

Purpose of the Study

The purpose of this study was to explore, analyze, and describe the ways that second generation Mexican American women with low income "take care" in relation to issues of reproductive health amidst changing cultural contexts. The aim of the study was to gain more understanding of the effect of changing cultural ways on identity and taking care concerns through a focus on interculturations rather than acculturation or assimilation. The goal was to bring the voices and experiences of Mexican American women with low income to the fore in order to enhance the understanding of their concerns about taking care for clinicians, researchers, and scholars.

However, in this research, the women's stories revealed that among the many strategies that women employed to "take care," the most salient strategy was the task of working out gender identity amidst cultural contexts. That is, the process of working out gender identity was central to the ways women took care of themselves. Because of the

historical phenomena of change due to immigration and mixing cultures in the U.S., narratives revealed intercultural clashes of background meanings and brought the women's concerns in relation to gendered expectations to the fore. Because of the influence of traditional, idealized Mexican gender norms, stories about problematic gendered dynamics brought experiences of interpellation and power dynamics to the fore. Narratives about bodily experiences of pregnancies, miscarriages, and other health problems revealed multiple ways that women engaged in "taking care" and how meaning was relevant through gendered embodied experiences.

Significance of the Study

Because many qualitative research studies in the past have focused on Mexican American women based on acculturation models, this research offers an alternative approach. Through the concepts of interculturalizations and interpellations, new avenues for investigating lived experiences are opened up. Chicano/a researchers have asserted the need for research that addresses the issues of acculturation but that focus on adaptation of Latino families rather than dysfunction (Vega, 1995), research that focuses on how Latino families negotiate sexuality (Hurtado, 1995), and research that explores the interaction of cultural identity and gender (Felix-Ortiz, Newcomb, & Myers, 1994). Thus, this research will make a contribution to both

the research and theoretical literature in ways that Chicano/as have identified as important. Not only will this expand the knowledge about Mexican American women, but it will have important implications for nursing education in relation to the culture of some Latinos/as in the U.S. and for policy designed to address issues relevant to Mexican Americans.

Study Design

I utilized the methodology of interpretive phenomenology along with new ethnographic techniques for data collection and analysis for this research. This combination drew on the rich history of anthropological studies of culture and the philosophical rigor underlying phenomenological inquiry and analysis. New ethnography provided important guidance and caution for data collection as well as a framework for embarking upon critical post modern analyses of myself as the researcher and my ethnographic interpretations. Phenomenology provided a rigorous analytic method for deeper understanding grounded in the women's daily coping. Phenomenological methodology catalyzed a continuous unpacking of my interpretations by focusing and refocusing me on the meaning of phenomena for women as embedded in complex relationships. Based on these two methods, I used interviews and participant observation to gather data on twelve Mexican American women who were each the daughter of Mexican immigrants.

Organization of the Dissertation

The chapters that follow this introduction describe this research project and pertinent theoretical or philosophical issues. In Chapter 2, I will present information about acculturation research, models, and findings. Then I will introduce my conceptualization of "interculturations" as an alternative to the concept of acculturation.

In Chapter 3, I will explore the method interpretive phenomenology and new ethnographic techniques. As a prelude to the discussion of method, I will provide a discussion of post modern critiques of modern conceptions of the self and the issue of "Truth" because of its importance for my way of approaching the women of this study. I will also include a brief discussion of some distinctive features of feminism which have had a significant influence upon my way of approaching this research. The discussion of the two research methods of new ethnography and interpretive phenomenology will then be presented, followed by the introduction of important terms or concepts for data analysis. Finally, I will present information about the setting, sample, and techniques I employed in data collection and analysis.

In this research I did not approach the women of my study only as detached "subjects" who have accomplished a mind/body split such that they have assigned meaning to

themselves and things in their worlds. Rather, in this research, I sought meaning as it emerged within stories and in conversations that revealed the women's embeddedness in relationships with partners, parents, or siblings. Because of the power dynamics at work within relationships, I will address the phenomena of interpellation in Chapter 4 to facilitate understandings about women's personal experiences of power dynamics in relation to gender and ethnicity within everyday settings (of home or work) as well as within therapeutic or clinical settings. This will be an analysis of the taken-for-granted power dynamic at work when women, in particular, are interpellated as gendered subjects or as therapeutic subjects.

All of the women of the study discussed expectations of others in relation to the traditional Mexican gender norms. Consequently, in Chapter 5 I will present a theoretical analysis of gender norms as regulatory. This will include a theoretical discussion of traditional socio-cultural gender norms and a critical analysis of the regulatory function of the norms when invoked to interpellate women as part of the mundane processes of everyday life. Through these interpellations as "women," "wives," "daughters," or "Mexicans," women were formed as subjects and became vulnerable to the power of the norms through expectations of others. This had effects on gender identity, gendered

relations, and the ways women understood the meaning of experiences as embodied.

In Chapters 6 through 11, I will present analyses of the data, interpretations, and discussion. Chapter 6 will serve as an introduction to four salient themes from the data as well as an introduction to the paradigm cases of Gloriana, Lorena, Alicia, and Ines which will follow as Chapters 7, 8, 9, and 10 respectively. These cases provide detailed interpretations with multiple quotes from interviews. The purpose of providing detailed case studies is to protect the specificity of each woman's experience so as to decrease the tendency for readers to generalize the experiences of Mexican American women into stereotypes. Each of the four paradigm cases reveals a distinct style for working out gendered identities within the greater agenda of "taking care" amidst changing cultural understandings and expectations. Through detailed interpretations of the women's practices of contestation, invocation of covert and sanctioned norms, negotiation, and defensive resistance I will discuss the women's strategies for taking up their gendered identities in the Borderlands.

In the style of new ethnography, I have integrated the work of anthropologist Adelaida Del Castillo (1993), sociologist Pierrette Hondagneu-Sotelo (1994), throughout chapters 6 through 10. Their work specifically focuses on issues related to gender identity for Mexican women living

in Mexico and Mexican women who immigrated to California (respectively). Del Castillo's study of Mexican women and Hondagneu-Sotelo's study of immigrant women, provide important sociological and historical rootings related to the evolution of gender identity amidst traditional norms for Mexico-origin women. I have also integrated the work of other scholars and researchers.

In Chapter 11, I will present a more in depth discussion of the dimensions of interculturalizations. This will include the dimensions of meaningful spaces within clearings (Dreyfus in Magee, 1988), geographic place-based meanings, and temporality.

Finally in Chapter 12, I will address the future implications of this research. Because this research revealed that the women interpreted general health matters to be synonymous with reproductive health matters, the implications of this research reach beyond the specific area of women's health. Thus, I will discuss the implications of this work for clinicians, researchers, scholars, educators, program planners, and analysts of public policy.

Chapter 2

Research With Mexican American Women: From Acculturation Models to Interculturations

The phenomena of mixing cultures has implications for the health of thousands of people and in particular for Mexican Americans. Increasingly, clinical nurses and nursing scholars are recognizing the importance of the social, emotional, and cultural experiences of people who are moving between borders in and outside of the U.S. Although traditional notions of cultural adaptation and acculturation have explained some aspects of the phenomena, however, they are not adequate for describing the multifaceted cultural exchange that occurs when diverse people live alongside each other. Just as the reality of transnational migration circuits are disrupting traditional definitions of migration for Latinos (Rouse, 1991), post modern interpretations of cultural mixings are destabilizing modern notions of acculturation. This is of particular importance to nurses working with Latinos because the processes of movement between cultures has important effects on the health seeking practices, daily stress and coping strategies, as well as the health or illness beliefs of the diverse Latino population in the U.S.

Among the multiple growing ethnic groups in the U.S. are 22.4 million Latinos. The population of Latinos grew over seven times as fast as the rest of the nation's population during the 1980's. Approximately 13.5 million

Latinos are Mexican American (Bureau of the Census, 1993). In this discussion of movement between cultures, I will specifically focus on second generation Mexican American women. Because the processes of adaptation for second generation Mexican American women are similar to but distinct from those of their immigrant parents, an analysis of the processes of cultural mixing in daily lived experience is warranted.

The project of overall description of this phenomena is a large task due to the diversity and complexity of Latino populations. Although I will present a variety of research done related to the phenomena, each represents only partial understandings and local expressions of cultural mixing. First, I will present examples of research studies from the literature that explore health related variables to draw attention to the kinds of research that has been done in relation to issues of acculturation. These studies compare Mexican American women according to language spoken, possession of legal documentation for citizenship, and place of birth. Next I will address the theoretical ambiguity around the concepts acculturation, assimilation, and cultural identity because of their common use and confusion in the literature. I will follow this with a discussion of some misleading assumptions that may threaten the validity of research with Mexican Americans. Then, I will explore issues related to the use of acculturation scales in

research and the theoretical development of biculturalism. Finally, I will present a new conceptualization of the phenomena of cultural mixing that I have called "interculturations." To develop this concept, I have drawn upon particular concepts used with interpretive phenomenology in addition to Chicana poet Gloria Anzaldua's (Anzaldua, 1987) concept of the "Borderlands" and Chicano anthropologist Renato Rosaldo's (1989) "redefinition" of culture. The issues of unequal power dynamics among people of differing races, classes, and genders will be addressed in Chapter 4 through a theoretical discussion of the concept of interpellations.

The concept of "interculturations" draws attention to the properties of the phenomena of cultural mixing and gives meaning to perceptions I have had while working in the U.S. as a Public Health Nurse, perinatal staff nurse, and women's health nurse researcher with women from such diverse places as Mexico, Puerto Rico, Cape Verde, Vietnam, Cambodia, and Guatemala in addition to U.S. born white and African American women. Although interculturations theoretically exist amidst the cultural mixing of any cultural or ethnic groups, I am introducing interculturations in the context of my research with second generation Mexican American women. I will not address any other cultural or ethnic group at this time.

In this project, I will use the term "Latino" rather than "Hispanic" as a descriptor when citing studies or authors who are referring to larger heterogeneous groups of people with a national or cultural heritage descending from Mexico, Puerto Rico, Cuba, Central America, South America, or the Dominican Republic. I will use the term "Mexican Americans" to describe Americans who trace their ancestry to Mexico. The term "Chicano" will be used when it has been particularly specified by an author or researcher.

Selected Review of the Literature

As was discussed in Chapter I, the Council on Scientific Affairs of the Journal of the American Medical Association noted in their 1991 Report on Hispanic Health in the United States that as Latinos become more acculturated to the U.S., their health status worsens. Increased acculturation is not necessarily an indicator of better health (Barbara Van Oss Marin, personal communication, 6/30/95). Thus, a bias that automatic positive, constructive outcomes always result from the process acculturation disregards important contradictions such as this trend towards declining health status of second generation Latinos. Unchallenged assumptions of this sort can make research problematic. Some researchers however, avoided the use of the term, "acculturation" and implications of its meaning by doing research that compared Latinos without using an acculturation instrument. In this

review of the literature, these studies will be described first.

Comparing Latinos in Terms of Language Spoken

Health science researchers have compared groups of Latinos in terms of what language they spoke. Despite the disagreement about ways to identify acculturation (Marin & Marin, 1991), some researchers have reported language ability to be the easiest and most reliable shorthand measure for evaluating acculturation level (Marin & Marin, 1991), connecting English usage with a more acculturated population.

Swicegood, Bean, Stephen, and Opitz (1988) studied the relationship between language usage and fertility in the Mexican- origin population of the US. Because of the higher rates of fertility for women born in Mexico but living in the US, these researchers singled out this group of women and found that there is a negative correlation between English proficiency and the cumulative fertility of Mexican-origin women.

DeAnda (1985) assessed the level of stress and social support among Latina teen mothers and compared the psychosocial risks of Spanish speaking teens with English speaking teens. She found that English speaking Latina teens reported higher levels of emotional and interpersonal stress during pregnancy than did monolingual Spanish speaking Latinas, African American or white teens.

Comparing or Describing Latinos in Terms of Documentation Status

Some researchers have studied Latinos by comparing groups of Mexican American citizens to Mexicans living in the U.S. without documentation. Chavez, Cornelius, and Jones (1986) compared prenatal and postpartal factors in groups of Latinas according to documentation status. Interviews were done with Mexican immigrant women and their spouses in the San Diego area. These researchers found that undocumented mothers had a higher rate of giving birth with little or no prenatal care, a lower rate of postpartum and neonatal examinations, and lower rates of Pap smear exams than did Mexican women who were in the U.S. with legal documentation.

A group of sociologists and social anthropologists utilized ethnosurvey, a combination of ethnography and semi-structured interviews, to study undocumented migration from "sending communities" in Mexico to "daughter communities" in the U.S. (Massey, Alarcon, Durand, & Gonzalez, 1987). Their qualitative study was published in a book, Return to Aztlan. It describes migrants' processes of "integration" into American society. They found that integration increases as migrants spent more time in the U.S. if avenues for legalization were open to the migrant. Integration also increased with the acquisition of personal ties in the U.S. The researchers determined that a migrant was more

"integrated" if they had children who were born in the U.S., if they obtained steady employment rather than seasonal work, and if they learned to speak English. Those who participated in institutional agendas in the U.S. were also more integrated. Examples included those who sent children to school, those who were members of voluntary organizations (e.g., soccer clubs), or those who used social services such as WIC or food stamps. Finally, the more integrated migrants experiences a shift of orientation from Mexico to the U.S.

Comparing Latinos By Place of Birth

Guendelman, Gould, Hudes, and Eskenazi (1990) utilized the Hispanic Health and Nutrition Examination Survey (HHANES) to study generational differences in perinatal health among the Mexican American population. They found that U.S.-born Mexican Americans were at 60 percent higher risk for low birth weight (LBW) than Mexico-born women. Second generation Mexican American women (US-born) showed a higher educational and income status and more use of health care relative to their first generation counterparts (Mexico-born). Behavioral characteristics, such as smoking and drinking, actually increased in the second generation women. The latter group also had higher rates of physician-diagnosed diabetes and heart problems, but this could have been a result of improved access to care rather than to poor health status. The data revealed no significant effects of

generation on miscarriage rates. The authors reported using generation as a proxy for acculturation in this study. Although generation was an important variable, especially in terms of incidence of LBW, a critique of this research assumption is that the multifaceted phenomena of acculturation is much more complex than generation.

Another study focused on sociocultural factors and perinatal health in a Mexican American community in Chicago (Gaviria, Stern, and Schensul, 1982). An interview instrument was developed to include both qualitative and quantitative data which was implemented with 89 women, aged 16-41 years. Sixty of the women were immigrants who were born in Mexico and 29 were Mexican Americans born in the U.S. The women born in Mexico were separated into a "recent arrival" group (having immigrated in the last two years) and a "long-term" group (having been in the U.S. for more than two years). Long term migrants from Mexico were found to seek prenatal care earlier than did Mexican American women or those of the "recent arrival" group. The traditional postpartum practices of the cuarentena (a 40 day rest period for women after childbirth) were found to be persistent among the immigrants regardless of the time of migration to the U.S. and present among some Mexican American women. Long term immigrants also tended to use more private prenatal services than recently arrived immigrants or Mexican Americans. The technique of further describing

women born in Mexico but living in the U.S. in terms of time of arrival in the U.S. is useful. The authors acknowledged that "the acculturation process" involves a process of selective utilization of resources on the parts of Latinas living in the U.S. They also noted that their findings indicated that the women themselves were making a different sort of evaluation of the behaviors they chose to retain or discard and were being selectively influenced by the culture of the American medical system as it related to childbirth.

Defining Concepts

Because research with Mexican Americans presents multiple issues related to the ways people adapt to changing values, practices and cultural ways, a clarification of terms is useful. The concepts of acculturation, assimilation, and cultural identity are three terms that are often used in research among Latinos, whether a person is an immigrant or the descendent of a long line of Mexican Americans born in the U.S.

Acculturation

The concept of acculturation refers to the changes that are experienced by a group of immigrants who move to a new area and modify their customs, habits, language usage, life style, and value orientations to be more like those of the "host culture" (Marin, Sabogal, Marin, Otero-Sabogal, & Perez-Stable, 1987; Olmedo, Martinez, & Martinez, 1978; Rogler, Cortes, & Malgady, 1991). The term has been used

clinically as well as in research. Historically, acculturation scholars and researchers have assumed that acculturative changes always occur in the direction of the dominant group of an area (Rogler, Cortes, & Malgady, 1991; Keefe, 1980; Betacourt & Lopez, 1993; Rogler, 1994). They assume that the immigrant group's attitudes, values, and behavior undergo unidirectional change to become more like those of the majority group. Theoretical concepts such as "absorption" and "imitation" have often been used to describe the experience of Latinos in the U.S., assuming that immigrants and their offspring will change (or "acculturate") in the direction of middle class white "society" and away from their original cultural ways.

However, a serious limitation to the concept of acculturation is the assumption that people "acculturate" in one particular direction. Based on this conceptualization, bipolar models have been developed that contrast "Hispanicism" with "Americanism." These models are based on a "mutual exclusion" perspective that assumes that increments of involvement in an American "host" society culture necessarily entails corresponding decrements of disengagement from the immigrant's traditional culture (Rogler, Cortes, & Malgady, 1991). It is unlikely that acculturation occurs in such an orderly, systematic fashion.

Acculturation usually involves a changing of practices (Keefe, 1980; Ortiz & Casas, 1990), behaviors (Marin &

Marin, 1991; Marin, Sabogal, Marin, Otero-Sabogal, Perez-Stable, 1987; Betacourt & Lopez, 1993; Cuellar, Harris, & Jasso, 1980), or values (Betacourt & Lopez, 1993; Rogler, 1994). However, the expectation that immigrants only undergo unidirectional change limits understandings of acculturative experiences. For example, Latino immigrants in California may have daily contact with a variety of people from diverse racial, ethnic, and socioeconomic backgrounds including lower, middle, or upper class African Americans, Korean Americans, Filipino Americans, Viet Nameese Americans, or Anglo Americans of European descent. I contend that acculturation only occurs in the direction of middle class whites is limiting and unlikely.

Assimilation

Assimilation refers to a complete erasure of the original cultural ways of the people of one group so that they can become as similar as possible to the people of the majority group. Assimilation has been theorized to be a process in which members of one cultural group become fully integrated into the cultural, social, and political life of a new culture (Burnam, Telles, Karno, Hough, & Escobar; 1987). The assimilated members change to completely identify with the dominant culture. Vontress (1981) referred to assimilated immigrants as those who were so committed to becoming "real Americans" that they indiscriminately changed their social and cultural

interests, identities, and allegiances in their eagerness to "blend-in" with the white middle class majority. These individuals completely disregarded their original ethnic community.

Hayes-Bautista, Schink, and Chapa (1988) listed Anglo-conformity and the idea of the "melting pot" as types of assimilation. They described Anglo-conformity as the process of immigrants taking on language and cultural patterns based on the English traditions of Protestants of Northern or Western Europe. The melting pot ideal included the vision that immigration to America would eventually produce a new culture and a new people. This would theoretically occur due to intermarriage and amalgamation. The notion of a melting pot of assimilated Americans who gave up their ethnic identity to become "normalized" or "Americanized" is a problematic metaphor for the people of the United States (Matthew, 1970; Hirschman, 1983; Golick & Chin, 1983; Szapocznik & Kurtines, 1980). It assumes that a melted down "modal" American citizen exists. Chicana scholar Gloria Anzaldua criticized the melting pot notion as defunct and imperializing (Anzaldua, 1990).

Cultural Identity

Cultural identity has sometimes been erroneously used as a synonym for acculturation. Although some health research have problematized the relationship between the two concepts, many have used cultural identity and acculturation

interchangedly (Saldana, 1994). Identity refers to the issue of "who we are" and "where we're coming from" (Taylor, 1991).

Felix-Ortiz, Newcomb, and Myers (1994) defined cultural identity as a descriptor that allows for a multidimensional conceptualization along various domains and recognizes a distinct process that occurs as part of personality formation. LaFromboise, Coleman, and Gerton (1993) have identified cultural identity as the development of a "sense of self" in relation to a culture of origin. I contend that cultural identity is not something that evolves in a linear fashion as if approaching a goal or finished product. Furthermore, cultural identity is not a static characteristic nor is it genetically determined. Consequently, it is not easily defined, encapsulated, or articulated. Cultural identity is a complex process of both 'being' and 'becoming' that undergoes constant transformation due to the continuous play of history, culture, and power (Hall, 1990). This involves the constant negotiation of past histories with present intersections of gender, race, class, ethnicity, and place. Although the ongoing development of a person's sense of self in relation to a culture involves changes that may occur in customs, habits, language usage, life style, and value orientations, the process of change referred to as acculturation specifically refers to changes that a group of immigrants

and their offspring make to be more like the people of the host culture (Rogler, Cortes, & Malgady, 1991). Thus a person's changing identity may involve acculturative changes but the two processes are not the same phenomena.

Correcting Misleading Assumptions

Stereotypes Flatten Understanding of Identity

Assumptions can cover up the lack of differentiation between the concepts of acculturation and cultural identity and lead to theoretical misunderstandings. For example, assumptions about the behavior and "nature" of Mexican American women may be due to a failure to identify the many nuanced dimensions of a Mexican American woman's sense of self (identity) and the various processes of acculturation. This can cause a consolidation of the concepts of identity and acculturation into an essentialized stereotype of "The Latina" or "La Chicana." Such a stereotype was criticized by Dr. Sally J. Andrade of the Intercultural Development Research Association in San Antonio, Texas who saw that the typical social science representation of "the Chicana" is that of a mother and producer of large families who is married to an authoritarian and domineering man (Andrade, 1982). Other stereotypes depict Latinas as self-sacrificing, passive women who live within rigidly defined sex roles (Gibson, 1983).

Generalizations of this sort stifle awareness of the vast diversity among Mexican American women in the U.S. and

the different ways that they are involved in cultural mixing, especially in relation to gender identity. Such generalizations that refer to ambiguous theoretical notions can lead to stereotypic assumptions about the health care needs of Latinas as women. Assumptions about Latinas will lead to assumptions about their reproductive health care needs. Thus, it is important for clinicians and researchers to envision the variation of the sexual identities of Latinas, the differing styles of relationships that Latinas have with their sexual partners, as well as the varying needs Latinas have related to their bodies. Assumptions influence how researchers design studies including the questions that they will and will not ask, as well as how they measure the results. Therefore, theoretical clarity will decrease confusion and allow for increased clarity in research questions and research study designs. A feminist analysis would set forth the question of whose interest is being served when the diverse spectrum of variation among women is not recognized (Harding, 1987; personal communication, Jeanne DeJoseph, 11/9/96).

Acculturation and Immigration are Different Processes

Without recognition of the history of immigration of the U.S., which extends back beyond the 1800's (as will be addressed in greater depth to follow), clinicians, scholars, or researchers may assume that all people of color, including Mexican Americans, are immigrants and are involved

in a process of "acculturating" to be more like the majority population. Assuming that a geographic move set them up with the need to "acculturate" to a new context, a researcher may use a tool for measuring acculturation simply because a population is made up of people of color. Such an assumption may reveal underlying presuppositions that all whites in the U.S. were born here, that no whites are acculturating, or that whiteness is a "normal" or "regular" state. Golding and Burnam (1988) pointed out that investigators have often confounded immigration status and acculturation in their research, resulting in reports on the effects of one factor but not the other, without controlling for the influence of other demographic or socioeconomic characteristics on cultural effects. The conflation of acculturation with immigration can be avoided by designing research that accounts for the two as separate phenomena.

The situation for many Mexican Americans in the U.S. contradicts this assumption in an important way because Latinos have lived in what became the U.S. for multiple generations. That is, many of the ancestors of Mexican Americans did not, in fact, immigrate. Rather, years ago the ancestors of many Mexican Americans "stood still in ancestral homelands while the border moved southward" (Rosaldo, 1994). These individuals had to adapt to changes that came with the new, northern European settlers. In 1848, the government of Mexico ceded half of its territory

in the signing of the Treaty of Guadalupe Hildalgo after the Mexican war. This included what is now Arizona, California, parts of Colorado, Texas, Utah, Nevada, and New Mexico (Barrera, 1979). At least 80,000 Mexicans in the ceded territories found themselves being treated as an "alien culture" in the land of their ancestors (King, McRae, & Zola, 1993, p.264). In addition, generations of Tejanos (Texas Mexicans) were faced with devastating challenges after the Texas Revolution of the 1830's and the Mexican American War in 1848. Some stayed on their land, learning to accommodate the European settlers, but others moved south to land that was retained as "Mexico." Still others were forced to abandon their land or were killed by settlers, ranchers, or merchants who moved into Texas (Montejano, 1987; Barrera, 1979). Thus, consequent to changes in demographics and power, many Mexican people in what became the territorial U.S. dealt with the challenges of European and European American ways even if they were not immigrants.

No Cultural Group is Monolithic

Although many Latinos are from the same geographic place, it is inappropriate to assume that all Latinos recognize and practice the same cultural traditions or customs in the same ways. Different Latinos trace their ancestry through differing countries of origin, unique family histories, varying ideologies, contrasting socio-economic classes, and separate lineages. The differing

practices of everyday life, traditions, and beliefs among low, middle, or high income Mexicans, for example, influence both identity formation and acculturation for Latinos. This contributes to the complexity and diversity of each person's particular context.

An example of beliefs that may differ greatly among Latinos are religious beliefs. A common generalization is that all Latinos are practicing Catholics with values congruent with the teachings of the Church. In fact, Latinos vary in their religious affiliations within and outside of Christianity and may interpret their religion or faith in multiple ways. The meaning and priority of different religious symbols varies for Latinos, including that of Mary the Virgin Mother of Jesus. Catholic theologian Jeannette Rodriguez (1994) noted the variety of symbols of importance for Mexican American Catholics may or may not include the Virgin, commonly called Our Lady of Guadalupe. Rodriguez (1994) studied a group of 20 Mexican American women, Guadalupanas, for whom the symbol of the Virgin of Guadalupe was a liberating and empowering catalyst. However, other Chicanas or Latinas do not share these beliefs. Chicana scholar Norma Alarcon cautioned that, although "believers" view Guadalupe as a mediating figure with transformative powers who is capable of sublime transcendence, the symbol of Guadalupe exists for the

purpose of "universalizing" and containing women's lives beneath a constraining cultural banner (1994, p.130). Various Chicanas, such as Alarcon (1994) perceive the symbol of the Virgin as an historical role model for oppressed Latinas and disrupt this practice in their work. For example, Angie Chabram Dernerseian (1993) described Chicana artist Yolanda Lopez's "Guadalupe Series" which included artwork that displaces the "stoic Christian Guadalupe" from the central traditional position. In the Virgin's place Lopez put photographs of "Chicanas in motion." These included photos of militant Chicanas, Chicanas dressed in shorts for summer, or hard working Chicana mothers breast-feeding their babies (Dernerseian, 1993, p.42). Dernerseian (1993) noted that Lopez "reimagined" (p.42) Guadalupe as a symbol of or role model for contemporary Chicana/Mexicana seeking liberation from oppressive, male-oriented images of Chicana women and from the debilitating influences of social institutions and beliefs.

Research With Acculturation Scales

As noted by Marin and Marin (1991) researchers do not agree upon the interpretation of or the identification of acculturation. They do not agree on the prediction of its outcomes either. A number of researchers have published various acculturation scales and indices in attempts to develop tools for explaining behavior and attitudinal changes among Latinos. Mastery of the English language is

often regarded as the most important component of acculturation because it accounted for the greatest amount of the variance in several studies utilizing an acculturation scale (Rogler, Cortes, & Malgady, 1991; Marin, Sabogal, Marin, Otero-Sabogal, & Perez-Stable, 1987, Cuellar, Harris, & Jasso, 1980; Burnam, Telles, Karno, Hough, & Escobar, 1987). However, language is an insufficient measure of the complex processes of changing values because behavioral indices, such as unidimensional measures of language usage are at best indirect measures of cultural values and beliefs (Betancourt & Lopez, 1993).

The "Short Acculturation Scale for Hispanics"

Marin, Sabogal, Marin, Otero-Sabogal, and Perez-Stable (1987) developed a "short acculturation scale for Hispanics." The original scale of twelve items was developed from results generated by a 16-page questionnaire administered to convenience samples of Hispanics aged 15-75 years, living in San Francisco, CA, Miami, FL, and Green Bay, WI. After an exploratory factor analysis with varimax rotation and 15 iterations, three factors with eigen-values higher than 1.0 were found to account for 67.6% of the variance. The first factor accounted for 54.5% of the variance and was labelled "Language Use and Ethnic Loyalty." Five common items loaded heavily on the first factor and had a reliability alpha of (.90). A number of analyses were conducted in order to check the validity of the 12 item

scale including correlations with the participants' generation, length of time spent in the U.S., and the participant's own evaluation of his/her level of acculturation. The results of the original research showed a correlation of .69 ($p < .001$) from the correlation of the first (language) factor and the participant's generation; of (.76) ($p, .001$) for the first factor and length of residence in the USA; and of (.76) for the first factor and the participant's self evaluation of acculturation level which was measured by a Likert-type scale anchored as "very Latino/Hispanic" (scored as 1), and "very American" (scored as 5).

Because of the high correlations with the "Language" factor, the researchers went on to shorten the scale to use just the language questions to determine acculturation level. Marin and Marin (1991) state that this shortened scale has correlated highly with the usual validity criteria of acculturation scales, those being respondents' generation ($r = .69$), length of residence in the U.S. for foreign-born respondents ($r = .76$), and age at arrival in the USA ($r = -.72$).

The questionnaire that generated these results was completed by Mexican Americans and Central Americans. No difference was found between the results of these two groups when separated out. Two of the researchers who developed this scale describe it as very useful because of its psychometric characteristics, its short length, and the fact

that it works equally well with all Latino subgroups (Marin & Marin, 1991).

Research using the "Short Scale". The discussion of two studies will demonstrate how the Short Scale has been used in research. The first study was done by Marin, Posner, and Kinyon (1993) to assess the influence of acculturation level on expectations of emotional and behavioral changes due to consumption of alcohol. Each of the four items deal with language, i.e. what language do you read and speak?, what language do you usually speak at home?, in which language do you usually think?, and what language do you usually speak with your friends? The researchers found that the more acculturated Latinos as measured by the language-oriented acculturation scale, tended to respond similarly to the non-Hispanic white respondents. They tended to be less likely to expect emotional and behavioral impairment due to alcohol consumption. Central American Latinos were compared to Mexican Americans but no difference was found.

A second study, by Perez-Stable, Marin, and Marin (1994), utilized the shortened version of the scale to compare Latinos and non-Latino whites in terms of behavioral risks. There were no significant differences by acculturation for either men or women in proportions of heavy drinking, binge drinking, drinking and driving, current smoking, or seat belt use. Multivariate analyses

showed that less acculturated Latinos were less likely to have consumed alcohol in the previous month (odds ratio=0.41, 95% confidence ratio = 0.27, 0.62) and more likely to be sedentary (odds ratio=2.05, 95% confidence interval=1.35, 3.12).

Researchers doing studies utilizing the Short Scale have accepted the use of factors related to language use as a measure of acculturation. Although language factors correlate well with length of living in the USA, generation, and age at arrival in the U.S. (for immigrants), it seems that this scale reveals more about time and language use than it does about the complex phenomena of changing or shifting behavior and attitude patterns.

Caution needs to accompany the use of language-related factors as proxy measures of acculturation by clinicians and researchers. It may facilitate a simplistic attitude towards acculturation for subsequent consumers of these data such as clinicians, health workers, or researchers. For example, health care providers may make assumptions based on the notion that a Latina who speaks English is acculturated and a Latina who speaks Spanish is not. If a health care provider, for example, in a women's health center would use language as a proxy for acculturation, he/she may be vulnerable to making the erroneous assumption that individuals of low acculturation are more likely to adhere to traditional sex role orientations (Betancourt & Lopez,



1993). This may then lead to assumptions about a Latina's practices related to birth control or sexuality.

Assumptions about a patient's needs or attitudes might replace actual assessments in clinical care and services or health education may be rendered based on assumptions rather than on actual needs.

The ARSMA

Cuellar, Harris, and Jasso (1980) developed the most commonly used scale for measuring acculturation, called the Acculturation Rating Scale for Mexican American Populations (ARSMA). The ARSMA can be administered in English, Spanish, or both languages. It was originally developed from data obtained from 88 hospitalized Mexican American, Spanish speaking psychiatric patients with a psychotic diagnosis and 134 students of staff participating in in-service training activities. The 20-item questionnaire was scored on a five point Likert-type scale ranging from Mexican/Spanish (1) to Anglo/English (5). Factor analysis was computed using the varimax rotation method which yielded four factors accounting for the variance as follows: Factor #1, language familiarity, usage, and preference (accounted for 64.6%); Factor #2, ethnic identity and generation (18.9%); Factor #3, reading, writing, and cultural exposure (11.4%); and Factor #4, ethnic interaction (accounted for 5.2% of the variance). The researchers claim that the scale is able to differentiate five distinct types of Mexican Americans based

on level of acculturation: very Mexican, Mexican-oriented bicultural, "true" bicultural, Anglo-oriented bicultural, and very Anglicized. Internal reliability was found to be acceptable with a coefficient alpha of .88 (N=134) for the unhospitalized subjects and an alpha of .81 (N=88) for the hospitalized sample.

The ARSMA was developed based on the responses of 222 subjects; 88 of whom had psychotic diagnoses, usually schizophrenia. However, Montgomery and Orozco (1984) cross-validated the original study by Cuellar et al., by testing the ARSMA on a sample of 450 Mexican Americans and Anglo college students in south Texas. The results very closely corresponded to the original data provided by Cuellar et al. although the population groups of the two studies were markedly different. As a tool for measuring acculturation along a line representing Mexican culture at one extreme and "American" culture at the other the ARSMA has been useful across differing populations of Latinos (1980).

Other research using the ARSMA. The discussion of three studies will demonstrate how the ARSMA has been used in research. The first study I will present, by Lucas and Stone (1994), used the ARSMA in a study assessing acculturation and competition among Mexican Americans and Anglo Americans. Fifty-five Mexican Americans filled out several questionnaires including the ARSMA. No relationship

was found between level of acculturation and goal competitiveness or interpersonal competitiveness.

The National Center for Health Statistics conducted the Hispanic Health and Nutrition Examination Survey (HHANES) in 1982-84. An index of acculturation that consisted of eight variables based on the ARSMA was utilized to relate to the birthweight of 1,645 Latino mothers of Mexican descent who participated in the HHANES. After controlling for parity, a one point increase on the acculturation scale was found to be associated with a 1.19% (95% confidence interval=1.05,1.34) increase in risk of low birthweight.

Golding and Burnam (1990) compared Mexico born and U.S. born Mexican Americans' levels of depressive symptomology. They measured acculturation utilizing a scale that was developed partially drawing on the ARSMA. The results of this study showed that Mexican Americans born in the U.S. reported more depressive symptomatology than those born in Mexico although there was no association with acculturation levels.

These studies reveal that what the researchers called "acculturation" was not always associated with other variables, such as incidence of depression or competitiveness. Also, the research done using the ARSMA does not provide much evidence supporting the use of this scale with populations other than college students.

The Semantic/Sociocultural Inventory

Olmedo, Martinez, and Martinez (1978) set out to develop a practical paper and pencil inventory based on previous research done by Mercer in 1976 and Martinez in 1978. They stated that their purpose was to provide a quantitative measure of acculturation for Chicano adolescents. The sample consisted of 924 "Chicano and Anglo" (p.160) high school students in Southern California. The acculturation score for each individual was defined as the linear combination of semantic and sociocultural variables that provided the best least-squares estimate of that individual's score on a dichotomous variable on which Chicanos were assigned a value of 0 and Anglos a value of 1.

The study included a sociocultural questionnaire that collected background information about the "subject," his family, the head of household (HOH), and the language spoken at home. This was based on Mercer's previous work of 1976, that focused on characteristics like the occupation of the HOH, whether the HOH was raised in an urban or rural environment, the number of members of the "subject's" family. Mercer used this approach to measure acculturation levels of black, white, and Chicano children and found that acculturation (defined in this way) accounted for 32% of the variance in correlations with IQ scores. The more the black and Chicano children's responses resembled those of the Anglo children the higher the IQ score. It is possible,

however, that the findings reflect a measure of the ways that children of color were and were not like Anglo American children rather than a measure of acculturation (i.e. behavior change with time spent in the U.S.).

Interestingly, the inclusion of IQ test scores as part of Mercer's (1976) study seems to support an interpretation that IQ scores reflect a measure of Anglo-ness rather than an objective measure of intelligence.

The second part of the Olmedo et al. study included using a Semantic Differential Potency questionnaire with the high school students. This was based on the previous work of Osegood, Suci, and Tannenbaum of 1957 which suggested that Chicanos and Anglos differed quantitatively in a variety of semantic dimensions pertaining to affective meanings assigned to the concepts "mother," "father," "male," and "female." The teens of the Olmedo et al. study rated, e.g., "mother" in terms of bipolar adjective pairs like "hard-soft," "severe-lenient," or "ugly-beautiful." A factor analysis of part two resulted in three factors with only slight intercorrelations.

In the final solution including all variables from part one and two, the variables pertaining to citizenship of the HOH and the subject, as well as the language spoken at home (from part one of the study) combined to account for 50.8% of the variance. In conclusion, the authors stated that the results of their study reveal that Chicanos vary widely

along the derived acculturation continuum. They asserted that an understanding of within-ethnic-group differences is an essential prerequisite to studying the relevance of cultural variables to the psychological and educational assessment of Chicanos.

Finally, this study points out that impressions of what acculturation is, varies. In this study it seemed that the authors first identified what "being Anglo" looked like in the Martinez (1978) and the Mercer (1976) studies and they then set up a study to measure "how anglo" the Chicano teens appeared to be.

The Scale Developed by Caetano and Mora

Raul Caetano of the Alcohol Research Group, Medical Research Institute of San Francisco developed an "acculturation" scale that asked questions about: daily use and ability to speak, read, and write English and Spanish; preference for media including books, radio, television, and music in English or Spanish; ethnicity of the people with whom the respondents interact at church, parties, and in their neighborhoods now and when growing up; and various values thought to be "characteristic of the Hispanic way of life," (Caetano & Mora, 1988, p.465). Caetano and Mora used the scale to assess acculturation levels of Mexican Americans born in the U.S. and Mexicans born in Michoacan, Mexico. This was then analyzed in relation to alcohol use. The scale was administered along with an interview to 1,453

people in the U.S. Of these, 949 self-identified as Mexican American. The data from these respondents were analyzed along with data from 1,191 Mexican respondents. The results showed that Mexican American men drank more frequently but less drinks per episode, than men in Michoacan. Mexican American women had a lower rate of abstention, a higher rate of drinking at least once a week, and a higher rate of consuming five drinks per episode at least once a year than do women in Michoacan. For women, however, drinking patterns were not related to length of residence in the U.S.

Caetano and Mora (1988) showed more sensitivity to the complex nature of cultural change because they explored the phenomena of changing behaviors and included individuals living in Mexico in addition to Mexican Americans in the U.S. This allowed for more extensive comparisons. Groups included those scored as low, medium, and highly acculturated Mexican Americans as well as a group of Mexicans living in Mexico. Also, the authors articulated their rejection of the generalization that acculturation is the adoption of a dominant American pattern of behavior. In terms of alcohol, the authors suggested that Mexicans who do come to the U.S. have a variety of models that they might adopt since alcohol use in the U.S. varies quite dramatically across regions of the country or across states. This is a point that is often overlooked by researchers studying Mexican Americans. In the authors' words,

it would seem more plausible to think that the model of drinking the newly arrived will adopt is not that of the Anglo majority, but that of other Mexican Americans in the barrio. Thus understood, the evolution of Mexican immigrants' alcohol use with acculturation would be to a characteristically Mexican American pattern, one with elements inherited from Mexican culture, elements adopted and adapted from the Anglo culture and elements that represent the unique experience of Mexican American life in the United States" (Caetano & Mora, 1988, p.470).

Biculturalism: An Important Theoretical Development

Acknowledgement of the complex dynamics of biculturalism was an important challenge to the concept of acculturation because it held that cultural changes occur in more than one direction at the same time. Szapocznik, Kurtines, and Fernandez (1980) suggested that for individuals who live in bicultural worlds, the process of becoming bicultural involves learning communication and negotiation skills in two different cultural contexts, each with a separate set of rules. They rejected the theory that immigrants adopt "host-culture" behavior and values while simultaneously discarding those attributes of their culture of origin. They developed a Bicultural Involvement Questionnaire (BIQ), a quantitative scale that was designed to measure biculturalism (ranging from monoculturalism to biculturalism) and cultural involvement (ranging from cultural marginality to cultural involvement). The questions on the BIQ were limited to preferences of language (Spanish/English), recreation (Hispanic/American music, dances, places), media (Hispanic/American radio, TV, books,

magazines), and ways of celebrating weddings and birthdays (Hispanic/American). Although results showed that the BIQ was only useful when used with Cuban-Americans but not with non-Cuban Hispanics in Florida, this research on biculturalism introduced the possibility of conceptualizing acculturative changes that move in more than one direction, i.e. not always in the direction of the majority white middle class.

LaFromboise, Coleman, and Gerton (1993) described a model of bicultural competence within which an individual becomes socially competent in a second culture without losing that same competence in the culture of origin. They hypothesized that individuals who have acquired the affective/cognitive attitudes and beliefs as well as the behavioral skills in both cultures will be able to maintain and enhance their personal and cultural identities such that they can effectively manage the challenges of a bicultural existence.

Theories of biculturalism, however, are linked to conceptualizations of cultures as whole systems within which a person is competent. Thus, assumptions related to the meaning of "culture" need to be examined in order to move beyond such conceptualizations. It will be useful to revisit the classic anthropologic definition of "culture" which is often drawn upon in health research in order to redefine attributes of culture that are important in

research with Mexican Americans who are involved in multiple simultaneous cultural milieus. Additionally, a more creative concept of the world of Mexican American women who are dealing with issues of biculturalism and more on a daily basis, will be helpful to move understanding forward.

The Borderlands

Gloria Anzaldua (1987) described the world of Mexican American women as day to day living in the "Borderlands." Anzaldua likened the borderlands to the physical space of the actual Mexico-U.S. border. She then expanded this metaphor to include other physical spaces where people of varying economic, racial, and ethnic groups live in close proximity as well as the abstract spaces of mixing meaning and emotional experience or growth.

In the borderlands, messages with multiple roots speak to Mexican American women as part of everyday life in the U.S. Anzaldua stated that contradictions are part of daily experiences in the borderlands.

Taken-for-granted values, traditions, habits, practices, patterns, knowings, and sayings from different sources lend influence to Mexican American women in the borderlands. Multiple simultaneous background meanings may mix smoothly, bump up against each other, or crash with harsh abruptness in the lives of Mexican American women. This phenomena involves the mixing of Mexican, Mexican American, and mainstream Anglo-American cultures and

requires a flexibility of the psyche, as well as a tolerance for ambiguity and contradiction (Anzaldua, 1987, p.79).

Cradled in one culture, sandwiched between two cultures, straddling all three cultures and their value systems, La mestiza undergoes a struggle of flesh, a struggle of borders, an inner war. Like all people, we perceive the version of reality that our culture communicates. Like others having or living in more than one culture, we get multiple, often opposing messages. The coming together of two self-consistent but habitually incompatible frames of reference causes un choque, a cultural collision (Anzaldua, 1987, p.78).

Psychological, sexual, spiritual, emotional, and cultural practices mix in the physical and metaphorical borderlands of the U.S. including the process of change involved in living between shifting borders. Here, discontinuities and contradictions of meaning may complicate life where the borders of gender, race, class, and ethnicity come together. However, these cultural complications are part of the mundane practices of everyday life in the inbetween places of the borderlands.

Alex Saragoza (personal communication, 4/29/96) further clarified that borderlands is a process not an outcome. The process involves being in places that border one another but it also involves the phenomena of growth, change, and challenge which is met when a person confronts the dynamism and flux in spaces where cultures mix.

A Redefinition of "Culture"

Renato Rosaldo extensively explored the meaning of "culture" in his book, Culture and Truth: The Remaking of Social Analysis (1989). Rosaldo was interested in

redefining the concept of culture by suspending the classic norms anthropology has traditionally used to define culture. The classic norms emphasize a macro-definition of culture as "shared patterns" and "set(s) of shared meanings" (Rosaldo, 1989, p.28) that show up to form a smooth unity particular to a community or group.

In health related research, culture also tends to be a macro-concept of homogeneous patterns within groups. Nurse scholars, Giger and Davidhizar (1991) drew on Leininger's definition of culture to focus on patterns within groups. They defined culture as the shared values, beliefs, norms, and practices of a particular group that guide thinking, decisions, and actions in a patterned way. Nurse scholars Martin and Henry (1989) included daily practices in their definition although the scope of the definition was of large scale patterns. They defined culture as communication patterns, dietary practices, family and kinship relations, religious practices, health behaviors, as well as orientations to time, activities, and relationships in their definition of culture.

In contrast to this, Rosaldo encouraged social analysts to turn their attention to the blurry places in between the ordered patterns of what appears to make up a "whole culture" (1989, p.209). He redefined culture as that which occurs within the "mundane practices of everyday life" (1989, p.217) at a local, particular level. With this

conceptualization there was an emphasis on the internal inconsistencies of a people group, the conflicts, and the contradictions that show up in their daily living. Rosaldo encouraged scholars to explore these blurry zones along with the smooth, patterned aspects of everyday living for a people group.

Although traditional social scientists who study culture may avoid exploring places of contradiction, Rosaldo suggested that these intersections are exactly the place to study culture. He suggested that these inconsistent spaces "inbetween" clearly delineated dimensions of a people group, actually ARE the places where culture is produced. They are the places where meaning arises in the contexts of a people's lives. This conceptualization of culture, including the both the smooth and the contradictory elements of the "mundane practices of everyday life," allows the focus to be on uneven, everydayness in lived experiences rather than on formal customs, patterns, or traditions. This is especially important for research with Latino populations in the U.S. because it destabilizes rote assumptions made about Latinos or their traditions which may have been popularized by media or propaganda. A focus on the inbetween places causes the nurse scholar to refocus. It allows for the disruption of generalizations that breed stereotypic expectations.

Interculturations: A New Theoretical Concept

Because an ever widening spectrum of multi-directional cultural interactions and changes are possible in human experience, I am proposing a new theoretical approach to understanding the mixing of cultures. This approach unfolds around the concept of "interculturations."

The prefix, 'inter' is defined by The American Heritage Dictionary (1992) as being between, among, in the midst of, or within. This prefix also implies a quality of being mutual or reciprocal. I have combined this with the word 'culture.' Conceptually, culture has multiple definitions. However, it is Rosaldo's (1989) redefinition of culture that I am calling upon here. It is in this sense of the word "culture," that the neologism "interculturations" is based. That is, interculturations are the clashing or mixing of otherwise taken-for-granted meanings that occurs within the processes and practices in everyday life. They emerge within, between, and in the midst of daily living in the psychological, sexual, spiritual, physical, emotional, and material borderlands.

Interculturations are not merely bidirectional but multidirectional. Intercultural practices and processes may originate from one "culture" or people group or from another but this process is seen as occurring in a flexible and contingent manner rather than in a hegemonic manner.

Interculturations may show up in the life of an immigrant or

the life of a member of the "host" country, regardless of ethnicity. An interculturalization may originate from the mundane practices of the everyday life of an Anglo American man of the working class or that of an African American woman of the upper class and mix into the practices of a Mexican woman of the middle class, or vice versa. Regardless, the processes or practices may exist in the midst of two or three or four or more mixing "cultures" in the borderlands.

Interculturalizations occur whenever a mixing of cultural processes occurs. Although interculturalizations often go unnoticed in a taken-for-granted way, they are most easily identified (or show up) when a mixing of cultural processes brings with it a clashing of meaning. I will refer to this clashing of meaning that is manifested as a conflict or problem in coping practices as "disruptions." Benner (1994) describes breakdown to be situations of novelty, error, confusion, or conflict. I will use the term "disruption" rather than "breakdown" because it more clearly describes the intercultural experiences of novelty, surprise, clash, discontinuity, newness, or conflict for the women of this study. The American Heritage Dictionary of English Language (1992) defines "disrupt" as "to throw into confusion or disorder, to interrupt or impede movement or procedure" (p.538).

Wrubel (1985) stated that when smooth functioning or daily coping is disrupted, various aspects of the background

show up because of the disruption. The background that always was there in a taken-for-granted way is no longer seen through. Rather, the background is now seen or perceived in ways it wasn't before. Things that were transparent and in the background become explicit and observable. In this way, interculturations, as clashings of meaning or disruption, become explicit. Interculturations may show up through a person's speech, in stories they tell about current events, in their actions, or practices.

Researchers may be tempted to develop methods for the quantitative measurement of interculturations. However, such an endeavor may be impossible due to the limitless number of possible combinations of intercultural mixings.

Interculturations, Cultural Identity, and Acculturation

Interculturations may influence the processes of cultural identity because the evolution of a "sense of self" in relation to a culture of origin will occur simultaneous the mixing of cultural practices, processes, and background meanings. However, a new cultural identity is not formed each time a person participates in an intercultural mixing of practices. Rather, interculturations influence the processes that are the "being and becoming" of cultural identity.

The phenomena of interculturations is not the same as that of acculturation or biculturalism because it is multidirectional and unpredictable, rather than

unidirectional or bi-directional. Interculturations may or may not include an episode of assimilation or change in the direction of the majority group. If it does include such change, the episode may be discontinuous or inconsistent. The discussion of interculturations will be expanded throughout the rest of this dissertation.

Conclusion

Interculturations involve the unordered, unpatterned mixing and clashing of background meanings. Like the research studies shared at the outset of this paper, interculturalization for Mexican American women may include meanings that are disrupted due to the usage of English rather than Spanish in practice (or vice versa), due to the possession of legal documentation for residency or citizenship in the U.S., or place of birth. Unlike acculturation and assimilation, interculturations does not imply a certain direction of cultural change in behaviors, attitudes, or practices. Also, it is unlikely that the phenomena of lived experiences of interculturations can be measured through the use of a quantitative scale. Within a re-thinking of culture and a consideration of life in the physical borderlands as well of in the midst of Borderland processes, the conceptualization of interculturations holds promise for a deeper, more complex interpretation of the experiences of Mexican American women.

Chapter 3

Method, Methodology, and Research Design

Guided by the methodologies of interpretive phenomenology and new ethnography, I explored the lived experiences of Mexican American women. Because my research involved interviews and limited participant observation in the field, interpretive phenomenology as well as new ethnographic techniques were useful to guide my study design, study implementation, data collection, and data analysis.

Interpretive phenomenology facilitated a focus on understandings that emerged within taken-for-granted engagement in everyday coping. It provided the model for philosophical rigor in terms of underpinnings that fueled the research, including my own preconceived assumptions that were made explicit through the analysis of my own understandings (through the hermeneutic circle) and challenged me to become clear about how my participants were self-interpreting. Phenomenology guided me to elicit stories and to probe for understanding that emerged from engaged coping within meaningful contexts and relationships. New ethnography augmented this by guiding me to remain in the field outside of interviews (through participant observation) which enabled me to learn about the ways the women took up relationships and practices in addition to how they talked about them. New ethnography also guided my

focus on culture as the mundane practices of everyday life (Rosaldo, 1989) in the contexts of twelve adult daughters of Mexican immigrants. New ethnographic considerations offered important guidance on the practice of self reflexivity as a researcher involved in "self-other" relationships with participants in the field.

Because methodologies, methods, as well as theories are often based on philosophical understandings, clarity about the philosophical underpinnings implicit in the design of research will aid in the analysis of data. Consequently, I will precede this discussion of method by making explicit the philosophy underlying the methods (techniques for gathering evidence) and methodologies (analyses of how research should proceed) of a research program (Harding, 1987). I will also address postmodernism and feminism because they have been influential in my approach to this research. Next, I will discuss the methods of new ethnography and interpretive phenomenology. Finally, I will discuss the procedure I used in this project including research design, data collection, and data analysis.

Postmodern Critiques of 'Selfhood' and Subjectivity

A brief, historical analysis of the evolution of the concept of the "self" in Western civilization will lay a foundation for the discussion of subjectivity - an important element of how I approached the research participants in

this project. Historically in Western civilization, humankind was elevated to the center of the world as part of the Renaissance cosmology. That is, following the Middle Ages in Europe, Renaissance intellectuals, European men of the 14-16th century, focused on in the workings of the world around them from a perspective that re-located human beings in the center of all (Grenz, 1996). The foundations of modern scientific enterprise, were laid during the Renaissance period and came to a crescendo during the Enlightenment or "Age of Reason" (1650-1800). This period inaugurated the modern era which began in the nineteenth century. It was a period when (European male) intellectuals of the day sought universal, eternal, immutable truths which they believed could be accessed through reason. Philosopher Rene Descartes (1596-1650), often referred to as the "father" of modern philosophy, defined the human being an autonomous, thinking, rational subject, a notion that still holds today. Modern thinkers in Western civilization claimed that reason alone confirmed universal truths. A hegemonic system of knowledge and power emerged as modern intellectuals and scientists claimed that reason-based truths proved that they possessed the only legitimate set of morals, the only legitimated form of government, and the only true belief system (Grenz, 1996).

Many contemporary day people hold these modern assumptions to be Truth. David Harvey (1989) pointed out

that modernists have a universal vision of the world that emphasizes a rationalistic, positivistic, technocentric view and believe in an ongoing linear progress of 'civilization' as well as the rational planning of ideal social orders (Harvey, 1989). Based on the modern philosophy of Descartes, modernists also claim that the mind and body are separate and distinct entities. This claim became known as the mind/body split (Benner & Wrubel, 1989) wherein Cartesian notions of the self relegated the body to a sphere outside of and apart from the thinking subject (Grenz, 1996).

Within modernity, notions of subject-object dualism have also become widespread. Here, the self is perceived as a thinking subject which encounters every other kind of thing as an object. This dualism endows the subject with a greater importance than any other object. Grenz (1996) noted, however, that it was philosopher Martin Heidegger who offered the most telling critique of this notion of the "thinking subject."

Heidegger contends that the human being is not primarily a thinking self, a subject that engages in cognitive acts; rather, we are above all else beings-in-the-world, enmeshed in social networks (Grenz, 1996, p.86)

Taking this analysis a step further, Dreyfus (1991) explained that Heidegger did not see human being (or Dasein) as a "subject" that defines Truth, in the modern sense of rational, empirical propositions of Truth statements.

Rather, human being (or being human) is itself the practical activity which opens up a world (clearing). Heidegger calls this activity, "disclosing" (Dreyfus, 1991, p.271). Within the world then, the activity of disclosing allows people to discover particular, local "truths" which Heidegger called "discoveries." People discover specific things in whatever way is appropriate to their context, depending on the practices of the people in each particular domain (Dreyfus, 1991). So, discoveries are context-dependent. Finally, meaning is possible for people because they interpret discoveries in a world that is open to them through their practical activity and because people have shared, local practices (Dreyfus, 1991, p.278).

In my work, I reject the modern notion of the rational, autonomous self as the arbiter of 'universal Truths' in favor of Heidegger's interpretation of people as human beings who discover particular truths that make sense within local contexts. I approached the women of this study as people who are not understood within universal descriptions. Rather, as suggested by social geographer Allan Pred, people are grounded materially, concretely, and geographically in time and in space, relating to others as embodied persons (personal communication, 3/94).

Crucial Features of Feminism for Research

Feminism has influenced my intentions to make women's lives visible and women's voices audible through this

research. As a researcher, I am motivated by concern for women, as is in keeping with a feminist agenda (Reinharz, 1992, p.75) and not for their exploitation. Harding (1987) stated that feminist research must begin with inquiry into what appears problematic from the perspective of women's experiences. It must have the goal of providing women with information of social phenomena that THEY want and need, rather than "providing for welfare departments, manufacturers, advertisers, psychiatrists, the medical establishment, or the judicial system answers to questions that they have " (p.8). These distinctive features of feminism have influenced me and this work. Several of the women mentioned that their reasons for being in the study included the desire to help make a difference in the health care received by Latinas.

Harding (1987) also noted that a distinct feature of feminist research is that women's experiences are used as the test of the adequacy of the problems, the concepts, the hypothesis, the research design, the collection, as well as the interpretation of data in a research study. In this research, Mexican American women's perspectives were analyzed as part of a pilot study in order to explore the problem and research question. At that time, I had designed the interviews to address women's understandings of the concepts of womanhood, motherhood, sexuality, and pregnancy. Through the interviews I realized that the women's

experiences and concerns revolved around the issue of taking care. They were not particularly concerned with the concepts I had set out to explore. After many consultations with a variety of Mexican American, white, black, and Asian health professionals and researchers, I changed the study to address issues of taking care. As part of the current project, the participants of the study were able to tell me their understandings of the need for research related to taking care. In addition, the data analysis for this project involved multiple consultations including discussions with female Mexican American health professionals and researchers. The experiences of women were used as the test of the adequacy of the problems and concepts of this research.

Because the cultural beliefs and behaviors of feminist researchers have shaped the results of their analysis no less than those of sexist and androcentric researchers (Harding, 1987), I will identify my own context as part of the discussion of the "circle of understanding" (including my gender, race, class, and particular preconceived notions that I have brought with me to this research because of my context later in this document and in Appendix A and B). Finally, while involved in data analysis, participants were able to ask me questions about myself, my life, and my work. When they did ask me questions, I answered them as honestly as I could. This was in keeping with Harding's

encouragement to keep the researcher's work in the same critical plane of the participants (1987).

In the planning of this research, I was affected by feminist anthropologist Kamala Visweswaran's (1994) articulation of shifting identities, temporality, and silence as tools of a new/feminist ethnography. Her particular contribution to a clarity of understanding of feminist ethnography is a call to consider how women's identities are multiple, contradictory, partial, and strategic.

Feminist ethnographers both suppose that they can "give voice" to other women and know that they can never fully do so (Visweswaran, 1994). They call us to suspend the belief that we can ever wholly understand and identify with other women. Rather, we must offer the best interpretations we can amidst the tension of knowing we are both successful at understanding certain aspects and unsuccessful at comprehending all aspects of the lives of the women in our research. However, as suggested by Visweswaran (1994), new possibilities are engendered as a result of recognizing limits and acknowledging the impending "failure" to attain complete understanding. Some interpretations may "provoke" (Tyler, 1986) other interpretations even though complete understanding cannot be attained.

Other elements of feminist research include what DeJoseph and Messias (in press) defined as the assumption of

intersubjectivity between the researcher and participant and the mutual creation of data. I recognize that I influence the discussion during interviews such that what the participant shares with me is different because of my presence. Surely, my own values, assumptions, characteristics, motivations have an effect on all phases of the research process. Together, the participant and I "co-create" the data for interpretation (DeJoseph, personal communication, 6/18/96).

Ethnography as Method

Simultaneous to the development of postmodern critiques, an "interpretive turn" was occurring in the social sciences. Del Castillo (in press) argues that incisive and radical critiques of classic anthropology were emerging in the 1970's although Clifford (1986) noted that this began in the 1980's. Regardless, new ethnography refers to the development of these interpretations and their influence on methodology in anthropology. For decades anthropologists have made culture their focus. Then ethnographers began to problematize the traditional modes for describing culture (Rosaldo, 1989). They rigorously questioned modernist agendas to describe cultural wholes with consistent patterns and customs.

To frame my research, I will begin the following discussion of ethnography as method with the distinctions between classic (traditional) and new ethnographic

perspectives. Then I will present key issues about culture and its definition for this research.

Traditional Ethnography

Ethnography has been traditionally defined as an inductive mode of research which may utilize several methods of data collection (Robertson & Boyle, 1984). Hammersley and Atkinson (1990) stated that ethnography is a cognate term for participant observation which is a social research method.

Nurse researchers have identified ethnography as a method useful to furthering nursing research.

Ethnography is a means for gaining access to the health beliefs and practices of a culture. In a practice profession such as nursing, improved understanding of the meaning of clients' behavior will enhance nursing judgements and improve nursing care (Robertson & Boyle, 1984, p.43).

Ethnography draws on a range of sources of information that the ethnographer gathers while participating, overtly or covertly, in people's daily lives for an extended period of time. Interviews and participant observation are the most common ethnographic data gathering techniques (Robertson and Boyle, 1984). Extended first-hand contact with the people and the settings of the research project provide ethnographers with opportunities to check out understandings and to discover misunderstandings while still in the "field" (Hammersley & Atkinson, 1983). The ethnographer watches what happens, listens to what is said, asks questions, and collects whatever data are available to

throw light on the issues with which he/she is concerned (Emerson, 1988).

New Ethnography

New ethnography developed from classic ethnography in anthropology. Historically, traditional social scientists have used classic norms of analysis to detach from and observe their "natives" in order to come up with what they considered to be absolute, universal, timeless, and objective truth about culture (Rosaldo, 1989). Without accounting for their own biases and assumptions, anthropologists have been among those social scientists who believed that the classic methods of ethnography would yield objective cultural truth. New ethnographic practices have destabilized the "classic norms" that ethnographers historically employed to "other" the "exotic natives" of their studies in both data collection and the writing of ethnography (Rosaldo, 1989).

Because Western ethnographers can no longer portray non-Western peoples with unchallenged authority, Clifford (1986) claimed that ethnography is in the midst of a political and epistemological crisis. In the current postmodern arena, the processes of cultural representation and description in ethnography are seen to be contingent, historical, and contestable (Clifford, 1986).

Among those anthropologists who criticized the classic norms of anthropology was Renato Rosaldo (1989). As

discussed in Chapter 2, I have adopted Rosaldo's (1989) redefinition of culture which refers "less to a unified entity than to the mundane, everyday practices of everyday life" (p.217) in the border zones. Rosaldo also claimed that all interpretations of culture are, in fact, incomplete because they are made by positioned subjects who are prepared to know certain things and not others, no matter how knowledgeable, sensitive, or fluent they are in an "alien cultural world" (p.8). Thus, the social analyst is not a "blank slate" (p.207) and never can be.

The new ethnographer reflexively acknowledges herself, her position, and her way of thinking. This includes acknowledgement of assumptions, judgements, as well as tendencies to lean on particular systems of logic within ethnographic accounts. As suggested by Rabinow (1986), new ethnographic interpretations push past assumptions about 'received' logical explanations that are taken-for-granted in Western societies in order to uncover diverse centers of resistance in the lives of participants, along with creative strategies for survival. In this study, I avoided traditional, classic tendencies to essentialize Latinas.

As articulated by Visweswaran, in new ethnography the "pursuit of the other" becomes problematic, not taken for granted. (Visweswaran, p.20, 1994). The goal is not "total understanding and representation" (Visweswaran, 1994. p.20). Rather, the text is respected for its ruptures,

incomprehensions, and differences not despite them (Visweswaran, 1994). This takes into account inconsistencies that showed up as part of culture as mundane everyday practices for the Mexican American women whom I interviewed or in the background meanings or the lived meanings in their worlds.

Writing Ethnographies

An important task of participant observation/fieldwork is to provide a written ethnography of rich, experience based descriptions of the distinctive social and cultural life of those studied. This includes descriptions of their beliefs, understandings, attitudes, and values (Emerson, 1988). Geertz (1973) stated that ethnographies should provide "thick descriptions" that present close detail of the context and meanings of events and scenes that are relevant to those involved in them.

Recently, scholars in anthropology have recognized that ethnography is actively situated between powerful systems of meaning, posing its questions at the boundaries of civilizations, cultures, classes, races, and genders (Clifford, 1986). Clifford explained that,

Ethnography decodes and recodes, telling the grounds of collective order and diversity, inclusion and exclusion. It describes processes of innovation and structuration, and is itself part of these processes (p.2-3).

Because writing is central to what anthropologists do both in the field and afterwards in writing up accounts for

publication (Clifford, 1986), all aspects of the process of ethnographic research require scrutiny. New ethnographic critiques have made the writing of ethnography a focus of analysis. Historically, a lack of self consciousness on the part of anthropologists has propagated a persistent ideology claiming transparency of representation. It assumed the authority of the ethnographer as a "knower."

Contrary to traditional practices of the past, new ethnographers have asserted that the anthropologist is "obliged" to make readers aware of the micropolitics of the situation in which the narrative accounts were obtained and how the anthropologist was personally affected by their interactions with the participant(s) (Bejar, 1990).

Anthropologist Ruth Bejar discussed the "anthropological imperative" that anthropologists face in writing their accounts. In the writing of a life history narrative, Bejar described the ethical pull

to place the account in a theoretical/cultural context, to provide some sort of background, analysis, commentary, or interpretation, so as to mediate between the reality of a life lived and inscribed elsewhere but wedged between book covers and read here (1990, p.224).

This work of "mediation" is especially crucial to avoid stereotyping, decontextualizing, or misrepresenting people to an academic audience.

Robert Carr (1994) criticized the tendency of writers to generalize the experience of "all people" of a particular ethnic group based on the experience of one person. He was

critical of Elisabeth Burgos-Debray's (1983) interpretation of a Guatemalan "peasant" in I, Rigoberta Menchu: An Indian Woman in Guatemala. He criticized what he calls the "standard operating procedure" for writers and researchers of the "First World" to assume an easy metonymic relation between the "Third World" subject of testimonials and the ethnic group as if they were constituted as infinite duplicates of the original subject.

Pratt (1986) described the work of Marjorie Shostak (1983) in a way that contrasts with that of Burgos-Debray (1983). Pratt complimented Shostak's ethnography, Nisa: The Life and Words of a !Kung Woman (1983). Pratt pointed out that Shostak succeeds in disrupting and remolding many conventions of ethnographic writing. Shostak presented Nisa's narrative, not as a general or metonymic account, but as just one view of !Kung life. Shostak explained that Nisa's

history does not represent the whole range of experience available to women in her culture; the life stories of other women are often quite different. Also, it is not possible to take everything Nisa says literally, particularly her descriptions of her earlier years (p.43).

Shostak went on to explain how and why Nisa may have told some of her childhood stories in ways that made them particularly lively and dramatic. Shostak's candid honesty about the ethnographic encounters she experienced in working with the !Kung women, including an understanding of her lack of authority to deem this or that to be 'true,' earned

praise from critics such as Pratt, among others. Pratt (1986) explained that the book "is widely regarded as one of the more successful recent experiments in rehumanizing ethnographic writing" (p.42).

Bejar (1993), like Shostak, was quite candid about the development of her book, Translated Woman: Crossing the Border with Esperanza's Story. In the introduction, Bejar stated that she and her "comadre" became mediums for each other's stories. She stated that each spoke separately in the beginning of the book but then their voices were forged together to form a "meta-historia" (meta-story). Bejar spoke plainly about the contradictions of the project. Both Bejar as the researcher and Esperanza as the participant in the research study were in difficult positions. Esperanza told Bejar her "historias" (stories) so that Bejar could put them into a book that would "talk in the tongue of the gringos" (p.20). However, both Bejar and Esperanza knew that the information Esperanza shared about herself was "more than was proper to reveal to a gringa" (p.20). They knew also that it could somehow cross the US-Mexico border and get back to the other Mexican women of her village. Bejar called this "a compounded act of betrayal." Esperanza shared what was improper to share with anyone outside one's family and Bejar printed in a book so that "gringos" could know the details. Bejar, however, did not claim the authorial, powerful stance that promises protection.

Rather, she admitted the book is a "talking serpent" (p.20) and that each of them broke taboos in producing the book.

Thus, new ethnographic practices of data collection and the writing of new ethnographies raises questions about knowledge, the power of the researcher, and honesty in interpretations. The method of interpretive phenomenology also raises questions about knowledge and adds questions about being. The hermeneutic circle of understanding works to dismantle the power of the researcher and to enhance honesty in interpretations. A discussion of interpretive phenomenology will now follow.

Interpretive Phenomenology

Heidegger followed Wilhelm Dilthey in generalizing hermeneutics from a method for the study of sacred texts to a way of studying all human activities using phenomenology (Dreyfus, 1992, p.2). The methodology of phenomenology utilized by Benner (1984) and Chesla (1989, 1994) in nursing research is based on Heidegger's claims that we can come to an understanding of being by letting the things show themselves in themselves or by understanding "that which shows itself in itself" (Heidegger, 1926/1963, p.51). The interpretation of the researcher then moves from what is plain to see to what is hidden or taken-for-granted (Dreyfus, personal communication, 9/6/94).

From Cartesian Strongholds to Untraditional Notions of Being

In The Great Philosophies, Dreyfus (cited in Magee, 1987) explained how Heidegger came to break away from the traditional, Cartesian emphasis on knowing and epistemology in philosophy. Husserl, Heidegger's teacher and first mentor, claimed that people were subjects in a world of objects and that the mind was directed towards objects by way of intention. Husserl claimed that the directed mental content of people as self-contained conscious subjects would describe reality and give a person the ability to perceive, desire, and remember some object under study. Husserl claimed that intentionality was an absolute ground for everything and the indubitable foundation for understanding.

Heidegger, however, questioned the subject-object relation, claiming it to be an inadequate description of our relation to things. He saw that people are "in-the-world" such that many things are just "taken-for-granted" as we go along, with the background being full of shared practices, habits, patterns, skills, and "equipment" (things). Heidegger saw that we are not detached from external reality. Rather, people are "coping beings." People, who cope as an everyday practice, are in a "world of being."

Heidegger saw that coping reveals ways of being for people. Further, ways of being-in-the-world reveal descriptions of the world. Each functions as the grounding for the other. That is, ways of being-in-the-world revealed

by transparent coping grounds a person's description of the world, and vice versa (Dreyfus, 1992, p.122). This is a key aspect of phenomenology.

Heidegger was opposed to traditional philosophers who argued that a Cartesian notion of the "knowing self" was foundational (Dreyfus in Magee, 1987, p.259). Heidegger pointed out that the focus on a "knowing self" sets up a tendency for philosophers to pass over the phenomenon of the world. Heidegger was critical of those that made epistemology primary and those that clung to Cartesian (traditional) ontology (1926/1962, p.133).

Phenomenology Involves Understanding Rather than Explanation

With phenomenology, ontological issues have to do with understandings rather than with explanations. In other words, ontology is about making sense of how things are rather than explaining how things work (Benner & Wrubel, 1989). Heidegger acknowledged that all we can know in the study of "what there is" (ontology) is what we are able to understand about "what there is" (Dreyfus, 1992).

Heidegger's analysis reveals the assumption that is involved when philosophers eagerly claim to know something about being without recognizing that all that anyone can know is our interpretation of being as we are able to understand it. This may seem to be a basic idea, but in fact, Heidegger's ideas about ontology were boldly untraditional.

Heidegger described phenomenological research as letting "that which shows itself be seen from itself in the very way in which it shows itself from itself" (1926/1962, p.58). Phenomenology allows for an uncovering of that which is hidden in our everydayness but can show up for me to understand. Stated in terms of my study, the experience of interculturations in the lives of second generation Latinas will show themselves in themselves. I will explore them by examining how the women understand them. Again, this taken-for-granted understanding of being has been regularly passed over by traditional philosophers, and others of the "Western" world, because their focus has been on Cartesian notions of epistemology and, most commonly, rejections of ontology altogether.

Metaphysical Notions of Ontology are Displaced by Engaged Coping as Modes of Being

Traditional notions of 'Being' suggest an essentialized existence of human beings that is shared universally. Consequently, social scientists have tended to reject ontological discussions (Alarcon, personal communication 12/21/94; Del Castillo, personal communication, 1/9/95). Philosopher Herbert Dreyfus (1992) explained that Heidegger's (1926/1962) philosophical ideas about ontology are not referring to the philosophical notion of the essence of 'Being.' Rather, he is focused on the engaged activity of being when a person is absorbed in coping. Thus,

Heidegger shifted discussions of traditional ontology to focus on modes of engagement in everyday skills, habits, and practices. Then, understanding is grasped as it shows up within these practices.

Modes of Being

Ways-of-being in the world are revealed by coping in the situation (Dreyfus, 1992). Being in situations involves what Heidegger described as the modes of being. The ready-to-hand mode (also called availableness) involves "transparent coping" (p.124). In this mode, coping is smooth, automatic, and taken-for-granted. There is no theoretical reflection. Rather, things just 'show up' in a logical and unquestioned way to be used or dealt with. In the unready-to-hand mode (also called unavailableness), a breakdown occurs that disrupts the person's ability to function in a taken-for-granted way. Rather, the person stops to think and problem solve. An example is the situation in which a person is unlocking a door in a taken-for-granted way when suddenly the key breaks in two pieces leaving one piece in the door's lock. Consequently the person stops, looks, 'tinkers' with the key and the lock in attempts to get the key out. The present-at-hand mode is when all everyday practical activity stops. In this mode, people are detached from activity and are involved in theoretical reflection, a state of "wondering," or theorizing. This mode alone is what traditional

philosophers equated with ontology in total. However, Dreyfus (1992) points out that Heidegger saw this as just one of several modes of being in the situation and that in fact, most of the time people are engaged in practical activity (not theorizing). These ways of being engaged are what Heidegger referred to as radical ontology (not traditional ontology).

Meanings are Embedded in Contexts

Heidegger's ideas on human being are a "secularized" interpretation of Kierkegaard's notions of what it means to be a "person" (Dreyfus, 1992, p.299). Benner and Wrubel (1989), among others, built on an understanding of people as self-interpreting beings. They explained that people do not come into the world predefined but become defined in the course of living lives. People have effortless and nonreflective understandings of their 'selves' in the world because they are situated in a meaningful contexts and because they grasp meanings directly.

People do not assign meanings to the situation, rather meanings are embedded in the skills, practices, and languages that the person takes-for-granted (Benner & Wrubel, 1989). As involved participants, people move in and through situations in rapid, nonreflective ways. Although people can and do participate in abstract thought and reflection standing outside situations, it is not the only way people encounter the world. In fact, most of a person's

being takes place as "engaged in particular situations" (Benner & Wrubel, 1989, p.41).

Circularity of Understanding

An employment of Heidegger's hermeneutic circle (circle of understanding) can facilitate clarity of assumptions on the part of the researcher. He claimed there is a circularity to understanding a phenomenon, that is, we understand in terms of what we already know. We are thrown forward into a phenomenon with some kind of preliminary understanding of it, then we arc back with the reverse movement of evaluation (Packer & Addison, 1989, p.35). My projected "forestructure" has been shaped by my expectations and preconceptions, lifestyle, culture, and tradition (Packer & Addison, 1989, p.33). These create a forestructure that influences understanding and interpretation.

My forestructure of understanding will constrain my interpretation and what I am able to articulate about the research. Not only will my forestructure constrain me, but the Latinas' circles of understanding and forestructures will influence how they understand, interpret, and articulate various phenomena. As a researcher collecting data in the field, I need to ask myself questions to avoid reading "me" and my assumptions into the data. The forestructure, or what we know in advance about the phenomena of a study, can be laid out before a study is

initiated to be clear about what is being studied. It involves my forehaving, foresight, and foregrasp as conceptualized by Heidegger (1926/1962) and will be explored next.

My Forestructure for this Research

Forehaving. My initial sense of the phenomena or forehaving (Packer & Addison, 1991) is related to everyday experiences of Mexican American women. I proposed that interculturations were part of mundane, everyday practices and processes of transitions encountered by Latinas faced with decisions related to women's health. With this, I was prepared to investigate the phenomena. My sense of interculturations was developed through years of experience as a perinatal and women's health nurse working with immigrant women from various places including Puerto Rico, Central America, and Mexico and with second and third generation Mexican American women. Multiple conversations with women, other health care providers, and colleagues over a ten year period cultivated a keen interest in the ways that second generation Mexican American women, in particular, handled the mixing cultural practices of their Mexican ancestors and those of their U.S. born friends and relatives. My "forehaving" also included what I had learned through a pilot study I did in late 1992. My ideas about interculturations and issues of women's health were advanced through the implementation of the qualitative pilot study

which I did with four Mexican American women to learn about their understandings of the concepts of womanhood, motherhood, sexuality, and pregnancy (see Appendix A).

Foresight. Heidegger (1926, 1962) explained that the foresight is something we see in advance and "takes the first cut" out of what has been taken into our fore-having (p.191). In this research, my foresight was to interpret the conflicts and contradictions that Latinas encounter in daily living as part of cultural "mixings" or interculturations. I interpreted these mixtures to occur in the borderlands where various diverse Mexican and U.S. mainstream ways mix together.

Foregrasp. My consequent suggestion of a possible solution to the problems foreseen is called my foreconception or foregrasp. This is "what is to be found out in the asking" (Heidegger, 1926/1962, p.26). This is my preliminary sense of what counts as a question and what would count as an answer (Leonard, 1994, p.57). Because of the influences of both new ethnography and phenomenology, my preliminary understanding of that which would count as a question involved the context of the women's lives as they lived amidst changing cultural ways. Inquiry into the historical situatedness of Mexicans in the U.S. as well as particular elements of a woman's situation in her local context showed up as questions and stories that revealed how a woman was embedded in her socio-cultural context as well

as information perceived about her context through my efforts of participant observation showed up as what would count as answers.

With this forestructure of understanding, I implemented a study of "taking care" amidst interculturations and "borderlands" processes for second generations Mexican American women with low income. By focusing on interculturations from the perspectives of the Latinas who were participants in the research, I hoped to discover processes that could facilitate nurses' ability to understand Latinas' spectrums of positionality across cultures and classes (realizing that most nurses were not Latinas and did not have low incomes). I expected to gain understanding in order to teach nurses with the goal of decreasing missed understandings between nurses and Latina patient/clients who utilized clinics for women with low income.

Phenomenological Concepts of Importance

Various concepts utilized in Heideggerian phenomenology are central to understanding my research. The descriptions of these concepts are based on the work of Martin Heidegger (1926/1962) as interpreted by psychologist Judith Wrubel (1985), by nurse researcher Patricia Benner and co-author Judith Wrubel (1989), and/or by philosopher Herbert Dreyfus (1992).

Self Interpreting

Heidegger suggested that persons are self-interpreting. A person's "existence" is a person's self-interpreting way of being which embodies an understanding of what it is to be. In this way, Being human (or "Dasein") is what it interprets itself to be; human being is essentially self-interpreting (Dreyfus, 1992). Self-interpreting beings are themselves the embodied understandings that result from the constant non-reflective interpretations of the self in the world that shows up as smooth functioning (Wrubel, 1985, p.45).

For-the-sake-of-which

The "for-the-sake-of-which" is not a goal but rather a self-interpretation that informs and orders a person's activities (Dreyfus, 1992, p.95). The phenomenological concepts of the "self" and the "for-the-sake-of-which" are intertwined. People have effortless, nonreflective understandings of themselves (their selves) because they are always situated in meaningful contexts (Benner & Wrubel, 1989). People have embodied understandings of the world in relation to themselves, their commitments, and their concerns. In other words, if a woman lived for the sake of being a compassionate and consistent parent to her child, her living of this "for-the-sake-of-which" includes concerns about what it means to her to be a compassionate parent.

This "for-the-sake-of-which," then, is constitutive of her selfhood.

Background and Background Meanings

Dreyfus (1992) spoke about background meanings as what a "culture" gives a person from birth. It involves shared, public understandings of "what is." The family to which an individual belongs and the community of the individual provides background meaning, but only within the range of what is possible within that particular community and culture, in that particular time in history. Also, as people in a community live out the background meaning over time, it is modified and takes on new forms (Benner & Wrubel, 1989, p.46-47).

Human beings are always pressing into new possibilities (Dreyfus, 1992). What makes sense to do at any moment depends on the background of shared "for-the-sake-of-which's" available in a "culture." Thus, people are always already in a space of possibilities offered by the "culture," and commonly press forward into one of these possibilities without standing back and choosing what to do (p.264-5).

Personal background meanings are shared by (understood by) groups of people but are taken up in individual ways. This shared background familiarity allows people to have both shared and individual interpretations of our world.

These shared interpretations evolve from understandings and show up in "clearings" (Plager on Heidegger, 1994).

Clearings

Dreyfus (in Magee, 1988) explained that "understanding" occurs as a result of "clearings." Language, cultural conventions, social practices, and historical understandings create clearings (Benner, 1994). Clearings are part of the lived experience of people. They involve the activity of holding open a shared, public space of meaning in which entities can be encountered" (Dreyfus in Magee, 1988, p.264). Dreyfus (in Magee, 1988) noted that the philosophical underpinnings of "clearing" involves three issues. First, as people we are able to hold open a clearing because we are always already attuned in the world such that things matter to us. Second, we are engaged with taking up things in the world such that there is an interrelation of significance among things. This "referential totality of significance" connects people and things to things and people in ways that are taken-for-granted. Finally, as people we are involved in everyday transparent, skilled coping such that we are oriented towards the future and are pressing into new possibilities that our culture offers us. Further, the taken-for-granted ways we press into the future are cloaked with meaning in relation to our identities in a way that we do not usually articulate (Dreyfus in Magee, 1988). This non-cognitive,

taken-for-granted understanding opens a clearing in which everyday practices and everyday, taken-for-granted awareness takes place. All the aspects of coping that we take-for-granted in everyday human activity are governed by these clearings (Dreyfus, 1984 in Plager, 1994). Thus, shared understandings of personal background meanings are possible because of the taken-for-granted awareness within clearings, lending a sense of reality that is understood and shared.

Lived Meanings

The way personal meanings arise from and exist in the situation as the person experiences it allows for lived meanings. They are part of what is real for a person (Benner & Wrubel, 1989, p.410).

Coping

What people do when personal meanings are disrupted or when smooth functioning breaks down is considered to be coping. Because the goal of coping to restore meaning (Benner & Wrubel, 1989, p.408), ways of coping show up as viable strategies based on what is part of a person's world.

Temporality

The way people simultaneously live in the present, are influenced by the past, and are projected into the future is referred to as temporality. Benner and Wrubel stated that "it does not refer to the linear passage of time, but to the way the person is anchored in a present that is made

meaningful by past experience and by the person's anticipated future (1989, p.412).

Concerns

Concerns are involvements of a person in a context. A concern is a way of being involved in one's own world in which people and things matter to them. A concern describes a phenomenological relationship in which the world is apprehended directly in terms of its meaning for the self. It is the reason why people act and is necessary for life (Benner & Wrubel, 1989, p.408). (Note: the phenomenological concepts of background meaning, personal background meaning, breakdown or disruption, and a more extensive elaboration of clearing was also discussed in Chapter II).

Other Concepts of Importance

Other concepts of importance to this research were described in Chapter 2. I will briefly address the key concepts so that all of the major concepts are listed here.

The Borderlands. Borderlands refers to a place and a process (Anzaldúa, 1987; Alex Saragoza, personal communication, 4/29/96). Physically, it refers to the physical border between two actual places such as the U.S. and Mexico. Conceptually, it also refers to the metaphorical borderlands of the U.S. including the process of change involved in living between shifting borders. Here, discontinuities and contradictions of meaning may

complicate life where the borders of gender, race, class, and ethnicity come together.

Redefinition of Culture. Rosaldo's (1989) redefinition of culture refers to the mundane practices of everyday life. Rather than on the whole patterns of cultural traditions, the focus for research on culture is on the inconsistent, inbetween places of people's lives.

Interpellations. The concept of interpellations is also important but will be discussed in Chapter 4. It refers to a kind of interculturalization that involves power dynamics.

Interculturalizations. Interculturalizations are the clashing or mixings of background meanings that occurs within the processes and practices in everyday life. Clashing of this sort can be described phenomenologically as a "breakdown of background meaning." As was already discussed in Chapter 2, interculturalizations often go unnoticed in a taken-for-granted way when they involve a smooth mixing of background meanings for a person who is situated in a mixing cultural milieu. However, when a mixing of background meanings brings with it a disruption in smooth understanding or functioning and a clashing of meaning ensues, interculturalizations become explicit in experience.

When an intercultural clashing of previously taken-for-granted background meanings occurs in this research, it may involve a conflict of meaning between two or more people.

Whereas the background previously showed up as a "shared, public understanding" among people, it may now be problematic because of conflicting perceptions. People who assumed they shared an understanding about the world may discover they no longer do. The resulting conflict in coping for the two in disagreement presents them people with an opening for negotiation of meaning while respondent's description of the disagreement presents the researcher with an intercultural opening for analysis. The conflict or clashing of meaning may be resolved or ongoing. Regardless, the telling of a person's immediate experience through a story is the most useful mode for learning about interculturations in research. Storytelling, unlike question and answer interviewing, allows the person to access their concerns in context, their more immediate taken-for-granted understanding of the occurrence, and their practical knowledge.

A Self Reflexive Analysis as a Prelude to the Discussion of this Study

Before I present the discussion of the design of this study and the criteria for evaluating the quality of the project, I will present a self reflexive analysis of my context. Elements of my context, among other things, include my race and gender as a white woman; my sexual preference as heterosexual; my class status as a middle class, registered nurse and student; my education as a

graduate student; and my geographic location in San Francisco, California. In addition, my ability to speak Spanish, my interest in Latino communities and culture, my history of more than ten years working with Latino communities in Boston, MA, San Jose, CA, and San Francisco, CA as a public health nurse, home health nurse, clinic nurse, labor and delivery nurse, program planner, and health educator are important to the ways I approach this research.

Elements of my context influenced every aspect of this research project, from design, to data collection, to the writing of interpretations. I explored and examined my own personal feelings or reactions to the women involved in this research project through memos, consultation with my committee and other consultants, and confidential discussions with a therapist. Psychologist Melvin E. Miller recommended that "at the very least, all narrative researchers should be encouraged to undergo supervision with a seasoned clinician" in therapy. Indeed, ongoing therapy throughout the dissertation process has improved my ability to work out personal struggles that came up through the research process. Other elements of my context and how they may have influenced this research are directly discussed in Appendix A, B, C, and D).

The Study Design

I designed this research to explore the lived experiences of second generation Mexican American women with

low income in relation to their ways of "taking care," as an attempt to grasp their self-understandings related to reproductive health needs. I was interested in exploring interculturations that I hoped would shed light on the phenomena of changing cultural ways that may contribute to the trend towards ill health for second generation women.

Study Procedures

After obtaining permission from the Committee on Human Research (CHR) at UCSF, I was ready to implement this project. This research involved recruitment, data collection through interviews and participant observation, consultations, data analysis, and my interpretations of the women's understandings of their lives.

Inclusion Criteria

All women who participated in the study read the consent form and discussed it with me. The criteria for inclusion in the study included Mexican American women between the ages of 20 and 45, who were born in the U.S. to one or both parents who were born in Mexico, and who were of low income. Because of my language limitations (I am fluent in English and speak Spanish but am not completely fluent, therefore I could miss important nuances in conversation), an inclusion criteria was that all women be able to speak English. Each woman agreed to be interviewed two or three times about her ideas, opinions, feelings about taking care of herself, growing up, being a woman, being a mother, and

her culture. Women were also aware that the study required that I visit her in her community. There was no financial reimbursement for women who took part in the study.

Recruitment

Most of the women who participated in the study were referred to me by the physicians, nurse practitioners, nurses, or medical assistants at two clinical sites. I was able to meet and discuss the study with many of the women before or after their appointment at the clinic. If the woman was interested in the study, we went over the consent form together, signed the form, and made an appointment for me to visit her for the first interview. All twelve women who participated in this research signed consent forms and received one signed copy to keep. I contacted other women through telephone calls after receiving their name from one of the clinic staff as a referral. In these cases, I usually reviewed the person's chart to try and identify if she met the inclusion criteria before calling her. This was not always possible to establish in advance, however.

I spoke with a total of 35 women during recruitment. Of these, nine women were very interested but were ineligible because they did not meet the inclusion criteria. Another nine women were not interested in participating in the study because they were "too busy," or not interested in being interviewed. Two were undecided and did not participate in the study. Of the 15 who met the inclusion

criteria and were interested in the study, one failed to show up for two scheduled interviews and thus never signed a consent form. She did not participate in the study.

Fourteen signed consent forms but two women failed to show up for scheduled interviews and did not return phone calls after the missed appointments for interviews. Thus, twelve women participated in the study.

The Study Sample

The sample was comprised of twelve women who were daughters of Mexican immigrants. Although each woman was informed that the study was targeting second generation Mexican American women, the notion of 'generation' turned out to be a contested category for the women I interviewed. For example, one woman responded to this element of inclusion criteria stating, "I am second generation, but I was born in Mexico and came here when I was very little, at age 2 or 3. I fit the criteria and I want to be in the study." Consequently, she did participate in the study. However, during the second interview, it became clear that she did not move to the U.S. until she was 11 years old. Regardless of where she was born or grew up, this participant understood herself to be a second generation Mexican American woman (see Chapter 9). Another woman reported that she was born in the U.S. and later revealed, during the 3rd interview, that she had been given a false U.S. birth certificate and actually was born in Mexico. A

third woman explained that she was indeed born in the U.S. but during interviews revealed that she was taken back to Mexico from age 3 to 19. She first moved back to the U.S. when she was 19 although she had visited several times during her childhood and adolescence. Because her experience was significantly different from the other women, having spent most of her life in Mexico, this woman's stories and experiences served as a contrast to those of the other 11 women. However, her narratives were not central to any of my interpretations due to the important differences between her and the other women.

Various other demographic data were gathered by use of a demographic sheet that I filled out with the women during interviews. Among the data collected with this sheet included information about where the women and her parents were born and grew up (see Appendix E).

Age and language use. The women ranged from 20 to 39 years of age. All of the women spoke English and an additional nine were bilingual in Spanish. All of the women could read and write in English and five could do so in Spanish as well.

Economic issues. All of the women attended clinics for low income women. Eight women received Medi-Cal.

Partnership. Three of the women lived with their common-law partners and three were legally married. Six of the women were single. Of the single women, only one was

not involved in a relationship with a man. Two of the women were engaged. All of the women were heterosexual.

Employment. Ten of the women had jobs outside the home and one woman did babysitting in her own home. Only one woman was unemployed. The women who worked outside of their homes held a variety of jobs including that of a printer, telemarketer, daycare worker, data entry staff, secretary at a radio station, stripper/exotic dancer, cashier at food service, and driver providing transportation for dialysis patients.

Geographic situatedness. Six of the women were born in California, four in Texas, and two in Mexico. Five spent their childhoods in San Tomas, California, one in a California border town, four in Texas, and two in Mexico. Eight of the women spent their adolescence in San Tomas, one in a California border town, two in Texas, and one in Mexico. All twelve of the women spent their adult years after adolescence in California.

Information about families of origin. Most of the women's fathers and only about half of the women's mothers were born in Mexico. Of the mothers, seven were born in Mexico; two in California, and three in Texas. Of the fathers, ten were born in Mexico; one in Texas; and one in Europe.

The women's mothers ranged in age from 41 to 70 years and in education from three years of education to college

level. The women's fathers ranged in age from 42 to 72 years and in education from no education to a college education. About half of the women's parents were bilingual and almost the rest were Spanish speaking only.

The women each had from four to eight siblings. Two women had no children and the others had from one to seven children.

Health facts. None of the women reported serious physical illness or diseases. One woman reported having recurrent urinary tract infections, another had gestational diabetes with her last pregnancy, and two others reported having had kidney infections in the past.

One woman reported a past history of alcoholism, another a past history of alcohol use, and a third reported weekly alcohol use including "partying" weekly. Another woman reported a past addiction to methamphetamine (speed) and a current practice of regular marijuana use.

All of the women reported using birth control at some time in their lives. Most of the women described their health as "good."

Two women each experienced one miscarriage and one woman had had two abortions. All of the women experienced menarche between the ages of 10-13 years.

Data Collection

Medical Records

Whenever possible, I reviewed the medical records of the women who were recruited for the study. The two sites for recruitment were community clinics with staff to assist me in the location of the records. I would review the charts for information about the woman, her health, and her demographics.

Interviews and Limited Participant Observation

I visited each woman in this study from one to seven times. Taped interviews were done with each woman on most of these occasions and lasted from one to three and a half hours. I transcribed some of the taped interviews and hired a transcriber to transcribe others. I listened to the tapes in addition to reading and re-reading the transcripts of the taped interviews. I made notes during interviews, immediately after interviews, at the time of listening to the tape, and while re-reading the transcripts. I wrote memos about my personal reactions and feelings about the women, our interviews, the interview process, cultural issues, or any other issue that came up during data collection, while listening to the tapes, or reading the transcripts. I considered all of these to be data. I interviewed most of the women in their homes where they could control the environment. One of the women requested

that the second interview be done in the clinic. At that time, we used a private office for the interview.

Anthropologists typically spend years in participant observation which includes multiple interviews with participants while the anthropologist is living in the field where they are doing research. Here, they are engaged in the daily activities of their participants, observe their daily activities, and interview various people of the group they are studying (Adelaida Del Castillo, personal communication, 11/27/96). In contrast, I spent time with my participants on various occasions but did not live in the community where they lived and did not interview anyone who did not fit the criteria for the study and who did not sign a consent form.

Nonetheless, in addition to the taped interviews, I spent time with many of the women of the study during which I did not tape our dialogue. Although these untaped, unstructured episodes were limited to only one to three meetings (as compared to dozens of meetings that an anthropologist might have with participants), they were similar in style to what anthropologists define as participant observation during which the anthropologist is engaged in activities with the participant (see Carol Stack's All Our Kin, 1974) (Adelaida Del Castillo, personal communication, 11/27/96). Episodes such as the day I cooked with Beatriz, or the day I attended Alicia's wedding and

reception, in addition to the times that I took care of Lorena's children while she ran an errand or prepared for a party were more similar to Del Castillo's (personal communication, 11/27/96) definition of participant observation. To further elaborate on these episodes, I also spent time with women in their homes, watching t.v. and talking. I attended family functions such as a child's birthday party and community events such as a flag football game for a woman's nephew. I also shared meals and social times with the women at local restaurants. Again, it is important to note that because I did not spend a period of months or years involved in participant observation while living in the community of my participants, my research differs from that done by anthropologists. Nonetheless, through my experiences of limited participant observation I met the women's families, friends, spouses, boyfriends, siblings, parents, and other relatives. I gained important insight into the women's worlds through these unstructured times together.

Again, unlike an anthropologist, I did not seek out opportunities to interview the friends, partners, or family members of the participant. On a couple of occasions, a participant offered to set up an interview of this type and I declined the offer. Part of the reason for this was because I had received approval from the Committee on Human Research at UCSF to interview only women who fit the

criteria of my study and who signed a consent form. The other factors that dissuaded me from this were issues related to assuring confidentiality of my primary informants and issues of safety. Many of the participants informed me of sensitive issues, sometimes involving violence, drugs, or incest. I did not want to jeopardize my safety or that of my participants. Again, this is unlike the research tactics that would have been employed by an anthropologist doing new ethnography.

I also spent time exploring the communities of the women I was interviewing. For example, during interviews with several women it became clear that many of the women spent their free time shopping at a department store called Floyd's and at a particular local mall. Consequently, I spent time at both locations without accompaniment of any of the women of the study just to gain a perspective on the places. I also went to some of the local restaurants, fast food chains, and another cluster of shops where many of the women's mothers or relatives shopped. These shops were run by and used predominantly by mono-lingual Spanish speaking immigrants from Mexico.

Telephone Calls

I confirmed appointments for interviews by making telephone calls to the women at their homes or place of work. The women had my telephone number and would sometimes call me if they needed to change the scheduling of our

meeting. Some women spent considerable time on the telephone talking with me before or after setting a date and time for the interview. These telephone calls lasted from ten minutes to two hours in length. During and after the telephone calls, I made notes related to the discussion that ensued.

Data Analysis

My process of data analysis involved repeated readings of the transcripts of the interviews and my fieldnotes. Upon re-reading the transcripts I became aware of particular categories of interest to the women. I looked for stories within the narratives that gave insight into particular categories (e.g., self-protection taking care). 'Stories' were identified as narratives that focused on a particular episode or occurrence rather than a sharing of information in a series of questions and answers. Sometimes a participant would tell a story and add to it later in the interview. Allowing for the persons's style for narrating, I did not limit a story's length by a formal semantic beginning and ending.

Stories showed up as narratives or scenarios that the woman considered important such that she explained what happened at a particular time as well as how she felt about it through a re-telling of the events according to how they made sense to her. Through this, I learned that it was very important to just listen and wait for the woman to tell her

story as it showed up for her. Through her engagement in the telling of the story, women often told things that seemed unrelated but eventually came together as we continued to talk after the telling of the story. If things did not make sense to me after she had told the story, I would ask for clarification or offer an interpretation of what I thought the story meant to her in order to give her a chance to correct my misunderstandings.

Paradigm Cases

Benner (1994) explained that paradigm cases can be used as a strategy of perceptual recognition and understanding in data analysis. They are strong instances of concerns or ways of being in the world (Benner, 1994). The development of paradigm cases was vital to the development of my understandings of the women in this study. In the exploration of paradigm cases, I identified Gloriana's story as one that particularly puzzled me. After reading the whole interview text for a global understanding, I selected particular events and concerns, and then offered an interpretation of their meanings. Through several re-examinations of my interpretations, I was able to identify the everyday reasonings and associations Gloriana made within her context, as was suggested by Benner (1994). By analyzing the particular elements of her narratives in light of the whole text I gained a perspective on the multiple ways that Gloriana participated in "taking care." I began

to grasp what her practical concerns were in the situation. Additionally, I realized more about Gloriana's understanding of societal, traditional Mexican gender norms as well as the particular gendered expectations of people in Gloriana's world. During this process, I sought out consultation in relation to my interpretation of Gloriana's way of coping (see consultation below).

After focusing on Gloriana's way of coping, I began working on a second case (that of Alicia). I utilized the same procedure I described above. Then, I developed a paradigm case highlighting Lorena, completing it as fully as I could. As I compared the three women's ways of taking care, dealing with intergenerational influences, and taking up gender identity I continued to discover how the three women were distinct from each other. That is when I began to realize that the way that the women took up their gendered identities from within their matrices of relationships was their central strategy for taking care amidst interculturations.

Thus, the paradigm cases of Lorena, Alicia, and Gloriana each produced a meaning change for me as the interpreter, which brought clarity to my understanding of the phenomena of "paradigm cases" as tools in data analysis as described by Kit Chesla (personal communication, 2/16/95). Each woman's case exemplified a way of being so that I could understand the contrasts. I eventually

developed a fourth paradigm case, that of Ines, because her narratives "turned my thinking around" (Kit Chesla, personal communication, 2/16/95) yet another time. In the writing of paradigm cases, I also utilized thematic analysis to analyze the data. This will be discussed next.

Thematic Analysis

Analyzing the data thematically involved looking for meaningful patterns, stances, or concerns of the women as was suggested by Benner (1994) in order to clarify distinctions as well as similarities between situations or cases. I moved back and forth between portions of the text and portions of the analyses in order to explore the meanings of the data, dimensions of each woman's self understandings, and the larger perspective of the woman's life in relation to particular themes. Some of the broad categories of themes that emerged will be discussed next.

Intergenerational influences. The influence of relatives from various generations emerged as an important theme from the beginning of data collection. Women often spoke of their mothers, fathers, and grandparents. Consequently, I also sought out narratives that addressed the intergenerational phenomena. I looked for how these relationships and dynamics both opened up and closed down possibilities for the women.

Interculturations. The theme of background meanings and ways that women dealt with a clashing of meanings as

they showed up in their dealings with others in their worlds emerged. Women described episodes as problematic in their lives. General examples included a time of crisis, an incident that involved a difference of opinion with a significant other, or a time that required action from the woman's perspective. I reviewed the women's narratives related to these instances to see how interculturations showed up. By analyzing the narratives, I tried to identify the woman's assumptions that may have functioned as background meanings, the contradiction or conflict, the differing aspects of the other person's assumptions (because it usually involved another person), the central concern of the woman in the midst of the conflict /clashing /contradiction, as well as the practical coping that the woman engaged in during the situation. Finally, I analyzed the narrative to determine if this episode (or series of episodes) was a turning point for her (or led to a turning point for her). I was particularly interested in understanding a woman's interpretation of a turning point because this allowed for particular insight into what was significant to the woman, how it changed her way of understanding her stance in her world, and why this was important to her.

"Taking care." Women spoke of "taking care" in ways that were similar and ways that were different. I explored the data to gain understandings of what "taking care" meant

to the women based on their narratives but not necessarily based on their observed actions because of the limited amount of participant observation that I did. I looked for how each woman was involved in taking care, how it showed up as a concern for her, what relational involvements affected her understanding of taking care as well as her ability to participate in taking care activities, and how interculturations influenced her ways of "taking care." I also explored the data for understanding of how intergenerational influences affected her ways of "taking care."

In the exploration of "taking care," I found episodes in the data that involved physical health concerns (e.g., women's health or maternal-child health related problems, events, crises, and mundane practices) as well as episodes that were less physical and more emotional in nature (e.g., ways of dealing in relationships).

The focus on "taking care" was instrumental in uncovering the kinds of involvements that a woman was engaged in. These involvements set up her ways of being connected in relationships in her world (totality of involvements) and informed me about what was meaningful to her in relationships.

Identity. The analysis of paradigm cases and the focus on interculturations, intergenerational influences, and taking care allowed for crucial insight into the women's

processes of identities which brought the issue of gender identity to the fore in this analysis. Various identity issues were important to the women in this research and analysis of each women's primary identity concern (for-the-sake-of) and her self interpretation brought the realization that gender was a key identity issue for all of the women of the study. By searching for the nexus of clashing background meanings, I realized that a major site of conflict and concern was gender. Aspects and components of cultural identity meshed with those related to gender identity in ways that were visible due to the women's ways of coping in situations of intercultural conflict.

Exemplars

Another element of data analysis is the use of exemplars. These convey aspects of a paradigm case or a thematic analysis. They are useful because they allow the researcher to demonstrate intents and concerns through a range of exemplars, establishing a field of relationships and distinctions among the data (Benner, 1994). In my research, the use of exemplars allowed for the development of my understanding of qualitative distinctions within the data and among the women's lives.

Consultations

I sought out multiple consultants during the course of data collection and analysis. The goal behind this was to enhance my own self reflection, to challenge my analysis of

the data, to discuss the lives of the women in the study and the possible meanings of their narratives, and to affirm aspects of my work that were effective. Additionally, because this study was a cross cultural study due to my socially gendered, racial, classed based, and cultural embedded background as a white woman, consultations with Latinos/as was important to my analysis of the data as well as my growth as a researcher.

The different types of consultation I received ranged from cultural critique to methodological guidance. I received consultation in relation to phenomenology, methodology, and data analysis (Kit Chesla, RN, DNSc); data analysis and critical self-reflection as part of the research process (Jeanne DeJoseph, CNM, PhD and Adele Clarke, PhD); philosophical issues related to the phenomenology of Martin Heidegger (Herbert Dreyfus, PhD; Sean Kelly, Teaching Assistant); methodologic issues of ethnographic data collection and data analysis (Adelaida Del Castillo, PhD); sociological issues of sexuality and employment for sex trade workers (Lisa Moore, PhD); critical aspects of cultural issues for Mexican Americans in relation to my data and analysis (Health education expert Veronica E. Murillo, MPH; anthropologist Adelaida Del Castillo, PhD; historian Alex Saragoza; and nurse practitioner Enriqueta Hinojos), and general perceptions related to cultural

interpretations in general (Rebecca Carabez, Debbie Marquez, Marcos Gonzalez, Nuri Enciso, and Mary Lopez).

Criteria for Evaluating the Quality of Research

DeJoseph and Messias (in preparation) outlined six dimensions of quality for evaluating the focus, method, process, sensitivity, and interpretations in feminist narrative interpretations. The six dimensions of relevance, appropriateness, engagement, contextuality, presentation, and ethics, offer a useful framework for evaluating my research design, choice of methodology, and the process of implementing the research.

Relevance to Women

This study is relevant to the concerns of women as they were communicated to me in the pilot study and through consultations. The results of the analysis are likely to contribute to the improvement of health care services to women because the research was designed based on the concerns of the women.

Appropriateness of Method

The methodological approaches utilized in this research are appropriate to the study. As has already been discussed, new ethnographic techniques and priorities were key for a study that had cultural dimensions at its center. Phenomenology is crucial for the careful analysis of the women's narratives. Both of these methodologies encourage

reflexivity of the researcher throughout the process of research.

Engagement in Research

In this research, I recognize that the participants and I were engaged in the co-production of data. My goal was to maximize mutuality and trust in relationships with the participants by remaining open to their need to ask me questions and obtain information from me about the research. In relation to mutuality, participants were comfortable asking me questions and letting me know what would and would not be convenient for them in terms of interviewing including questions that they did not want to address and in terms of participant observation, letting me know when they did or did not want me to "hang out." In relation to reflexivity, my own rigor in self analysis kept issues related to my own engagement in the research, dialogue, and exchange at the forefront of my concerns.

Contextuality

The contextual issues of the historical, sociocultural, political, economic, and embodied life circumstances were crucial to the planning, implementation, and execution of this research. In order to enhance my knowledge of the context of my participants, I sought out coursework and independent work with Latino/a scholars for over two years before I began this research. My work with Alex Saragoza, PhD, focusing on the historical contexts of immigrants from

Mexico, was particularly important to my awareness of historical, political, economic aspects of the context of Mexican American women's positions in the U.S. Work by Chicanas Norma Alarcon, PhD (with whom I studied in spring of 1994) and Adelaida Del Castillo, PhD (who is on my committee) had significant impact upon my understandings of socio-cultural contexts of Latinas. Del Castillo's (1993, in press) work had a particular impact on the development of this research. Her work related to gender with Mexican women was crucial to my perspective. In addition, course work with philosopher Roberto Rivera, PhD and instructor and mental health therapist Felix Kury, MA increased my awareness of the scholarly work of various Latino researchers, scholars, theologians, and poets. In addition, my work as a nurse in Latino communities for over ten years influenced my understandings of women's embodied circumstances.

Presentation

Presentation concerns brought questions throughout the data analysis phase of this research. I decided to present whole cases in great detail as a strategy for avoiding the tendency for readers to stereotype women. Although this involved a great deal of analysis and discussion, I decided that this was the best way to present the research within particular contexts. (For an indepth discussion of the ethics of interpretation and presentation, see Appendix C).

Ethics

Issues of ethics were significant in this research. Not only was honesty important, as suggested by DeJoseph and Messias (in press), but issues of potential racial discrimination and misinterpretation required much consideration in every phase of the research. In addition, because the women were of low income, I felt an ethical pull to be as clear as possible about the contexts of women's lives because of the tendency of readers to be oblivious to the issue of class. As is mentioned in Chapter 12, caution must be used when discussing this research because it is limited in scope to women of low income.

In a volume on the ethics of narrative study, psychologist Richard Ochberg (1996), noted that the particular themes that a researcher focuses on in data analysis reflects an element of who they are and what matters to them. Getting clear about this has ethical implications for the project. Indeed this study was influenced by my personal concern for and experience of survival amidst changing cultural forces, familial relationships, and gendered expectations. Thus, the moral pull of ethical practice contributed to my desire to be self critical about my interpretations. I dealt with this through discussions of the research with consultants and professors, discussions of myself with my therapist, the writing of memos, and the writing and rewriting of my

interpretations after self conscious analysis (again, see Appendix C).

Conclusion

In sum, the combination of new ethnographic techniques and interpretive phenomenology allowed for a generative integration of methodologies that complemented one another and provided important guidance for this research. Feminism and postmodern critiques of modern notions of "Truth" and the "self" were crucial to my approach to the design, implementation, data collection, and data analysis. This discussion of new ethnography, interpretive phenomenology, feminism, and post modernism will be built upon in the next two chapters in the discussion of the concepts of interpellations and gender. Together these theoretical, philosophical, and methodological elements set up the framework within which I completed this research.

Chapter 4

Subjectivity, Subject Formation, Ideology, and Interpellations

As a nurse researcher and clinician, I have been in conversation with women about issues of reproductive health for over fourteen years. Through multiple conversations, women have revealed particular understandings of their gender identities that resist universal generalization or essentializing. In this research I did not approach the women of my study only as detached "subjects" who live out a mind/body split such that they have assigned meaning to themselves or things in their worlds. Although people sometimes do perform acts of 'construction' or interpretation within a mode of reflective cognition, I have focused on how women have uncovered or discovered meaning within contexts of relationships while engaged in coping.

I recognize, however, that these relationships and coping experiences are embedded in a larger matrix constrained by societal, cultural, economic, and political forces and are influenced by regulatory and traditional norms for sex and gender. A theoretical analysis of societal gender norms is crucial for situating the participants of this research within a larger socio-cultural milieu and will follow this discussion, in Chapter 5.

However, the following discussion of the phenomena of interpellation and its taken-for-granted regulatory function of forming subjects will complement understandings of gender

norms. The discussion of interpellation will be key for exploring how gender norms render subjects vulnerable to the power of discourses in society (Butler, 1993). For purposes of clarification, discourses in society can be defined as methods of common understanding (Garfinkel, 1984, in Alasuutari, 1995). Drawing from Foucault's discussion of the discourse of sexuality, I have further understood that a "discourse" can be conceptualized to include the statements of what is said about some category of issues in society, what is authorized to be said by those who are speaking, how these things are said, from what point of view they are presented and why - or to obtain what results (Foucault, 1978, p.27).

Thus, this discussion will serve as a prelude for understanding how the traditional Mexican gender norms, as a part of the discourses of society, can facilitate interpellations of women within the mundane processes of everyday life (submitting women to the regulatory function of gender norms to form subjects) in their personal relationships as well as in their relationships with health professionals. Theoretical understandings of interpellations are important in this project because of the ways that societal gender norms can be transferred to personal expectations related to gender identity, gendered behavior, and perceptions of gendered bodies. This has important implications for health care providers.

Subject Formation and Subject Positions

Historically, Western Cartesian philosophers assumed that all people were autonomous subjects capable of free choice. In contrast, interpretive phenomenology is not based on the notion of the radically free individual. Rather, phenomenology holds that people are predominantly coping beings. Because people are absorbed in coping most of the time, we are usually in an engaged mode of being called "ready-to-hand" (Heidegger, 1926/1963). However, when a problem arises and disrupts taken-for-granted engagement in daily practices, we step back from coping to reflect and problem solve. In this time of reflection (present-at-hand mode of being), we are faced with this disruption of everyday activities. Here, we may employ abstractions, mental representations, and conceptualizations of thought to make sense of things. In this mode, we may think about ourselves in a central way, i.e. we become the subjects of our own thought.

As "subjects," we then conceive of ourselves as subjects relating to other subjects or objects and ultimate substances (e.g., God). It is during this time that we will engage in conceptual problem solving or theorizing. Here, our attention is no longer focused on engaged coping in a taken-for-granted way. Rather, we are engaged as a thinking subject (Dreyfus, 1992).

I am suggesting that the phenomenological modes of being (Dreyfus, 1992) can be employed to enhance understanding of the phenomena of interpellation. I contend that the movement from engagement in taken-for-granted, (ready-to-hand) mundane coping activity to engagement in problem solving or cognitive reflection (present-at-hand) involves the phenomena of the formation of subject. As stated above, it is within this mode of reflection that persons understand themselves to be the subjects of their own thoughts.

However, when a force (or forces) outside of the person acts to affect the movement from a mode of engaged mundane coping to that of a thinking subject, I contend that the phenomena of interpellation may be involved. Marxist philosopher Louis Althusser (1971) first described interpellations in his classic essay, "Lenin and Philosophy." Various scholars of cultural studies have since built on the theory (Smith, 1988; Butler, 1993; Gooding-Williams, 1993; Lowe, 1994; Sandell, 1996). To introduce the concept of interpellation, Althusser first outlined the concept of ideology.

Ideology

Within a Cartesian framework, Althusser (1979) defined ideology as the system of the ideas and representations which dominate the mind of a man or a social group (1979, p.149). From a Marxist perspective, Althusser stated that

ideology consists of illusions presented by 'men' (sic) to themselves in imaginary forms. These conceptualizations allude to reality, but are only cognitive representations of their relations to their real world(s). Althusser noted that ideological notions of the dominant class of people have particular power to influence the thoughts of members of society in general resulting in mass effects of various sorts (p.136). Within Althusser's framework, ideologies are the substratum on which everyday reasoning is built.

Rather than conceptualizing ideology as a cognitive function that produces mental representations in the mind and precedes action, I am suggesting that ideology can be understood within a phenomenological understanding of people as coping beings who uncover meaning as it is disclosed within contexts of relationships while engaged in coping. I am suggesting that ideologies can function as certain kinds of background meanings that are made possible because of clearings. To further describe this, I will clarify the connection between background meanings and clearings.

Dreyfus (1992) defined background meanings as what a "culture" gives a person from birth. It involves a shared, public understanding of "what is" (Benner & Wrubel, 1989). Not only does the family of an individual provide shared understandings of "what is," but the community and culture also provides background meaning within the bounds of what

is possible at that particular time in history (Benner & Wrubel, 1989).

These shared public understandings (Benner & Wrubel, 1989) are held in a taken-for-granted way by people who are engaged in coping. Furthermore, Dreyfus (in Magee, 1988) noted that "clearings" or shared spaces of meaning allow for these understandings among people because of cultural conventions, social practices, and historical interpretations.

I am suggesting that ideological notions of taken-for-granted understandings about the ways that things, events or people are in relationship to each other may be among the background meanings that a person takes to be real without consciously reflecting upon it. Wrubel (1985) noted that background meanings allow for the perception of the factual world.

Again, in contrast to my perspective, Althusser's (1979) conceptualization of ideology is based on a Cartesian representational model of the mind. With this model, people perceive and understand experience by representing their experiences mentally and then interpreting or assigning meanings to them (Benner & Wrubel, 1989). Within this framework, the mind and body are split such that the mind is the only source of meaning and interpretation and the body cannot be understood as a knower but only as a means of bringing information to the mind (Benner & Wrubel, 1989).

Again, Althusser (1979) holds that ideology is due to cognitive representations that dominate the minds of people in a social group.

In contrast, I contend that understandings or meanings, even ideological meanings, are taken up by people who are socially positioned and culturally embedded in contexts that are historically situated. Here, meanings arise within contexts and are generally not reflected upon (as they would be in the present-at-hand mode of being) but are taken-for-granted (as in the ready-to-hand mode). Building on the work of Wrubel (1985), I am suggesting that ideological understandings may show up as background meanings that may become available but are never totally available to reflective consciousness because they are culturally and socially embedded in contexts in a taken-for-granted way. A disruption of that which is taken-for-granted may catalyze reflective thought about some ideological background meanings.

In short, Althusser (1979) theorizes that ideological meanings start with mental representations in the mind and move into daily activities while I contend that ideological meanings probably first emerge in everyday activities and practical contexts (because of background meanings made possible through shared public clearings) and are taken up in practices without reflection, as part of daily ready-to-hand coping that is taken-for-granted. Further, when some

disruption, challenge, or breakdown occurs, the ideological meanings as background meanings may then show up for the person to reflect upon cognitively. However, the obviousness (Althusser, 1979, p.161) of these ideological background meanings may remain so obvious that they are transparent which makes complete and total clarity or disengagement from these ideological background meanings unlikely.

As a point of clarification, I do not conceptualize ideology as being constitutive of a person's identity. However, ideological understandings as background meanings may function to constrain or expand the possibilities related to identity that are available to a person because of clearings. To explain this distinction related to identity, I will again address clearings. Clearings are possible because of language, cultural conventions, social practices, and historical understandings (Benner 1994). Further, as Dreyfus (in Magee, 1988) explained, the underpinnings of clearings involve (a) the way we are always already attuned in the world such that things matter to us; (b) the interrelation of significance among things in the world as we are engaged in them; and (c) our involvement in everyday coping such that we press into future possibilities that our culture offers us. In short, clearings are possible because we are engaged in a phenomena of pressing into possibilities that are made available to us by our

culture and community where things are interrelated and where things matter to us. As part of the phenomena of clearings, people press into future possibilities in ways that involve how we understand our identities (Dreyfus in Magee, 1988). I contend that because background meanings - even ideological background meanings - may show up in clearings, they may affect how people press into future possibilities related to their identities (their self-interpretations or for-the-sake-of-which's). In this way, ideological background meanings may constrain a person's self interpretation or identity but they do not constitute them.

Interpellation of the Subject

Althusser (1979) built upon the notion of ideology to develop the concept of "interpellation." Althusser (1979) defined interpellation as the process of "subject formation" within ideologically saturated societies. He held that ideology constantly constituted concrete individuals as subjects (p.160). However, the terms he used in 1979 have since been critiqued and problematized. For example, post-structuralism undertook a systematic remapping of the category of the "subject" (Mowitt, 1988). Smith noted that since the late 1970's it has sometimes been used as a synonym for the "individual," the "person," the "self," or the subjected "object" of social and historical forces (Smith, 1988, p.xxvii). Accordingly, post structuralist

scholars have contested the meaning of the "formation of the subject" (see Smith, 1988; Foucault, 1972). For purposes of this discussion, I will refer to the subject as the conscious, thinking person; and I will refer to the formation of subject as the process by which a person becomes the object of her/his own thought (Dreyfus, 1992).

According to Althusser (1979), ideological representations in the collective mind of a society "hail" us and sometimes we respond to the call, as if we belong to the representation in some sociological way. This is interpellation. Further, because of the power dynamics at play in society, Althusser claimed that we are constantly caught up in the "ritual practice" of ideological recognition (p.161), being hailed and responding to the call such that we are never outside of this phenomena. When we respond, Althusser states we become interpellated as subjects. Thus, according to Althusser, we are always already interpellated by ideology as subjects (1979, p.164) because ideology saturates society.

Before I present more of my own elaboration of Althusser's (1979) concept of interpellation, I will briefly introduce the work of several other scholars who have expanded the analysis of interpellations. Paul Smith (1988), Lisa Lowe (1994), and Jillian Sandell (1996) have each provided important development of the concept leading

up to my reworking of the concept in reference to health care providers.

The Work of Paul Smith (1988)

In his volume, Discerning the Subject, English scholar Paul Smith (1988) noted that, despite our ignorance of its presence, a dynamic of power is at work when people become subjects. When the formation of the subject involves a process of being sub-jected or thrown beneath some other force that has a greater power valence, interpellation has taken place. Smith (1988) suggested that the interpellated subject is a conglomeration of positions "into which a person is called momentarily by the discourses and the world that he/she inhabits" (p.xxxv). In the discourses of society, the subject is vulnerable to various forces that dominate the subject in some way or another. Smith contends that macro-relations in society, language, political apparatuses, or ideology act as powerful forces in the background. Smith noted that these forces exert dominance over the subject in ways that are not readily recognized (1988).

The Work of Lisa Lowe (1994)

Lisa Lowe (1994) asserted that interpellation takes place within social relations. The phenomena involves an enlisting of people as subjects (hailing or calling them) such that they respond to identifications that are created and sustained through ideological "fantasies" upheld by

members of society. These "fantasies" depict a certain interpretation of the structure of relationships in societies. Lowe contends that subjects are enlisted to identify with a relational position set up by "fictions" that propagate universalities and harmonies in society at the expense of difference and particularity (1994, p.61).

The Work of Jillian Sandell (1996)

Jillian Sandell (1996) is the only scholar I have found who has addressed the complex yet taken-for-granted issue of interpellation in relation to health care services.

Although Sandell's focus is different from that of this research project (her focus is the specific phenomena of the propagation of victim feminism through therapy), her work merits discussion in order to articulate the usefulness of the concept of interpellation for discussing the ways that micro and macro processes are affected related to health care.

Sandell (1996) raised concern about the proliferation of what she has termed, "therapeutic culture" in the U.S.: the phenomena of self help techniques as part of everyday life. Within this greater social phenomena, Sandell focused on the ways that individual therapists employ psychological therapeutics in "recovery" regimens such as Twelve Step groups, for their clients, whom she noted are mostly female (Simonds, 1992 cited in Sandell, 1996). Sandell noted that therapists encourage their clients in recovery to employ

individualistic strategies for self healing. She compared the differing ways that women and men are interpellated in contemporary American therapeutic culture and noted that most self-help books that tackle issues related to gender and relationships are aimed at women. She stated,

women more often than men are interpellated as therapeutic subjects--at least within the kind of therapeutic culture that addresses issues of gender oppression. Men are also interpellated as therapeutic subjects, but this is more often in the realm of business and economics rather than gender and sexuality, suggesting that therapeutic culture reinforces, rather than eliminates, gender distinctions (Sandell, 1996, pp.24-25).

By addressing the phenomena of interpellation, Sandell discussed the micro-political processes that operate within particular localities (e.g. Twelve Step groups) to reinforce rather than challenge the dominant practices of the oppression of women in greater society. She claimed that therapeutic culture interpellated women as "therapeutic subjects" and encouraged them to employ individual strategies for recovery without acknowledging societal practices of oppression, even within the self-help movement. Her critique is useful to analyze the power dynamics at work in health care institutions and society at large.

My Elaboration on the Concept of Interpellations

Not unlike Althusser (1979), I contend that power dynamics and ideology make interpellations possible. My contribution to an elaboration of the concept, however,

involves a nuanced understanding of the phenomena of interpellations as they is experienced on a personal basis. I am proposing that relational power dynamics that are taken-for-granted can combine with ideological understandings as background meanings to set up interpellations. For example, parents, teachers, clergy, or health professionals such as physicians or nurses are people who may be "automatically" and transparently granted more relational power due to their sociological, cultural, gendered, or economic positions as superior to a child, student, parishioner, or patient. I contend that we are often caught up in relational experiences that involve differentials of social, economic, gendered, or cultural power due to multiple elements, such as sex, sexual orientation, ethnicity, income, education, race, or etc. These, and many more elements not listed here, may then influence power differentials in social relationships including therapeutic relationships between health providers and patients.

In addition to the power dynamics, background meanings may influence interpersonal dynamics leading to interpellations. Gender norms, racial and ethnic stereotypes, taken-for-granted understandings about sex/sexualities, and beliefs related to class are just a few of the forces that can show up as background meanings in shared public clearings, affecting the ways people

interpellate others during one-on-one encounters. Nurses, physicians, and other health care personnel are not exempt from the processes of ideological background meanings and consequent interpellations.

Furthermore, background meanings offered by one person's family or community may coincide with dominant societal ideologies in ways that are taken-for-granted. Dominant ideologies may be reproduced and actively enforced by health care providers through daily practices (Anderson, 1987) as well as through the health care literature that creates subjects as part of the discourses of medicine, nursing, public health, psychology, etc. discourse.

Consequently, nurses, physicians, and other health care staff are at risk for regularly invoking discourses through daily interactions with clients, through the prescription of therapies and the planning of care. Journal articles, medical and nursing texts, documents of federally required standards of care, as well as health care documents about the care of specific groups of patients contribute to the nursing or medical "discourses" and build upon ideological understandings that are derived from background meanings. Diagnoses, disease types, and demographic markers can also be used within taken-for-granted daily practices in health care to interpellate, e.g., the employment of notions as "cancer patient," "Hispanic diabetic," "welfare mom," or "teen mother." Each taken-for-granted conglomeration of

positions can then work as a background meaning that fuels interpellations of people as subjects who are themselves enlisted to identify with such marked positions. Again, because power dynamics are at work to set providers over patients, interpellations may occur in health care encounters.

Failure to recognize the nuanced affects of these forces can disguise what goes on between providers and patients. An analysis of the micro and macro processes of interpellations (on an individual basis that is influenced by greater societal taken-for-granted understandings) may help to identify relational dynamics that impede appropriate and respectful health care delivery. Furthermore, theories of cultural competence in health care delivery or psychosocial dynamics within patient-provider relations may lack clarity due to the absence of understanding or interpretation of this phenomena.

I contend that ideology and consequent interpellations are due to (and contribute to) the taken-for-granted background meanings that operate transparently in everyday life in clinical and research settings. Medical and nursing discourses, unexamined ideological background meanings, as well as differing power dynamics between patients and researchers/practitioners set health care professionals up for interpellations.

An analysis of the taken-for-granted affects of ideology and interpellation within health care settings may be helpful to health researchers who are attempting to reduce the oppressive effects of such power dynamics as those of interpellations which lead to racism, sexism, and other destructive forms of stereotyping or discrimination. Personal self-evaluation is necessary for researchers and practitioners to become aware of the established practices of the discourses to form subjects and interpellations due to personal or societal taken-for-granted background meanings as well as power differentials. With self analysis, researchers and practitioners may be able to decrease the negative influence of these forces.

Interpellations as Interculturations

In relation to Mexican American women, for example, I am suggesting that interpellations can be described as a particular kind of interculturation. As stated in Chapter 2, interculturations become explicit in experiences when a mixing of background meanings brings with it a disruption in understanding or smooth functioning such that a clashing of meaning ensues. I am suggesting that these clashes are interpellations when a force outside of the person acts to affect the movement from a mode of engaged mundane coping to that of a thinking subject, especially when another person's expectations based on their background meanings are operationalized to "hail" the woman as a dominated subject

of some sort (e.g., a man with traditional expectations for a subservient wife who will tolerate domination in personal relationships without contestation; a nurse or doctor with stereotypic expectations for a Latina as a compliant therapeutic subject such as "La Sufrida" who is will silently refrain from negotiation during a clinical encounter [Adela De la Torre, personal communication, 5/13/94]; or a health care provider who, because of time and budget constraints, interpellates a woman as a "Hispanic diabetic," or as a "traditional Catholic" who does not use birth control, without making a full assessment).

It may not be uncommon for a person who (through a disruption of their taken-for-granted background meanings), recognizes that they have been caught in the "hailing" of interpellation from an oppressive source, to feel shock or outrage. Despite these feelings, the person may not articulate the experience explicitly. A Mexican American woman, trained in health care services, once explained to me the way she felt when she was treated as a "Hispanic Diabetic" during her pregnancy. She felt that, regardless of the fact that an inadequate assessment had been done, she was assumed to be a gestational diabetic because of her ethnicity. She was so overwhelmed by the act of stereotyping that was being operationalized on her behalf, that she was unable to articulate her fear that she was being misdiagnosed or her outrage that she was being treated

like a "number." The clashing of taken-for-granted meanings or interculturalization showed up as an interpellation. Such experiences of interpellation may catalyze increased feelings of personal danger when they involve a person's body.

When a person is unable to speak about the phenomena of interpellation that they are caught up in, they may be experiencing the "inutterable" (Alarcon, personal communication, 12/95) or the "abject" (personal communication, Del Castillo, 2/96). In either case, a person may experience a sense of shock, shame, anger, or fear. They may not be able to articulate their feeling of being overpowered by a phenomena that cannot be explicitly named.

Thus, I am suggesting that in this situation, a person may recognize that they were subjected to the power dynamic of interpellation simultaneous to and in addition to a clashing of background meanings. As with an interculturalization as described in Chapter 2, things will show up in ways that are no longer taken for granted, but with a simultaneous interpellation, the clashing causes a person to realize that a domination had occurred.

An interpellation that occurs amidst the clashing of background meanings may be easiest to identify when it is a frank racist or sexist act of domination. However, because of the workings of background meanings and ideological

background meanings, the actor (or interpellator) may or may not be aware that they were complicit in an act of oppression or domination through a process of subject formation as interpellation. Some sort of breakdown or disruption of their taken-for-granted understandings may be necessary for them to move out of ready-to-hand coping (oppressive though it may be) and into a space of problem solving or reflection such that they become aware of the oppression they have facilitated.

Nonetheless, I contend that power dynamics, power differentials, and racist or sexist ideology works to influence background meanings in ways that are important to investigate. Their insidious influence requires constant self reflection and analysis on the part of clinicians and researchers involved in relationships with patient/clients or research participants.

The Balance of Power Between Clinician and Patient

Because clinicians are often imbued with a greater balance of power during a health service encounter, they are at risk for interpellating subjects in a variety of ways. I contend that failure to recognize, assess for, or legitimate an intercultural experience (a clashing of background meanings) may set health care providers up for complicity in interpellations as part of daily interactions in a system of hierarchical positions such as health care institutions. For example, when there are cultural, racial, ethnic, and

gender differences between a clinician and a client/patient, these add to the societal positionings that create a power differential between the two. When a clinician who is in a more powerful position, fails to recognize an interculturalization as such, she/he may rely on assumptions to explain the experience of the patient and interpellate the patient, hailing them as a therapeutic subject in particular ways that may be oppressive or have oppressive effects. For example, during a visit to a family planning clinic, a Latina may verbally contradict herself during a health assessment or examination with a clinician at which time the provider may assume that the Latina contradicted herself because she is hiding something, is unintelligent, is lying, is codependent, or is "wishy washy." If the provider is not aware of the contradictory nature of interculturalizations in general, he/she may assume that the Latina has chosen to just follow traditional gender norms, and interpellate her as such.

Psychologist Oliva Espin (video tape of UCSF Psychiatric Grand Rounds, 1995) raised criticism of practitioners who label the behavior of their Latina clients as "traditional customs" in an attempt to be culturally sensitive. Espin claims that maladaptive or destructive behavior is then dismissed as "cultural" without an actual assessment of the patient's situation. Depending on the position, perspective, and self-reflexive practices of the

clinician, interculturations and interpellations may play a part in the way a health care encounter is handled. However, the effects of an interpellation are often "transparent" (Althusser, 1979). Thus, an understanding of interpellations AND interculturations may increase understanding of relational and power dynamics for people of differing socio-cultural positions.

Stereotypes and Generalizations

In Research

All interpretations are made by positioned subjects who are prepared to know certain things and not others due to life experiences, gender, age, race, ethnicity, and other situating characteristics (Rosaldo, 1989, p.40). The particular context of a nurse researcher will affect how she will design research to study phenomena in the lives of participants and how she/he will interpret the data that she/he gathers. Again, interpellations may occur. Consequently, researchers need to continually examine their techniques of data collection and analysis in order to identify blindspots, ideologies, beliefs, and positionings that will affect the interpretation of results and the ways they might interpellate participants.

The work of Chicana scholars disrupts the taken-for-granted tendencies to categorize Latinas or interpellate a particular woman according to a stereotype. As qualitative

researcher Jeannette Rodriguez (1994) pointed out,
Chicanos/as

differ widely among themselves in terms of bilingual capabilities, skin coloring, and economic status. All of these factors have some effect on the development of the individual. Generally, the dominant society's strategy is to play against a people's differences, to define them as stereotypes or as an ideal (1994, p.85).

As with any research, unexamined taken-for-granted understandings occur due to background meanings and can influence the research process. With research that is related to reproductive health for Latinas, for example, that which is taken-for-granted will influence how researchers envision the sexual identities of Latinas, the relationships that Latinas have with their sexual partners, as well as the needs Latinas have related to their bodies. Unexamined taken-for-granted understandings become operationalized when researchers interpellate participants based on background meanings that include stereotypes or ideals. This will influence how researchers design studies, the questions that they will and will not ask, as well as how they measure the results.

Social Science Stereotypes of Latinos

Stereotypes that have been operationalized in research may fuel interpellations in clinical practice. For example, social scientists have tended to generalize that the man of a Latino family is "lord and master" and that the woman is relegated to an insignificant subordinate position (Rodriguez, 1994). The Mexican American woman is often

taken to be a mother and producer of large families who is married to an authoritarian and domineering man (Andrade, 1982). Other stereotypes depict "the Latina" as a self-sacrificing, passive woman who lives within rigidly defined sex roles (Gibson, 1983), a naive and rather childlike "sainted mother" (Rodriguez, 1994). Adela de la Torre criticized clinicians who stereotype Latina to be like "La Sufrida," the long-suffering Latina woman who is without a voice (personal communication, 5/13/94). Generalized subject formations of this sort stifle awareness of the vast diversity among Latinas and can lead to stereotypic assumptions about the health care needs of women.

Disrupting Stereotypes

Del Castillo's (1993) study of Mexican women revealed the existence of covert cultural norms related to gender. Her work disrupts notions of stereotypic behavior patterns and power relations within Latino families. Del Castillo stated that Mexican gender ideology is too complex and multifaceted to be essentially characterized as simply male-dominant. Furthermore, she found that gender ideology expressed cultural ideals of "gender-appropriate" behavior which did not always correspond with actual behavior. Del Castillo claimed that Mexican men and women negotiated between traditional and alternative normative behavior. Consequently, women were invested with the power to check, subvert, or complement male-dominant behavior with or

without the cooperation of males. Del Castillo's (1993, in press) work suggests that Mexico's sex/gender cultural norms are comprised of abstract gender ideology, simulated gendered behavior, as well as local notions of gender-permissible behavior.

Knowledge of Del Castillo's (1993, in press) work can reduce a health provider's tendency to rely on taken-for-granted ideological background meanings about idealized gender norms. Such unchecked understandings (or misunderstandings) function transparently to foster interpellations of Mexican women in relation to gender.

Assumptions about "Latino" Values

Various cultural values have been described as being "basic" to persons who are "Hispanic" (Marin & Marin, 1991). These include allocentrism (collectivism rather than individualism); *simpatia*, *dignidad*, *respeto* (the need for smooth and pleasant social relationships causing a person to behave with dignity and respect toward others); and *familismo* (strong identification with and attachment to their nuclear and extended families, loyalty, and solidarity). Generalizations involving these cultural scripts, while meant to be helpful to health care providers who know very little about Latino communities, may be initially useful but have the potential of collapsing into stereotypes that may give rise to interpellations. Descriptions of "typical" patterns among Latinos are most

useful when they are accompanied with cautions that no generalization is accurate 100% of the time.

A perspective that allows for the conceptualization of Latinos as "positioned subjects," situated in different and changing positions on various spectrums of experiences may be useful in dismantling unexamined ideological background meanings that may lead to interpellations. For example, spectrums of positions related to values, such as familismo, is a realistic schema for conceptualizing the possible positions of Latinos on this issue (e.g., some Latinos are very family centered in all spheres of their family life, others are only family centered in particular arenas, etc).

Conclusion

Careful assessment of a patient's situation by a clinician, as well as personal investment in the self-reflective work of identifying nuanced stereotypes that may be due to ideological background meanings related to people groups, is important for recognizing the implicit power dynamic of background meanings, ideological background meanings, and interpellations. Careful listening and observation may enhance a clinician's ability to identify a clashing of background meanings (interculturalization) in the lived experience of a Latina patient, as well as a clashing of expectations between the provider and the patient. This may interrupt the seemingly transparent processes of interpellations and/or interculturalizations in clinical

encounters. Further, a researcher's self reflexive and critical self analysis of blindspots and assumptions may serve to reduce the transparent functioning of ideological societal norms for regulating perceptions about gender. Theoretical understandings of interculturations (as clashing background meanings) and interpellations (as influenced by ideological background meanings) may aid clinicians and researchers in balancing the power and reducing the distortion in perceptions about patients and research participants alike.

Chapter 5

A Theoretical Discussion of Gender Identity

"... gender is a project which has cultural survival as its end..." (Judith Butler, 1990, p.139)

An analytical discussion of gender, sexed bodies, and gendered bodies will lay out a theoretical framework for exploring the dynamics of gendered identity for the Mexican American women of my study. It will provide an arena for discussing the phenomena of gendered relations for Mexican American women in personal relationships with family members and partners, in addition to their experiences with representatives of modern Western health care institutions. Theoretical perspectives on identity, gender, and gender norms, particularly those of rhetorician Judith Butler (1990, 1993), will serve as a prelude to the analysis of work done by anthropologist Adelaida Del Castillo (1993) and sociologist Pierrette Hondagneu-Sotelo (1994). Del Castillo studied gender issues in relation to Mexican women living in Mexico City. Hondagneu-Sotelo studied the "gendered transitions" of Mexican women who immigrated to California (1994). Their research provides an important background for the analysis of my work with second generation Mexican American women in California.

Identity

Philosopher Charles Taylor defined identity as "who we are" and "where we're coming from" (1991, p.34). It is the

background against which our tastes, desires, opinions, and aspirations make sense. Taylor claimed that we can define our identities only against

the background of things that matter. But to bracket out history, nature, society, and the demands of solidarity, everything but what I find in myself, would be to eliminate all candidates for what matters. Only if I exist in a world in which history, or the demands of nature, or the needs of my fellow human beings, or the duties of citizenship, or the call of God, or something else of this order MATTERS crucially, can I define an identity for myself that is not trivial (1991, p.40-41).

Because of our contexts and because things matter to us in our particular contexts, we are able to understand our identities. In the process, however, Taylor claims that we discover aspects of our identities through negotiations in overt and internalized dialogues with others (1991, p.47). These negotiations occur in contexts within which we are situated or positioned. We all speak and write from a particular place and time, having a specific history and culture. Cultural studies theorist Stuart Hall (1990) claimed that identities actually undergo constant transformation due to the continuous 'play' of history, culture, and power. They are not static formations.

Identity is not as transparent or unproblematic as we think. Perhaps instead of thinking of identity as an already accomplished fact, which the new cultural practices [e.g., cinema] then represent, we should think, instead, of identity as a production which is never complete, always in process (1990, p.222).

Identity is processual rather than static and consequently politics arise when a certain group pursues, contests, and

explores the processes of identity. When the subject is also the object of interest, study, scrutiny, or critique, the negotiations and dialogues that ensue are called identity politics (Norma Alarcon, personal communication, 8/29/94).

Identity politics offer multiple avenues for exploring many dimensions of identity including gender, culture, ethnicity, class, race, sexual preference, and embodied self-understandings. As a dimension of identity, gender reveals aspects of identity. Gender, however, does not exist as a static given. Rather, it is a process that is always evolving, never complete.

Gender: A Dimension of Identity

Gender can be described as the activity of managing situated conduct in light of normative conceptions of attitudes and activities appropriate for one's sex category (West and Zimmerman, 1987, p.127). Gender activities or "doing gender" have been noted to involve a "complex of socially guided perceptual, interactional, and micropolitical activities that cast particular pursuits as expressions of masculine and feminine 'natures'" (West and Zimmerman, 1987, p.126).

Butler (1993) problematizes the notion of the "construction" of gender in order to more carefully articulate the constraining elements of the notion of "construction" and the constitutive activity of gender. She

argues that the act of construction (e.g., the notion that "gender is constructed") assumes that there must be an "I" or a "we" who enacts or performs that construction (p.7). This is problematic because the agent, who precedes and performs the activity of constructing, must first have a motivation and direction for constructing whatever it constructs, in this example, gender. In reply to her own theoretical examination, Butler states that it is unclear that there ever can be an "I" or "we" who has not already been submitted or subjected to gender, such that it chooses a direction to go with it. She suggests that this is because gendering is, among other things, the differentiating relations by which speaking subjects come into being. Butler theorizes that subjects come into being through the constituting activity of gender. Butler claims,

Subjected to gender, but subjectivated by gender, the "I" neither precedes nor follows the process of this gendering, but emerges only within and as the matrix of gender relations themselves (1993, p.7).

Thus, Butler suggests that the subject comes into being within and as the matrix of gender relations (1993). This is not to say that a person does not create mental representations of their gender identity. In phenomenological terms, a person may theorize about gender in the reflective or present-at-hand mode of being. In this mode, a person may manipulate the interpretations other people make about their own gender identity. However, based on Butler's work, I am suggesting that the movement of the

person from the ready-to-hand to the present-at-hand mode of being, i.e. the formation of the subject (see Chapter 4), occurs within the matrix of gendered relations in a person's world, (context) so that they take up coping according to what shows up to them in that context. My focus is on the self-interpretations related to gender (as dimensions of identity) that develop as the women (as embodied subjects within a matrix of gendered relations), take up the activities of living. Here, within a socio-cultural arena wherein gendered expectations abound, women are both constituted by and constitute the gendered processes of their identities.

Gender Norms and the Subject

Butler (1993) noted that the matrix of gender relations institutes and sustains the subject (p.8) through a process of reiteration of norms. Rather than intentionally constructing their own gender in order to become a subject, Butler's formulation suggests that people discover themselves in gendered relations that have been historically perpetuated through reiterations of norms. From within the matrix, people move, manipulate, contest, and subvert their position as one who is always already subjected to gender.

Traditional Mexican Gender Norms

Various texts have presented detailed interpretations of traditional Mexican gender ideology (Paz, 1961; Romanucci-Ross, 1973). Citing numerous sources, Del Castillo

(1993) explained that ideal norms hold that men have authority over women, the husband over his wife as does the brother over his sister; the older have authority over the younger, but always the father is the ultimate authority over household and family matters (p.240).

"Reiterations" of Norms are not the "Origins" of Gender

In her book, Gender Trouble: Feminism and the Subversion of Identity, Judith Butler (1990) analyzed the notion of "presumptive" and "compulsory heterosexuality" (p.ix) within "restricting frames of masculinist domination" (p.141) and problematizes the category of "female." Through her analysis, she disrupts assumptions about the existence of natural, original, and inevitable dimensions of "true" gender identities (p.viii). Rather, she suggests that the "effects" of institutions, practices, and discourses are assumed to be (or are made to appear) the identity categories that are themselves the origin and cause of "true" gender identities (Butler, 1990, p.viii).

Gender coherence as a prototype of "men" and "women" can be said to be a fiction of regulatory norms rather than an essence or natural "given" (Butler, 1990). Gender identity does not stem from an "original gender code" that set up men as "man" and women as "woman" at some point in history. Rather, power and culture historically provided particular modes for behavior and identity (Butler, 1990) and gender norms set up patterns for behavior that reify

notions of acceptable, gendered behavior (Butler, 1993). Gender identity, then, is taken up within culturally sanctioned codes (or norms) for behavior (Butler, 1990, p.339).

Butler uses dimensions of gendered homosexuality as the critical instrument for the examination of gender as a "stylized repetition of acts" conditioned by institutions and compulsory in practice (1990, p.140). Although Butler's instrument of analysis (gendered homosexuality) is in contrast to the focus of my research (gendered strategies for taking up identity for twelve second generation Mexican American heterosexual women), Butler's re-thinking of gender is important for the analysis of my work because it carefully problematizes assumptions about the essence of gender.

Gender as Repetitive Performativity

Butler's (1993) notion of performativity is not the same thing as performance. Performativity results from the reiteration of norms; it is neither free play nor theatrical self-presentation. The ontology of a gendered body that is caught up in the taken-for-granted performative is contingent on various acts which constitute its reality (Butler, 1990, p.136) (e.g., in the ready-to-hand mode of being as described by Heidegger in his discussion of radical ontology in Being and Time, 1926/1962). Performativities result from the existence of prohibitions (in the

background) that generate sanctioned and unsanctioned sexual practices as well as sexual arrangements that are repeated in a taken-for-granted way which is not the same as action that is "chosen" (1993, p.95).

Regularized, constrained repetitions of norms impel and sustain performativity. The historicity of such reiterations remain disguised under an "appearance" of agency. In her book, Bodies that Matter: On the Discursive Limits of "Sex" (1993), Butler connects performative acts with the shared practices of communities. Each performative/reiterated act is "the citing of a prior chain of acts which are implied in a present act and which perpetually drain any "present" act of its presentness" (Butler, 1993, p.244). They are not voluntary acts, but are taken up as repetitions that are constrained by norms within communities or localities.

Bodies: The Surface for Inscriptions of Gender

Butler (1990) holds that the taken-for-granted contours of bodies are the surfaces upon which gender significations are inscribed (p.129). For this reason, the notion of "bodies" can be problematized to uncover cultural expectations and meanings. Butler's analysis of sexed bodies and the way in which the materiality of sex is "forcibly produced" through repetition of norms within heterosexually hegemonic contexts (Butler, 1993, p.xi) can be extended to explore women's self-understandings of their

bodies as both material (physical) and materialized (laden with meaning) through the repetition of particular heterosexual, culturally valenced norms. I will be addressing issues of the body not only because women discussed practical issues related to their bodies, but because, as a woman and a nurse, I am personally drawn to and am grounded by women's understandings of their embodied experiences. In addition however, I will seek to understand cultural inscriptions of women's bodies as the women are interpellated in everyday gendered relationships.

Gender as Provocations, Disruptions, Performances

Within contexts, the agency of women as "bodily beings" (1993, p.x) who are subjected to normative, heterosexual, cultural constraints can be explored to identify ways the women provoke disruptions of gendered expectations. These disruptions may appear as performance that occurs within a gendered matrix of relations and may involve provocations and disruptions of norms.

In my study, I will be focusing on women's lived experiences that involve how they take up, provoke, disrupt, and perform their gendered identity. The contexts of the lives of the women of my study are constrained by (and expanded by) the mixing of cultural milieus. Mexican, Mexican American, Chicano, and Anglo influences predominate.

The "fiction" of traditional Mexican gender norms is a salient topic in the women's narratives (Del Castillo, 1993,

in press). Del Castillo (personal communication, 11/27/96) argues that these norms that have been identified as traditional are not actually traditional because they have been contested for decades. She notes that Oscar Lewis (1951) found that Mexican women were contesting these norms in the 1940's. Del Castillo's (1993) own study showed that Mexican women were contesting the "norms" in the 1980's. Therefore, she suggests that women have contested the "norms" for at least 5 decades.

Both the performance of and disruption of traditional norms have serious material (physical) effects on the bodies of the women (e.g., when physically beaten). They also have socio-emotional effects because gender is materialized through meanings attached to bodies. Gender norms propagated within modern, Western health care institutions influence the phenomena of understanding between health care professionals and Mexican American women who are patients/clients in the system. Thus an analysis of the taken-for-granted elements at work in the reiteration of norms for professionals in health care institutions is also important.

Gender Norms within Modern

Health Care Institutions

The articulation of issues related to gender, sex, and bodies provoke what may appear to be taken-for-granted clinical understandings within modern, Western health care

institutions. In History of Sexuality, Volume II, (see pp.1-4) social critic and scholar Michel Foucault (1978) discussed the ways that experiences of sexuality came to be constituted in Western societies. He suggested that the history of experiences of sexuality resulted from the correlation between fields of knowledge (mostly due to the formation of the sciences that refer to sexuality); types of normativity (set up by the systems of power that regulate the practice of sexuality); and the forms of subjectivity in a culture (that is, the forms within which individuals recognize themselves as subjects of this sexuality, sex/gender system).

It is uncontested that bodies are at least important materially and physically, as is assumed in clinical encounters in modern, Western medical institutions. However, as Foucault's analysis would suggest, understandings of bodies, genders, and sexualities are limited because perinatal and reproductive health professionals have been informed predominantly by the sciences of obstetrics and gynecology which were developed, written about, taught, and practiced in a predominantly white, male, heterosexist context (medical schools or nursing schools within medical schools or hospitals) that also functioned to regulate the practice of sexuality. The history of health provider's understandings of their own and their clients' sex/gender/bodies/sexual experiences have

been limited due to the previously listed issues as well as the limited forms of subjectivity that have been possible in middle class, white, male-oriented cultures.

I am suggesting that the limited and limiting aspects of these elements gives form to the gendered expectations for behavior that are considered normative in modern clinical sites. These norms have transparent influence on health professionals' interactions with clients in a clinical encounters, limiting their ability to grasp the multiple, complex socio-cultural aspects of women's embodied experiences. Uncritical and unexamined understandings of various dimensions of gender identity and taken-for-granted assumptions about what the regulatory norms mean to an individual Mexican American woman are problematic.

Exploring Traditional and Alternative Mexican Gender Norms:

Contestations and Negotiations

An important question in my research is similar to some posed by Butler in the Introduction to Bodies that Matter (1993). That is, through what regulatory norms is sex and gender materialized and how can we understand the norms, as they produce the effects of gender and the materiality of sexed bodies, without falling into the trap of cultural determinism? (compare Butler, 1993, p. x). Butler (1993) suggests that interpretations (constructions) of the regulatory norms are always unstable and have gaps or fissures worth exploring.

I am focusing on the gaps between the assumed, regulatory gender norms and the practical living of gendered identity. Here, as Butler suggests, that which exceeds the norm, that which cannot be wholly defined by the norm, or that which cannot be fixed by the repetitive labor of the norm, shows up. That which occurs in the gaps, disrupts the consolidation of the norms. The alternate gendered activity in the gaps destabilizes the norms, offering men and women space for alternative gendered behaviors, as was also the case for the Mexican women of Del Castillo's (1993) study.

Mexican Women in Mexico: Del Castillo's Study

Anthropologist Adelaida Del Castillo (1993) explored what could be termed the "gaps," as Butler described them. She found that men and women negotiated between traditional, regulatory norms and alternative normative behavior. Here, covert cultural norms operated in the midst of socially acceptable, traditional norms.

Del Castillo defined covert cultural norms as implicit patterns or principles of behavior that were informally utilized as practical guides to alternative gendered behavior at the local level. Through the covert cultural norms that were not formally acknowledged, women were invested with the power to check, subvert, or complement traditional, male-dominant behavior with (or without) the cooperation of males. Del Castillo found that the covert norms did not coincide with popular notions of male-

dominance (1993). Furthermore, Del Castillo found that the women hid the expression of local notions of gender that contradicted ideal gender ideology behind the simulation of traditional gendered behavior, giving the pretense of sanctioned behavior that reflected Mexican societal ideals (1993).

Del Castillo (in press) noted that, "Gender has traditionally been given expression as either male or female systemic role patterning. But this binary approach doesn't allow for gender contradiction, gender flexibility, gender ambiguity" (p.22). In Del Castillo's study, the covert cultural norms were discernible through: discrepancies between gender ideology and daily-life relations; interactions of men and women that involved pretense at the local level based on local notions of gender appropriate behavior that were given validity by covert cultural norms; and negotiation of domestic relations between men and women that were brought to the fore by economically empowered women.

Mexican women who immigrated to California:

Hondagneu-Sotelo's Study

In her qualitative study of Mexican migrations, sociologist Pierrette Hondagneu-Sotelo found that, through migration, women and men reinterpreted normative standards and creatively manipulated the rules of gender (1994, p.96). In the process, traditional social relations and cultural

resources were reshaped, contributing to a trend toward more egalitarian relations for Mexicans who migrated to the U.S. Hondagneu-Sotelo (1994) noted that through these transformations, cultural ideals and guidelines for appropriate gendered behavior changed (p.146).

In their daily lives and actions, immigrants draw upon social norms and traditional cultural frameworks, but they do so in this new, changing social environment. Immigrants arrive with cultural and ideological baggage, but in the new society, as they unpack and rearrange it, they discard elements and adopt new ones; women, for example, may take up new activities such as working for wages, attending meetings in the evenings, and driving, and they may exert authority over family matters previously out of their control (Hondagneu-Sotelo, 1994, p.15).

No formulaic linear stages could map these changes because they happened unevenly and often resulted in contradictory combinations of everyday practices (p.193). As immigrant women became more autonomous and assertive, they began assuming some of the decision-making authority that their husbands previously held as the undisputed patriarchs of their families in Mexico (p.194).

Hondagneu-Sotelo (1994) defined gender as the social and cultural ideals, practices, and displays of masculinity and femininity (p.2). It was a set of social relations (p.3). She defined patriarchy as a "fluid and shifting set of social relations where men oppress women, in which different men exercise varying degrees of power and control, and in which women collaborate and resist in diverse ways" (p.3). Although gender relations are patriarchal, the

phenomenon of urbanization, women's increased participation as income earners, and immigration have begun to erode men's dominance over women in Mexican families (p.14).

Nonetheless, Hondagneu-Sotelo noted the persistence of a double standard. That is, sexual infidelity was tolerated for men who immigrated to the U.S. but not for women who stayed behind in the Mexican village or those who migrated to the U.S.

My Study With Second Generation Mexican American Women

In my study of twelve second generation Mexican American women with low income, I explored the women's understandings of traditional Mexican gender norms that functioned as regulatory norms. These norms influenced expectations for gendered behavior as well as the ways that women maneuvered between norms to contest or manipulate their position as gendered subjects. My inquiry explores the "gaps" between traditional norms and alternative behavior for twelve Mexican American women with low income living in a large metropolitan California city. An analysis of their stories can inform health care professionals who are concerned with improving services to members of the diverse Latino/a groups in the U.S.

My analysis offers insight into second generation Mexican American women's understandings of gender/sex/bodies; expectations of gendered behavior; dynamics of power: domination, submission, negotiation, and

contestation within relationships; and experiences of fear and obligation in relation to bodies, sex, gender, and power. Women's stories included embodied experiences, that is, the ways that meanings, expectations, styles, and habits were expressed and experienced in the body (Benner & Wrubel, 1989). The narratives reveal how the women took up, coped with, and interpreted their bodies in relation to sexual, familial, socio-cultural, and personal matters.

Conclusion

This theoretical discussion lays out a framework within which the data analysis of my research can be situated. Gender can be discussed as a dimension of identity that emerges within a matrix of gendered relations. The phenomena of gendered norms: submission to, manipulation of, and contestation of; can be discussed as complex negotiations that occur within the mundane practices of everyday life. Reiterated performativity, provocations, and disruptions of gendered identity can be analyzed along with bodies that are both material (physical) and materialized (given abstract meaning) within the theoretical framework suggested by Butler (1993). Finally, the research with Mexican women by Del Castillo (1993) and the work with Mexican women who immigrated to California by Hondagneu-Sotelo (1994) set up the discussion of my work with second generation Mexican American women in California.

Chapter 6

Data Analysis: Themes and Paradigm Cases

In this study, I set out to interview Mexican American women with low income about how they took care of themselves in terms of reproductive health within Mexican and U.S.-based cultural contexts. I asked the participants about how they thought and felt about taking care of themselves in relation to their lives, their health as women, their culture, growing up, and being a mother. The women talked about various ways that they "took care" from gathering information about their bodies to seeking medical services to learning to eat nutritionally rich foods when they were pregnant to protecting themselves from harmful people or situations. However, among the various strategies employed by the women to "take care," the most salient strategy involved the processes of working out gendered identities in relation to all the other activities of taking care. That is, the women's processes of working out their gendered identities were central to the activities of "taking care." In addition, power dynamics and interpellations influenced their interpersonal relationships related to gender because traditional idealized Mexican gender norms and ideology (among other things) influenced the expectations of the women, their parents, their partners, their siblings, etc. Furthermore, because of the historical phenomena of change due to immigration, changing understandings of gender

Consequently, in this research I focused on the ways that second generation Mexican American women with low income worked out their gendered identities as a central element of taking care amidst intercultural clashes of meaning and shifting relational dynamics including interpellations.

In this chapter, I will discuss some themes related to gender as they emerged from the data and then I will introduce the paradigm cases that will be presented in Chapters 7-10. I am not presenting a conclusive list of themes from the data at this point. Rather, I am introducing four themes that were present in many of the twelve women's stories. This will enable the reader to be aware of the themes which will be interpreted in more depth in the paradigm cases. The themes include issues related to embodiment, understandings of traditional gender norms, historical accounts of grandmothers and mothers engaged in negotiating gender in relationships, and the phenomena of "othering" Mexican women by the Mexican American women of my study.

Embodiment

As a nurse and a researcher, I came to this research with a value for the processes of gender as vitally connected to women's embodied experiences. I understood embodiment as the ways that meanings, expectations, styles, and habits are expressed and experienced in the body (Benner & Wrubel, 1989). However, I was not aware of how the theme

of embodiment would show up in the data or if it would at all.

Indeed, the narratives of the women included stories about pregnancies, miscarriages, or other health problems which involved embodied expectations of themselves and others as well as meanings that were experienced in their bodies. Their stories of embodied understandings also revealed the ways that women engaged in "taking care" of themselves in relation to what they experienced as meaningful through embodied experiences (such as the embodied understanding of the health and well being of their child in utero). It was in the context of meaningful bodily experiences, that women spoke about their needs to take care of themselves physically. However, their physical needs to take care were related to emotional, psycho-social, and spiritual needs. Rarely did embodied understandings of physical needs show up without understandings of related emotional, psycho-social, and spiritual needs.

Women described the challenges they met growing up in a maturing woman's body such as a first period or a first pregnancy. In addition, they talked about being in social relationships that were influenced by living in a female body, i.e. a material, physical body with a gender that was traditionally overdetermined in its female-ness or femininity (Butler, 1990) and that conveyed daughter-ness, wife-ness, sister-ness, mom-ness, etc.

Thus, I approached this research with an awareness that women's bodies mattered in ways that were implicit and explicit, as part of their self understandings related to gender. Consequently, I was alert to the ways that their bodies mattered physically as material bodies and figuratively as they were "materialized" abstractly through the various gendered meanings that were inscribed as upon the "surfaces" of their bodies as cognitive representations (Butler, 1993). I found that whether the experience involved the birth of a baby, a high fever and infection, an incident of sexual abuse, a miscarriage, or a discussion about the kinds of clothes the woman saw as appropriate to wear -- women's bodies were integral to their experiences materially, abstractly, or both.

Furthermore, it was through the women's stories of bodily events, that I was able to understand the meanings of different phenomenon and how their embodied experiences influenced their perceptions of interculturations and interpellations in the midst shifting or conflicting gendered expectations. In addition, "taking care" showed up as a process that involved embodied understandings that were also influenced by societal and individual perceptions of gender norms, which will be explored next.

Interpretations of Gender Norms

As daughters, wives, sisters, and mothers the women of this study spoke about their realities in reference to the

expectations of their parents, husbands, partners, siblings, and children. The women also referred to the idealized, societal perceptions of traditional gender norms throughout the interviews. Although most understood the norms similarly, some interpretations of the traditional gender norms varied among the women. I will now present a brief and inconclusive overview of the ways that some of the women described the idealized gender norms.

The participant I call Francisca explained that the traditional role of the wife was to please her man, to think as he wanted her to think, to be faithful even if he was not faithful, and to "completely" raise the children without the use of a babysitter. The role was traditional in that the woman was supposed to be as her mother was with her husband.

Another participant, Ines, understood the traditional role similarly. However, she added that a woman was supposed to remain silent and "keep her mouth shut," regardless of what was said in conversation around her.

The participant I refer to as Alicia noted that the role of the woman was to cook, clean, have the house in order, and "keep the kids fed." However, she further noted that the woman was supposed to "let" the man work (outside the home). Her description implied that a traditional woman would not work outside the home nor would she do anything to threaten a man's role as the 'breadwinner.'

The word "macho" was used by several of the women of the study to describe the traditional behaviors of Mexican men. For some, like Francisca, traditional men who were "macho" were men who required their wives to serve them food and to follow their orders related to the domestic chores of the house or the social relations of the family. However, the phenomena of "machismo" was contingent upon a woman as counterpart. In fact, when I asked Francisca what "machismo" meant she defined it in terms of the role of women saying, ". . . the woman is always there. She's always going to do everything for him and he can basically do whatever he wants."

In addition to expecting the women to do the cooking, cleaning, and child care, the participant I call Lorena pointed out that traditional, "macho" Mexican men did not allow the women to leave the home or to have friends over. A further distinction was made by the participant I call Beatriz. She noted that traditionally macho men expected women to stay home all of the time. Beatriz's shared her caricature of a traditional wife and husband. In her words,

B: The housewife's the one that cooks, cleans, takes care of kids, stays home all the time, and is the bed partner, and basically that's it. In Mexico, that's what a wife is. That's what a wife is. You know, she'll take care of you! You can go do whatever you want and your wife will be home. And it ain't going to work like that for me. And it ain't going to work like that for anybody who's around me because I won't let that happen to anybody.

Finally, some women, such as the participants I called Juana, Elena, and Ines, but not all of the women used the term "macho" to refer to men who were abusive to their wives or partners. They both explained that the abuse might be verbal, physical, or mental.

In her study with Mexican women, Del Castillo (in press) noted that local, particular expressions of Mexican gendered behavior are far more variable and complex than traditional ideology suggests. She proposed that the recurrent contestation of rigid gender roles by Mexican women in her study implicated a past tradition of gender flexibility in Mexico (Del Castillo, in press, p.23). My research suggests that Del Castillo's proposal of recurrent contestations of gender roles as historical phenomenon can be extended to the everyday lives of Mexican American women.

Past Histories of Gender Flexibility

Indeed, daughters of Mexican immigrants living in the U.S. (second generation Mexican American women) are affected by perceptions of traditional Mexican gender norms as well as modern interpretations of gender in the U.S. This may include notions of the autonomous, self aware, individual woman which is hailed as the Anglo American feminist subject of consciousness (Alarcon, 1991).

Gutmann (1996) noted that changing economic needs and migration were two issues that influenced gendered expectations in Mexico (Gutmann, 1996). Indeed migration

has introduced different variables into the lives of Mexican families for decades. While some Mexican Americans have immigrated to the U.S. for the first time in recent years, generations of other Mexicans have been migrating or immigrating to the U.S. continuously since 1890 (Massey, 1993). Hondagneu-Sotelo (1994) found that transformations in gender relations began for families when men departed Mexico through migration and before their wives or partners joined them.

As was found by Del Castillo (in press) with Mexican women in Mexico City, the narratives of the women in this study revealed that they were influenced by their Mexican ancestors (parents, grandparents, etc.) whose life histories involved disruptions of the idealized gender norms and experiences of gender flexibility in decades past. Among the many examples from the stories of the twelve women of the ways that patterns of relationships have been flexible related to gender, is that of Alicia. As will be discussed in detail in Chapter 9, Alicia was influenced by the lives of her third generation Mexican American mother and her Mexico-born paternal grandmother in Mexico. Her grandmother's assertive style of communication implied a disruption of the observance of traditional, idealized Mexican gender norms for women to remain silent. Alicia's mother followed the example of her mother-in-law (Alicia's paternal grandmother) and passed the practice of assertive

communication on to Alicia. Therefore, Alicia felt no conflict related to voicing her opinion to her husband whenever she thought things were not going the way they should, just as her mother did with her father.

Another example of flexibility in gendered patterns/expectations is that of the participant I call Katiana. Her parents were both raised by women who would be considered untraditional by the idealized standards of Mexican gender norms. That is, both of Katiana's grandmothers moved to the U.S. and raised their children as divorced women without husbands. They passed on to their offspring, an understanding that single women can be successful without partners. Thus, both Katiana's father and mother encouraged her to wait before she married, even though she became pregnant as a single woman. Her mother, in particular, encouraged her to finish her studies at the community college and get the job she wanted before she entered into a marriage in order to avoid becoming "trapped" in a marriage with a man who may forbid her to go to school or get a job. Her father was supportive of Katiana's work as well as that of his wife who was employed as a restaurant manager while she was concurrently enrolled as a nursing student at a local community college. He himself held a college degree and was employed full time. This pattern of support for autonomous women seemed to be a long standing pattern in this family.

The narratives of Francisca revealed that her mother's history may have influenced how she was engaged in the process of working out her gendered position as a woman, a daughter, a sister, and a bride-to-be. While discussing the complex issues that created tension in her own life related to her gendered identity as she approached her own wedding, Francisca described her mother's history of gendered negotiation. She took the discussion back to the time just before her mother became pregnant with Francisca. She explained that her mother (who was living in Mexico with the couple's four children) had discovered that her husband (Francisca's father) was having an affair in the U.S. where he migrated annually. Because the couple had an agreement to make special short term migrations to the U.S. together just before the birth of each new child, Francisca's mother planned her fifth pregnancy (Francisca) so that her husband would have to take her to the U.S. for the delivery of the baby. This pregnancy and impending delivery occurred during the time that the affair was going on. During the trip north for the birth, Francisca's mother negotiated with her husband to put an end to the affair and to bring her and their other four children to the U.S. to live. The negotiation went as she hoped and the whole family began living together consistently in the U.S. after the birth of Francisca.

To Francisca, her mother's actions showed up as a source of cultural knowledge about gender rules that traditionally maintained a double standard (men can have affairs and women should tolerate it) and ways of maneuvering within rule-based relationships to change practices. Although the details of this story and the influence of this history of gender flexibility in relationships are much more complex than I have presented here, this brief presentation introduces yet another example of the many ways that second generation Mexican American women were influenced by the histories of their ancestors in relationships.

Women from "Over There" or "Here"

Utilizing the place based phraseology of "here" and "over there," many of the women of this study spoke about Mexico and Mexican-ness in relation to the U.S., revealing what it meant to them to have been born and/or raised in the U.S. Most of the women explained that women from "here" were distinctly different from women from "over there." They seemed to invoke these place-based labels as a way of distancing themselves from Mexican women and a way for setting themselves apart from them. In this way, Mexican women "over there" in Mexico, showed up as 'other' to women who grew up "here."

For example, (as will be discussed in Chapter 7) by repeatedly using the phrase, "over there," the participant I

call Gloriana distanced herself not only from the practices of Mexican women, but she actively worked against being expected to take up her gendered identity or gendered behaviors as "they" did. Inherent in Gloriana's discussion about women from "over there" seemed to be a value judgement that Mexican women were not as "good" as U.S. born women.

Similarly, another participant whom I call Delia was taught by her U.S. born mother that she "shouldn't let the men control" her as women from "over there" did. Delia said,

D: Because over there, the men tell the women like what to do. The women have to stay home and they have to cook and clean and everything like that. They're not allowed to work. And [my mom] says "No," she doesn't want that. She wants me to work and make a living for myself so then I won't have to be dependent on him all the time.

Another participant, Elena, explained that she felt "odd" in comparison to Mexicans from "over there." She noted the ways that she was unlike the Mexico-born women in her neighborhood in San Tomas, California. Elena drove a car while the women from Mexico did not. Elena held a job and put her children in daycare while the Mexico-born women stayed home with their children. She said, "I just thought of them as different because they were from a different, -- from Mexico, and I was from here."

The participant I refer to as Beatriz distanced herself from Mexican women from "over there" who lived by traditional Mexican gender norms. She claimed that they

called her a "pocha" which is a derogatory slang term that implies that she was inauthentic and not worthy to be called a Mexicana because she was too "Americanized." Beatriz not only recognized traditional Mexican women as 'other,' but she actively nurtured a self understanding that was 'other' to Mexican women. She vigorously defended her position by partnering with a man who didn't interfere with what she described as "my own thoughts" and "my own rights."

In contrast to Francisca, Delia, Lorena, Alicia, and Beatriz, the participant I call Juana stated that there was no difference between women who were born in Mexico and second generation Mexican American women who were "from here." However, her experiences revealed that another powerful Mexican woman in her world did not agree with her on this point. This led to great suffering for Juana. She explained that her Mexico-born mother-in-law always wanted her Mexico-born son to marry a woman who was also born "over there." Thus, when he married Juana, who was born "here," her mother-in-law put a black magic spell on Juana to cause her to suffer and to break up their marriage. Still, Juana understood herself as an "American" woman who was not different from a Mexican woman. Invoking a universalist theme, Juana derived her sense of value as a "good" woman regardless of her birth place.

J: But his mother always told me when I was living with him, when I was married, that she always wished her son was married to somebody from Mexico because she didn't like the people from here, because women from here are

bossy. You know, she always said that women from here are demanding. That's not true. Not all women are like that. There's women over there that are demanding, too. [Uh huh.] Just like -- It's even, I think. There's good women here; there's good women over there. There's bad women here; there's bad women anywhere.

MS: But she thought that just because you were born here --

J: I was no good for her son.

Additionally, Juana observed the traditional Mexican gender norms even though she was from "here." Not only did she refrain from interfering with her husband's activities that kept him away from their home for days at a time, but Juana said she always asked permission from her husband before she did anything outside the home or spent any money. She felt that she was righteous before God in her actions as an obedient wife. Still, Juana explained, her mother-in-law was relentless in her judgement of Juana as 'other' and "bad" because she was "from here."

The phenomena of 'othering' women from "over there" or "here," the influences of generational patterns of gender flexibility in relationships, gender norms as they clash and mesh in daily living, and perceptions of embodied experiences involving interculturations and interpellations are analyzed and interpreted in more depth in the paradigm cases that follow in the next four chapters. Consequently, I will now introduce the four cases.

Introduction of Paradigm Cases

My interpretations of Gloriana, Lorena, Alicia, and Ines draw attention to the women's four distinct styles for

working out gendered identities within the greater agenda of "taking care" amidst changing cultural understandings and expectations. I found that how each woman forged her way within her particular matrix of relationships differed. In order to adequately address each woman in her particularity, the interpretations on the pages that follow are accompanied by very detailed analyses of their stories. My intention in sharing such detailed accounts of each woman's situation is to decrease the chance for stereotyping by providing evidence of each woman's particularity. In-depth discussion will allow the practical meanings and concerns of the women to show up in their own terms (Benner, 1994). Therefore, I will present the four cases in as much entirety as possible to enhance the reader's opportunity to perceive the woman's practical engagements in everyday living. Furthermore, I am attempting to share significant textual evidence so as to equip the reader to challenge the practical reasoning of my interpretations as is suggested by Benner (1994).

Following each case, the next will be examined individually and then in comparison to the previous case. Similarities and distinctions between cases will be explored in order to more fully understand the practical worlds of both (Benner, 1994). Topics, issues, concerns, and events will be interpreted with a focus on the woman's everyday reasoning and associations (1994). Incongruities and puzzles will be analyzed in particular in order to

understand the nuanced dimensions of everyday coping amidst changing cultural milieus.

Gloriana: Contestation

Gloriana's story is presented in greater depth than are those of Lorena, Alicia, or Ines. This is partially because Gloriana was a very articulate informant. It is also because her narratives address a large number of issues, many of which the other women also respond to or deal with but in different ways. She also embodied a particular, distinct style of working out her gendered identity through contestation. That is, Gloriana took up her gendered identity by contesting the gendered expectations of the people in her world. Often the expectations of her parents, brother, boyfriends, and ex-husband were derived from the societal gender norms that reflected traditional Mexican ideals of gendered behavior. However, Gloriana met these expectations through contestations. She pushed back the boundaries of their gendered expectations through discussion, argument, disobedience, withdrawal, verbal attacks, and physical fighting. How Gloriana maintained relationships within her agenda for contesting their expectations is revealed through her stories.

It is through an elaborate discussion of Gloriana's narratives that the temporal and place-based dimensions of meaning can show up as a landscape of meaningful spaces within the context of her relationships (James Watt,

personal communication, 10/12/96). This will allow an understanding of how Gloriana contested gendered expectations in ways that were meaningful for her.

Gloriana's primary identity concern was that of an independent woman. She perceived herself as evolving through her developing ability to stand on her own two feet. Her narratives revealed a series of episodes that opened up the possibilities for her to work through her transitions toward autonomy, although often with hardship and difficulty.

Lorena: Invocation of Covert and Sanctioned Norms

Lorena perceived herself to be a woman of adaptation. She described herself as "a tree that grew on its side." Various traumatic events in Lorena's life, from the time she was a baby to the present day, called for a perspective that was flexible and tolerant. Lorena responded to this by learning to adapt within a changing world. She has learned to identify who she could trust and then thrived within the bounds of those relationships.

Likewise, Lorena learned to take up her gender identity from within the bounds of what was considered "acceptable" gendered behavior by adapting the normative standards of her family and peer group. This then sanctioned her position as a "good" woman and mother who has partnered with a "different" and "proven" man. Lorena continued to work out her gendered positionality by invoking a system of covert

cultural norms (Del Castillo, 1993) for gendered behavior. She located points of convergence between the covert norms, the idealized traditional Mexican gender norms, and the gender norms sanctioned within evangelical Christianity. By drawing attention to the places of convergence among these systems, Lorena protected a space where she and her husband could take up their more egalitarian practices in everyday life.

Alicia: Negotiation

Alicia interpreted herself as one who negotiated among differing cultural ways as a part of daily life. As the daughter of a woman who was a third generation Mexican American and a man who immigrated to the U.S. from Mexico, Alicia has been situated within relationships of cultural negotiations from birth. Alicia modeled herself after her mother and took up negotiation as a daily practice in her own marriage with a man who, like her father, had immigrated from Mexico.

Alicia did not invoke the traditional gender norms to sanction her way of taking up gendered expectations. Rather, Alicia dealt with conflicts over gendered expectations related to the everyday practices of household labor and childrearing by talking, discussing, and negotiating with her partner. She voiced her opinions to him as was the practice of her mother and grandmother. However, she did so for the purposes of forging an agreement

about what would be the "right" action or agenda for her and her husband under the particular circumstances. Her negotiation activities were central to her ways of coping with differing expectations in daily living.

Ines: Defensive Resistance

Ines understood herself to be a strong woman who was capable of protecting herself and her loved ones from the dangerous agendas of other people. She learned to protect herself through a variety of defensive strategies as a response to attacks that included verbal and physical attacks of her. Ines also invoked a system of covert cultural norms (Del Castillo, 1993) for gendered positions as resistance to the traditional idealized norms that she saw as oppressive. She responded to others' gendered expectations by invoking her own system for understanding men and women. In this way she defended herself against traditional, idealized expectations of others who wanted her to be silent and tolerant of domineering, abusive men.

Like Alicia, Ines also shared her opinion when she wanted to, although her purposes in doing this were not in order to negotiate. Rather, her purpose was to fend off the demands of others and to resist their attempts to interpellate her as a dominated subject.

Finally, Ines also resisted the power of societal and familial expectations (as well as acts of domination) by interpreting herself as a woman with special abilities to

know otherwise unknowable things. By assuming the special status of a woman who could possibly be a "witch," various possibilities for self interpretations outside of the regulatory gender norms opened up.

Conclusion

As can be perceived from this brief introduction of the four Mexican American women, each woman's way of working out gendered identity involved complex issues. The indepth discussion of their narratives that follows will further refine an understanding of contestations, invocation of covert and sanctioned norms, negotiations, and acts of defensive resistance as strategies for coping in the borderlands. Additionally, the interpretations will highlight multiple issues including the themes of embodiment, gender norms, women from "over there" or "here," and the historical situatedness of women within families that have negotiated gendered relations for generations.

Chapter 7

Gloriana: "Standing on my own two feet"

Gloriana is a 31 year old second generation Mexican American woman. I told her about the study one day when she came in to the clinic to see her family practice doctor and she agreed to participate. After signing the consent form Gloriana immediately began telling me a story of how she recently helped a mono-lingual Spanish speaking Mexican friend to get the care she needed during her pregnancy. As I listened to the story, I was struck with how compassionate Gloriana was about her friend's plight. Her concern was powerful and her motivation to express her feelings about it was compelling.

At that first meeting, I had explained the purpose of the research, but I was interested in how Gloriana "took up" my description of the study. At our second meeting (our first interview) she said she understood the research to be focused on the "background about Hispanics, what they know of their culture" and about "medical things that they know or don't know." This not only gave me insight into how Gloriana perceived the project but revealed one of her main concerns: knowing "medical things." Gloriana then began to tell me many stories of the ways that she gained information about her body in relation to reproductive health matters. She told me about the things she "knew and didn't know" about her body, how she came to know certain things, and how

"knowing" or "not knowing" influenced her ways of "taking-care."

After a particularly long interview, Gloriana stated her own goal for this research. She wanted to take part in the research because she valued the possibility of catalyzing doctors and nurses to be more sensitive and available to women as patients. She saw me as someone who knew "much" because she told me so much about her life and was hopeful that I could make a difference because of her stories.

G: Well, you're doing this research. If, I hope, and I do feel, you know, knowing you, we've been talking for a long time and everything, and I honestly feel that someday you will be able to get people or maybe get some doctors to really, to listen to you. If it's listening to our conversation, I don't know, or maybe listening to more.

But what we really need is - me being half-Mexican, half-American - we need to have doctors to help these ladies that, not just Mexican ladies - oriental people also, all different kinds of nationalities - people from India, whatever, to be able to -- "us" communicate with these doctors because I think that's very important because our health is important. If we don't -- If we're not in good health, then you know (pause).

MS: What do you have?

G: What do we have? I mean, without our health, we, we have nothing. Where we won't go nowhere. We can't be nobody. We can't be nothing. We can't accomplish anything.

And hopefully, you know, somebody will listen and do something about it because I have friends, I was able to help one friend out, and you know, and that's one friend. But here, you know, you know so much. Maybe you can help, you know if its ten people or twenty people even, you know, and we need that. We need more people, also doctors to be more open regardless if it's, you know, where it's female, even a male, I think

they're even more open too. Like a female doctor and a female patient, but we need those male doctors to be more open with us female patients.

Gloriana described many experiences including her first period and her first two pregnancies including a miscarriage. As Gloriana told me stories about her life, she repeatedly connected the issue of women gaining reproductive health information and the issue of communication between Mexican American women and their mothers. Her personal understandings about how the communication styles of mothers impact their daughters' lives were illustrated by her life experiences and the feelings that came with certain events.

I will be exploring the ways that Gloriana took up "taking care." Her concerns included aspects of care of the body including diet and exercise in pregnancy, use of birth control to prevent pregnancy, and obtaining medical care and check ups on a regular schedule. Her involvements with family members and significant men in her life influenced "how" she cared about these matters. Meaningful phenomena included: learning to make up her own mind in the presence of her parents' differing opinions about how she should live her life; protecting herself by keeping secrets or limiting information she was willing to share with family members or lovers; learning to stand up to both men and women who are in positions of superiority - either by cultural or societal standards; maintaining her sense of "standing on her own two

feet" as a divorced woman; and working out her gender identity as a woman in relationship with men.

Gloriana expressed particular concern for "Mexican girls" who "don't know how to talk to doctors" to get the information they needed. She discussed the relational dynamics she experienced with health care workers (both professional and traditional). Various concerns influenced the ways Gloriana interacted with health care providers within her agenda to take care of herself. Among these were lived understandings of: trust and distrust in relationships; "being open" about sexuality and women's bodily needs; balancing survival needs with the pain of stigma and rejection within traditional Mexican cultural worlds and gender norms; fear of the detrimental consequences for speaking out about wrongful acts; and a deepening self respect. These and other concerns are most accessibly explored through Gloriana's narratives about problems, events, mundane practices, as well as crises in her life.

Among Gloriana's interpersonal concerns and involvements were the complex relational dynamics between her and her parents, siblings, boyfriends, ex-husband, and friends. From the stories that she told in the course of our discussions, I was able to make interpretations of how Gloriana's relationships influenced the emergence of her sense of gender identity as well as her ways taking care of

herself while dealing with the mundane happenings in her life.

Communication: "the main, first thing
that is important"

Gloriana stressed the importance of communication from the first few minutes we spoke and throughout our discussions. She valued communication highly, but saw it as something that was missing from her relationship with her parents. She described it as "something that I didn't have growing up."

G: I feel I didn't have it with my parents. I mean, they loved me. They took care of me, but there wasn't communication. And, and that's very, very important to me. That's the most important to me and respect, but I know what respect is. My parents respected me, but there wasn't communication. And that's the main, first thing that is important to me.

Gloriana expressed a sense of loss because of a lack of communication with her parents. She specifically expressed disappointment that she did not share "mother-daughter" events with her mom, like "shopping for a dress" or having a "mother-daughter sitdown" just to talk. She had hoped to have a close, intimate relationship with her mother that would allow her to share private or "embarrassing" topics, such as issues related to the process of growing up in a woman's body.

Because Gloriana's relationship with her mother was not ideal in her own eyes, she repeatedly expressed disappointment in the amount and quality of communication

she shared with her mother. One of her main disappointments was that she was uninformed about her body BECAUSE her mother did not teach her things. Gloriana saw that this had serious repercussions on her life. Without a confidante in her mother, she had to rely on books, magazines, school classes, and even box labels of various products for health and body care information. Gloriana expressed her dissatisfaction with this when she said, "I would have loved to have learned, womanwise, from my mother instead of from magazines."

Silences that Span Generations

Gloriana described this phenomenon of a lack of communication between women as one that spanned generations of Mexican women. Rather than information being passed down from mother to daughter to granddaughter, intergenerational silences prevailed. Notably, communication did not occur between women and men either. But, it was the silences that prevailed among women that were of greatest concern to Gloriana. In the context of discussing her early experience with menstruation, Gloriana said,

G: my parents are very, very old-fashioned. I had to learn through school, through books about my period and everything because my mom, she never spoke to us about that. Most Mexicans that I know, friends that I know, they didn't even know about it either. It's like they found out on their own or through friends or through books, and I wish that I was -- I would have been able to find that out through my parents, my mother. But my mom, she was very quiet about it and her mother was also like that towards her. And I guess that's why she

was like that towards us. She has five girls and it's like we all learned everything that we know through books and through school. And I wish she would have been able to talk to us and everything.

These intergenerational silences contributed to the insecurity Gloriana had about herself and her body. She said she feared that there were many things "about MYself, MY insides, MY body" that she didn't know about. Despite a strong desire to "know" these things, Gloriana did not push her mother to mentor her. She did not confront her about the lack of communication. Therefore, she remained unsure about the exact reasons why her mother walled off communication and adopted the strategy of learning by her own means.

G: She was just -- I don't know. There was like a wall there. I don't know how I can say it. I don't know if it's because she really didn't know, or she didn't know how to explain to me, or she was embarrassed, or I really -- I don't know. And I never just -- I never pushed the issue to tell her, "Well, you know, here you're my mother. You never did -- Told me this. You never told me that." I never went that far to say anything to her. I just tried to learn what I can on my own.

"I just tried to learn what I can on my own"

Gloriana developed many ways to gather information by herself as a form of taking care of herself. For example, when she had her first period at age 11, she learned about the purpose and use of menstrual pads by standing and reading in the aisles of a grocery store.

G: When I started my period, I didn't know what kind of pads to use or nothing. And I was at the store -- I ain't kidding, I was at the store, and I think I was there for maybe a half an hour reading all the little

packages. (pause) And people were just passing by, looking at me, and I didn't care. I just read them. I go, "Well, this is like this. How come this is bigger than that?" Like they have the liners and stuff, and then they had the super maxi pads, and I was there looking at them, and I didn't know!

MS: And you were how old?

G: Well, I -- See, I started my period when I was 11. And I went to the store when my dad went to the store, and my dad went his way, and that's when I went my way, and it's like I even got in a different line. I didn't even want my dad to see (softened voice).

MS: So you didn't tell your dad or your mom that you had your first period?

G: No! Until after, I think -- Well, my period's practically all over, and then that's what I told my mom (lowers voice) "You know what, I was bleeding." And my mom goes, "Oh, well, that happens to you." But it's like that, that's all that was really said.

MS: That's all she said?

G: Yes.

Gloriana learned about condoms at the age of 12 by reading condom box labels in a drugstore. When I asked her when she first heard about the use of condoms to avoid pregnancy and sexually transmitted diseases, she immediately informed me that she did not "hear" anything about this. She did not perceive her knowledge to have come from a verbal exchange with anyone. Unsatisfied by what was said in school or what was printed in magazines, Gloriana stated that she actually "learned" about condoms when she took the initiative to go and read the labels on packages of condoms at the drugstore.

G: I, I didn't hear about it. I, I remember going into the drugstore, and I remember I wanted to buy some

cards, and I went through an aisle, and I'd seen the little boxes of condoms (lowers voice, smiling), and all kinds of different shapes and sizes. (MS chuckles) I won't say sizes, but like the boxes, they're big ones, long ones. [Yeah.] And I just started looking at them, and one -- And people, they looked at me, but it's like, "Well, I don't even know." I just started looking and I could say that's how I learned. Some of it was in school and some -- There wasn't much magazines that really said much about anything, but in school, they would talk, and then when I -- When I got into high school, you know, they offered condoms, free condoms.[They did.] Uh huh. I went to Mt. Soledad, and but not that many people would go and get them. [Huh.] And I remember a friend of mine, she got them, and she opened it, and she started playing with it, she said, "Lookit, it looks funny," and we were like uh -- We would laugh about it, you know. "It's like a balloon! Blow it up!" And that's the kind of attitude that we had, you know, then. I, I really didn't know.

Although condoms were offered to students free of charge in her high school, Gloriana was not among those who actually went and got them. She and her friends joked with each other about the free condoms but she did not yet fully comprehend their actual contraceptive purpose at this time. As a teenager, Gloriana did not understand the odds of getting pregnant when not using condoms or any other form of birth control. She thought her chances to conceive were slim describing her attitude as, "You know, what are the odds?" Consequently, she did not consider using condoms when she became sexually active at age 16. The information she gained in the aisles of the drugstore, at school, and from friends was insufficient to inform her that she was at risk for pregnancy and sexually transmitted diseases (as will be further discussed later).

Breaking Silences within the Family

Intergenerational silences operated within as well as between generations. Among Gloriana's four sisters, one was older. As a teen, however, Gloriana never went to her older sister for information because she perceived her to be no more informed than she was. Furthermore, Gloriana had not become skilled in communicating with others on these topics because there were no family practices of talking to each other about bodies or sexuality. Consequently, Gloriana remained ignorant about some of the practices associated with menstruation into her young adulthood. It wasn't until she was 20 years old that she discussed the topic of tampons with her sister who was married and living away from the family home. By this time, Gloriana had already had two pregnancies and understood the concept of birth control. On this particular occasion, Gloriana found a box of tampons, which she referred to as "those tube things," at her sister's house. She described herself as "still learning because I knew what a pad was, I knew what birth control was, but I didn't know what that was (a tampon)."

G: I didn't know what it was. How to use it?! You know, and I'd seen the box, and I go, "Huh? How would I use that? How am I supposed to -- How do I do that?" [Uh huh.] And then I'd seen that my sister was using them, and see it's like --

MS: Your oldest sister.

G: My older sister. It was like we were all just quiet, you know. It was our personal things. And I remember going to her house, and I'd seen that in her closet (quiets voice). I'd seen the box.

MS: She was already living somewhere else?

G: Uh huh. She was married, and she was already living with her husband and everything, and I remember, and I'd seen that she would have the big box of -- The pads, and then she would have those tube things, and I would look because I didn't know what they were. I mean, I knew it -- At the time, I did know what pads were, but tampons, I didn't know what they were. And she opened one up, and she said, "Well, see, this is how you would do it." I go, "That is weird!" You know, to me, that was something weird. Like "God, who invented this?" You know?

MS: So you didn't use it?

G: I tried it one time. [Uh huh.] And it's like "Uh uh, this isn't for me!" [Huh.] (laughs) I felt, I don't know, I felt uncomfortable.

Eventually, the rest of the sisters began talking to each other about these things. Rather than allowing their younger sisters to learn about their "personal things" on their own, Gloriana and her sister made themselves available to their younger sisters to talk, answer questions, and discuss various topics.

G: My older sister did too, she learned on her own. I could say my younger sisters learned because they asked questions, they asked me questions, my older sister questions, so they were able to relate to, if not my experience, my other sister's experience. So, I could say they were lucky because they had two to go to, which on the other hand, I couldn't really go to my sister because my mother didn't say nothing to her, and she never really said much to me. It's like we were all just quiet to each other. And what we learned, how we learned was our own thing. We were never open with each other or anything.

Intergenerational silences or the practice of being "quiet to each other" about sexuality, contraception, and personal hygiene set up Gloriana's older sister to fail to communicate with Gloriana. The practices of "quietness"

prevented family members from learning how to talk about taboo topics and how to deal with the feelings that arise when the changes of a woman's body, body care, or sexuality were discussed. However, as was mentioned above, for Gloriana and her older sister somehow the agenda to communicate overruled the familial practice of "being quiet." Perhaps the position of "older sister" gave them status and enabled them to communicate. The responsibility to inform the younger sisters so that they could take care of themselves in ways they were ignorant may have become important to Gloriana and her older sister BECAUSE the position of "informer" had remained vacant in their experiences. Notably, the younger sisters had the skills for asking questions. The increased number of sisters growing through puberty towards young adulthood, dealing with body changes, and experiencing curiosities about sexuality probably led to an atmosphere that fostered communication. Gloriana's sensitivity to the issues and discomfort with the silences may have spurred her on to create a space in which frank discussion could replace silence. Her younger sisters' agendas to "find out" may have also contributed to the forces that eventually permeated the "walls" of silence.

"It's a shame!": Gloriana as Coach

Gloriana often expressed exasperation that intergenerational silences set up other Mexican women to be

ignorant, not just within families but when interfacing with health care providers as well. Her frustration at seeing other Mexican women struggle with the same lack of information she experienced led her to actively help others find the necessary information and resources. For example, in the first interview she said,

G: My mother, I guess, I don't know if it's because she didn't know really, or if she felt uncomfortable. I really don't know the reason why, but I, you know, I think it's a shame that so many Mexican girls, they don't know! They don't know a lot, and then it's hard when you go to the doctors.

By telling me a story about her Mexican friend, Ana, who was a monolingual Spanish speaker, Gloriana expressed her concern about Latinas who want to ask questions of a doctor but "don't know how". Upon beginning this story, Gloriana forcefully exclaimed, "This is a good story! It's important!"

Ana was a young woman who was considering becoming sexually active. She came to Gloriana for help to get birth control because her "mother never told her about anything" and she perceived Gloriana as being informed. Gloriana helped Ana navigate through the U.S. health care system in order to obtain her first prescription for birth control.

G: I have a friend of mine who about a year ago, she started telling me, "You know, I met some guy, you know, and I really like him. We've been dating for a while now, but we haven't been with each other yet. But I don't want to get pregnant or anything. I want to go and get the pills. Can you take me? I don't know where to go or what, but I want to get on the Pill." And I go, "Okay." So I took her to Woman's Health Clinic. [Uh huh.]

The lady told us there, "Well, she needs to get a check-up and all of that, and then they'll prescribe some pills for her and everything like that. So she got her check-up. I took her to get her check-up and that and everything like that. She was kind of scared because she said, "Well, why do they even have to check me down there and everything for if they only give me pills? Why can't they just give me pills?" She thought they were going to give her pills over the counter like, you know, any medication. I go, "No, well, here it don't work like that. I don't know what you were thinking cause here it's not like that."

MS: Cause she was from Mexico?

G: Cause she was from Mexico. Now, her mother never told her about anything. According to her, she didn't know about nothing. But I'm pretty sure she knew something because she knew that if she would be taking the Pill, you know, she won't get pregnant. [Uh huh.] Well, I never told my story with anybody [Uh huh.]. What I experienced with my mother. I just made them -- Well, according to her, it's like she knew! -- She thought I knew everything, which I didn't! (raising the pitch of her voice) [Huh.] Because she came to me about wanting me to take her to the clinic and all that.

Acting as a coach, Gloriana took Ana to the U.S. clinic and explained how it works over "here" in a modern women's health facility. Through this experience Gloriana compared herself to Ana. She wondered if Ana's experiences of intergenerational silences were bounded by more porous walls than those that surrounded Gloriana. In comparison to Gloriana, Ana seemed to be more knowledgeable than Gloriana was when she first became sexually active. Gloriana had become sexually active without awareness of the need to use birth control. Ana seemed to already know that she should use birth control if she was going to be sexually active.

Gloriana did not tell Ana what she called "my story," or "what I experienced with my mother." Rather, she allowed

for a certain kind of silence with Ana. Consequently, Ana thought Gloriana "knew everything." By leaving what she called "my story" untold, Gloriana did not acknowledge the influence of the lack of communication in her life. It is possible that Gloriana did not disclose her shared experience of intergenerational silences because she feared that such a sharing would threaten her stance as teacher and coach. She may have been embarrassed because it appeared that even Ana, who was born in Mexico, had been better informed than Gloriana was in the past.

Regardless, Gloriana took on the role of mentor in Ana's mother's stead: talking with Ana, taking her to the clinic, reading the box label, translating the information into Spanish, and instructing Ana on the correct usage of oral contraception, foam, and condoms.

G: So I took her to the clinic and she got checked and everything, and the doctor prescribed some pills, and what was so funny, but then it wasn't funny to me is that, she goes, "Okay, well, I'm going to take these tonight, and I guess I can be with him tonight." And that's what she said! I was like, "What?" (softening her voice) I go, "No. It don't work that way." Because she thought by taking the Pill early in the morning she would be able to be with him that night! And I just told her, "No, the pills don't work like that!" (soft, compassionate voice)

And then one thing that I should have done, and I didn't do, at the time, I don't know why, but I said to myself, "I doubt if they'll have it." You know how they have directions in English? Well, why not have them in Spanish. [Yeah.] And the box, well, it was in English. She opened the package and it had everything in English on how to take them and all that. [Uh huh.] So I read it, and then I told her about it and everything.

And it's like she actually thought that by taking a pill in the morning, it would be okay to have intercourse that night! (soft but astonished voice)

MS: So do you think she understood when you explained that it would take like a month?

G: Oh, yeah, after -- Because I told her, and she goes, "But why?!!" I go, "Well, you know, when you take an aspirin -- I mean, when you have a fever and you take an aspirin, does the headache go away right after you swallow that pill? [Uh huh.] No, it doesn't! [Uh huh.] Well, that's how these pills work. It doesn't take a couple of hours, especially this kind of pill. You know, it needs to get used to your, your system inside and everything. It doesn't just boom and work right away." (spoken with a soft, teaching voice). [Right. Right.] I mean, you could -- It's a pill, but it's medication. [Uh huh.] Look at it as it's medication. It's not a, a, just any old pill. And I told her, "Do you understand?", you know, "Do you really understand how to use it?" And she goes, "Yes, I do." And she didn't know nothing about the foam. She didn't know nothing about the condom or nothing like that. I told her, "You know, you can use THOSE things for the time being that you're using the Pill, but you still need to continue to use the Pill."

Gloriana was astonished at Ana's naivete. She was also astonished that her own careful coaching style didn't guarantee Ana's comprehension.

This story reveals specific dimensions related to communication for Gloriana. First, Gloriana expected mothers to teach daughters about their bodies and birth control but saw the role of friends to include stepping-in if mothers and daughters are together unable to break down the walls of intergenerational silences. However, even WITH a friend (or sister-figure) to help, Gloriana realized that a woman could misperceive how products work in a person's body. Even WITH coaching, a woman could misuse birth

control and fail to prevent a pregnancy. Furthermore, information alone was not sufficient for understanding when it came to personal issues related to sexuality and bodies.

For example, Gloriana found out that the attention and sensitivity of the mentor was in a dynamic relationship with the openness and trust of the mentee. Gloriana's presentation of the story suggested that her coaching was compassionate and caring, just as she would have wanted when she first became sexually active. At the same time, Ana's comfort with Gloriana was crucial because it allowed her to speak freely with Gloriana, revealing how she had misinterpreted the way the Pill worked in the body over time. Thus, intimacy and trust between Ana and Gloriana showed up as crucial to the understanding of such personal and complex issues as oral contraceptive use. Without Gloriana's attention and concern even well AFTER the clinic visit, Ana could have misused the contraception and could have become pregnant.

The Taboo of Telling What Mom Did and Did NOT Say

Gloriana's story revealed that a verbal sharing of past experiences influenced by intergenerational silences may itself be taboo. The nature of what one woman talks about with her mother may carry such emotional weight that a woman may refrain from telling "her story" even if it could help another. The disclosure of what one's mother didn't say in private moments may require as much vulnerability and

courage as the actual articulation of what she did say. What is remarkable is that Gloriana had the courage to tell me as an interviewer so many of the things her mother DIDN'T tell her.

Finally, the story disrupts a stereotype that the quality and quantity of information a woman has about reproductive health is greater for women born in the U.S. It was not, in this case, determined by where a woman was born or what language she spoke. Women born in Mexico may be more informed than Mexican American women born in the U.S. The temptation to judge a woman according to where she grew up, assuming that at the very least the U.S. public schools would have informed a woman about the purpose and use of condoms, may be a naive generalization. Even Gloriana was amazed that Ana was aware that birth control was necessary to prevent pregnancy. Both women demonstrated significant motivation to understand this phenomenon although each had a slightly different access point, background understanding, and time of readiness to learn.

What if My Mother and I HAD Communicated?:

Gloriana's Unplanned First Pregnancy

Gloriana reflected upon her past in the context of her present, revealing both a belief that her mother should have communicated with her and a disappointment that her mother didn't do so in reality. She was disappointed in her mother and felt that if her mother would have communicated with

her, various events could have turned out differently in her life.

G: Well, see, (breaks in) I feel if my mother would have been -- All this that I'm learning now, I would have already known way back then. I feel if she would have spoke to me.

MS: And how would that make life different for you?

G: I think it would have made -- It would have made life a little easier. I wouldn't still be feeling that you know, I'm still missing out on a lot, a lot of stuff!

Gloriana acknowledged that she felt set-up for being unaware of several things that happened to her body. For example, due to an assumption that her chances to become pregnant were slim, Gloriana did not "think" of using birth control and consequently became pregnant at age 17. She described her thinking with a shy smile saying she "never thought about it."

When she was 17, Gloriana did not realize she was pregnant so she continued with her normal activities which included playing soccer at her high school. After a game, she began to experience abdominal cramping that was so intense that she went to a neighborhood clinic. The nurse and doctor at the clinic informed her that she was pregnant but was now miscarrying, possibly due to her participation in sports. At the time, Gloriana had various feelings all at the same time. She felt "happy" to know what was "wrong" with her. She felt "relieved" that she was not going to have a baby. However, she described herself as "naive" because she had not been using birth control. And finally,

she felt "bad" because she may have "caused" the miscarriage due to her rigorous involvement in soccer. Although Gloriana would have preferred to learn these lessons through discussions with her mother rather than through actual experience, she valued what she learned through the pain of this event.

MS: Is there anything you look back on and go, "I wish I had done this differently. I wish I had done that differently."

G: To be honest with you, I don't wish I had done anything differently because my personally -- what I've experienced, if I wouldn't have known about my miscarriage, then I would have gotten pregnant, maybe not even been ready to get pregnant, or not wanting to get pregnant. So I'm kind of glad that I got pregnant, I had a miscarriage, that I knew more like -- I knew, you know, about birth control, and I knew, you know, how I have to take care of myself when I did get pregnant. And then, knowing that, okay, well, if I have intercourse, and I'm not taking care of myself, I'm not being protected, then I am going to get pregnant. Am I ready for that?

"Taking Care"

Gloriana used the language of "taking care" in reference to the actions of self protection or bodily protection. For example, one way of "taking care" was to use birth control. Gloriana assumed it to be an active, conscious process of "protection" - protection against unplanned, unwanted conception. Gloriana also used the term "taking care" to mean the actions a woman takes during pregnancy to protect her health. In both ways, she took up the meaning of "taking care" within the context of protecting herself. Taking care strategies showed up amidst

understandings of bodies that can become pregnant, her own personal readiness to become pregnant, and communication with her mother.

For example, the pregnancy and miscarriage abruptly changed Gloriana's understanding of her body, the connection between sexual intercourse and conception, and the purpose of birth control. It also raised the issue of wanted versus unwanted pregnancies and the notion of "being ready" to have a pregnancy for the first time in her life. Until this experience, Gloriana was unaware of her feelings on these issues.

This experience was a turning point for Gloriana. She described it as the time when she "grew up." It was at this time that she came to UNDERSTAND that there were many things she didn't know about her body.

G: I could say like I grew up. That made me -- I don't know. I don't know if it made me open my eyes or realize, "You know what? There's a lot of stuff out there that I don't know about." Because there was a lot of stuff that I didn't know about! And I feel that if my mother would have sat down with me and talked with me then, you know, maybe I would have gone on birth control. Maybe this wouldn't have happened to me. I don't know. But after I had my child, during my [second] pregnancy, I spoke a little to my mom, and she let me know that she didn't know nothing either. My grandmother didn't talk to her. It was like she found out on her own like we did. So I think that maybe part of it was that my mom didn't know how to come out and talk to us, what to say, what not to say. I really don't know.

When addressing her strategies for "taking care," Gloriana again returned to a discussion of her relationship with her mother. Gloriana wondered what would have happened

if her mother had taught her the risks of pregnancy, the way to use birth control, and how to protect a pregnancy once conception has occurred. She wondered how would things have been different if she had been able to determine that she was pregnant and whether or not she would have played soccer if she had known she had conceived.

In her struggle to understand her mother's non-communication, Gloriana highlighted the common experience she and her mother shared: silence. She acknowledged that her mother, too, struggled with a lack of teaching from her own mother. Indeed, her mother could have been ignorant of the facts about women's bodies because she was never informed. On the other hand, she could have been aware of the functioning of the female reproductive system and birth control but caught up in an intergenerational practice of silence. The familial norms could have set up her mother's practices such that she felt she could not talk to her daughters. A personally held but culturally derived sense of reality about the way people learn about sexuality (defined as a personal background meaning by Wrubel, 1985), may have functioned as a tradition that her mother took for granted in this situation. If this was the case, talking to her daughter would not have shown up as an option to Gloriana's mother. It is also possible that her mother was originally ignorant as a young woman due to intergenerational silences around sexuality, later acquired

knowledge about bodies, considered talking to her daughter, but just wasn't comfortable with communicating on the topic.

Is "Not Knowing" the Result of Ignorance or Pretense?

When Gloriana told her second generation Mexican American boyfriend of her pregnancy and miscarriage he accused her of both knowing that having sex without using birth control would lead to pregnancy and that playing soccer while pregnant would cause a miscarriage. He made the assumption that Gloriana knew about her body regardless of cultural traditions that limited communication about sex. He also assumed that she then PRETENDED to be ignorant. He may have also assumed that silences between women in a family weren't so complete that they kept people ignorant.

G: He kind of like told me, "Well, you know, you knew that", and "You just went ahead, and this happened because you didn't want to go through the pregnancy," and I just -- I didn't -- At the time I -- "What are you even talking about, you know?" I go, "I didn't even know I was," and it's like he was two years older than me, and it's like he knew -- I guess he knew that I knew, "Well, if I don't take birth control, eventually I'm going to get pregnant." But I didn't know. [Oh.] And he never knew that I didn't know none of this. [Oh.] So --

MS: So he thought you wanted to get pregnant that first time. And then did he also think that you let yourself have a miscarriage?

G: Uh huh. That's -- Yes, he did. Which uh -- I don't know. At the time, it's like I found it -- I don't know. How can I say? It's like he knew what was happening, but I didn't. I didn't know. And, well, I didn't -- I wasn't thinking about it.

This turn of perceptions baffled Gloriana. In retrospect, she also assumed that her boyfriend knew the

consequences of having unprotected sex and still took no precautions. She assumed that because he was two years older than her he must be more informed than her.

Obviously, she did not expect the cultural tradition of intergenerational silence to have the power to keep a male, like her boyfriend, uninformed.

It could have been that her boyfriend was ignorant and felt embarrassed so he tried to buffer his feelings by blaming Gloriana for what he, in fact, didn't know either. It is not possible to know her boyfriend's perspective from Gloriana's narrative. However, his accusation was ironic, given her struggle to learn about her sexuality on her own. It is possible that he jumped to the conclusion that she was pretending to be ignorant in order to divert attention from his own ignorance or denial. He may have been PRETENDING to be aware of the consequences of having sex without using birth control.

Adriana Ortiz Ortega suggests that it is a cultural norm for Mexican women to act ignorant about their bodies and sexuality EVEN IF they are informed. She theorizes that the "ideal woman" is ignorant about her body, issues of sexuality, and the very activity of sexual acts including intercourse. She refers to this code for behavior as "idealized sexual ignorance" (personal communication, 2/26/96). This could be described as a background of meaning about women's behavior that the culture and

tradition provides for a group of people which is taken up nonreflectively from birth (based on Wrubel's definition of background meaning, 1985, p.43).

Gloriana's boyfriend may have assumed that Gloriana was just performing within a code of behavior previously set up by background meanings that were taken-for-granted about women's behavior. His assumption would have held that Gloriana actually knew what was going on despite her behavior.

If he did make this assumption, then Gloriana actually became the 'victim' of the codes or cultural script because she was, for all practical purposes, ignorant. An expectation that she was 'performing' sexual ignorance didn't serve her physically (she ended up becoming pregnant and then miscarrying) or relationally (he accused her of "acting" and their relationship ended). In sum, she experienced an unplanned pregnancy and a subsequent miscarriage and was accused of lying about her knowledge. All the while, Gloriana was actually unaware of the facts. Regardless, Gloriana was shocked by her boyfriend's accusation as well as the effects of her ignorance on her body because she did not expect either occurrence.

Gloriana began taking birth control pills as a strategy for "taking care" and protecting herself. Because of the miscarriage and associated experiences, Gloriana wasn't ready to become pregnant.

"Really Taking Care":

Gloriana's Second Pregnancy

In time Gloriana discovered what it meant to her to be ready for a pregnancy and ready to have a child. At age 19, Gloriana stopped taking the Pill and became pregnant.

G: There I knew, "Okay, I am going to get pregnant if I don't take them." So then I went to the doctors, and I knew I was pregnant, but that's what I wanted. That's when I started taking care of myself.

With her second pregnancy, Gloriana invested in a more seriously focused agenda of taking care of herself. She was self-directed in her motive to take care, as revealed by her statement that "if I don't, no one else is." When she had become pregnant this second time, Gloriana told her parents and they became very upset. Regardless, Gloriana and her boyfriend decided to get married.

Once the news had been told, Gloriana noted that her mother was available to her during her pregnancy. The tradition that fostered silences related to sexuality, contraception, and hygiene obviously was not at work in relation to issues of pregnancy, especially when the pregnancy was leading to childbirth (and not abortion). Gloriana described her mother as the most "helpful" person in her world at that point saying, "she was there more (than the others) to comfort me." Gloriana and her husband moved in with her parents before the baby was born. She described her mother as "always there" for her to talk to about the

pregnancy during this time, "to put her hand on my stomach, feel the baby, and that kind of thing."

Gloriana was concerned about preventing a miscarriage, so she dropped out of high school and began to "really take care" of herself. This involved eating an improved diet, exercising, resting, and avoiding alcohol. The practices of "really taking care" set up new parameters for her daily activities.

G: Well, then after, after I knew that I was pregnant with my first child, that's when I really started asking some more questions and asking how to take care of myself, what vitamins to take, what foods to eat, what nonfoods to eat, how to balance my, my weight, you know, don't -- I don't want to be overweight, and stuff like that. So I could say really I started really taking care of myself more when I knew that I was pregnant.

MS: What things changed?

G: I wasn't so -- I liked to go out bike riding and playing and I like to dance a lot. [Uh huh.] And every once in a while, I like to drink wine and stuff, and a lot, a lot of that stuff, all that changed.

MS: Oh, it did? All of that?

G: I didn't -- Well, I wanted to really take care of myself as I was pregnant so I didn't do much of it. Well, I didn't drink or anything like that. I really didn't go out. I tried more to rest because I -- I was going through my pregnancy.

A Technological Hearing Versus A Bodily Feeling

Just months before the birth of her first child, Gloriana realized that her baby was barely moving in utero. This made her very worried about her baby's health and well-being. For weeks her doctor told her that everything was ok, saying "we can hear the baby's heartbeat, so don't worry

about it." Gloriana, however, was greatly distressed and tearfully begged for the doctor and his team to do something to correct the situation. The doctor continued to repeat his assessment of normalcy.

Until the seventh month, Gloriana had not discussed the situation with anyone except her doctor. Daunted by worry that something was very wrong with her child, she found that she could not "hold in" her fear anymore. So, she confided in her mother and husband. When she told them of her fears about the baby, her mother took her to a sobadora, a female masseuse, to correct the problem. Gloriana told the story this way:

G: Well, at the time -- All along, I was talking to my mom, "You know, I feel him move, but he's not moving as much." And then I just thought to myself, "Well, maybe because I'm not as far along." That's what I thought. But then when, you know, I said, "Okay, by about 7-1/2 months pregnant, I should be feeling my son more than what I am." I believe that I went to San Tomas Hospital to have the ultrasound at least three times I went in there. And all those times that I went in there, they told me the same thing. You know, "We hear your heart, your son's heartbeat," and yes, I heard it, but I wasn't satisfied. You know, I was worried still. You know, and I told my mom, and she goes, "You know what, mi hija? Maybe the baby's not right, or maybe" -- I don't know. I was pretty big so I figured, "Well, maybe he's stuck or something." But then, you know, I come home, and the doctor said that he's fine. I felt that maybe the umbilical cord was wrapped around him. I, I, ... so many things went through my mind! I didn't know what.

And then she told me, "Why don't we go to this lady and see what she tells us?" So we went, and she felt my stomach and everything and then she told me. And you know what? It didn't even take her long. It did not take her long. After she felt him, she goes, "You know what? The baby's sideways. Instead of his, his feet

being up, or his head being down, he's sideways," and that's what she told me.

And then my mom told her, "Well, you know, can you help her?" And she goes, "Yeah, I can help. It's going to take me a while, but I can help her." And I was concerned. I told her, "Is it going to hurt the baby in any way?" She goes, "No." She goes, "As long as, you know, I do this carefully, you should be fine. You're not the first one that I've done this to."

So I felt more comfortable, but still, you know, I wasn't sure. I didn't feel, "Well, you know, maybe she's just saying it just to say it." And that's when she put all kinds of cream on my stomach, and she started moving my stomach. And she was just moving it like side to side, side to side, and then, it took about twenty minutes. And then after that, I just felt like a hard, hard kick, and from that time on, I felt him kick, kick, kick, kick, kick! And it's like "God!" and a few nights went by. I told my mom, "God, I can't even sleep now because all he does is kick, kick, kick." She goes, "Well, yeah, all that time that you really didn't feel him kicking, he was trying to kick, but he couldn't. The times that you felt him kicking is because, you know, he was" -- I considered him being stuck. I don't know what the doctors call it, but I would call him being stuck, and he was like maybe trying to get out, trying to, you know, move himself to get comfortable and stuff, and that little kick, you know, he was, he wasn't able to move. So I needed help, and I got help.

Gloriana, along with her mother, was convinced that she needed "to do something" about her son's lack of movement in utero. However, Western medicine had nothing to offer. Before and after she saw the sobadora, her desperate requests for helping the baby to move more were met with affirmations that the heartbeat was audible. However, the hearing of an amplified heartbeat was no consolation for Gloriana.

"Now I feel like I'm really pregnant."

Gloriana's doctor missed an important opportunity to understand the needs of his patient. Gloriana explained that she just didn't feel "really pregnant" although she was eight months along.

G: I was so blunt with him when he told me, "Oh, I hear your son's heartbeat and everything." I go, "Yes, and I also feel my son kick now." And I think I told him that a good four or five times. You know, "I feel him kicking, and now I feel like I am really pregnant and my son is fine. He's kicking and, Oh, Look! He just kicked!" I remember being there on the table, and [saying to him] "Oh, Look! He just kicked!" And while he was checking me, he'd seen that my son kicked, and it's like he [her son] went off to one side, and he just looked, and he didn't say nothing.

The doctor could have learned about what it meant to Gloriana to be "really pregnant." However, because it could mean different things to different women, he would have needed to sit down and talk with her in order to understand what she meant. This, of course, was what Gloriana said she needed from her mother earlier in life; to be in communication with the "holder" of the information so that she could understand her body and be understood as well. The lack of communication with the doctor resulted in much worry on Gloriana's part and "missed understanding" on the doctor's part (Visweswaran, 1994, p.xii).

To Gloriana, it was most important to FEEL the baby moving in her womb. This was in contrast with the priorities of the Western medical team. To them, it was most important to HEAR the baby's heartbeat. What mattered

to each was not in synch. In this situation, the health care professionals valued a "hearing" obtained through technology above the woman's bodily sensation of movement within. However, the technology made little difference to Gloriana. It did help her to know that her baby was "alive," but it did not give her any reason to trust that the baby was "alright."

Gloriana felt that she took things into her own hands when she solicited the services of the sobadora because she sought services outside of the credentialed medical establishment. She said, "the doctors didn't know what to do" so "I took care of it myself." Although Gloriana took for granted her mother's role in this, she did acknowledge her own power in making this decision and noted that the sobadora who massaged her belly and turned the baby was successful despite her lack of a license of any sort. In a short amount of time the unlicensed woman, working in her own home using only creams and a board on a mattress, safely turned the baby and corrected the problem. The baby was now freely moving!

This experience revealed that the lay-healer had more knowledge, skill, wisdom, and therapeutic ability to solve the problem in Gloriana's body than the licensed, credentialed, certified physician. It also revealed that her mother WAS able to access help when the "knowledgeable" physician was unable. Despite her silence on the taboo

issues of sexuality and matters of the body, Gloriana's mother was not only informed but willing to share her knowledge in relation to the pregnancy. Her mother knew that a sobadora could help, she knew which sobadora to go to, and she took Gloriana and her husband to see her.

Here, Gloriana came face to face with the clash of cultural expectations and practices over her bodily needs and those of the baby in her womb. In the U.S., medical doctors typically took care of pregnant women. However, her physician, who held a license and was skilled in medicine, was unable or unwilling to help her. In Mexico, doctors as well as midwives (Werner, 1977), curanderas, or sobadoras may be consulted during prenatal care (Jordan, 1993). Now, Gloriana found that she could not get her needs met in a modern U.S. medical center staffed with licensed physicians. She had tried desperately, but was offered only the hearing of words and a heartbeat as a response to her needs. Because Gloriana's need to obtain validation that her son was "really" okay was so vital, she was willing to go OUTSIDE of Western medicine for it.

In addition to the theme of mixing traditional health practices with Western medicine, this story also involved a woman's journey towards trusting her own body and her sense of what was needed to protect the life growing in her womb. Gloriana's strategies for taking care extended the work of 'protection' from the prevention of pregnancy and the

protection of her body when pregnant, to the protection of the life of her fetus inside. Up until this point, facts and information about her body were very important to Gloriana. But now, she learned something significant about relying on her own intuitive understanding of her body. Her sense of what she needed bodily, on behalf of herself and her unborn baby, became a source of intelligibility for her.

A Sense of Betrayal Externally, A Sense of Trust Internally

Through the dramatic event of the sobadora turning the baby, Gloriana learned to trust her own body-sense MORE than she trusted her doctor's sense. Even though she described her visit with the sobadora as "taking a chance," her own sense that her son's life was at stake made the risk worthwhile. She felt that she had no other alternative, especially because the doctor didn't even seem to try to address Gloriana's concerns. After the sobadora turned the baby, Gloriana felt anger towards her doctor and a sense of betrayal.

G: I, in a way, felt like betrayed from my doctor. It's like, you know, he should know more, because he's a doctor. I mean, this lady, she didn't have a license or nothing. I don't -- I really -- I don't know what kind of background this lady had, and at the time, I didn't even care. [Yeah.] The only thing I cared about was her trying to help me. [Uh huh.] I, I knew I was putting my son on the line, I could say, because I didn't know, for example, what kind of background she had, or if she even knew what she was doing or whatever, but I just had to chance it. [Uh huh.] I had to do something. I spoke to my doctor. He said everything was okay. I didn't feel everything was okay! So I had to find something else. I had to find someone else to help me. So I went to this lady, and sure, she helped me, and I felt betrayed because, you

know, a lot of people, you know, say, "Okay, well, he's a doctor, he knows everything."

Well, no one's perfect, first of all, and doctors do make mistakes. Everyone makes mistakes regardless of if he's a doctor, lawyer, whatever. A judge, whatever. It don't matter, but I felt he should have done something for me. And I did, I felt betrayed. [But you] And, you know, betrayed but also happy. You know, happy at the same time.

Gloriana's feeling of betrayal stemmed in part from the fact that her knowledge, beliefs, and feelings about her body were not respected by this man. She saw that he didn't trust her requests. Without addressing her concern, the doctor still continued to respond with the same message even after the turning of the baby; "we can hear the heartbeat, so everything is ok." The doctor didn't share with Gloriana the reasons why he did not attempt a version nor did he acknowledge, in a way that Gloriana could perceive, her fears about the baby not kicking. While it is not possible to know the thinking behind his practice, some possibilities are that he was unaware of the baby's transverse position; or he thought it would resolve on its own; or he felt the risks of a version outweighed the benefits. Jordan (1993) noted that standard management strategy for malpresentations in pregnancy is Cesarean section in the U.S. which is in contrast to the practice external versions by traditional midwives worldwide, as well as trained midwives and physicians in Europe. Although it is unclear as to why Gloriana's obstetrician did not attempt a version, it is clear that Gloriana responded to his non-communication

regarding her options with heightened concern and ultimate action outside Western medicine.

Gloriana was convinced that she needed to do "something." She understood her decision to go to the sobadora as putting her son "on the line" because things didn't feel right. The betrayal she felt from the physician involved his failure to DO something for her or to even know HOW to do something for her. Gloriana faced the completely unexpected scenario of a physician who seemed to LACK knowledge! All her life, Gloriana struggled to obtain the body and health information her mother failed to give her. Now, after blatantly asking for help from a credentialed physician, Gloriana faced the contradiction that "the one who should know what to do," didn't. Older women with wisdom about bodies (her mother and the sobadora) provided the solution for her problem.

Gloriana's reaction to this was profound: a feeling of betrayal: the physician's lack of knowledge and action caused her to feel betrayed. Just as she had expectations of what her mother should have done for her in terms of communicating information about her body and personal matters before she was pregnant, Gloriana had expectations of what services and information a physician should provide for her from his professional knowledge when she was pregnant. Through this experience, Gloriana learned how to

complement Western medical care with the traditional Mexican practices of massage so that her needs were met.

Thus, at age 19, Gloriana had the experience of bypassing a powerful credentialed, male figure to meet her own needs. The fact that the powerful but un-helpful figure was male while the helpful figures were female contributed to Gloriana's gendered understanding of health providers. For example, formerly Gloriana saw her mother as disempowered or uninformed and she previously perceived the uncredentialed sobadora as questionable. However, after the "turning" she saw this female lay practitioner as able. Elements of this scenario may have challenged her acquired notions of gender and knowledge.

Male Doctor? Female Doctor?:

Gender Matters

Early in the first interview, Gloriana brought up the issue of a male versus a female doctor. She stated that in her experience, male doctors spoke only in "short conversations" with her and were eager to send her on her way without asking her questions to find out if she understood what was going on in her body. She felt that a female doctor actually read her chart and asked questions such as those she listed in the following excerpt.

G: "Hi, how are you? How have you been?" And, and uh, "Oh, I notice that your weight has gone up. Your weight has gone down." And that's one thing that I notice about female doctors is that they read their charts. Oh, "You, you were in here last month, or "You were in here six months ago, and you had this done, and

how's it going?" "Oh, and are you, you still on this birth control pill? Is it working for you? Do you find any uh side effects or anything?"

Issues relating to who took responsibility for the sharing of information was important to Gloriana. If she had to ask all the questions in order to be told what's happening with her body, she felt alone in her agenda for taking care. If, however, the doctor asked questions of Gloriana, she felt cared for by a concerned physician. She preferred the style of female physicians over that of males.

Gloriana understood that her perceptions were influenced by past experiences in life and wrestled with the possibility that female doctors are superior to males, in general. During a later interview while discussing a separate event about trusting men and women, Gloriana spontaneously presented a fictitious scenario about standing on the edge of a roof.

G: I felt within myself that I can't trust a man. No matter how much he tells me he loves me, no matter how many gifts he gives me, he could give me, or whatever. I will not trust a man. I can -- I think I could to a point, a certain point, but for me to like uh -- For an example, if he was to tell me, you know, "Let's go up to this building up on the roof." And he would tell me, "Okay, close your eyes, and take steps," and I'm at the edge, I won't do it. I don't have that much trust in a man to do that.

MS: And if a woman did that?

G: Um, (pensively) I don't think I would do it either.

Gloriana looked at me with contemplation and conveyed a sense of paradox that she could not resolve. She described a conflict she lives with as a mundane reality, conflict in

her personal background meanings (Wrubel, 1985). Gloriana was more comfortable with females but may not trust them any more than males. I pushed the issue to try and understand how this affected her trust of male and female physicians. The dialogue continued as follows.

MS: I also remember you saying that in terms of doctors, you said that you really trusted a woman more than a man. [Uh huh.] And uh -- I mean, I know that that's very different than a boyfriend, but what some of your, some of your examples were how men, men don't know what it's like to be in a woman's body, [Uh huh.] and how you just trust -- You have a woman doctor now, and you trust her a lot more.

G: But the reason I trust her is because I didn't have to ask her questions, so many questions like I would a male doctor, and she was able to right off the top without me even asking questions just tell me, "Okay, well" -- For an example, when my pap came out abnormal, right off, you know, I didn't even have to say, "Well, why?" Or "How come?" Nothing. You know, right off, she came on, and told me why, and how it happens, and how it could happen, different ways it could happen, and that's when I started feeling, you know, being able to be more open with her, and trusting her. [Yeah.] Which, I mean, another female doctor could just tell you you know, it came out abnormal, and this is why, and that's it. Take this, and that's it. While, you know, I mean, -- It also depends on how they explain themselves. Like, you know, she would tell me, "Okay, well, I'm going to give you this cream. Use it this way. There's other methods of uh other creams you can use but, you know, I recommend this one for you." It's like, you know, some doctors don't have to say that, you know.

This excerpt complicates her earlier generalization that female doctors were better because they communicate better. Here, Gloriana admitted that this particular female doctor was spontaneously able to communicate with her and to teach her about her body as well as the lab test results. She finally noted, however, that the measure of a doctor

"depends on how they explain themselves," thereby admitting that she not only saw possibilities for nuanced differences between male and female doctors but among female doctors as well.

Gloriana's comfort level with physicians was as important as her ability to trust them.

MS: So if someone did ask you that question, if they said, "Who do you trust the most?"

G: I can't answer that. [Really?] To be honest with you, I can't. [Huh.] It's just the experience that I've had growing up, I can't really answer that. [Yeah.] Because there's been negative view on both parts. [Uh huh.] It's been negative, and, and not much positive. [Yeah.] I couldn't answer.

Gloriana seemed surprised that she in fact couldn't say she trusted a woman more than a man. A pensive reluctance disrupted her ability to make a generalization about her ability to trust. Trust was not simply based on gender.

Still, gender played a role in how she was able to approach a physician with her bodily concerns. Gloriana feared that a male doctor could not understand the experiences of women, but a female would "more likely know how you feel." Because men live in male bodies, she felt that they could not know what "it's like to have a baby, go through delivery, and all that." Consequently, Gloriana said she believed that she could communicate with a female doctor on more topics and at a deeper level. The dynamic exchange of communication between Gloriana and her female doctor was of great importance to her.

G: because now that I have my doctor she -- When, when we talk, -- She asks me stuff and everything. I ask her questions. She answers me. She tells me, "Do you understand what I'm telling you?" And before I wasn't even asked. [I see. I see.] And at times, I tell her, "Well, I understand you a little bit, but I'm not too sure, you know, what you're getting at." [Right.] I don't understand. And, and before it's like I wasn't even asked so why, why even say anything?

Gloriana's concern was to understand what is communicated in the health encounter, which she termed being "comfortable" with herself. When I asked her to clarify the meaning of being "comfortable with herself," she forcefully replied,

G: understanding what they're telling me, and not just, okay, hear them out, "Okay," you know, REALLY understand what they're telling me, what my question is, what their answer is. Understand that answer.

In the past, Gloriana didn't tell her doctor when she didn't understand something. Consequently, she had to deal with feeling uncomfortable with herself. Her style of relating has matured, however. Gloriana learned to be more assertive about securing understanding, whether she is receiving services from a male or female health provider.

Gender -- with its conflicts, contradictions, and inconsistencies, -- experienced as part of the mundane happenings of everyday life, complicated issues of trust, comfort, and communication with health providers. A crucial element of Gloriana's ways of taking care in her world involved the development of skills for managing the messages she received about traditional Mexican gender norms and multiple clashing alternative gender norms.

Conflicting Gender Norms:

"Here" vs. "Over There"

In the midst of her U.S. upbringing, Gloriana tried to make sense of others' expectations which were based on the traditional Mexican gender norms. She noted that in her first marriage, these gender norms influenced the expectations of her ex-husband, Blas. Traditional Mexican gender ideology would prioritize the husband's needs over those of the wife. However, Gloriana explained that just because a man was born or raised in Mexico does not mean that he will automatically adhere to the traditional norms. That is, despite her expectation, Gloriana saw that the place of a man's birth did not necessarily determine how traditional his expectations or his behavior towards women would be. She had always assumed that the place where a man grew up had significant influence on their behavior and that Mexico-born men would be more traditional.

Both her ex-husband, Blas (who grew up in the U.S.) and her current boyfriend (who grew up in Mexico) were born in Mexico. However, they were different in how they dealt with her in terms of communication and personal needs. In discussing these differences, Gloriana was puzzled. She thought that a U.S. upbringing would foster a less traditional stance, especially interpersonally. She expressed surprise that her boyfriend who grew up in Mexico

was more "understanding" and had better communication with her than Blas did even though he grew up in the U.S.

G: There's more communication within us, and, and he was brought up in Mexico, and not here.

MS: Born and raised in the city or --

G: Born and raised in, in a ranch in Mexico, and here my ex-husband was born in Mexico, but raised here, and it's like they're totally complete -- They're different, you know. Instead of my ex-husband being more understanding, he's not. This other person that's not even from here is more understanding than he is.

MS: Do you think that it has to do with where he was born?

G: Uh, I think -- Well, I don't know because I -- I really don't know how it is over there. I mean, I hear stories, but that's just stories. Who's to say they're true or not? I don't know.

Place as a factor raised perplexing issues for Gloriana. How could it be that Blas was raised "here" and "didn't care" about her feelings, but her current boyfriend was raised "there" and was more "concerned" about her feelings? This was further complicated by the fact that her more understanding boyfriend was raised on a ranch, which she implied was a more traditional place, while Blas was raised in San Tomas, California, which she assumed was a less traditional place. Gloriana's assumptions each man's background meanings (taken-for-granted assumptions about what is) were based on their gender, where they were born, and where they grew up. When their relational concerns did not match her assumptions, she was perplexed. Their emotional interactions with her did not present a neat formula for male behavior. She wondered if her current

boyfriend's personality style ("more outgoing") and education factored in to the difference between their communication practices.

After exploring and comparing various attributes of the two men, Gloriana recognized that she didn't trust her original premise that the place of upbringing mattered. She also didn't REALLY know if factors related to "over there" mattered. She didn't trust the stories she had heard about Mexico and wasn't comfortable making a generalization about "how it is over there."

While telling me about Blas and her boyfriend, Gloriana realized that her assumption of how things "should be" (background meaning) contradicted what actually was the case. However, she had a certain tolerance for the contradiction. She noted the contradiction in her understanding, discussed it, but did not dwell on the confusion. She accepted the contradiction in a mundane kind of way.

Gloriana was familiar with the experience of discovering culturally derived understandings of reality that were inconsistent with personal experiences. She seemed to take up these inconsistencies as she went along, integrating them as best she could. In other words, she discovered that some ideological constructs and some background meanings were in conflict with her personal experience of gendered behavior, but she did not chafe at

its disruption of general cultural assumptions about people who live in the U.S. versus Mexico, or people who grew up on ranches versus those who grew up in urban areas.

"girls over there, and not here"

Utilizing the place based phraseology of "over here" and "over there," Gloriana differentiated between the places of Mexico and the U.S. in a way that set them up to be corresponding. She spoke of the two as places that were in relation to each other. "Over here" is in a dynamic relation with "over there." The use of these corresponding terms implies the constant potential of movement between the places. Gloriana used the terms to imply physical movement across geographic borders (physically moving from here to there or vice versa) as well as non-physical movement across borders of meaning (between Mexican and U.S. spaces of meaning).

Gloriana used the terms "over there" and "over here" to discuss the differences between Mexican women and herself. The terms implied a spatial relation to each other which were useful for setting herself 'apart' from Mexican women. Throughout her narratives Gloriana distanced herself from Mexican women by identifying them as being from "over there" while she was from "here."

Thus Mexican women "over there" in Mexico, showed up as "other" in Gloriana's interpretation of her situation as a woman who grew up "here." Gloriana heard stories about what

Mexican women were like from both her parents and her boyfriend. She used this information to contrast herself with them. The result was a somewhat stereotypic, flat interpretation of "girls over there," that focused on the negative aspects she learned about "them." For example, Gloriana understood that Mexican women did not question their partners about their activities or whereabouts. They did not hold them accountable in any way and would not expect equal freedom to socialize with their friends, as Mexican men do. Gloriana stated that she was not and would not be like Mexican women in these areas. She gave many accounts of ways that she disrupted this stereotype in daily life (for example asking her Mexican boyfriend where he was going and letting him know what she wanted or expected from him, etc).

Despite her boyfriend's attempts to change her, Gloriana stated that she "wasn't brought up over there." Gloriana declared to him (and to me during the interview) that she couldn't "agree with what you believe in over there." Rather, she boldly proclaimed that if the kind of woman he really wanted was a woman from "over there," then he should "go and find yourself someone over there because I'm not going to be like they are over there." By repeatedly using the phrase, "over there," Gloriana distanced herself not only from the practices of Mexican

women, but she actively worked against setting herself up to be stereotyped.

G: Yeah. But he also wanted to change me. Because he told me, "I wish you were different."

MS: He did?

G: Yeah. He's told me.

MS: What does he want?

G: He wanted me to be -- To depend on him. He would tell me, "God, you know, if you were from, from Mexico, you know, like if I wanted to go out with my friends, you'd just stay here, and you wouldn't ask questions. You would just tell me, 'Well, have a good time. I'll see you when you come home.' Or 'I'll call you when I call you.'" I just tell him, you know -- "My parents have told me, too, that that's how they are over there. But, you know, I wasn't brought up over there. I just -- I can't agree with what you believe in over there, you know. I mean, having a boyfriend to me here is like, you know, understanding each other while, you know, you're going to go out with your friends, you will accept the fact that every now and then, maybe I want to go out with my friends." But, see, he doesn't believe that that's right of a girl to do because of the fact that that's how he knows of girls over there, and not here.

MS: But he accepts it.

G: But he accepts it. Otherwise I don't think -- If he didn't, I don't think we would have been together for so long.

MS: Yeah. Well, you said that he has tried to change you. How did you get him to stop trying?

G: I told him that if he continues to, you know, keep pressuring me and wanting me to change, and I -- You know, I told him, "Well, if that's what you really want, then go and find yourself someone over there because I'm not going to be like they are over there. I'm who I am. Accept me for what I am, who I am, and how I am. If not, then go your way, and I'll go my way." [Uh huh.] And he...

MS: He accepted it?

G: He accepted it.

Women from "over there" were dependent on their partners, tolerated their erratic comings and goings without asking questions, and willingly stayed home alone.

Gloriana, in contrast, described her expectations of a relationship to include "understanding" each other and accepting that the woman may want to go out with friends just as the man did.

What was key to Gloriana's interpretation of her boyfriend was not WHAT he knew of Mexican women, but "HOW" he knew of Mexican women. (She described him saying, "But, see, he doesn't believe that that's right of a girl to do because of the fact that that's how he knows of girls over there, and not here."). His knowledge wasn't a just a set of facts or ideological tenets based on gender norms. Rather his knowledge was also experiential; it was derived from routine interactions with women in Mexico and practices that were taken-for-granted as part of his personal background meanings related to women. In his experience, Mexican women stayed at home and did not hold their partners accountable in terms of their activities and whereabouts. Imbued with personal background meanings about women's behavior, these practices were transparent to him as "right" ways for women to act.

The Background Shows Up Because of Conflicts of Meaning

Gloriana's interpersonal concerns about the way a woman from "here" can or should act conflicted with traditional

expectations that she connected to women from "over there." They also clashed with her boyfriend's personal background meanings which were in harmony with traditional Mexican background meanings in general. Consequently, Gloriana was not simply coming up against a difference of opinion in these instances. Rather, her interpersonal concerns for men and women (as a woman from "here") clashed with his taken-for-granted personal background meanings about the behavior of Mexican men and women, wherever they were situated (in the U.S. or Mexico).

The conflict in meanings between Gloriana and her boyfriend actually caused the background to show up for her such that she discussed it in terms of "over there" and "here." The nexus of the clashes and conflicts of meanings reveal intercultural spaces - spaces where the traditional and the untraditional clashed. In this case, the conflict among two people who were involved/engaged in each other's daily practices caused the mixing to show up for Gloriana as problematic and therefore as something she needed to reflect on and wanted to discuss to gain understanding.

An Assertion of Identity

Gloriana's statement, "I'm who I am. Accept me for what I am, who I am, and how I am," functioned both as an assertion of identity as well as a threat to his taken-for-granted meaning structure. By asserting herself with this statement she was invoking respect. She laid out a

boundary, signaling a limit to her willingness to bend in the negotiation of gendered behaviors. Gloriana asserted her stance, despite the fact that he was not fully supportive of it and, perhaps, because he was not fully supportive of it.

For Gloriana, it was here in these spaces where cultural clashes could be palpated, that identity brought direction. Gloriana took a stand in this space, recovering meaning amidst the inconsistent notions of what was asserted by others as that which was real in a taken-for-granted way as, if it was obvious and clear. Thus, although Gloriana's interpersonal concerns related to gender conflicted with her boyfriend's assumptions about gendered behavior patterns, she was able to confront the traditional Mexican pattern of obligatory submission to male volition. Her strategy for confrontation involved making a declaration of identity to her boyfriend in the midst of conflict over assumptions of what's "right."

Gloriana stayed in this partnered relationship with her boyfriend despite his traditional beliefs and expectations. It is striking that Gloriana didn't move on to another relationship in which her autonomy and independence would be less contested. As her story continues to unfold, it seems that Gloriana chose a partner who was traditional BECAUSE he afforded endless opportunities for her to continue to refine her sense of autonomy and identity as independent.

Understanding Gloriana's stance is complicated and is probably not clear to Gloriana herself. She expresses deep concern for her own autonomy in relation to a partner but continues her involvement with a man who has traditional expectations for Mexican/Mexican American women. She values independence as a woman but is willing to be with a man who values female dependence. The dynamics that are at play are complex.

Marriage and Dependence on a Man

Gloriana explained that, to her boyfriend, marriage meant that she would take on his beliefs about gender norms and allow him to control her. Although this did not drive her to reject him, she explained that she would never allow him to change or control her despite his persistent belief that he would change her. Aligning herself with the practices of the place called "here," Gloriana stated that she is NOT CAPABLE of taking on the ways of Mexican women. Here, Gloriana found and claimed a space for herself that was meaningful to her and allowed for relationship despite differences.

An example of their differences involved communication and accountability. Gloriana saw that U.S.-raised women took whatever opportunities they needed or desired to communicate with their partners and to be informed of their activities. This was inconsistent with traditional Mexican expectations of women.

Pediatric nurse practitioner Enriqueta Hinojos (personal communication, 5/14/96) stated that Mexican communication styles of women keep them detached from the outside world because men handle the activity of interfacing with outsiders. When a Mexican woman begins to realize that she CAN communicate with outsiders in society (e.g., health professionals, teachers, doctors), she is no longer isolated in her nuclear family unit. However, her savvy in obtaining information and in communicating with strangers or professionals can threaten the male if he has always adhered to traditional communication practices. By remaining unconnected to members of society, women do not challenge their own isolated or ignorant position or the autonomous and informed position of the male. Hinojos maintained that the ideal, traditional Mexican woman doesn't ask any questions and has no ambition to know things.

In his study of machismo in Mexico City, Matt Gutmann (1996) found that the increased exposure of women to other people outside the home through employment and increased autonomy was threatening to men. His informants explained that men's authority was being undermined by the economic and socio-cultural changes in women's lives including strains of migrations, falling birthrates, and exposure to alternative cultures on television. Consequently, the changes in the lives of women have required changes in the lives of men.

Gloriana defied this "ideal" by her communication-seeking stance as well as her reluctance to marry her boyfriend. She was aware that he believed that marriage would change the dynamic of their relationship. Possibly, Gloriana saw this too, because she was currently uninterested in entering into a marriage and was adamant that even if she did, no matter what the pressure would be, she would not change.

G: ...the problem that we're having right now, it's like, I told him, "Just because -- If I was to marry you, you are not going to control me." Not now, or not ever. I will continue to do and believe what I believe in. So me being married to you is not -- You're not going to change me." And I've let him know that, you know. "Don't think that just because I accept to marry you, I'm going to change because I'm not."

MS: How are your beliefs different? It sounds like they're different, yours and his. He wants you to believe his stuff, but --

G: Because he wants me to do -- Like what I said before, you know, and act like the girls act in Mexico.

MS: Oh, that way.

G: You know, being home. [Oh, that.] And him going -- Go out whenever he wants to go out, and me not -- They don't question the men. They don't question them. "Where are you going? Who are you going with? When are you coming home?" It's like "Okay, well, you're going to go? Okay, well, have a good time, be careful." That's it. But here, we don't say that here. It's like "Who are you going with? Well, how long are you going to be there? Where are you going?" You know? [Right.]

Gloriana explained that traditional Mexican women would only say words of agreement related to what their men do. Again, using the distancing device word, "here," Gloriana

declared the U.S. as a the place of women who CAN ask questions.

Gloriana recognized her own stance of independence by noting how she raised her sons alone. This was to be heard as evidence that she would not give into the traditional dictum that called for her to depend on and obey a man without asking questions. Her success in raising her sons without a husband was evidence of her capabilities to thrive and functioned to blunt her boyfriend's ventures towards dismantling her power. Gloriana disarmed her family's reliance on the traditional obligation of a wife to remain married to the man who fathered her children when she declared that her happiness determined whether or not she would stay with a man. Such a proclamation literally rattled the cage that would have held her.

G: And it's different, but see, after eight years, he still feels within himself that someday he will be able to change me. [Huh.] But I just told him, you know, "You need to really think about it because if you think that just because I marry you, I will do whatever you want, no. I -- I don't care if I have five kids from you." [Uh huh.] "I will leave you if I am not happy with you. Bottom line."

MS: Does he believe you?

G: He has to believe me because from the start he's told me, "I don't know how you do it. How you've done it, and how you do it, having two kids." I go, "Well, I've done it." I go, "If I had five of my own, I, I would be in the same situation that I am right now." And I -- You know, I told him, you know, he's told me, "God, babe, I wish that you would be different, and you would do what I tell you to do," and I go, "Yeah." I go, "So are you saying that if you were to tell me, I would answer you, "How high?" He goes, "Yeah." I go, "Yeah, right." I go, "You know, that would never happen. I

go, "That, you're going to be wishing, you know, for I don't know how long until you're buried six feet under, you're going to wish that that was going to happen."

Gloriana recognized the power struggle that surrounded her behavior as a woman, mother, and wife. By giving weight to the value of her happiness, Gloriana disrupted the traditional practice that positions a woman's needs below those of the rest of the family. She learned that her happiness was important when she ended up in an unhappy marriage. At the time, her parents opposed her divorce on the grounds of Mexican traditional values that sons needed their dad and that she could not make it on her own. When her ex-husband realized she wasn't going to come back to him, he taunted her with his image of a "mujer sola," who's life was wasted when she was unpartnered by the father of her children.

She explained that he told her, "If you don't want to be with me, that's fine, but if you think that another man is going to accept you and two kids, you're crazy. All he's going to do is use you." In saying this, her ex-husband used the traditional norms to threaten her sense of a future. Gloriana described his perspective on her future as a divorced woman with these words, "My, my whole life is just wasted. No one's going to want me. Everybody's just going to use me. They're going to say, "Well, God, she's got two kids so she's easy."

Blas was invoking what Del Castillo (1993) described as the *mujer sola*. She explains that, "In Mexican society a woman without a man (widow, single parent, abandoned women, separated or divorced) is marked as a *mujer sola* representative of an undesirable female status" (p.244). Women who live without the companionship of a male "are perceived as subverting a basic socio-gender tenet based on the centrality of the conjugal couple for it is through her conjugal role that a woman fulfills her primary social role as mother and wife," (Del Castillo, in press, 'Male and Female Crafting of Mexican Manhoods,' p.4). The threat of being marked a *mujer sola* serves to keep women coupled or anchored to an adult male (Del Castillo, in press, p.5). For Gloriana, however, the threat went unheeded.

From Being a "Kid" to Being a "Mother"

The feelings of Gloriana's parents were powerful in influencing Gloriana's actions. She described her parents as being extremely upset about her decision to leave her ex-husband. They clearly told her what she was doing was "wrong" and that she was incapable of "making it" on her own. They admonished her to stay with him claiming Gloriana didn't know what she was doing.

G: I went back to my ex-husband because my parents, you know, they pressured me so much that they get into my head that you know, you can't make it. You can't make it. You know, you need him, and you need him. And at the time, I wasn't working so I said to myself, you know, "What am I going to do? I'm just going to have to stick to him, you know. I have no choice." And, and after that third time, I just said to myself, "You

know, I've already tried twice, and my third time -- You know, I'm here with him. I know I can get some kind of help out there. I know there's somebody that could help me. I just need to find that person to, you know, to show me through that, you know, that road, but I know there's somebody out there." [Huh.]

I just said to myself, you know, "I'm not going to fool myself anymore." [Huh.] "I need to do for myself before I do for anybody else," and you know, I went, I told my parents, "You know, I'm sorry. I love you and I respect you, I can't do this," you know, "Here you're telling me I need to do this for the boys' sake, but I need to do for myself before I do for anybody else." [Uh huh.] And uh -- And, you know, I told my, my parents, "I feel like I have no respect within myself because here I'm doing what everybody wants me to do, but I'm not doing what I really want to do. What I am doing, I don't feel right doing it. And I'm -- I don't want to do it anymore. I'm not going to do it anymore."

Gloriana saw her parents' expectations as "very selfish" because their only concern at this time was her sons' welfare. By describing their failure to value "her," Gloriana revealed her own movement towards a valuing of what made her happy. Here, Gloriana made the transition to act in a manner that was in synch with her own needs and desires rather than those of her parents. She described the change in her perspective in relation to her past goal of pleasing her parents as movement from being a "kid" to a "mother."

G: ...then that's when I said, "you know what? I'm not happy. I'm not going to be with somebody who I don't love, who I'm not happy with. I'm not going to do it." You know I told them, "I love you both, and I respect you, but I've got to do for myself. I'm not a kid anymore. I'm a mother. I have two kids, and I need to think about what I'm going to do for now, now."

This event was a turning point for Gloriana. Her parents' needs for her to stay with the boys' father for

their sake, even if she didn't get along with him, showed up as unlivable to Gloriana. With this realization, her desire to nurture her own sense of self respect showed up in a new way. By standing up to her parents, she realized that she was, in fact, standing up for herself.

Through this transition towards respecting her own needs, however, Gloriana carefully and intentionally affirmed her love for her parents. This was an action of self-protection. Such affirmations served to reinstate her position as a respectful daughter even though her actions appeared threatening and disrespectful.

Financial Independence Through the Help of A Sister

While Gloriana's parents were aghast at her decision to leave her husband, Gloriana's sister took an active role in helping her get a stable income. She helped Gloriana to focus on HER own vision for her own future. Gloriana's sister did not project her agenda for Gloriana nor did she reinstate that of her ex-husband.

Gloriana lived with her sister for two years. Her sister also gave her a job as janitorial cleaner. Gloriana was able save her money and, in time, bought a car. Eventually, her sister promoted her and gave her more responsibility over some of the other cleaning service workers. This built Gloriana's confidence and gave her a sense of "making it."

The phenomena of women helping women in transition is not unusual. In her study of Mexican experiences of migration entitled, Gendered Transitions, Pierrette Hondagneu-Sotelo (1994) found that women regularly helped other women in the migration process through networks. It was not uncommon for single women to help other single women migrants to secure jobs as well as the economic support necessary to make the transition to the U.S.

Gloriana described her feelings about her newly gained economic autonomy as,

G: ...then I felt better within myself. I said, 'You know, I can do it. Here I'm able to work part time, and have my kids and buy this and that for the boys,' things that they wanted, that they needed, and stuff, and for myself, too.'

Gloriana gained vital grounding by maintaining a job and earning an income. This allowed her to get her own apartment and to provide shelter for her sons on her own. This increased Gloriana's sense of the importance of her own effort to make a difference in her life.

In her study with Mexican women, Del Castillo (in press) found that economically empowered women ultimately used their power to displace ideal notions of gender-appropriate ideology and patriarchal dominance in the family. Although Gloriana resisted the traditional norms even when she was penniless, the economic independence she gained after the divorce contributed to her sense of accomplishment and ability. She described these

accomplishments as an ability to "take care of herself" and contrasted this with typical behavior for Mexican women.

G: I've let them (the men in my life) know that from that start, that I could take care of myself, and what surprises my boyfriend now is that he's so used to -- the girls in Mexico, it's like what the man says, you do. And the woman is afraid to be by herself.

And one thing that he realized, when I met him, I was working and everything. And he would tell me -- he started telling me after we got close, he goes, "Well, how are you going to support yourself and your boys?" Because at the time I had my own apartment and I had no one helping me, I was doing it on my own, working. And I just told him, "You know, I had to get out there, and I had to do it." I got training to become a teacher, and got myself a good job, and was able to find an apartment I was able to afford.

And he goes, "God" -- he goes, "You know, I'm really surprised because a lot of girls in Mexico wouldn't be able to do it. Wouldn't do it. They would be too afraid." I go, "Well, I'm not one of them." So, I just tell him "I'm happy, and I want you to know that, realize that. I don't need you. I don't feel I need any man to support me. I've been able to do it for many years on my own."

As the above narrative shows, Gloriana did not consider herself to be "one of them," where the "them" were Mexican women who needed a man/spouse to survive. Her income astonished her boyfriend and commanded respect. Taking care of herself, in this instance, meant subverting the traditional need for women to be fearful, obedient, and unable to bring in an income. Gloriana's courage to be without a man and to work for an income made her untraditional. She was well aware of how her stance was located somewhere between traditional Mexican gender norms

and individualistic "American" notions of autonomous women.

Indeed, she saw herself as unlike the "girls in Mexico."

G: "Well, sometimes things don't work out, but, you've got to keep going. There's a lot of people that say, 'Okay, that's it. It's over with. My whole life is ruined.' But, NO!, you've got to keep going.

MS: Where does that strength come from in you?

G: In me, I don't know. (laughs). I just say, "I've got to do it for me" because there is nobody right beside me that's going to turn around and give me a push and say, "You know what? Get with it!" I've got to do it.

Gloriana's strength to "get with it," and her self protection through earning an income showed up time and again in her stories. She took care by motivating herself and protecting herself as well as her share of the power in her relationship with her boyfriend. Gloriana did not have this power in her first marriage. Rather, because she did not work, her husband would not allow her to make any decisions about how "his" money was spent.

The "50/50" Plan

She came up with the plan of splitting all of her bills "50/50" with her boyfriend when they lived together. She said that she brought it up with him when they began discussing moving in together.

G: I got that idea because when I was married, my ex-husband would tell me -- You know, I would tell him, "I want to get this. I want to get that." You know, like for example, I told him, "I want to get -- Let's go get a dinette set or let's get a bedroom set." "How do you think we're going to do it? I'm the only one that works around here. You know, with the money that I get, you know, we're paying -- I'm paying the bills. I'm paying the rent."

And that's -- That's where I got it from. I go, "No way. No uh! I am not going to allow for no man to ever tell me, "I pay the bills. You make -- You have no income. Bottom line." I said to myself, "No!" Because when he told me that, I felt, I felt small. I felt like, "You know, I have nothing. Everything I have is because he bought (it)." Nothing -- I didn't sweat to buy anything, you know.

I just -- I just wanted to start off new after being separated from him. I wanted to have stuff. I wanted to work for what I wanted, and that's all.

Because of the traditional norms, a plan to maintain financial equity in a relationship could be taken as an insult to a man and a threat to the integrity of the "love" the woman offers the man. So, when Gloriana introduced the idea to her boyfriend she started off assuring him of her love. In describing her stance with her boyfriend during the interview with me, Gloriana's voice and language was coaxing and soothing as were her words. She said to him,

G: "You know what? I love you. I want to be with you. You know, I want to live with you." And I told him that "There's something that I want to do and agree on before we even move in together." He goes, "What?" I go, "I want us to go 50/50 on everything. I don't want you to say later on along the line say 'Well, I'm the one who pays the rent now. I'm the one who pays the bills now.' Half of the rent, half of the bills, half of the groceries, and whatever half there is. I want to go 50/50 all the way."

When he replied, "That's okay, babe, I'll pay -- I'll pay the rent." She responded firmly but lovingly, "No, that's all right." Gloriana gently but firmly held her ground on this sensitive issue of the privilege of economic autonomy.

Even Gloriana's older sister who has been married three times did not think this practice was wise. She encouraged Gloriana to LET him pay the bills. Despite the coaching from her "mentor," Gloriana trusted her instinct to set up the relationship with the "50/50" rule. In the long run, this enhanced her sense of self worth and ability to "make it" on her own means.

G: My older sister told me. I go, "No." I go, "You know what? That's your way of thinking. But I think differently." I go, "Everyone has their own opinion." I go, "No, no way, not, not now or not ever do I want him to throw that in my face." [Yeah.] I'm the one who pays the bills around here. Or do this or do that. No. It's like it's always been 50/50 all the way, and, and that made -- That has always made me feel good about myself. It's like, "You know what? I have a man living with me. You know, we're living together, but you know, I could do it as well as he could do it." I was able to save money, have money in the bank. I was able to -- I sold my car, got myself a better car, and you know, he was surprised.

Under the traditional model enacted in her first marriage, Gloriana had no power to participate in the purchasing decisions. Because her boyfriend accepted the "50/50" rule, Gloriana's ability to make financial decisions and purchases on her own was secured. Additionally, her newly acquired proficiency for employment could not be squelched by a traditional expectation that women should not work.

In order to protect such an important agreement with her boyfriend, Gloriana never allowed him to know what the financial arrangement of her first marriage was like. The lesson she learned in her marriage was too painful and the

ground gained too valuable. She did not want to jeopardize such gains with her current partner. If he knew what she was like in the first marriage, Gloriana feared that his motivation to change and control her would increase significantly. Consequently, she defended against this possibility by managing his impressions of her first marriage and her ex-husband.

G: One thing that I never did, getting back to the situation with my ex-husband and my boyfriend, how he - - He knows that, you know, I'm very (in)dependent myself. I never let him know what kind of life I lived with my ex-husband, how he was with me. [Huh.]

MS: You never told him.

G: I never told him because I didn't want him to think, "Well, you know, she, she must have been really dumb." [Huh.] You know, I didn't want him to ever think that even though I was, but I, I just -- I don't care for him to know. I mean, besides, that was with my husband so I don't feel he even needs to know what kind of relationship I really had. Just the fact that things didn't work out because there was no communication within us, and that's all he knew, he knows.

MS: And when you say that you were dumb with him, you mean like the fact that you -- You weren't working so you didn't have your own money.

G: I didn't have no kind of -- I can't say I had an education, you know. I didn't. I didn't finish high school. I didn't have no diploma yet, no GED. I didn't have anything.

Gloriana's self-perceived ignorance in her first marriage and her newly gained power in this relationship were crucial to her emerging sense of herself as an autonomous woman. The memories of her ex-husband's lack of respect for her and his power over their finances were powerful. She did not want her boyfriend to know that her

current independent, autonomous style was the result of a process of growth since her divorce.

Negotiation as a Strategy for Valuing Self

Gloriana admitted that sometimes she would have liked to tell her boyfriend how much she needed him, but she resisted the temptation because it could have been detrimental to their negotiated relationship.

G: My boyfriend helps me out, but I don't let him help me out to a point where I make him feel that he's really need -- I need him. That [I see.] I don't -- I never let him know that. [Uh huh.] Even though at times, you know, I would like to let him know that, you know, "I really need you," but I don't. I hold that in with -- I hold that in within me, and because I don't want him to know.

MS: Because if he knew --

G: If he knew, then he would say, "Okay, well, you know, she's going to do what I ask of her," and I guess it would just make his ego just burst, or I don't know. But I, I just -- you know, I've let my family know I can do it.

Gloriana paid a high price for the sense of identity she gained and was vigilant to distance herself from being considered similar to "girls over there" (Mexican women). Likewise she took care of her newly gained sense of self as well as the image of an independent woman she projected, by defending her stance-post-divorce. She defended it against collapsing, in her own self-understanding or in the eyes of her boyfriend, back into the stance she had as a "dumb," unemployed housewife.

However, Gloriana seemed to have adopted, a hypervigilant mode of defense. Maintaining a relationship

with a traditional Mexican man probably consumed much energy and required much effort for Gloriana. However, after the constraining relationship with her ex-husband, it probably offered different benefits as well. For example, Gloriana enjoyed her boyfriend's impression of her as a woman who could make up her own mind about how to act, how to communicate with a man, how to provide for herself and her sons, and how to negotiate the parameters of a relationship (e.g., wanting to know where he is going, wanting to go out with friends also, maintaining financial independence, etc). Perhaps the meaning of this relationship was all the more enhanced BECAUSE OF the struggle inherent in it and BECAUSE OF the ground she gained with him. These negotiated gains probably influenced her own self understanding and enhanced the value she placed on her stance.

On Being a Marked Woman

Despite the personal, limited "benefits" of being partnered with a traditional man with whom she could actively "negotiate" her identity, Gloriana had to face the judgement of her boyfriend and his family who lived in Mexico. To her disappointment, she found out that as a divorced woman with children, she was marked. Upon discovering the stigma they had applied to her, Gloriana became angry.

G: Then he went to Mexico, and it's like he came back brainwashed or something. I don't know. [Really?] I sensed him so different, completely different. [Like how?] He was cold towards me. I would ask him, "How

was Mexico?" he wouldn't talk much about it. Like something had happened over there. [Huh.]

Then I found out that his parents told him that they didn't want him with me because he shouldn't be with me, (because) I've been married, I have two kids. He needs to find someone, not so much as a virgin, but someone with no kids, someone who hasn't been married.

And you know, I just told him, "Well, you know, how do you feel about that?" He goes, "Well, I kind -- I kind of wish that, you know, you didn't have kids and everything." I go, "You know what? I don't even want to go on. You know, don't even talk anymore. I don't even care what you have to say anymore. You know, just get your stuff and just go."

Gloriana was able to act on her anger. By asking her boyfriend to leave their place of residence, she acted in accord with her self-identification as a woman who respected herself. Not even the judgement of her boyfriend was enough to cause her to question her stance as a divorced woman. Instead, it was an opportunity to push the boundary even further. If he could not accept her for who she was, Gloriana was willing and able to separate. The turf at stake in this struggle for control was that of the woman: her body, her activities, her reputation, as well as her mental and emotional resources.

However, instead of quickly rectifying her predicament as an unpartnered woman after her divorce (*mujer sola*), Gloriana saw her situation as one worth perpetuating and protecting. As an unmarried woman she had some power, some control, and attained financial security "on her own." In fact, Gloriana actively resisted pejorative labeling by asserting that she had taken care of herself and her sons

well. Eventually, Gloriana and her boyfriend did get back together. Gloriana described her self understanding in reference to her relationship with her boyfriend with the following statements.

G: He knows that I am standing on my two feet, and I am not going to budge! He knows that, you know, I am able to, to support myself, take care of myself, and I'm okay without him. I would BE okay without him. So you know, it makes me feel good. I mean, I've come a long way. My family knows I've come a long way. I'm the only one, you know, that's been on my own and by myself without a husband, you know, to help me for many years, but I have been able to be on my own.

Not only was it important to Gloriana to prove to herself and her boyfriend that she had the ability "to stand on her own two feet," but it was important for her to prove it to her family as well. The influence of her family was crucial in her ability to recognize and respect her own efforts. Through this Gloriana learned to value her own insight about the right path for her life by listening to her own voice.

G: I've proved it to myself and to my family that I have been (able to do it on my own), and when there is a gathering, I don't see much of my brothers, but when we do, they've told me many times, "Hey, girl, I don't know how you've done it, but you've done it, and I'm really happy for you" I tell them, "It's hard. I have my ups and downs, but I'm -- They're (my sons are) here, and I'm in good health. The boys are in good health, and everything's fine." And you know, nobody's perfect. Everybody has problems, and everything, but I just try to work things out as best as I can.

Gloriana valued her increased sense of self esteem in the presence of her brothers. Still, such a sense of self esteem and respect from them did not come without a price,

as is revealed by Gloriana's history of relationship with her brothers (which will be addressed in the next section).

Historical Embeddedness

In the Borderlands where cultural expectations and practices related to gender mix, day to day living also involved how Gloriana, her brothers, sisters, parents, and relatives were embedded historically (Saragoza, personal communication, 4/30/96). Gloriana spoke often of their impact on her growth from childhood to womanhood. The elements of her family "origins" influenced the ways she was positioned to deal with the mixing of cultural factors as a Mexican American woman.

Gloriana spoke often of the past events in her mother's family. Consequently, a discussion of Gloriana's situatedness requires a preliminary focus on Gloriana's understanding of her mother's situatedness. This, along with an exploration of the messages Gloriana received related to gender while growing up, will help illuminate the previous discussion of Gloriana's attitudes towards male and female health professionals, strategies for taking care, and practices of survival amidst interculturations and conflicting background understandings.

Power, Control, and Fear in One Woman's Life

The themes of power in relations between men and women, the meanings of women's bodies, the motives of Mexican men, the power of jealousy, and the meaning of accountability for

physical crimes are a few of the issues raised by the following narratives. I am including these excerpts together because they are connected by the theme of power, control, and fear.

The proceeding interpretation of Gloriana reveals many of her strengths, her ability to get the information and services she or her friends needed, as well as the various strategies Gloriana employed for taking care of herself. These narratives and interpretations explore the mundane activities as well as the crises of Gloriana's life, with a focus on her reproductive health: puberty, pregnancies, a miscarriage, infections, etc. Within these situations, Gloriana employed strategies for coping with her body and her embodied experiences in the context of the situation at hand. Amidst intercultural mixings, Gloriana did the best she could to deal with the mundane and the complex. Among competing agendas for her identity, her behavior, and her everyday activities, Gloriana faced her mistakes as well as her triumphs. However, Gloriana's process for thriving amidst intercultural mixings in the borderlands had been radically altered not only due to the mixed messages she received about gender and culture. From childhood to adulthood, Gloriana faced a particular set of threats to her well-being that were complicated by gender and culture.

The goal of this study is to understand the complex nature of everyday experiences for women who understand

multiple simultaneous realities in daily living. The indepth investigation that is presented here is meant to shed light on the particular experience of ONE woman who is Mexican American. It is in no way meant to imply that ALL Mexican American women share this experience or that my interpretation of Gloriana's experiences is the "correct" interpretation. Furthermore, sexual abuse is indeed an international problem, documented in every locale where documentation is sought (Finkelhor, 1994). That is, a history of sexual abuse has been acknowledged by an important percentage of the adult populations in every country where researchers have investigated (Finkelhor, 1994).

In the U.S., similar rates of child sexual abuse exists across racial and ethnic groups (Mennen, 1995). Research has shown, however, that Mexican American children were more likely than African Americans or Anglo Americans to be sexually abused by an extended family member (Huston, Parra, Prihoda, & Foulds, 1995).

Bordercrossing as Historical Practice

The geo-socio-cultural pattern of the family Gloriana was born into included practices related to movement between Mexico and Texas. Her parents and grandparents were all born in Mexico, but each lived in both Texas and Mexico. Gloriana described her maternal grandfather as a "Mexican" who "always lived in Texas." He moved to Texas and "bought

the ranch and bought acres and all of that" when he was an adult. The ranch is the only place Gloriana has ever known him to live.

Gloriana's maternal grandparents secured citizenship for Gloriana's mother, Mariela, when Mariela was a child. While in her twenties, Mariela and her boyfriend, Roberto, left Mexico and moved to Texas. Soon after, they got married, which provided citizenship for Roberto. Gloriana pointed out that citizenship was secured for her father and consequently for her entire nuclear family, through her mother. Although Gloriana does not describe her mother as "well-networked," Mariela fits Saragoza's (personal communication, 4/30/96) term for a person who has connections on both sides of the border and can facilitate legal U.S. citizenship for others. Gloriana and all of her seven siblings were born in the U.S. They were the first generation of the family to live exclusively in the U.S. They did make occasional vacations to Mexico, but their home was in the U.S. The geographic locations of the living places of her parents, grandparents, relatives, and godmother were all in the same vicinity on the Texas-Mexico border.

MS: So you were in Texas, and you just went over the border.

G: Because my parents have a ranch in El Torro, Texas. That's where they lived. And there my aunt lives in Marinez, Texas, which is not that far away, and then my godmother used to live just right there on the border of Mexico.

Thus, Gloriana was born into a family that was sophisticated in bordercrossing-experiences due to life lived at the physical U.S.-Mexico border. Her family collectively accumulated many experiences due to years of lacing back and forth over the border. This provided Gloriana with a relational network on both sides of the border as well as a wealth of social information about life on either side. Compared to a woman born to a family that moved from a remote village in rural Mexico or El Salvador with no network or library of experiences to draw from, Gloriana's situatedness equipped her for a certain ease in "border crossing" (Saragoza, personal communication, 4/30/96). This was not just the physical crossing, however. The sophistication of her family's border travel included historically situated experiences of psychological, social, emotional, fiscal, sexual, and racial politics (discussed below) setting up a certain milieu within which Gloriana crosses borders of many kinds.

Gendered Power Struggles:

Painful Lessons in Survival

Gloriana's Secret: "I never said nothing to anybody"

While talking with Gloriana during interviews, she brought up the fact that she has long lived with a "dirty" and "icky" feeling about her body that she believed could have been decreased if her mom would have taken a more active role in teaching her. Although she did not talk

about why she had these feelings, Gloriana explained that she was glad when she learned a physical strategy for decreasing her sense of "dirtiness." She stated,

G: And just recently, too, did I discover, too, that you know, there's powders we can use, sprays we can use, because like I was telling my doctor, 'Well, you know, sometimes I feel like dirty,' and she goes, 'Well, why don't you buy this spray? There's sprays and powders and stuff you can use.' And just -- I'm not kidding you. Just I'd say about three months ago did I discover the spray stuff. [Huh.] I actually -- I went to the store, and I started reading the boxes and stuff.

As a nurse, I remembered this part of the dialogue because of the high incidence of such descriptions about a "dirty" bodily feeling among women who have been sexually abused. Eventually, Gloriana did reveal an episode of abuse.

Gloriana was the fifth child born to Mariela and Roberto who had a total of eight children while living in Pajaro, Texas. Gloriana has 3 older brothers, one older sister, and three younger sisters.

When Gloriana was 5 years old, her parents decided to leave Texas and move the family (without Grandpa and his new wife who stayed on their ranch in Texas) to California so that Roberto, a cook by trade, could find better paying work. They lived for a while in a small house behind the home of Roberto's brother in California. When Roberto and Mariela saved enough money, they bought a house in which they lived for 17 years.

Taking Care: Pretending as Protection of Self

Each year, Roberto and Mariela would pack up for a family vacation trip to the Texas-Mexico border region where many relatives lived. Gloriana accompanied the family at least four times on these summer trips. However, when Gloriana was nine years old, she was sexually molested by an uncle during one of the family vacation trips. Gloriana began to come up with various excuses, like carsickness or crucial school projects, year after to avoid having to go on the trip to the place where the abuse occurred. Gloriana wanted to avoid her uncle who lived in the Texas-Mexico border region.

G: And I also get carsick. Yeah, I do get carsick. And I use that a lot as an excuse. I used it a lot, too. But, you know, I was able to cope with my carsickness. [Yeah.] But I started exaggerating and saying that, you know, it's worse, and when I knew that they were planning on going, [Uh huh.] it's like I would get sick. [Uh huh.] And, and pretend. I would go into the bathroom, like start throwing up a week before they were planning on going and stuff.

MS: You would get that sick?

G: No, no, I would PRETEND so they would say, you know, "Why take her? She's feeling sick now. You know how she gets sick on the road."

Thus, this incidence of sexual abuse changed the map of Gloriana's world, physically, emotionally, and sexually. Physically the Texas-Mexico border region was a place to stay away from. Emotionally it was a place of pain, fear, and anger. Sexually it was a place of danger. Gloriana was

successful in avoiding the vacation year after year for 19 years.

Who's Protecting the Little Girl?

Gloriana told me the story of the sexual molestation, and in so doing, revealed various details about her childhood life. For example, she considered herself to have been "Daddy's little girl" when she was a child. She loved her father very much although she said she "didn't understand" him.

It was a common game for Gloriana to beg her dad to allow her to accompany him when he did errands so that he would buy her candy. One time, Gloriana begged her dad to let her accompany him on an errand he was running with her uncle (her father's sister's husband) over the border to Mexico. Despite her father's refusal of permission, Gloriana secretly got into her dad's station wagon and hid under some blankets before her dad and uncle came out of the house. The men got into the car and began driving out of Texas, without knowledge of her presence. Eventually, Gloriana's uncle discovered her presence in the car and signaled to her to stay hidden.

Gloriana was perplexed by his signal because in the past she would just "pop up" in the car to her father's surprise and begin laughing and teasing him, trying to coax him to buy her candy. Usually her father would become

mildly irritated at her little game, but he would always end up buying her candy.

This time, however, things weren't following the same routine. In response to her uncle's stern but silent warning, Gloriana obediently remained hidden under the blankets in the car. When the car stopped, her father got out and walked away into a building. Meanwhile her uncle reached for Gloriana and began to fondle her breasts. When she pulled away and told him to stop, he threatened her. He continued to touch her and told her that she was "in the wrong" for getting in the car without permission and said that her father would hit her if he ever found out that she came.

Gloriana believed her uncle and became frightened of being punished by her dad. Her fear kept her from disclosing the incident to anyone. She hid all the way back and stayed in the car until after her dad and uncle were in the house. She didn't tell anyone what had happened. In fact, Gloriana kept this secret for 19 years.

Not only did she believe she had been "wrong" and was "bad" for disobeying her father, but Gloriana felt alone. She was alone in her feelings and alone in her knowledge of the violation. Gloriana carried the weight of the pain alone. There was an additional vague awareness that no one had protected her from the uncle she once trusted. No one - not her father, not her mother, not a brother or sister or

aunt - no one protected Gloriana from being sexually molested.

The lingering awareness that she had been powerless to protect herself added to a confusion over who made this terrible thing happen. Questions hung like a shroud. Did Gloriana bring this upon herself? Did she set herself up for the abuse? Was it her fault that her uncle molested her? Like many other women who have been the victims of abuse, Gloriana wondered in silent pain and confused feelings. An "icky," "dirty" feeling about her body emerged and continued to surface for years after. For example, Gloriana explained that sometimes she takes two or three showers per day because of the "icky" feeling. Gloriana recalled that since she was a little girl, she began the practice of changing her clothes a couple times per day, especially if she had been out shopping. This was something her mother encouraged her to do as a child and it was something Gloriana currently encourages her sons to do. Since menarche, Gloriana had a desire to douche weekly and to use "feminine sprays and powders" to help herself to feel "clean." It is highly possible that these strategies for body cleanliness are linked to the abuse.

Years after the incident with her uncle, when Gloriana was 24, she first met her current boyfriend. Because of flashbacks of being sexually molested by her uncle, Gloriana would not allow her boyfriend to touch her breasts when they

would "make out." However, he sensed her emotional distress related to his touch and was sensitive to her fear. He continued to ask her why she was afraid which gave her the courage to explain her feelings and memories of the event. He listened compassionately. The communication they shared was extremely valuable to Gloriana because he was the first person she was able to confide in about the abuse.

It wasn't until Gloriana was 28 years old, that she was able to confide in her parents. This was when they were particularly insistent that Gloriana join them on their family trip to Texas-Mexico that year. Despite her disinterest in the trip, her parents persisted to invite her to come along. Gloriana then finally told her parents about the abuse. Just as her boyfriend's persistence in asking her about her feelings led her to confide in him, her parents insistence about the possibility of her traveling to Texas-Mexico with them gave her the impetus to confide in them.

Upon sharing her story, Gloriana's older sister gained the courage to confide that the same uncle exposed himself to her in acts of exhibitionism during her childhood as well. She too had kept the secret all these years.

Outraged and angry, Roberto and Mariela, confronted the uncle on the next trip they made to Texas-Mexico (without Gloriana and her sister). They discussed their newfound knowledge of the abuse of the past, telling him, "We know

what you did." Roberto angrily disowned his sister and told the uncle (his sister's husband) that he "want(ed) to have nothing to do with you." Gloriana described her father's emotions as "strong anger." Later, her father told her that he would have killed the uncle if he didn't have a family. As Gloriana explained the story violence as retribution for wrong doing did not show up as an unusual conception (background).

Although it was important to Gloriana that her parents confronted her uncle, the 19 years of silence had detrimental effects. It certainly contributed to her tremendous sense of the void in communication between her and her parents. Unfortunately, different agendas dovetailed to compound the silence. As a child and young woman, Gloriana was afraid to tell of the sexual abuse and how it made her feel "icky" and "dirty." At the same time, Mariela was not in the habit of talking to Gloriana about anything related to her body or sexuality. Regardless of "who" was reluctant to communicate "what" to "whom," Gloriana's disappointment that her mother did not communicate with her about her body were probably exacerbated because of this incident. Since these topic related to the body were never typically raised in the family, Gloriana's parents never tried to find out her experiences or feelings about her body. Intergenerational

silences probably added still more weight to the burden of her secret.

As discussed earlier in this interpretation, Gloriana felt strongly that if her mother had communicated with her when she was younger, life would have been "easier" for her. Gloriana's sense that she "missed out" on a lot because of the lack of communication may extend to the consolation she might have received if her mother had probed enough to find out that Gloriana had been sexually molested by her uncle.

The incidence of molestation and her uncle's threat to her well-being if she ever told what had happened, influenced the ways Gloriana protected herself in the future. During the 19 year silence, various dimensions of Gloriana's life were probably affected by her fear. Additionally, the Texas-Mexico border region, became connected with the negative meaning of abuse by a man who was not held accountable for years.

When asked what gave her the courage to tell her current boyfriend and her parents about the abuse, Gloriana stated that her courage was actually rooted in her ability to stand up to her brother when she was about 13 or 14 years old. She called this her "first step."

"My First Step"

Gloriana described a dynamic of control that operated among the men of her family. This control was exerted over the female members of the family. It specifically included

her brothers' belief that they had control over their sisters. Gloriana described her very first boyfriend's initial meeting with her father and brothers. At this time, her oldest brother physically threatened her boyfriend, pushing him up against a wall and pointing his finger at him and tapping it upon his chest, saying "if anything bad happens to my sister, I'm going to come looking for you, so just watch yourself." Gloriana described the scene with an angry smirk on her face, as if to communicate a sense of abhorrence and anger mixed with a sense of absurdity at the display of physical posturing that set her brother in dominance over her young boyfriend. She described her brother with an incredulous look stating, "my brothers honestly feel that they have control over me."

Gloriana then told me a story about how she stood up to her brother at age 13. She explained that during her early adolescent years, her three youngest sisters slept in one of the four bedrooms in the house. The two oldest brothers slept in another bedroom while her third brother had his own bedroom because he was a college student (her parents felt he needed and deserved his own room). The fourth bedroom was that of her parents which left no bedroom for Gloriana and her oldest sister. So, they slept out on the couch in the living room.

Gloriana's oldest brother, who was 18 at the time, would come home at 2 or 3 am and wake up Gloriana and her

sister saying, "I'm hungry. Make me something to eat." Over and over, Gloriana and her sister would get up and cook food for their brother at this early hour of the morning. On many occasions after cooking, the girls would wearily go back to sleep without washing the dishes. Then they would get sternly reprimanded in the morning by their father for leaving dirty dishes in the sink even though the cooking was done for the benefit of the brother (and not for them). Gloriana was shocked and disappointed to realize that her father was simply concerned about the dishes getting washed. Even when he realized why the sisters dirtied the dishes, he did not take offense at her brother's routine demands for service from them in the middle of the night. Gloriana wondered how it be that routine obedience to 2am demands for service was "right" and how her father could approve of the assumption that it was a woman's place to serve men, regardless of the hour or conditions.

Eventually, Gloriana "got fed up with" the demands of her brother and what seemed to be unfair reprimands from her father. So, she began refusing to cook or serve her brother when he woke her up in the middle of the night. This angered her brother who slapped her on many occasions for refusing his orders. He would continue to command her to obey him. Afterall, traditional gender ideology would position him "over" her while at the same time requiring him to protect her if she was in danger. Such protection might

be rewarded with servitude by other girls, but not with Gloriana. She continued to resist her brother's commands despite his physical affronts and the covert pressure from the traditional gender norms.

G: My first step was standing up to my brother. [Uh huh.] And if it was getting slapped or getting hit, [Yeah.] I didn't care, but, but I got tired of it.

MS: Because you were about what? 15?

G: I was about 13, 14. Uh I got -- I got fed up. "I'm not going to do this," [Right.] you know? And if it was for me to get hit or whatever, I didn't care. [Yeah.]

MS: So that was your first step.

G: Well, yeah, I could say it was my first step.

Here, Gloriana discovered what it felt like to resist the control men attempted to have over her by threatening her with violence. As a nine year old little girl, Gloriana was unable to fend off the man who abused her and threatened her but as a 13 year old adolescent, Gloriana was able to stand up to a threatening male. In this incident, Gloriana moved from a fearful stance of being controlled to a risk-taking stance of refusing to be controlled. She called this transition, "my first step." With this transition, she discovered that her own self-determination and autonomy as more important than physical safety.

Attempts to Enlist Mom's Support

Defying any requisite for silence about male authority, Gloriana actually tried to enlist her mother's assistance when her brother would use physical violence to control her.

However, her mother backed her brother in these instances. Gloriana wondered how it could be that her mother accepted his expectations for such service. Gloriana was outraged by her mother's failure to take her side. Instead of protecting her from a violent brother, her mother blamed Gloriana for the abuse she got and remained passive in relation to her son. Gloriana described it this way,

G: I would go crying to my mom and tell her, you know, "He hit me" and this and that. Sometimes he would even leave his hand mark on my face. And she said, "Well, you have to have said something for him to hit you because he's not going to turn around and hit you just to hit you."

It is difficult to understand why her mother did not stand up for Gloriana. Perhaps her mother's background meanings held that brothers could expect services from sisters and could even hit them if they fail to comply. Possibly, Gloriana's mother was intimidated by the "role" of her own son and the power of his position as the oldest male child of the family such that she was secretly afraid to confront the power granted him by traditional gender norms.

This incident raises several issues: parents' enforcement of the rights of sons within the family to command obedience from sisters; the question of daughter's rights (or lack of) to protection of self through the power of parents; brothers assumption of physical power over sisters boyfriends; and in general the subjectivity of protective behaviors within families that include sons and daughters.

Physical Avoidance and Verbal Attacks as Self Protection

After several interactions of this sort, Gloriana developed a strategy for protecting herself. She began sleeping in the bedroom with the other three sisters and avoided her brother altogether. This physical move, like her physical avoidance of the Texas-Mexico border region, was an effective strategy for avoiding having to deal with an abusive male.

Gloriana also developed verbal strategies for destabilizing her brother's attempts to establish dominance over her. That is, the power struggle over her freedom of behavior changed from a physical struggle to a verbal struggle. For example, Gloriana began calling her brother by names such as "Ugly," "Monster," or "Dog" instead of using his given name. By refusing to use his name in even mundane daily interactions, Gloriana was able to regularly remind him that she had leveled the playing field. Unlike her sisters, Gloriana responded to his threats with taunts and assertions that she didn't care if he slapped her, saying, "I'm not going to do what you want me to do."

These stories reveal dimensions of Gloriana's journey of emancipation from her brother's grip. It raises, however, the same issue of her parents' inability to protect her from a hurtful male. Not only did her parents fail to protect her from physical violence, but they failed to believe her side of the story, and failed to condemn her

brother for 'taking things into his own hands' when he would physically abuse Gloriana as punishment for her lack of obedience. Their passivity on this issue seemed to reinforce the traditional practice of male physical dominance over females.

G: I was never able to understand the fact that it was okay for my brothers to hit us, and my parents not punish my brother for nothing, and my parents not tell my brother anything. My brother found that okay for him to do. And I don't understand that. And it's to this day I don't understand it.

In this story, Gloriana learned to stand up to her brother and gain liberation from his oppression despite the lack of protection from her parents. This story sheds light on the roots of experience that influenced Gloriana's strategies for taking care.

There were other influences that contributed to Gloriana's perspective on male violence and dominance over women. Some of these influences had roots deep into the history of Gloriana's mother's family. Here, the themes of men and women, light skinned-ness, women's bodies, beliefs about bodies as property, sexuality, and the meanings of "taking care" come together. I will now explore these themes from historical family stories to Gloriana's present day struggle.

Physical Safety: An Issue of Taking Care

Places Imbued with Meaning

Reaching further back into Gloriana's family history, her maternal grandparents had two daughters (Mariela and

Eva) and three sons. Mariela and Eva worked on ranches in Mexico as housekeepers, separated from their families and their husbands or boyfriends. By the time Mariela (Gloriana's mom) was 22, Grandma had bad heart trouble. At this time, she died from the shock of finding out that her beautiful, light-skinned daughter, Eva, had been stabbed multiple times by her jealous husband who thought she was having an affair. Sometime before Gloriana's fifth birthday, Gloriana's godmother was also stabbed by her jealous husband in Mexico. He too killed his wife because he thought she was having an affair. In her study of a rural Mexican village, Romanucci-Ross (1973) noted that when a woman has in fact been unfaithful, "tradition allows the betrayed man to leave or kill the unfaithful woman" (p.55).

Gloriana described the deaths of her aunt, her godmother, and her grandma on the first interview, raising the story as part of the family history in the midst of describing her mother's family ancestry. Little did I realize then how important her interpretation of their deaths was to her understanding of her world.

As she told the story, Gloriana specified that her uncle stabbed her aunt 67 times. Whether or not the number is accurate is less important as is the size of the number. Clearly, the family records the memory of this event with almost legendary significance. The murder was probably

bloody and gruesome, as is represented by the noteworthy detail of the "67 stabs."

The danger of Mexico as a place shows up in the retelling of the deaths of both her aunt and godmother; stories told to her as a child growing up. When asked about the possibility of ever living in Mexico, Gloriana stated that she was afraid to live in Mexico. Here, "place" was enmeshed with meanings (spaces) of male-female relations, jealousy, and violence.

By comparing Gloriana's story of her journey towards emancipation from her brother with the story of Aunt Eva's death, a contradiction shows up. Gloriana stated a fear of Mexico as a place where men go unpunished for violence committed against women. As a little girl Gloriana was aware that her parents condemned her uncle for killing her aunt. However, she was unaware of how they would deal with the other uncle who sexually molested her because she never told them about the incident. Later, when Gloriana was 13, her parents turned a blind eye to her brother's physical violence towards her when she came forth and actually told them about his behavior.

For Gloriana, the meaning of violence to women now extended from her ancestors, her aunt and godmother, to her present day nuclear family. It also extended from the Texas-Mexico area to California. Previously, Gloriana's perception was that Mexico or the Texas-Mexico border region

was the place of danger. Now, California also became imbued with place-related memories of or fears about violence against women. This shows up as a contradiction to Gloriana although it is a contradiction that she deals with as mundane. Mexico was seen as an unsafe place for women as was the Texas-Mexico border region, but California used to be safe, and isn't so safe anymore either. She has no explanation for this and does not spend time contemplating in order to uncover one.

Reinforcing the Lesson

In her talks with Gloriana, Mariela reinforced the ancestral legend cautioning light skinned, attractive Latinas to be careful of Mexican men because they are dangerous. Despite her own tacit approval of her son's violent acts against Gloriana as an adolescent, Mariela was clearly suspicious of jealous male lovers. It is possible that Mariela disregarded her son's physical affronts to her daughter because she saw them as spats between siblings which are qualitatively different from disputes between lovers. It is also possible that she privileged her son in a way that permitted him to use physical force to try and "control" his sister. As already mentioned, she may also have granted him a superior role over his sister because he was a male, in keeping with tradition gender norms that favor males.

However, Mariela seemed to have a distinct perspective when it came to the physical dynamics between lovers. Clearly, she feared the potential violence that may ignite when jealousy is involved.

The following story reveals how Gloriana's mother repeated the story of her aunt's stabbing to Gloriana, reinforcing the need for Gloriana to be cautious with jealous Mexican men.

G: Yeah, my mother told me because my mom, you know, we started asking, you know, how my parents met. They met at a dance and everything. They only knew each other three months, and then they got married. My dad said that he really loved my mom and everything. My grandfather was still living, but didn't want my mom to get married or anything. He was totally against it, but at the time, my mom had already had three boyfriends, I believe, and my grandfather wouldn't accept none of them. So my dad was the third boyfriend. So my dad -- My mom told my grandfather that she's not going to lose this one. So she didn't, and they got married, and after I got older, my mom, you know, told me that you know, "Don't be with a, a jealous man because uh a good example would be what happened..."

MS: "To my sister?"

G: To her sister - thinking that she was having an affair when she wasn't. And that made me, you know, really think about, you know, "God, the way men, Mexican men think, you know." Just because another -- A girl talks to another guy, which is just "hi" or "bye," they totally blow it out of proportion, you could say, you know? [Yeah.] Make a big thing out of nothing. [Right.] And my parents, you know, when they realize that my boyfriend now, when we first met, he was very possessive over me. He would come and visit me and everything. When my parents were around, he would tell -- He would say, "God, you know" -- Because my name's Gloriana, but my nephew nicknamed me Lena, and he would, he would sit by me, and he would caress my hair and say, "Oh, Lena's so pretty. Isn't she pretty?"

MS: Your nephew?

G: No, my boyfriend.

MS: Your boyfriend, yeah.

G: And when he would say that, my mom would just look at him, and I knew my mom was thinking, you know, of her sister (pause, wide eyes) until finally about the third time that he did that because it happened -- You know, we would be together, and he -- I mean, to me, to him, it was like, "Oh, God, I'm God's gift to this world," you know? "Okay!" (laughs, big, proud smile).

MS: Yeah, that's great! (chuckling)

G: And you know, my mom came out, and she told me, "You need to be careful with him because you know, he's a Mexican. We don't know what he's capable of doing, and you know, a lot of Mexicans think that if you do him wrong, well, they're going -- You're going to pay back double." And you know, she made me really think about the situation, and start thinking more about my aunt.

The story revealed that Mariela's father was extremely overprotective of his only living daughter (Mariela) that he didn't want her to marry. The death of his daughter at the hands of a jealous husband had taught him that a daughter who became a man's wife was vulnerable to his wrath. Consequently, he refused to allow her to marry the first three men who proposed. Finally, Mariela convinced her father to allow her to marry Roberto.

However, Mariela remained suspicious of men who become partnered with a beautiful, light skinned woman. This became evident when her light skinned daughter, Gloriana, hooked up with an admiring man. Noting that there is a fine line between admiration and jealousy, Mariela warned Gloriana of the danger her boyfriend might bring.

Who Takes Care of Whom or What?

As if by prophesy, Gloriana went on to face a serious violent confrontation with her boyfriend, despite her attempts to ward off such an event. When Gloriana was 27 years old, she had been involved with her boyfriend for about 3 years. As a response to her mother's fear that her boyfriend could become jealous of other men in Gloriana's life, Gloriana discussed these issues with her boyfriend. She said to him,

G: "I don't know how you really are, if you're a really jealous type or what, but if you are, you know, I don't want you to be like that with me. I'm not going to allow for you to be like that with me." And I told him the story about my aunt. And he was really shocked and stuff. And then, you know, he just told me, you know, "I just -- I want to take care of what's mine," you know, and that's how he put it. He wanted to take care of me, me being with him, he was going to take care of me. Make sure nothing happened to me. And then when I felt he was being more protective is when I put my foot down.

I told him, you know, "I don't need for you to take care of me. I'm capable of taking care of myself. I've done it for so many years. I've been doing it. I met you -- Even before I met you, I was, you know, being able to take care of myself, and I'm able to take care of myself. I don't need for you to take care of me. You know, it's nice of you to feel and think that way, but you don't have to because I'm capable of taking care of myself."

The use of the terms "taking care," is interesting in this story. Here, Gloriana revealed her assumption that when a woman is with a man, the man may consider her to be "his." Consequently, the question of who takes care of whom is raised in the context of "property." Her boyfriend described "Gloriana," as an entity that he considered to be

"his" possession. This changed the question from "Who is taking care of whom?" to "Who is taking care of what?" The parameters of just "how" a man takes care of "what" he owns remained unclear, however.

Gloriana and her boyfriend broke up again, some time after they discussed her aunt's death. Control and power in the relationship were at issue. One evening after they broke up, Gloriana went out to a nightclub where she ran into an old (male) friend. Her boyfriend had followed her to the nightclub and saw her dancing with this man. He pulled her off the dance floor by the arm. Gloriana could smell alcohol on his breath. She argued with him at the nightclub saying,

G: I go, "It's none of your business why I'm here." I go, "You have no control over me. I don't know if you ever THOUGHT you had control over me, but you don't. You have no control, and you never will have any control over me. I'm going to do what I want to do when I want to do it."

Gloriana asserted that SHE was in control when she came up against her boyfriend's anger. He told her, "You are in the wrong," signaling that a system of norms for what Gloriana could and couldn't do existed and that Gloriana had violated them. At this point, Gloriana was unaware of the extent of the punishment she was about to suffer at his hands due to her disobedience of the traditional gender norms for a woman who "belongs" to a man through relationship. She asserted her volition to resist his control. However as the narrative unfolds, the question of

who was really in control became murky because of her boyfriend's physical strength and violence.

Later that night after Gloriana got home, her boyfriend came to her door saying he wanted to talk. She let him in which she described as "my mistake." He hit her with his fist and knocked her down. However, Gloriana chose action rather than passivity. She fought him back verbally and physically. In the narrative, she rearticulated the things she said to him while they were physically fighting.

G: I'd go, "You think I'm scared of you? I'm not." I'd go, "You think I'm going to let, allow for you to hit me, and me just sit here or stand here, and let you hit me, no." I, I fell to the floor when he was coming up to me. All I remember is putting my foot out to him and kicking him and, and (MS silently seeks clarification of where she kicked him by motioning to her groin area with a questioning look on her face) -- No, I kicked him in the chest, and he went flying back. I told him, "You hit me, and I -- I'm going to keep hitting you. You'd better knock me out. You're going to have to KNOCK ME OUT in order for me to stop hitting you." He goes, "Okay, that's fine!" And we got at it again. We started hitting each other, and I was yelling and yelling and yelling.

Gloriana's verbal assault is no less significant than the physical assault she waged on her boyfriend in response to his physical attack. There was no question in her mind; she was fighting back with all of her strength. Regardless of the many ways she had been victimized in the past by her uncle or her brother, she was not going to fail to defend herself in this event.

Gloriana was not only defending her body, however. She was also fighting against her boyfriend's definition of her

as his property for which he had taken the right to "take care" by his own definition. He saw violence as an act of taking care but Gloriana saw his acts of violence as threats to her well being. For her boyfriend, the line that separated actions motivated by a need to protect, from actions motivated by a compulsion to control seemed to be a fine one. Just as was the situation for her uncle who murdered her aunt, jealousy had combined with the drive to control a woman who was seen as a possession.

Perhaps in the past, Gloriana had appreciated some aspects of the gender norm of men using their physical strength to protect women from danger. However, this was going too far. Here, Gloriana was fending off men's physical use of threat, danger, and violence to control the women they were involved with - their activities, their bodies, and their intentions.

Gloriana had learned what the threats to her well-being were in life, despite the conflicting cultural scripts and expectations of the people in her world. Her "first step" towards facing physical threats related to gender norms occurred at age 13 when she stood up to her brother and refused to cook for him according to his beck and call (breaking a Mexican cultural norm). At age 19, she stood up to a credentialed physician and obtained help from a sobadora (breaking a U.S. standard for "trusting your doctor" and breaking a Mexican tradition of deference to men

with credentials). At age 22, Gloriana bucked the traditional gender system of normed (Mexican) behavior that threatened to hold her captive in an unhappy marriage. Now at age 27, she was in no position to backslide. When faced with a jealous boyfriend who began to beat her for "misbehaving," Gloriana physically and verbally fought back (breaking cultural and gender taboos in the process). As an untraditional woman, Gloriana stood her ground in relation to HER agenda of taking care of herself.

Can "Two Wrongs Make a Right?"

This physical struggle between Gloriana and her boyfriend was not just a test of bodily strength, however. The physical fight ended when Gloriana became unconscious but the struggle that tested character, resolve, and mental strength continued well beyond this point. A neighbor had called the police during the fight. They arrived after Gloriana's boyfriend had departed but Gloriana soon regained consciousness and informed them of her boyfriend's name and address. He was arrested and put in jail that night, but Gloriana understood this one time incident of violence to be a symptom of a deeper problem. She considered her boyfriend to be a "very possessive man" who "needs help" not only because of his control issues but because she saw that he was addicted to alcohol.

With her boyfriend behind bars, Gloriana perceived the situation to be an opportunity to affect a change that would

benefit her situation and would address his illness. Her boyfriend had requested that she help him by bailing him out of jail. For three days, Gloriana would not return his desperate calls and messages of apologies. Finally, she went to see him in jail and confronted him on his possessiveness and his alcoholism. Perceiving her own refusal to help him at this time to be a "wrong" action, Gloriana wanted to avoid falling into the trap of allowing "two wrongs make a right." She decided to write a letter to the judge who was to sentence him. She requested that he be put on parole WITH a mandate to attend Alcoholics Anonymous and she agreed to drop the charges against him. The judge heeded her request and put him on a two year parole with a mandate to attend AA.

This again, brings up the question of why Gloriana stayed in the relationship when she clearly had a chance to leave it. Again, it is possible that the opportunity to continue to work out her stance as a woman at the borders was compelling her to participate. Additionally, by helping him out, she gained power in the relationship. He was in awe of her benevolent action and she made demands of him in her new position of strength. Thus, Gloriana was able to maintain a relationship with her boyfriend and carve out some change in their dynamics that met her needs more directly.

Since that time, Gloriana has maintained the kind of relationship she wanted with him, successfully avoiding marriage, co-habitation, and a submissive rank. He has not had any alcohol for five years and has continued to attend weekly AA meetings even though his parole ended three years ago. They have continued to be in relationship with one another, but they do not live together. The physical fight described above was, in fact, the ONLY time her boyfriend hit her during their entire eight year relationship. She stated that never before and never again has he "laid a hand" on her.

Still, Gloriana endured accusations from her parents that she was acting in an unhealthy way by dropping charges against the "jealous Mexican man" who brutally beat her up. However, Gloriana disregarded her parents criticism. She saw this as an opportunity to exert her own power towards the ends of her own choosing. Rather than just physically avoiding him by breaking up or moving away, Gloriana had faced his jealousy and violence and gained some power WITHIN the situation. This gave her a sense of being able to "stand on her own two feet." She wasn't backing down and she wasn't running away.

The question of strength looked one way in terms of bodies fighting bodies that night in her apartment, but quite another when it came to strength of character. Gloriana's appraisal of "taking care" of herself and her

boyfriend was quite different than her boyfriend's notion of "taking care" of "what was his." For him, Gloriana was an item to be owned and "cared for" as one would care for property. Gloriana's body, her person, and her life was to be under the control of her owner, i.e. her partner. For Gloriana, however, her boyfriend was a person to be reckoned with, not a item to be controlled. His welfare was important, not because she owned him or his body, but because he was a person with a "problem" who needed help, a person to communicate with, and a partner to negotiate with.

"It's my life"

Gloriana's ability to maintain a relationship with her family despite her independence from her them was an interpersonal accomplishment. She defined for her parents what it means FOR THEM to accept her as a daughter, not vice versa. She described their reaction to her decision to stay in a relationship with her boyfriend this way:

G: They didn't want me to have anything to do with him, but I just told them, "It's my life, and I want to do what I want to do. If you don't accept who I'm with, then I'm sorry. I won't bring him up -- around when you're around."

MS: And they accepted that?

G: And they accepted it. I feel that, I tell them, "as long as, if you want me as a daughter, then you need to accept what I believe in, and if it's for me to be with him, wanting to be with him, then so be it." And they have!

Gloriana was not afraid of challenging the standard, traditional definitions of daughters and parents. As a

single, divorced woman, she held a hard line with her family AND her boyfriend.

Gloriana confidently talked about her stance with her boyfriend, but also revealed a realistic appraisal of his concern for her behavior. She admitted that her boyfriend still thought that he has a 50/50 chance of changing her.

G: ...because I'm not afraid of him. I know for a fact that if he was ever, ever to put a hand on me again, he knows that I will fight back, (long pause) for one, and for two, he knows, I, I, I give him 50/50 percent that he knows that he is not going to change me. He knows that I am standing on my two feet, and I am not going to budge. He knows that, I am able to support myself, take care of myself, and I'm okay without him.

The norm for a Mexican man who has lived under the traditional Mexican gender norms for his entire life, would be a taken-for-granted assumption that he would have a 100% probability of changing/ influencing his partner's attitudes or behaviors. In this context, a switch to a 50/50 probability is significant movement. It reveals that he acknowledges that she is not going to obey him 100% of the time. At best, he thinks, she may comply with his wishes 50% of the time. To Gloriana, this movement in her boyfriend's thinking showed progress. Rather than being angry and bitter, Gloriana revealed an understanding of the intercultural shifting that occurred for Mexican American men AS WELL AS women. This gave her the wisdom to recognize this change as progress.

Despite her parents objections, Gloriana did not surrender her autonomy to make her own decisions in the face

of pressure from her parents. She relied on HER OWN belief that "two wrongs don't make a right" and helped her boyfriend get his life onto a more healthy path. Although her parents hoped that Gloriana would split up with her boyfriend, Gloriana said she chose to "let bygones be bygones."

Gloriana explained that since the violent fight, it was not uncommon for her boyfriend to cook for her as well as change the oil for her car. Although it is not untraditional for a man to take care of a woman's car, it is indeed untraditional for a Mexican man to cook for a woman. Cooking is a powerful metaphor of devotion between people in Mexican culture (Veronica Murillo, personal communication, 2/3/96). Her boyfriend's actions are thus not trite acts of tokenism. For Gloriana they signal real respect.

In telling me this entire story, Gloriana maintained that she now knew how to fight back even if she harbors wounds in the battle. The power of this intention in the context of Gloriana's lifelong struggle to take care of herself - regardless of the clashing background meanings around her and the competing agendas of her family, herself, and her boyfriend - fueled not only her power to govern the actions of her body as well as her internal experience of her own self respect but her quest to obtain body knowledge, health information, and efficacious services as well.

With an understanding of Gloriana's situation, historical rootedness, place in her family, generational history, and her borderlanded way of being, the remaining story of the ways that Gloriana has learned to take care of her health and her body can be understood.

Standing up to a Woman:

A Woman Taking Care

The previous story is of Gloriana's experience of standing up to men amidst conflicting agendas. Notably, Gloriana only told one story of standing up to a woman. This event occurred about one year previous to our interviews. It was the most recent event Gloriana described in the interviews with me. It is a story about how Gloriana stood up to a woman, a nurse, as part of her agenda to take care of herself in terms of reproductive health during a clinic visit.

Last year, Gloriana experienced "really, really bad cramps" and was diagnosed with "cancer of the cervix." She was to have a cryo surgery done by the gynecologist as an outpatient at the local community health center (a procedure during which the diseased cells on the surface of the cervix are frozen with an instrument that is introduced through the vagina and applied to the cervix). U.S. standards for appropriate medical care taught Gloriana that nurses should protect, comfort, and support their patients. However, the nurse who was attending her during the procedure left the

room and did not return. Gloriana was very frightened to undergo the procedure in the first place. Once the procedure got underway she became even more uncomfortable when she realized how compromised her physical position was: her feet were up in stirrups; her legs were spread open; no clothing covered her body from the waist down; and the instrument that is used in the cryo procedure (called a cryo machine which includes a boxlike machine that sits on the floor and has a mechanical arm that reaches up to be inserted into the vagina in order to freeze the surface layer of the cervix tissue) was between her legs. Being alone with two male physicians without a female chaperon while in this compromised position made the experience quite disturbing. She described the scenario as,

G: ... I went in, and I was really, really scared, and one thing that I did not appreciate, and I let them know is that when I had the surgery done, there was a nurse inside. And the doctor needed something. Well, the nurse left the room, and she never came back until the surgery was done. The surgery took about an half an hour, and it was just the doctor and I, and plus another doctor, which, I guess you could call him a residential doctor or something? Well, there was only them two, and I felt so uncomfortable. I felt very, very uncomfortable. After it was over, then the doctor, the nurse knocks on the door and comes in, and then, "Oh, here you go, doctor." And, and I told the nurse, I go, "Well, when you have a patient in here, isn't the nurse supposed to be in here?" And she goes "Yes." I go, "Well, you never came back." I go, "And I felt very uncomfortable."

Gloriana trusted the nurse to be there to help her "get through" the ordeal and "to be there with" her. This trust was violated when the nurse left the room for the duration

of the procedure. Gloriana felt it was not only "unprofessional" for the nurse to fail to tend to her female patient's needs but it was just plain "wrong!" to leave a female unchaperoned with male doctors. When describing her feelings, Gloriana had a difficult time saying exactly what she felt; something between betrayal, discomfort, fear, and anger.

G: ...I put myself in her place, and I wouldn't have liked that. And I don't know, how can I describe that? I don't -- I felt like -- I won't say like betrayed, but - I can't find the word for it.

MS: Abandoned?

G: No, not really abandoned. How can I say it? I really don't know what word to really use. But it's like I had her there, and then like she was gone. I had like --I confided in her for her being there and helping me and going through this, and it was like the next thing you know, she's not even -- She's not even there. [Uh huh.] You know, to comfort me, whatever, so be it. But you know, to be there with me. And then she wasn't. [Uh huh.]

So I really felt inside that, you know, I need to let her know before I leave her, I'm going to let her know how [Yeah] -- You know, how she made me feel, and I thought that that was, you know, unprofessional of her regardless. [Uh huh.] If she had to go get something for the doctor, you know, well "I'll be right back" or yell it through the door, you know, "I need this. Can you get this for me please?" [Uh huh.] And she could have done that. She didn't even do that. [Uh huh.] You know, she left, and it's like by the time everything was over, then she came back in.

And after the doctors left, they go, "Okay, well, we'll be right back. We're going to go and um, and um read over your chart and everything." And she said, "Well, how did everything go?" And I go, "Well, not too good." And that's when I let her know, you know, "I didn't appreciate you leaving the room. I can understand that you had to go get something, but I felt very uncomfortable being in here with two male doctors. And I was really uh depending on you for you being in

here, which, you know, there's always a nurse in here. [Uh huh.] You know, I felt very, very uncomfortable."

At the time of the incident, Gloriana waited until the procedure was over, tolerating the situation silently.

Then, when the nurse returned, Gloriana shared her strong feelings with the nurse without fear or apology. Gloriana seemed to take a teaching stance with the nurse, informing her of what would have been the right way to identify and meet a patient's needs in this type of situation.

MS: Is it a nurse that you want in the room or a woman?

G: Just a woman. I felt, I felt very, very uncomfortable. [Uh huh.] And at the time, the way I was and everything, I mean, there's really nothing I could say or do because he would -- The doctor at the time, you know, "Please don't move" and you know, "Try not to move or anything." And it's like well, I didn't even want to talk or nothing. I just felt -- I, I felt so uncomfortable and upset that you know, I think I more likely I took it out on her because she's the one that left the room when she shouldn't have, and she was in there helping him. [Sure.]

So I, I -- At the time, I didn't feel like I should have to say anything to the doctor or nothing of anything -- Because when I react, I felt, I felt, I felt like release sort of because I let her know. She was the one that was in there, and I am aware that, you know, most nurses or a female is in the room at the time what, what, you know, depending on whatever reason you're there, but there always -- There always is a female in there.

And I let her know because she was in there, you know, preparing everything, and she's the one that brought me into the room and everything and told me to put the robe on and all of that. [Uh huh.] And then after, you know, they had me on the, on the bed, and my legs were on the stands and everything. She was still in there for a while, and then that's when she left the room, and she didn't come back until everything was all over.

After Gloriana confronted her, the nurse stayed and discussed the incident with Gloriana. She also apologized. The nurse validated Gloriana's complaint by acknowledging that no patient should "have to go through" such an ordeal.

This story was one of the first Gloriana told me during our interviews together and it was the most recent occurrence she told me about. It was especially meaningful to Gloriana because it was a story in which she was able to deal directly with a credentialed health professional, a woman, who failed to meet her needs. It was also important because the nurse heard her complaint and responded through communication. Unlike the obstetrician who never directly acknowledged that Gloriana's need to "feel really pregnant" was crucial or that the sobadora's actions actually succeeded in turning the unborn baby, this nurse heard Gloriana out. Thus, Gloriana's experience and her needs as a person and a patient were acknowledged. In her attempts to protect herself, to secure the services she needed, and to take care of her health and body Gloriana exercised what she had learned about standing on her own two feet.

Gloriana: In Review

A Woman of the Borderlands

An understanding of the ways that Gloriana took care of herself can be grasped through an analysis of how she interpreted her own situatedness. Her family's historical rootings on the Texas-Mexico border provided place-based

meaningful spaces for Gloriana's world. The mundane everyday experiences and events that Gloriana talked about involved happenings that set up her concerns and influenced her coping. Through narratives about particular negotiations with people within particular contexts, Gloriana's taken-for-granted ability to "flex" and move between traditional and untraditional gender norms and cultural norms can be seen.

In Gloriana's world, interactions between men and women were influenced by traditional cultural and gendered expectations, alternate interpretations of gender norms, historic incidences of murder, personal experiences of sexual molestation and physical violence, and strategies for protecting one's self. Interactions between parents, children, and siblings were influenced by legacies of intergenerational silences, gendered expectations, sexual ignorance, and brother-sister power dynamics. These legacies, honored or challenged, influenced the dynamics of communication and relationships for Gloriana which in turn set up her ways of taking care.

Taking Care

Gloriana developed an ability to be proactive in relation to the health care needs for herself and others. Sensitized by a lack of woman-to-woman communication across generations in her family, she developed an intentional agenda to be heard by health care providers and to assist

providers to hear the needs/requests of "Mexican girls" who were underserved and uninformed. Her inclusive perspective expanded in concern for "Oriental people," "people from India," and "all kinds of nationalities." She took the needs of her sisters and her friend, Ana, seriously and tried to impart knowledge in ways she never received.

Gloriana learned to take care of herself and her body through lived experiences of pregnancies, a miscarriage, and infections. She learned to trust her body through the work of a sobadora when her physician failed to meet her needs. Much later, she intentionally sought out a female doctor to obtain medical care because this enhanced her comfort level and ability to communicate as well as her ability to gain health information. Armed with a sense of what kind of care she deserved, Gloriana's agenda to take care allowed her to recently stand up to a nurse when her safety and comfort was threatened during a outpatient surgical procedure.

Taking Up Gender Identity

Gloriana's understanding of her own gender identity, the manhoods of various men in her life, the gendered capacities of male and female doctors, and power dynamics between sexual partners were influenced by her own self-interpretation as a woman who is "half Mexican, half American" and a woman who can "make it" on her own. Despite criticism from her parents, her ex-husband, and her boyfriend Gloriana faced her world as a divorced mother of

two sons, got a job, an apartment, and a car by maintaining an income through employment. She learned how to value her own way of taking up her gendered identity over that of her parents or her boyfriend. She resisted assertions that would mark her as taboo or undesirable as a divorced mother of two sons. She contested power dynamics with her brothers. She also learned how to negotiate within relationships without cutting off the people she was connected to even though their background assumptions about "women" differed from her own. She was able to protect her ways of living out her gendered identity by insisting on financial independence, resisting dependence, keeping certain pieces of information about her past secret, and making her own decisions.

Gloriana allowed the struggle to become physical. She learned how to fight to maintain her autonomy, even when the fighting became violent. For better or worse, Gloriana was not afraid to allow her body to, literally, become the site of the struggle for her gendered stance in her world. She chose to remain in a relationship with a man who favored traditional gender norms. Her negotiated position, however, allowed her ample opportunity to continue to struggle for a clearer understanding of her stance. She maintained this position, even though the struggle was highly taxing.

Gloriana also maintained her stance by distancing herself from "girls over there" and claiming identity as a

woman from "here." She learned how to "stand on her own two feet" in the midst of clashing gender norms or expectations and in contrast to Mexican women whom she perceived to be traditionally subservient to men.

Conclusion

Analysis of Gloriana's way of being in the world allows insight into intercultural coping when taken-for-granted assumptions about gender and culture clashed and where cultural practices mixed. Her stories offer insight into the complex factors that influence one second generation Mexican American woman's ways of taking care of herself and her ways of taking up gender identity amidst intercultural mixing of the Borderlands. Gloriana's proactive, searching style of actively negotiating her gendered identity amidst people who adhere to traditional gender norms is uniquely incisive to this way of thriving in the Borderlands.

Chapter 8

Lorena: A tree growing on its side

I met 23 year old Lorena at the clinic when she came in with her newborn baby. One of the nurse practitioners invited Lorena to consider being in the study so Lorena and I went into an exam room to talk. I told Lorena I was interviewing second generation Mexican American women and she said she wanted to take part in the study. She described herself by saying, "I am second generation because I came here when I was very small and grew up here." She told me that she had much to tell me about her ways of taking care of herself and talked a little bit about her newborn and one year old daughter. She needed to get to another appointment but before she left, she pointed out the scars from burns on her right leg and, with tears in her eyes said, "I have lots to tell you about these things."

Woman of Mixtures

Lorena is a fascinating mix of Mexican and Mexican American. She came to this country without citizenship. She mixed Western medicine practices with traditional healing through a sobadora/curandera. She was raised by evangelical Christian missionaries but is married to a Catholic man. She was raised among relatives who call her both sister and niece in the same breath. Her understanding of her life involved a mixture of many things including miracles, luck, superstition, hard work, and honesty.

The following story of a "miraculous" experience for Lorena, a bordercrossing experience when she was 18, reveals her sense of protection even though she didn't understand how it happened.

L: When we were crossing, they said the sheriff was coming so the man (the coyote) said go back, I had permission to stay in the U.S. but not to cross the border, so it was scary cause I could get caught over here but not crossing or they'd send me back. I was behind the group, and the sheriff came close to the border and this guy told me, "Here, stay here." And I went down and the sheriff passed but he didn't see me. But he did see those people close to me and took them but not me. I was scared. Then I turned and I didn't see anyone there. It was like my angel was protecting me or something. My uncle and aunt were coming with us and I told them but they said, "I didn't see anyone with you" and they didn't believe me and I still wonder who was it cause I remember it. I don't even know how I was able to hide myself.

As a way of learning about Lorena, I will first present a description of the elaborate collection of artifacts that decorated her modest one bedroom apartment in East San Tomas.

Momentos of Meanings Fill the Walls

When I first went to Lorena's home, I noticed various things on the walls. A large calendar hung next to the door. On it was the painting of an Aztec warrior kneeling over a scantily clad, voluptuous Aztec woman who laid unconscious at his feet. The Aztec warrior was pointing an arrow in his bow at the sky.

In the living room, there was a set of shelves that held the television set and a stereo. Every shelf held trophies her husband's team won in soccer games and

tournaments. To the right of the trophies, various photos were framed in a collage and hung on the wall. Most of them were of her husband in his soccer uniform with his teammates or alone holding trophies or alone holding a soccer ball. There were two other photos of Lorena and Alex with their daughters, Yana (now two years of age) and Aida (now one year old). The words "Equipo Blue Jays, Alex, E.H., Portero #1" were written on a white card in the middle of the collage [translation: Blue Jays Team, Alex, E.H., Goalkeeper #1]. A small flag with the word "Torneo Marcos Tapis, Club Martino, Liga de San Tomas" hung on the wall to the right of the photos.

In her living room, Lorena seemed to have created little shrines by grouping photos and artifacts together on the walls. In addition to the group of soccer-related things, she also had a menagerie of things grouped around a "cousin" motif. She had tacked up 2 photos of her daughters' cousins with a handwritten label under the photos, spelling out their names, "Claudia y Miguel Martinez." Below the photos she attached two 4 inch stuffed toys to the wall. A fancy colored pacifier hung between them. She explained that these were gifts from the cousins to her daughters. She tacked them up for her daughters to see, rather than to play with.

A collection of religious items were clustered in another area. There was a framed copy of "Las Huellas" (the

Footsteps prayer) from which a small star of David pendant was hooked. Lorena explained that her cousin had given her the pendant and she wore it around her neck for a while even though she didn't know what it meant. She eventually took the pendant off and hung it from the frame, however, because her grandmother told her it wasn't good to wear it.

Notably, she did not discard this pendant-gift from her cousin, but chose to display it along with the other photos and artifacts of religious significance although she did not show any awareness of Judaism. Another print of a prayer entitled, "La Diferencia" (the difference) was framed and hung up. Tucked in the corner of the frame was a small photo of Aida. Nearby hung an additional framed collage with 8 photos of Lorena, Alex, and Yana, taken before Aida was born. Lorena explained that there were no drawings or pictures of Our Lady of Guadalupe on the walls because she was not Catholic and consequently, she wouldn't "bend" to images of the saints. She noted however, that the only reason she had a cross in the house was because it was connected with her father-in-law's death. She said, "...but that's for my father-in-law's nine day. After he die, they make nine days prayer. I don't know what that means." Family honor, respect for the dead, and family traditions were more important than proscriptions about Catholicism in this instance.

Despite Lorena's pronouncement of her religious affiliation as evangelical Christian (and specifically not "Catholic") and her rejection of images of the saints, she seemed to own and display various items that would be equally unacceptable by U.S. fundamentalist evangelical Christian standards. That is, she displayed a collection of artifacts, symbols, and photos that reflected a theme of 'good luck.' Among the items on the wall was an astrological certificate that said, "Yana: born under a good sign," dated Dec. 1, 1994. There was a 2 dollar bill tacked above the certificate and another 2 dollar bill tacked above a photo of Aida along with a 1990 Liberty coin encased in plastic.

Various other mementos hung on that same wall including a sign that said, "Happy Birthday" in a meticulously done colored pencil drawing of a delicate rose and a spider web, a page from a photo album with Yana's birth pictures, and her 3 month photo. To the side of these photos, two peacock feathers in a plastic bag were tacked to the wall. A photo of a baby was placed in another frame that was too big for the photo so that the cardboard backing showed through the glass. A decorative piece featuring string wrapped around tiny nails on wood, formed Lorena's initials below a pair of doves. The doves faced each other and a heart sat between their faces. The wood below the string was painted different colors, such that the heart was red. An shag rug

wall hanging of a brightly colored parrot completed this set of wall decorations.

"maybe God gave me another chance"

Lorena was born in Mexico City in 1972. Lorena's mother, Magda, left Lorena with a babysitter when she was 6 months of age. The babysitter then left Lorena and her own infant alone in the house which caught on fire. When Magda learned of the fire she hurried to the house only to find that even the firemen wouldn't risk entry to the burning house. Seventeen year old Magda ran into the house and scooped up Lorena. A burning blanket was on top of Lorena so her flesh had been burned on her right foot, ankle, calf, and abdomen. Upon exiting the house, Magda fell and dropped Lorena onto the dirt, which caused the burned flesh to become soiled with dirt. Later in the hospital, the doctors had to meticulously clean her burns. Eventually, they removed skin from Lorena's buttocks to apply to her legs.

The other infant died in the fire.

Lorena did not tell this story with a sense of victory or awe. Instead her affect was one of sobriety. Lorena explained that she has always wondered if her mother had done the right thing by saving her.

L: Sometimes I think she shouldn't have done that and I should have died because of all of the problems since I was 11. Maybe God meant me to die. But, after that maybe God gave me another chance because the doctor said it would be a miracle if my leg would grow to the right length, if my bone would grow the right way, and it did.

Lorena explained that it was miraculous that she lived through the pain of the burns and the treatments. She did not understand how a baby could have lived through the pain of the skin grafts and debridement due to the burns. Despite the fact that the doctors did not sedate her while they treated her burns, Lorena said she does not remember the pain of the treatments.

Lorena was not raised by her mother, however. She grew up in the home of her grandparents and most of their 12 children in Mexico City until the age of 11. Lorena has happy memories of being a little girl, thriving under her grandmother's protection. Lorena refers to her uncles and aunts as sisters and brothers because she was raised as her grandmother's daughter. If one of her uncles mistreated her while growing up, her grandmother would step in to protect Lorena, which Lorena enjoyed immensely, smiling broadly and chuckling as she explained this to me during the interview. Lorena's mother, Magda, was the eldest of her 12 siblings. One of Magda's brothers was shot and killed in Mexico years ago, although Lorena is not sure why.

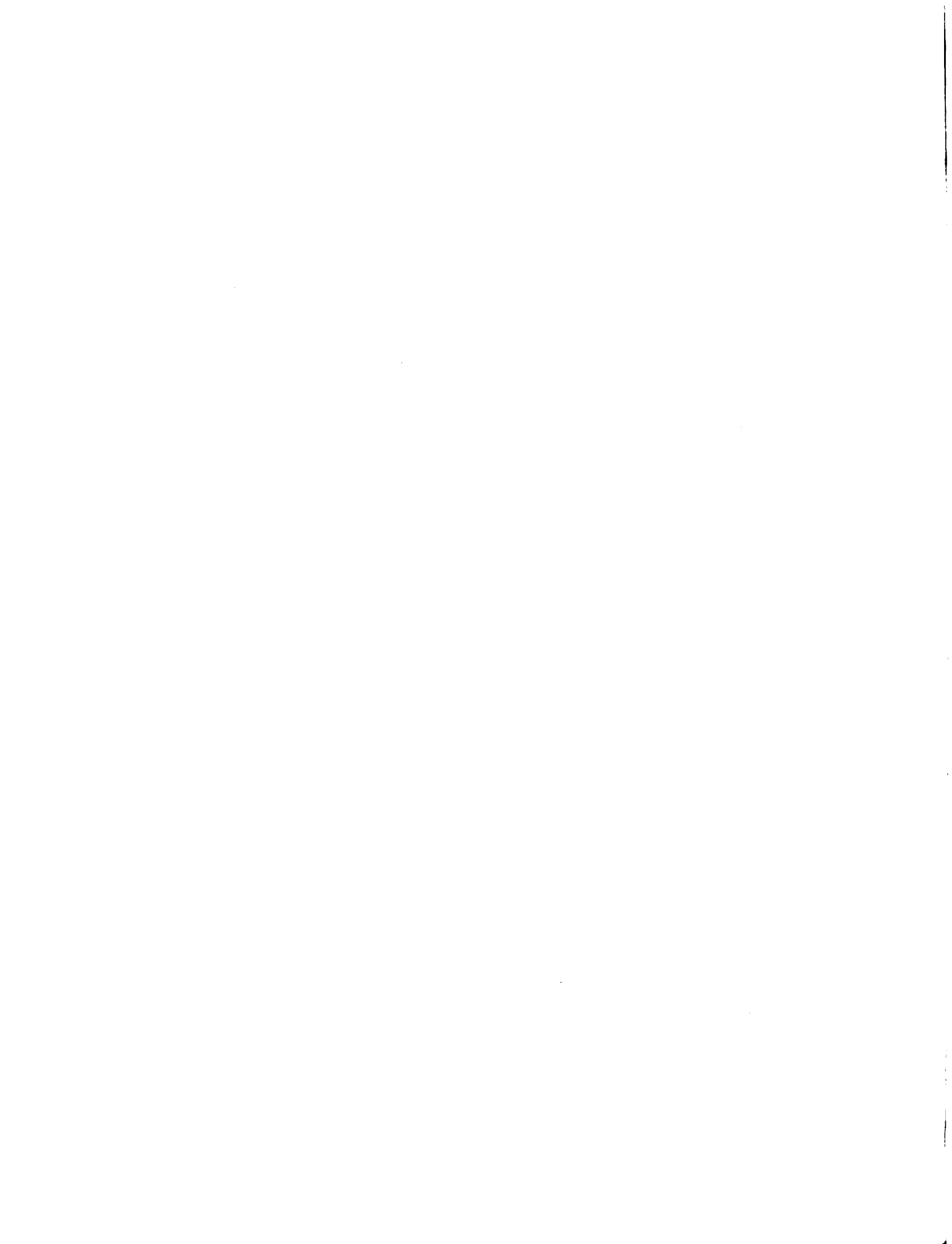
Lorena described her grandma, who is now in her 60's, as the one who taught her "everything," and most importantly, she taught Lorena to cook.

The action of teaching a girl to cook is a very special experience, according to women's health education expert and cultural consultant Veronica Murillo. Murillo explained in

consultation with me that usually a mother teaches her daughter how to cook traditional Mexican food which is an important sign of both belonging between a mother and a daughter and a rite of passage for the girl who is preparing to be a wife someday (personal communication, 2/3/95). In this case, Lorena learned from her grandmother which was a sign of her grandmother's maternal significance in her life. Romanucci-Ross (1973) found in her study of a Mexican village, that daughters model themselves after their mothers even if they feel unloved by them. She found that loyalty, dependence, and the desirability of modeling herself after her mother are inculcated from a young age. Again, in Lorena's case her grandmother was the woman Lorena saw as her mother. Indeed, she was Lorena's role model.

Lorena explained that her grandparents were "evangelistas" and "missionaries who go around to places to teach the Bible." Grandmother taught Lorena about evangelical Christian principles including teachings on the roles of men and women. She stated that Grandmother was her model for appropriate ways of living. In terms of male-female roles, Lorena explained that Grandmother did whatever Grandfather "says." Lorena said that because Grandmother was an older person, "she teaches us how the husband is."

Since she was a little girl, Lorena has confided more in her Grandmother than in any other person. Even while living in the U.S., Lorena dealt with her emotional dilemmas



or pain by calling Grandmother in Mexico City. This usually made Lorena feel better because she could cry with her and because Grandmother always prayed for Lorena before she hung up the phone.

Lorena trusted both of her grandparents and was able to ask them questions and voice her disagreements when they arose. She said that she couldn't really remember a time when she couldn't speak up or ask a question even if she was contesting one of her grandparents' decisions or asking questions of a stranger. She attributed this confidence to having "the same blood as my grandpa." However, Lorena was always afraid of voicing disagreement with her mother, Magda. Lorena said her fear of speaking up to her mother was due to the fear of being hurt and a lack of trust.

L: They say I have the same blood as my grandpa (mom's dad). If he doesn't like something, he would speak up. As a child I would speak up to my grandma but not my mom because if I did, my mom would slap me - like when I was around 14. Because my mom always said, if I went to church I was only going to meet guys. She didn't trust me. And I didn't feel comfortable with her cause she doesn't trust me.

Lorena stated that her "problems" began in life when she was sent went to live with her mother in the U.S. Lorena and Magda did not get along. According to Lorena, there was no trust between them.

Historical Context

Magda had two sons and another daughter after the birth of Lorena. When they were all very small, Madga divorced her husband. Lorena had been cared for by her grandmother

since birth. So, but at the time of her divorce, Magda left her other three children with her sisters (who also lived with Grandma) and made her way to the U.S. Magda's ex-husband did not live with Grandma and the children but he visited every week, bringing food and candy every Sunday.

Thus the children were raised by their aunts and Lorena was raised by Grandmother. Some years later when Magda had set up a stable home for herself in the U.S., she sent for her two sons to join her in the U.S. Finally when Lorena was 11, Magda brought her and Magda's other daughter to the U.S. Grandmother agreed with the plan to send Lorena to live with her mother and her three siblings because she believed that the Lorena would have a better life with more opportunities in the U.S. None were citizens of the U.S., but Magda was in pursuit of her citizenship and a better life for herself and her children. Magda indeed gained her U.S. citizenship in September of 1996 although none of her children have yet acquired the same.

During my last interview with Lorena, she commented upon her life in light of the hardships with her mother since age 11 and her early experience with pain as a baby having been burned in a fire.

L: Maybe the accident made me be like that, to be strong, whatever happens, to be strong in life. Because if you can't stand up for yourself, who is going to stand up for you?

Lorena's ability to stand up for herself, particularly when it came to standing up to her mother, was challenged over

and over as the narratives and excerpts that follow reveal.

A Painful and Perplexing Disowning

Lorena's adjustment to the separation from Grandmother was difficult. In addition, Magda was not kind to Lorena in the U.S. Her mistreatment caused Lorena to wonder why a woman would be so mean to her own daughter.

Magda disciplined Lorena by physically hitting or whipping Lorena on isolated occasions when she thought Lorena was disobedient. She distrusted Lorena's motives in relation to "boys" and accused her of relationships that Lorena was not having. Magda also made harsh demands on Lorena. On one occasion when Lorena was 13, Magda took her other three children for a holiday to San Beniz while leaving Lorena home, having ordered her to clean the house and to cook a meal so it would be ready for them when they returned. They stayed away the entire day and returned at 9pm. Lorena felt deeply rejected due to this event.

Then, when Lorena was 15, Magda became angry at Lorena because she refused to wear some clothes (pants and a mini skirt) her mother had purchased for her. The refusal could have been seen as a threat to Magda's position as Lorena's provider. At this time, in front of Lorena's friends, Magda made a public display of her distaste for Lorena's disobedience. She told Lorena not to tell anyone she was her daughter. Rather, she was to tell anyone who asked that she was Magda's maid. Make no mistake, Lorena explained,

this had nothing to do with protecting Lorena from the INS. Rather, Lorena stated, it was done for the sole purpose of being mean to Lorena. Later, her mother further affected the disowning when she said the same thing in front of Lorena's siblings. They then proceeded to treat her like the maid from that time onward. Lorena said they didn't respect her but rather they "talked back" to her.

Finally, Lorena gained insight into her mother's mistreatment. One day, again when Lorena was 15, Lorena got into an argument with her mother's sister who was in town. She wanted to hurt Lorena. So, in a moment of anger, Lorena's aunt told Lorena that the man she had always believed to be her father, was not, in fact, her biological parent. This crushing realization filled in gaps that Lorena never understood and added to her sense that she didn't belong.

Confusion of Identity and Abandonment at Birth

Upon hearing that the man she knew as "father" wasn't really her father, Lorena confronted her mother. Magda explained that in fact, the man who was the father of Lorena's three siblings was NOT also Lorena's biological parent. Magda did not think it was important to tell Lorena the truth, so she never did.

Magda explained the true story as follows: when Magda was 16, she gave birth to her first child. At the time of the delivery, the doctor told Magda she had given birth to a

boy but within minutes handed her a girl: this was Lorena.

Lorena described the confusion this way,

L: First they told that I was a boy, but when they gave me to my mom, I was a girl. So the confusion was there.

Not only was there confusion about which baby was born to Magda, but, Lorena explained that her biological father abandoned her BECAUSE she was not a boy. In Lorena's words, "my real dad left me because I wasn't a boy." Lorena thought that her biological father would have "kept" her if she had been a boy. She said her father was a "high one" in the military which is why, she surmised, he probably wanted a boy. She thought her father valued boys more than girls because girls required more "taking care" of.

L: I don't know. Maybe because girls are more delicate. Girls, you need to take care of more. I think they're the same thing. Well, I don't know. A boy is more hard (hardy) you know.

Thus, until age 15, Lorena had been misled to believe that the father of her three siblings was also her biological father. Upon hearing the news, however, Lorena did not change her relationship to her stepfather in Mexico. She continued to keep in contact with him through letters and telephone calls and she continued to refer to him as her father. Crucial for Lorena, was the fact that her stepfather gave her his name. In her words, "To me, he is my dad," because he was "the one who gave me the name."

From this time onward, Lorena began to believe that her mother probably treated her badly because she was conceived

by a man her mother did not marry or stay with. This mistreatment, now coupled with the news that her mother was first told she had given birth to a boy, caused Lorena to wonder if the hospital staff exchanged her and another baby at birth. She wondered if she was given to the wrong parent. She explained in her words, "sometimes I feel that the way she treats me, I feel like maybe they changed me." It was possible that Lorena needed to suspend the answer to this question because it postponed facing one of two painful realities. That is, if it was true that she was born to a different woman but given to Magda at birth, then she would never know her real parents although she would have a more acceptable explanation for mother's mistreatment (i.e. 'the woman who rejected me really isn't my mom'). However, if it was false and Magda was, in fact, her biological mother then she could rest assured that her kin are indeed blood kin but she must face her mother's rejection.

Lorena was very unhappy that she found out about the confusion at the time of her birth. She stated that her mom should have either told her when she was a little child or not at all.

At the time of our interview, I asked Lorena if her biological father left her mom as well. This question seemed to be perplexing to Lorena. She just looked at me and said, "They didn't tell me that." It seemed that she was told that the rejection was aimed at her because she was

a girl-child. Lorena was the rejected one, not her mother. Perhaps, to Lorena, the child is the object of rejection, not the wife. This may be an assumption that Lorena made because her experience with her mother was that of an adult who was always the one who rejected others and left, e.g., Madga divorced her husband and moved to the U.S. leaving her four children with relatives. It wasn't until Lorena was 11 that her mother asserted her desire to parent Lorena.

In a later interview with me, Lorena stated that she no longer entertained thoughts that Magda wasn't her mother.

The dialogue went as follows:

- L: Before, (but) I don't think anymore, I thought she wasn't my mom.
M: So (now) you think she is your mom?
L: I don't know. Do I look like her? (laughs)
M: (MS looks at the photo of her mother on the wall) I think you look a lot like her.
L: Well, I don't like to think like that (that she isn't my mom) cause if she's not my mom, then my grandma is not my grandma. So, right now, I don't care if she is or is not. Right now, I'm just glad my grandma is alive.

Whether or not Lorena was the biological daughter of her mother matters less to Lorena than did her relationship with her grandmother. Because her grandmother raised her, Lorena valued her attachment to her grandmother who was her teacher, role model, spiritual advisor, counselor, and mother. Grandmother was Lorena's number one confidante. Lorena admitted, "When I have problems or feel alone I write to my grandma. I would tell her everything."

As if to signal her reverence for the intergenerational lineage of women connecting her to her grandmother, Lorena had hung an 8x10" photo of her mother next to another 8x10" photo of her grandmother and great grandmother. These were taken in Mexico. These photos held prominent space in her living room, directly opposite the large 4x6' window and hung above us from where we sat on the couch discussing her life.

Much of Lorena's ideals about life, spouses, family, etc. came from or was affirmed by her grandmother, whom she would call when she was in a crisis. While her grandmother's teachings were in line with Evangelical Fundamentalist Christianity, they were also congruent with traditional Mexican teachings, in relation to gender norms. That is, the Fundamentalist Christian teaching that the man is the head of the house (Van Leeuwen, 1990) and to be obeyed does not conflict with Lorena's understanding of Mexican gender norms that required women "to cook and clean" and work as needed without complaining in service of the man.

Although Lorena seemed to revere the intergenerational connections in her life, she seemed angry that her mom saved her from the burning house only to mistreat her as a teenager in the U.S. Perhaps she questioned "God's will" because her Christian belief in a benevolent God who blesses through families does not coincide with the painful reality

of her mean and harmful mother. Lorena's internal conflict related to who was her "real" mother became vividly evident when her taken-for-granted assumptions about parents' relations with their children who marry clashed with her mother's assumptions on the topic which will be explored next. It is possible that the stories Lorena told me about the painful past with her mother as well as the confusion at the time of her birth were "oft-told" stories that provided a framework for her to describe her beliefs. It is possible that Lorena told the stories often because her hunch was that Magda was her biological mother and she needed to reinforce her stance that biological mother or not, Magda was not her "real" mom. Perhaps an assertion that it may have been "God's will" for her to die was a way to fend off the acknowledgement that her mother's savior-like action of running into a burning house did not make up for the mistreatment. Lorena may have been actively working to distance a connection that linked her with a mean and unloving mother-figure.

"My REAL Mother": Power and Authority

While telling me the story about when she and her boyfriend decided to get married, Lorena explained that she went back to Mexico when she was 18 because things were so difficult with Magda. However, at the time, it wasn't long before her mother came to Mexico and brought Lorena back to the U.S. Lorena did not contest her mother's wishes to

bring her back because she realized she needed to obtain proof that she had finished high school in the U.S. in order to get a job in Mexico. When she came back to the U.S. her mother encouraged her to enroll in a GED completion and job training program called "Job Corps." As part of the program, Lorena lived in a dorm. Although this was Magda's idea, it was preferable to Lorena because she wanted to be away from her mother. During this time, when Lorena was 20 years old, she met Alex who had recently moved to the U.S. from Mexico where he was born and grew up. The two fell in love and became sexually involved. Months later, they became pregnant. At this time, they decided to get married and have the baby rather than having an abortion.

When they decided to get married, Lorena called her Grandmother to tell her. Her grandmother gave her permission to marry. This act of granting permission made sense to Lorena because she considered Grandmother to be her "real" mother. Having already called Grandmother, Alex and Lorena then went to Magda and informed her of their plans. Much to Lorena's surprise, Magda bestowed upon them, her permission to marry. This action showed up as "weird" to Lorena. She told the story this way:

L: Alex and I told mom that we were going to get married, and she gave us permission, and when she did, we were kinda like, "What?" because like here it doesn't work that way, your daughter doesn't go to your house and ask for permission. And I spent my younger life here, you know, when you change... ah, you change... ah, um...

MS: (pause) You mean from a child to a woman?

L: Yeah! It happened here! But in Mexico, it DOES go that way. Like if I have a boyfriend, he goes to my parents and gets permission to marry me. But here you don't, so here it was weird because I grew up here, I grew up here in school which isn't the same as growing up in Mexico where you grow up in your house. So, it was weird for my mom to give us permission. We felt like, "what do you mean you give me permission?"

...I had already called my grandma before my mom knew anything. It's kinda like you have two cultures. I told my grandma that I had a boyfriend, but I didn't tell my mom. And when my mom gave me permission, it was kinda weird, and I said, "My grandma did it already!" (laughs). I mean, my real mom gave me permission already, who-I-grew-up-with gave me permission.

... My mom wasn't like, you know when parents tell you when you need to come home, well, I felt like, "Wait a minute! I'm not living here, I'm living at jobcorps."

Four things showed up as clashings of background meanings to Lorena: (1) the standards for parental behavior at the time of engagement for daughters who grew up in the U.S. rather than in Mexico; (2) the experience of coming of age in the public versus the private sphere; (3) the taken-for-granted assumptions about the power and privilege of the "real mom" versus another maternal figure of lessor importance; and (4) the conflicted perspectives about the 'rights' of a parent who isn't also a provider versus the 'rights' of a daughter who is providing for herself. I will explore each in that order.

(1) Growing Up "Here"

First, having transitioned from a child to a woman in the U.S., Lorena assumed that her mother wouldn't attempt to

apply Mexican traditions when she announced she was getting married. According to Lorena, Mexican standards held that parents granted permission to daughters and their partners who hoped to get married but U.S. standards for girls who grow into women in the U.S. did not grant any structural role to parents to oversee the marriage decisions of their offspring. So when her mother granted permission to Alex and Lorena, Lorena was shocked.

Lorena's mother-daughter attachment to her grandmother far exceeded her attachment to Magda. Not only did Lorena confide first in her Grandmother about her engagement but she also confided the fact that she was choosing a boyfriend. She explained,

L: So when I met him and I was like, I'm going to have my boyfriend, I think it is about time. And she told me ok but you have to be careful, don't do this and do do this. My grandma told me it is better to have someone to talk to when you feel bad. Sometimes I think, when God decides to take her (grandma) who am I going to talk to?

Even though Lorena experienced "the change" from a child to a woman in the U.S., she still wanted to obtain her grandmother's blessing on her decision to marry Alex.

L: When I was going to get married, we called my grandma, we didn't straight go talk to my mom, we each talked to her on the phone and we told her we were going to get married, so everything we've done we had permission.

(2) Learning About "Sex, Condoms, and Everything"

Lorena saw her experience of growing up "here in school" as very different from the experience of "growing up

in Mexico where you grow up in your house." The phenomena of "school" versus the phenomena of "your house" signaled Lorena's understanding of the difference between public and private spheres. In the public sphere, Lorena participated in the phenomena of "school." Later in this same interview, Lorena further discussed her "change" at menarche and linked it with school, explaining that she learned about various things including "sex, condoms, and everything" in school. She explained that at home in Mexico, her grandma had previously taught her about some changes that a "young lady will go through, like your breasts will become sore because they will grow, but nothing about the period or bleeding."

Lorena said she asked her mom about menstruation once but she replied, "I'll tell you later," and then she never did. Lorena would have wanted to learn about menstruation with her grandmother. She would have wanted to be able to confide in her grandmother in person at the time of her first period. But, because she had to be removed from Mexico to live with her mother she was deprived of this opportunity. Lorena further explained the difficulty she had going through menarche here in the U.S. without her grandmother.

L: When I came, my mom was like a totally different person. I didn't know her and she didn't know me. Like when I had my first period, it was scary, nobody told me about it, I didn't have my grandma beside me and it was kinda hard. My mom told me something to do and that's it, but it was not the same as my grandma.

Lorena did confide in her mother that she was having cramps but her interaction with Lorena on the topic was minimal. Lorena said, "I told her I had some pains and she bought me some pills and that was it."

Consequently, Lorena's self-interpretation was that no one, and particularly NOT her mother, taught her how to take care of herself in terms of her bodily changes in adolescence. She learned how to cope with her developing body and her periods mostly through school.

Because she was separated from her grandmother and because her mother failed to discuss sex, condoms, menstruation, and pregnancy with her (these being the topics she felt were important for girls to learn about), Lorena was determined that her daughters have a different experience. She stated that when they grow up, she is going to teach them about sex, safe sex, and condoms. She said, "They need to know about safety, so that if they want to have sex they will do it with protection." Lorena made it a point to say that she would communicate with her daughter about these issues herself, rather than to rely on their schools to teach them. It is also noteworthy that Lorena did not show any inclination towards maintaining the traditional Mexican and fundamentalist Christian proscription against sexual relations outside of marriage.

(3) The Power and Privilege of the "Real" Mother

At the time of her engagement, Lorena discovered that her mother's (Magda's) taken-for-granted assumptions about her power to permit Lorena to marry and about her privilege to exercise such power were different from Lorena's taken-for-granted assumptions. To Lorena, Magda's position in Lorena's life did not earn her the power nor the privilege to grant or withhold permission to marry.

Lorena used the words "my real mom" and the one "who-I-grew-up-with" to describe her grandmother. The meaning of "real" involved engagement with the "who" she grew up with. The fact that Lorena physically moved to the U.S. after 11 years with her grandmother did not change the emotional attachment Lorena maintained in personal meaning through letters, telephone calls, and visits. Magda's assumption that she had access to the power and privilege of a "real mother" seemed out of place, rude, and even humorous to Lorena.

Lorena used the words, "two cultures" to represent her relationship with her "real mom"/grandmother in Mexico and her relationship with Magda, her biological mother in the U.S. Each relationship showed up as a culture to Lorena because each carried particular situated understandings and a web of particular concerns. Lorena's dealings with her mother were of an entirely different sort than those with her grandmother.

Grandmother, the "real" mother that she grew up with in a house in Mexico with 10 other aunts and uncles she called brothers and sisters, protected Lorena and extended a sense of belonging. Magda, her biological mother who saved her from a burning house before she was old enough to remember, took her away from her "real mother" while she WAS old enough to remember, extending only a sense of rejection here in the U.S. She didn't expect Magda to perform as a "real" parent. This added to her sense of her mother's behavior as "weird."

(4) A Parent Who Isn't Also a Provider

Lorena assumed that a person who was taking care of or providing for another's needs has some rights over them. She pointed out that she was not living in her mother's home at the time of her engagement to Alex. In fact, she had moved to Job Corps due to several arguments with her mother. Lorena perceived that she was not receiving any provision or protection from her mother at this time, so, her mother did not have any 'rights' to grant "permission" for anything in Lorena's life.

The following excerpt sheds light upon Lorena's taken-for-granted understanding about the rights of providers.

L: I used to be afraid of my mom but not any more because I have my back. My husband. If someone is going to hurt me he will be there, so I call him my back. If my mom wants to hit me, he is going to be there to say, "Wait a minute. You are not feeding her. You are not buying her clothes. You don't have the authority to hit her. I know she is your daughter but you can't do that.

This narrative implies that a woman is under the authority of a parent or a husband, particularly if they are providing for her food or clothing needs. After partnering with Alex, Lorena no longer feared her mother because of the protection Alex provided. In reference to this, she called Alex, "my back." For Lorena, he was her protection against the most powerful negative figure in her life. By taking a husband, Lorena was no longer vulnerable to her mother's maltreatment. In particular, she was no longer vulnerable to her mother's physical abuse.

Likewise, by moving to Job Corps, Lorena thought that she was no longer vulnerable to her mother's authority. However, when her mother attempted to grant Lorena and Alex permission to marry, Lorena discovered a clashing of assumptions between her mother and herself (interculturalism). Although this showed up as "weird" to Lorena, she did not openly challenge her mother on this.

Learning to Trust "My Back"

Lorena explained that she learned to trust Alex during the time that they were dating before they became sexually involved. It was through specific experiences with Alex that Lorena learned a greater respect for her body in relation to men and how to reject accusations from other women who tended to blame the victim. Through these experience, Lorena came to trust Alex.

L: I think I trusted him more, because he was a very nice person. I have a burn on my feet and with my first

boyfriend, I always needed to put panty hose to, so I could wear a mini skirt. He didn't want a lot of people to see my leg.

M: So he wanted you to hide it.

L: Yeah. And my husband, one day I put on my panty hose, cause I was going to put on shorts, and he looked at me, "Why are you putting on panty hose?" And I showed him my leg, and he look at me - and that is why I trust him more - because he said, "You know what? You don't need to be shy, you don't need to hide anything." I wasn't his girlfriend yet. He told me, "If someone want to be your boyfriend, or want to be with you, he have to want it the way you are, the way your body is." That's when I felt more comfortable. And if ever I was going to wear shorts, he would say, "If you're going to put on panty hose, I won't talk to you." And, I looked at him, and I put shorts on, and that's when I trusted him more. He taught me a lot of things that I never knew. Like how to respect MYself more.

Not like with my first boyfriend - with him, if someone would talk to me I wouldn't talk to them because I didn't know them.

But Alex, he said, "If somebody talks to you and they bother you, you tell me and I will take care of it."

And one day, Alex and I went to a party at his friends. And a guy came over and said, "You want to dance?" And I said, "No, thanks." And he said, "Come on, let's go dance!" And I looked at him and I told him, "No, I don't want to dance." And I was, my husband's, I was his girlfriend already, and he went to get some drinks. (Lorena's youngest baby begins to cry while she talks). When he came over and he said, "Is something wrong?" And he was looking at my husband, and he says, "I was here first." That's what the guy said! And then my husband said, "What are you talking about?" And the guy said, "Well, I told her to dance and she's going to dance with me." Then he grabbed my hand. Then my husband, he had the sodas, and he threw the sodas, and he said, "You know who I am?" And the guy said, "No, and I don't want to know." And then he took my hand and he said, "She's my girlfriend." And that guy went like, "Oh my God!!" (Lorena laughs and then giggles).

And my husband pushed the guy and he say, "What, you gonna do something?" And they were going to get in a fight. And I said, "Come on, just forget it!" And he

said, "You know, he is bothering you. What does he think?"

And another friend said, "I don't know where this guy came from. No body knows him." (London Bridges Falling Down, playing in background as an the truck of an ice cream vendor drives by). And I'm like, "Oh my God!" and you know you get shy. And there was a lot of ladies. And you get shy, because they start talking. And sometimes they said, "Well, you made that fight, you this and that" and I feel like, "Oh my God," and I tell him, "You know what? Don't invite me anymore to anymore of your parties." And he goes, "You don't have to get shy, it wasn't your fault. He was forcing you to dance."

Lorena used the word "shy" in this story three different ways. First, "shy" was the embarrassed and ashamed feeling she had in relation to her body and the scars from the burns. Secondarily, she used the word in relation to the way she felt when the "guy" who attempted to "pick her up" at the party. Finally, she used "shy" in relation to the women who attempted to blame her for the fight. I will discuss these in that order.

Accepting Her Body

This narrative raised the issues Lorena's acceptance of her body. Alex discouraged her from hiding her burn scars and taught her a new way to respect herself. Well before they were sexually involved, Alex challenged Lorena to accept her body, scars and all, by showing her that he accepted her body. This caused her to trust him.

Women as Property

This story also raised the issue of women as property and their consequent needs for protection. Lorena seemed to

value "being taken care of" in the matrix of power dynamics she found herself a part of. In this instance, a man approached Lorena assuming 'ownership' as if she was a piece of land and he had squatter's rights. Alex responded to the situation by using violence to fend off the on-coming "squatter," within the milieu of gendered assumptions about male-female interactions.

Lorena's interpretation of Alex throwing the drinks as he readied himself to fight revealed her value of his protection. However, it raised the question of who was fighting for whom. It was indeed possible that Alex was about to fight for Lorena but it was also possible that he was going to fight for himself, his pride, as well as to preserve HIS CHOICE of female partners or as a display of his masculine power to "protect" a defenseless woman.

Blaming the Victim

Notably, Alex did not shame her for being in the unfortunate position of being attractive to the wrong guy. In fact, even when the other women at the party tried to incite Lorena to believe that she was THE CAUSE of the problem, Alex dispelled such accusation. He laid the blame on the 'squatter' and encouraged Lorena to let go of any other interpretation of the event.

In the telling of this story, Lorena revealed her concerns and her values in relation to Alex and her identity. The story revealed how she valued Alex's

protection, his respect for her feelings, and his way of giving her permission to or teaching her to not be ashamed (shy) of her body (scars). Lorena also valued this experience because it disrupted her taken-for-granted fear of people who order her to do things. In this scenario, the people who she feared were her ex-boyfriend who required her to wear hose when she wore shorts and ordered her not to talk to strangers thereby limiting who she could even converse with; the man who demanded that she dance with him; and the women who accused her of starting the fight. Alex seemed to be teaching Lorena that she doesn't have to obey these people.

Mexican Gender Traditions and Christianity

"You have to both come home and help each other"

Lorena acknowledged both the ideological Mexican traditions of separate spheres for husbands and wives and the fundamentalist evangelical Christian teaching that "the man is the head of the house." Psychologist Mary Stewart Van Leeuwen (1990) noted that many evangelical Christians believe that men have "headship" over women based on the Biblical story of Adam being given dominion over all creation by God including the power to name Eve (p.41). When I asked Lorena if she always obeyed Alex, she responded by saying, "Yes, well, partially," and then chuckled to herself. Lorena seemed amused by her own admission that she

doesn't always obey Alex but goes on to articulate her obedience of his "headship."

L: If he says, 'We're leaving,' I can't say 'No, I gonna stay, you go.'

MS: So pretty much what he says, is pretty much what you do?

L: Yeah, partially (laughs).... See what happened is, in our culture, well, not so many womens do this anymore but like me, it's because I have to do it. Some ladies now say, "Well, I'm working and I don't do it, I'd have to stay home, clean, cook, wash, and everything." Some say, "Well, I'm working, I can't do everything." That's why for me, I think that's why a lot of married people are not satisfied. Because right now you have to work, even when your husband, you have to both come home and help each other. For me, if he says you are gonna do this, I'm gonna do it cause he's the head of the house. You know, they say ladies are now getting on the top of the men and that's not supposed to be. It can't be. Because for me, always, the man is going to be the head of the house.

MS: Is that something you learned from the Bible?

L: Yeah.

MS: More that than what you were taught in Mexico?

L: It is both. It is both. Cause my grandma is, whatever my grandpa says, she'll do it. And she's really older - So she teaches us how the husband is.

Lorena's practical concerns in her own situation often called for a collaboration between spouses who needed to "help each other out." Thus she voiced a traditional ideology but lived out a practical mutuality with her husband. Alex's more mutual participation in domestic tasks will be explored next.

"My husband is totally different"

Lorena took-for-granted Christian fundamentalist beliefs about "male headship" (Van Leeuwen, 1990) as well as Mexican traditional gender norms that call for a dominant male/husband. However, she disrupted an otherwise smooth living out of this dictum by partnering with a man who was "different."

Lorena saw that her husband was unusual compared to her uncles and the other men he plays soccer with. She outlined his different-ness as including respect for her body, acceptance for her burns, concern for her health, and more egalitarian attitudes about gendered tasks of house cleaning and childcare. His participation in domestic tasks had incurred criticism from other women, but was readily accepted and defended by Lorena as the next section of the narrative reveals.

L: My husband is different from other men because other men go out with men, drink beers, when they come home start yelling at you. I see people on TV, men who abuse you. He is totally different. Sometimes when I am sick he says, when I come back from work I will help you. Other men say it doesn't matter if you are sick you still need to cook and to clean. And if I'm sick or if I am tired, he says you don't have to cook, forget about cleaning the house, you can do it tomorrow. So, he is different. I see how different he is from my uncles - when they come back from work they want to find the house clean and food, they don't allow the wife to go out, and if friends are invited over, they don't like that. And they go out with friends. But my husband doesn't. My husband isn't like that. Like if he goes out and plays soccer, he comes back and he brings me a rose, and this is different than my uncles. He is different because he never hit me and he doesn't yell at me that much. He yells at me if I do something wrong.

And sometimes if I want to go out, he will go out with me. So he is kinda an understanding person. And he doesn't like other persons to come and say things.

Like (once) I hadn't worked and he didn't have a paycheck so our fridge was empty. (giggles) And my uncle came and said, "Oh look at your freezer, it's empty!" My husband doesn't like for people to come to the house and say things. It's hard to find someone like him. It's different. When my aunt goes to the laundry, she go by herself and take the children with her. When I go to the laundry room, he goes with me and help me. Or when I go to work and he doesn't, he stays with the children. He will change my daughter's diaper. And my brothers (uncles) don't.

They say his is a mandilón, that I tell him what to do, that I manage him. But, it it's not true. He is the head of the house. He gives the orders. We go by his orders. They say that when he take care of the babies when I go to work, or when he helps me with the laundry. That's why he is kinda different from other people.

When my grandmother came I was pregnant with Yana, he said. "All you have to do is cook, you don't have to clean the house, you can spend all the time you want with your grandma. The only thing I want is the dinner cooked." And my brothers tell their wives that they have to cook and clean everything if they want to go out.

The meaning of "different" for Lorena is a man who participates in some aspects of her domestic chores and values the health of the wife. Unlike other men, Alex acknowledged how much Lorena suffered with her first two pregnancies. His concern for her health and comfort caused him to suggest that "two girls (daughters) is enough."

In terms of domestic tasks, Lorena did not describe Alex as ever doing all of her work for her. She, in fact, never mentioned that Alex ever did any cooking. His tolerance for a home that is not always cleaned, his

participation in childcare, and his assistance with the laundry have earned him accusations of being a "mandilón," [from mandil which means apron] a man who is dominated by a woman. Lorena matched these accusations with evocations of the Christian dictum of male headship (Van Leeuwen, 1990). Her insistence that he was "the one who gives the orders" that she follows, was an attempt to reinscribe her practices among "acceptable" traditional Mexican ways by claiming sanctioned Christian principles.

Lorena compared Alex with other "Mexicans" (particularly her uncles in Mexico, Alex's brothers in the U.S. and Mexico, and Alex's teammates from the local soccer league). Most of these men were probably Catholic but her uncles were likely to be evangelical Christians. She stated that Mexicans can be "machos," but Alex is not. She felt that he was extraordinary because he would not put stringent limits on her autonomy as other Mexican men do. For example, Lorena could have friends over when she wanted to. Indeed, I visited her on various occasions when her husband was not home. Twice he came home just as I was leaving. On both occasions, he was polite and kind to both Lorena and me.

Further, Lorena felt that she had the option to stay home when she wanted to, rather than being obligated to accompany Alex to soccer games or social events. She said,

L: Sometimes I don't do what he wants like if he wants to go and play soccer and I don't want to go, I won't go.

At the end of this discussion, Lorena said, "From all those little things, I think he is different, totally different!"

The ways of Alex and Lorena disrupted the cultural assumptions about the role of men as well as the Christian ideology about the leadership of men in family. Lorena did not want it to appear that she is "managing" her husband but because his ways were less demanding or oppressive of Lorena, they caused suspicion in the eyes of her friends. She announced that she was in keeping with the evangelical Christian teachings of her Grandmother, that required a woman to submit to the orders of a dominant male.

It is possible that Lorena invoked the traditional Mexican gender norms as well as the evangelical Christian norm of "male headship" (Van Leeuwen, 1990) as an attempt to protect and maintain Alex's less hierarchical and more participatory practices of sharing in domestic duties. By overtly invoking the structural model of male headship, Lorena used ideology to try and divert attention from or cover up more mutual and less oppressive practices within their marriage. This covering up showed up as a necessary act because other people were accusing her of "managing him" and making him a "mandilón."

Perhaps Lorena was especially able to value the ways that Alex broke the gender norms because she herself bent the rules when it came to obedience. As a resourceful, flexible, hard working survivor, Lorena was grateful for the

"understanding" man she had married. Within this partnership, Alex gave and Lorena gave. They both worked together. He was neither a mandilón nor a tyrant. She was neither a slave nor a queen. This was something to protect.

Learning About Gender From Grandmother and Magda

Grandmother taught Lorena various things about gendered relationships and the importance of marriage. She taught Lorena that marriage was something "good" in relation to the Judge (God) who determined if behavior is good or bad. Consequently, Lorena said she wanted to stay married and not get a divorce like her mother, Magda. Grandmother taught her that the wife was to obey the husband and that divorce was "bad." By example, Magda introduced the opposite extreme to Lorena. She was a divorced woman who remarried although she did not follow a husband's leadership. Lorena described her mother's second marriage saying,

L: But I don't agree to that marriage. Because my mom doesn't accept someone ordering her. She likes to GIVE orders, not ACCEPT them.

Lorena learned different things from the lives of Magda and her grandmother. Magda was an untraditional woman who also happened to be very mean and unloving to Lorena. Grandmother's traditional teaching gave Lorena structure and order: marriage is a forever commitment that is "good," husbands are the "head" of the family, and women need to obey their husbands. Indeed, Grandmother's powerful mentorship with Lorena closed down many possibilities for

autonomy for Lorena. However, her example gave Lorena a daily experience of love and belonging which opened up other possibilities that actually nurtured autonomy. In effect, her mentoring opened up possibilities for meaningful, secure relationships.

Lorena's understanding of Magda's example opened up possibilities for autonomy in a different way. As a woman Magda got a divorce, moved to a new country without her children or ex-husband, married another man in the new country, and took her children back when she wanted to. But Magda's example closed down other possibilities because Lorena perceived her to be domineering in relationships. Magda was not a person Lorena was drawn to emulate.

Lorena's imagined a life for herself as a single woman but she did not model it after Magda. Rather, Grandmother's love and acceptance of Lorena gave her a vision for a possible life as a single woman who would live with Grandmother. Lorena expected that she would have never married if she had stayed in Mexico/ She was content with this idea. When life with Magda was so difficult in the U.S., Lorena tried to go back to Mexico. However, this option turned out to be problematic so Lorena ended up back in the U.S. It was then that marriage showed up as a viable option to Lorena. It was a way to escape having to live with her mother after Job Corps. Lorena explained,

L: So, when I was 18 we (Magda and I) had problems, so me and my brother decided to go back to Mexico. But, then

she (Magda) went to Mexico and brought me back again. Then, I wanted to come back here cause I needed to get approval that I went to school here or my GED, but I never thought about getting married. But, after that everything was the same again (with Magda), so I decided to get married.

The influence of Grandmother and Magda on Lorena's self interpretation is complicated by multiple factors. Some of these will be explored next.

Self Interpretations

Lorena used different phrases to describe herself and her husband in her world. In a complex extended family, she was a tree that did not grow "straight" who partnered with a man who was "different." In a heterosexist context that prioritized childbearing, she was a woman who was "good to have babies" and her husband was a "proven man" who abstained from having sex with her when she ran out of birth control. These will be examined next.

A Tree that Grew on its Side: A Self Interpretation

When Lorena was describing herself in the context of her extended family in Mexico she stated that her identity as both sister and niece to her mother's brothers (who she considered brothers rather than uncles) as unusual. As she grew older, these male relatives told her that they wanted her to call them "uncles" instead of brothers. About this change in nomenclature, Lorena referred to herself as a tree that is fully grown saying,

L: I told them if a tree already grows on its side, how do you want to put it straight?

Lorena's used the metaphor of a tree to challenge her male relatives to honor the pattern of growth that had already taken place in her life. Her reluctance to change the status of her position in the family revealed her own acceptance of her situatedness as a niece who was really a sister.

"I'm good to have babies but I don't want them now"

One day Lorena pulled out her photo album and showed me various pictures of friends, relatives, teachers, classmates, and acquaintances. The way that she described different people revealed the value she placed on the status of marriage and parenthood. She tended to describe individuals by saying, "he's married," or "she's married," or "he gets a girl already" which meant that the person had had a daughter already.

However, she began using the phrase "good to have babies" on another day, a phrase I'd never heard before. The phrase came up in the context of a discussion on birth control. Lorena used the phrase to describe herself three times in one conversation. When I asked for clarification on the phrase, she said:

L: They say when you're not good to have babies, when you have to have a --- (she couldn't think of the name and I guessed and she continued on) --- yes, a C-section. They say that a woman is a "good mother" if she can have babies, not a C-section. So, I'm good to have babies, so they can't say that I'm not a good mother."

The informal gender code at work here deemed women who "could" deliver babies vaginally as "good," and by

implication, those who delivered babies via Caesarian section as 'bad.' Lorena's concern for the opinions of "them" (her peer group of aunts/sisters and friends) caused her to make a declarative statement asserting her worthiness of the label "good mother." In fact, her physical experience after a vaginal birth (covered later in this chapter) was life threatening. Lorena seemed to have gained self-esteem due to her experience of having the physical stamina to survive the suffering of giving birth.

Lorena explained that her family brought up the issue of a "good mother" regularly because she had not yet had a son, implying that there was more to this informal gender code than just what type of birth a woman's body affords a child. Indeed, the sex of the child is a measure of her value as a mother as well. Lorena responded to their questions by saying, "I'm good to have babies but I don't want them now," dispelling their threatening accusations with a display of agency. On the heels of claiming the label that marked her "acceptable" in her family/peer group ("good to have babies"), Lorena noted her volition to limit her pregnancies. Her intention to prevent pregnancies despite the cultural norm to continue to bear children until a son was born came up spontaneously in this conversation. The phrase, "I just don't want to," rolled off her tongue without sign of any unsettling self-recognition of her radical divergence from traditional Mexican norms for

childbearing. Indeed her self-positioning within the informal gender code was a way for preserving her self-understanding of her gendered identity as a "good mother."

Then, using words that expressed understanding of the particular way that a person's body "supports" a pregnancy, Lorena said,

L: I don't want to have another baby, not now. I think that maybe in another 3 or 4 years, maybe I'll have another baby, but probably not. Having another baby, it depends on how your body is supporting it (the pregnancy).

Lorena's ability to decide when she would and would not prevent conception required cooperation from Alex. In this context she went on to describe him as a "proven man."

"He's a proven man"

Lorena was discussing her need to get a injection of depo provera because this was the birth control she wanted to use. However, she and Alex were short on money this month so she wasn't sure she would be able to afford paying for the office visit and injection. I asked her if they were going to use some other form of birth control if she didn't get her depo shot. She said, "Yes, we have foam and condoms. But we don't do anything when I'm not on the shot or anything. He's a proven man." I was perplexed by this phrase and questioned Lorena about it. She explained that, along with her grandma and her mother, she understood a "proven man" to be one who "is not forcing me to have

relations with him." She giggled and then continued her explanation,

L: A man is not a good man if he forces you, so that you're having many babies. And he's really bad if he doesn't use condoms. So, anyway, he's helping you if he doesn't force. I don't want my husband to force me to do anything that I don't want to do.

The concept of a "proven man" seemed to function as a judgement scale for men. Either a man was a good man who had "proven" his worth by not forcing his partner to have sex when birth control was unavailable, or he was "really bad" if he forced a woman to have sex without condoms. Notably, there was no mention of suspicion that Alex used condoms with her because he was protecting her from sexually transmitted diseases he might have contracted from sexual relations with other partners. Rather, Lorena's said understanding was that he used condoms to prevent pregnancies. The notion of a "proven man" seemed to refer to a monogamous partner who respected the agenda for preventing pregnancies. This informal gender code was a useful, taken-for-granted tool used by the women of her family for rating men. Lorena may have also invoked this coding system to block the power of other formal (traditional) or informal gender code system that were set up by other people to judge women. That is, although Lorena was "good to have babies," she was limiting her pregnancies even though she had not yet bore a son. Lorena may have invoked Alex's status as a proven man to suggest his support

in her agenda to limit her pregnancies and to block judgement directed at her value as a "good" or "bad" mother.

Informal Gender Codes and

Covert Cultural Norms

The invocation of a informal gender coding system could fuel the development of what Del Castillo termed, a "covert cultural norm" (1993). Del Castillo found that covert norms allowed men and women to negotiate between traditional and alternative normative behavior investing women with the power to check, subvert, or complement male-dominant behavior, with or without the cooperation of males (1993, p.243). She described the covert norms as "implicit patterns or principles of behavior not necessarily formally acknowledged but informally utilized as practical guides to gendered behavior at the local level" (Del Castillo, 1993, p.253). Lorena's assertions that she was "good to have babies" but just didn't "want" another pregnancy and that Alex was a "proven man" because he didn't have sex with her unless they used birth control fit Del Castillo's description of covert cultural norms (1993). In discussions with family and friends, both the "proven man" and the "good mother" coding systems allowed her to protect her gendered stance in relationship to Alex even though she was not continuing to bear children until a boy was born.

The couple's prevention of pregnancies as well as their more mutual participation in domestic duties showed up as

"local notions of gender-permissible behavior," as described by Del Castillo (1993, p.253). Through the alternative gender coding system of covert cultural norms (Del Castillo, 1993), Lorena was able to protect her agency to act within her situation as she deemed appropriate.

Sterilization, Mutuality, and Divorce

While Lorena and I were discussing birth control, the topic of sterilization came up. From there, Lorena raised the issue of divorce. When I asked her if she was planning to get a tubal ligation in the future and she replied,

L: I asked my husband about that and he said, 'No.' He says that if we get a divorce someday, you know, because we aren't getting along, you know because that happens, then if I marry again, then the guy will want babies and you won't be able to have them. Or he says that when our babies get bigger we might want more so he says, 'No' about the tubal.

I asked her if she thought they were going to get a divorce and she replied by describing some dialogue she had with Alex on the topic.

L: So then I asked him, 'Oh, you think you gonna want a divorce?' and he said, 'No, then don't think of it like that, think of it like when our babies get bigger, we might want more.' I say, 'Ok.'"

By dodging the seriousness of the "divorce" question, Alex postponed definitive discussion on the topic, although this did not show up as problematic to Lorena. She continued talking about her options and backup plans without a need for closure on the issue.

Later I asked Lorena if Alex was open to getting a vasectomy. She divulged a plan that featured mutuality as

well as a safeguard for both of them should they someday get a divorce and remarry. She replied,

L: I told him it wouldn't be good. If he says I shouldn't get one then why should I say he should? No. If we both get it, it's better. But not only him or only me. Cause if he get another girl someday, he can't get her pregnant (giggling).

Although Lorena gave no indication that her relationship was unstable, the topic of divorce came up on several occasions. In this conversation, she described how she and Alex worked out a plan so that they each could protect their options to have more children in the future together or with different partners. Still, Lorena often noted that divorce was something she wanted to avoid.

Early in our first interview, the topic came up and I directly asked Lorena why she didn't want to become a divorced woman. She replied,

L: If we get divorced, he say he will take one of my babies. I tell him no, if we gonna get divorced I'm gonna take care of my two kids. Because I believe babies are better with the mom.

Lorena's multiple references to the possibility of divorce revealed it as an ever present threat that one needed to get clear about regularly. Perhaps it was particularly frightening to consider because as a divorced woman she would be a taboo, *mujer sola*. It is possible that it also played on her mind because she was abandoned by her biological father at birth and by her mother on several occasions in life.

In her study of a rural Mexican village, anthropologist Lola Romanucci-Ross (1973) found that the most fragile familial link was between husband and wife. A wife would regularly take into account the possibility that she could lose her husband through desertion, an attachment to another woman, or through natural or violent death. She found that a woman would invest in her children (sons particularly) while she was "expecting and even anticipating eventual abandonment and the breakdown of her marriage" (p.46).

Fears Related to Women's Health Care Services

Fear of Bodily Exposure

One of the deterrents to getting an annual pap smear was Lorena's fear related to other people seeing her unclothed body.

L: I gonna have a pap smear on 7/20. I had one when I had each baby. But, I don't like it. I don't like someone else to see my body, even my husband. I don't know why. I'm shy or something. Like when I go to the doctor and they say, oh you need this. I start thinking, "Oh my God!" and I start getting nervous.

MS: So why are you getting one now if you don't want one?

L: Because the doctor say he wants to see if everything is ok, if I don't have cancer. So, I don't want to have it, but I know I need it if I don't want to get sick. I need to have it.

Despite Lorena's fear of bodily exposure with a physician, she recognized the uncomfortable experience as a trade off. She explained that she had endured the experience of physical exposure in order to prevent sickness.

Fear of Sexual Abuse with Doctors

Lorena talked about how she didn't want to get a pap smear done by a male doctor because of what she had seen on TV about doctors abusing women. She stated a preference for a female doctor but qualified her preference by noting that since doctors might abuse female clients, she was as fearful of lesbian female doctors as she was of heterosexual male doctors. She told me a story about a Mexican woman who had a pap smear done in Mexico by a "lady doctor." She explained,

L: she really wasn't a lady doctor, she was a 'gay.' So she (my friend) felt herself as dirty.

To deal with her fear of being mistreated sexually by a heterosexual male doctor or a lesbian doctor, Lorena informed me that she preferred that a nurse be present during a pap smear, because then she would feel "more comfortable." She clarified that whether the physician was a "lady or a man doctor," she wanted a nurse present. She did not address the possibility that a nurse might be gay. Perhaps she assumed that all nurses were female and heterosexual.

Lorena talked about a gay friend she met at Job Corps while explaining that she felt "it is not their fault if they are gay." She noted, "I don't have discrimination." She explained that the issue was not if a person was gay but if a gay person was a physician. She had no trouble trusting a friend, gay or straight. But, she explained, "A

friend and a doctor are very different, cause a friend isn't going to hurt you. But a doctor, MAYBE they won't hurt you (and maybe they will)."

Fear of Pap Smear

Lorena believed that women who were virgins could not have pap smears. She explained that this was because the execution of the pap smear might "break the skin" of the woman. She said, "So, I didn't let the doctor do the pap smear when they did my physical (before I was sexually active)." She acknowledged that she first had a pap smear after the birth of her first baby.

Fear of Being Misunderstood

I asked Lorena how she protected herself when she went to the doctor. She explained that asking questions was one of the best ways to be sure services were being offered appropriately. Lorena explained that women who only speak Spanish don't ask as many questions as she does because they are afraid that their doctors won't be able to speak Spanish and because they assume the doctor is an expert.

MS: Are there other precautions you take to make sure a doctor won't hurt you?

L: I ask what are they going to do, why are they going to do it, how long it going to take, what are they going to take? If they don't answer the questions then I won't do it. Then if they tell me they are only going to do one thing on an appointment, I ask, why, how come, when am I going to need another one, what if I need another one.

MS: some Mexican women would be afraid to ask questions.

L: Because they are afraid they won't understand Spanish or they think the doctor knows what he is doing. But sometimes they don't. Whether I was in Mexico or here, if they give me medicine, I ask why you give this to me. My grandma always taught me to ask questions.

Complementing the Health Care System

Not having sufficient money or health insurance, Lorena gets the care she needs in ways she can afford. Whether it is through the clinic or through a sobadora, she finds a way.

One day when I came to interview Lorena, she informed me that she had just returned from visiting a local curandera who was from Mexico. She explained that the curandera "makes home medicine" and also "does massages." Lorena had solicited the curandera's services in the past. For example, Lorena took Yana to this curandera once because Yana (her two year old daughter) fell down and the injury caused Yana to awaken repeatedly at night. The curandera massaged Yana which cured the problem. So on the day of our interview when Lorena wasn't feeling well, she called the curandera at 8:30am. The "lady" encouraged Lorena to come over so Lorena left her 2 year old with a babysitter and went over to the "lady's" house with her baby in her arms. However, the curandera was so busy with customers in addition to tending to her six children that Lorena waited for 4 1/2 hours, hoping to receive services. Lorena ended up leaving before she received an evaluation because the wait was too long. Lorena explained,

L: She was fixing her house, and she say, "Hold on a minute," she was fixing her kids, she has 6 kids. And then she was putting her stuff to cook. And she said, "I will be with you in a minute, I will be with you." She was very busy. And I was watching TV in her living room. Then she came out and said, "Hold on. Can you wait 2 more hours?" And I look at her and I say, "No, I need to get home," and my baby started crying.

Lorena explained that she used both the Western medical clinic and the curandera to meet her or her family's health care needs. She said,

L: I don't like to go to the clinic all the time (laughs). It costs too much.

M: You have to pay out of the pocket? [Yeah]. You don't have MediCal?

L: No. And I can't pay all. See, like next month I have to pay \$45.00 for the appointment and for the depo (provera). And it is too much for me. It is too much. And I was thinking to find another clinic, but I don't know.

Lorena explained that the curandera does not charge clients for her services ("she doesn't tell you how much you can give her"). Rather, "you can give whatever you want." When Lorena brought Yana to the curandera, she massaged her for 20 minutes. Lorena paid her five dollars for her services that day. The low price for services and the effective care received made the curandera an attractive alternative to the clinic.

First Birth

Risking it between the "dead and the alive"

Lorena told the story of the birth of her first child.

L: With Yana, I had contractions for one day. Then when I was pushing, the doctor and nurse had me flat on my back and I couldn't push then my mom came in and she

sat me up and on the second push the baby came out. When I asked for help, the nurse said to me, (Lorena says something in Spanish and repeats it in English) "When you had sex, you didn't need help, so why do you need help right now?" and I looked at her and I got mad.

MS: She said this in Spanish?

L: Yes (she was a Latina). And after I had my baby, I told the doctor, "This lady said this to me," because I was mad. Even in the labor I was mad. And I told him, "She is supposed to be helping us, that's why you are paying her, but she didn't' help me." And when my mother came in the room, I told the doctor I didn't' want that other lady, I didn't' need her.

L: Did you ask your mom to come?

MS: No. I was surprised.

L: How did you feel when she came into the room?

MS: I felt kinda happy.

MS: Really?

L: Yeah, cause my grandma knew we weren't talking to each other. And when she visited she said, you should say you are sorry to your mom because when you are in delivery you are between the dead and the alive, and you don't know if you are going to live. If it is hard, you may be gone. My grandma said, in order for it to be peaceful when you have your delivery, you need to go to the people that you weren't speaking to and make your forgiveness, just like if you were going to die, you need to prepare to make it peaceful, you need to ask for forgiveness.

But I hadn't talked to my mom. For me, it is kinda like God who made this happen, my delivery. Because I couldn't have my baby because I didn't' go to my mom for forgiveness. And my brother called the hospital and asked how I was doing and my husband told him I was doing bad. And he told my mom and she said, "It's not my problem." And her boyfriend said, "What if she dies? You better go."

So it was my brother and my mom's boyfriend who were pushing my mother to go. So when she walked in I said to my mom, "I'm sorry." and she said, "I forgive

anything that happened." After she told me that, I started having contractions again because they were going to start going away. After my mom told me that I started having contractions again. I had two contractions and my baby came out. And I say, maybe God made this happen.

While hospitalized for the childbirth, Lorena met with four "bad" nurses. The first nurse not only refused to help Lorena when she was unable to push effectively after more than 24 hours of contractions, but she insulted her by suggesting that Lorena's sexual involvement that led to pregnancy was irresponsible. In anger, Lorena realized that the contractions began to diminish. Remarkably, Lorena explained, her mother entered the room just when Lorena needed her. She changed Lorena's position and the contractions picked up once more. Miraculously, within two pushes, Lorena's baby (Yana) was born.

Lorena's sense of relief and gratitude for her mother's presence was as surprising as was the fact that her mother came during a time when the two women were not even in communication. However, it was Lorena's grandmother who sowed the seeds that grew into the perspective Lorena had of the events. That is, because of her intense anger with her mother, Lorena failed to heed her grandmother's previous warnings that things might go badly in childbirth if she didn't make peace with her mother. Equating childbirth with death, her grandmother advised Lorena to forgive her mother and seek forgiveness before she entered into the space between "the dead and the alive" in childbirth. While

in labor, at a time when Lorena was in a state of anger due to interactions with the nurse she perceived as antagonistic and insulting, Lorena's mother came through the door giving Lorena the chance to ask for forgiveness before it is too late. Her mother received the apology and absolved her of any transgressions. Lorena perceived her mother to be the agent who facilitated a safe delivery for the baby. Indeed, Lorena saw God's hand in the situation because He gave her the chance to make peace with her mother even though she didn't seek forgiveness before the labor began. Without this act of contrition, her narrative suggests that terrible things could have occurred.

Notably, three men played important roles in bringing together this mother and daughter at the time of the birth of a granddaughter. Lorena noted that her brother was the one who called the hospital to check on Lorena's progress. It was her husband who handled the call and informed him of the trouble Lorena was having. Upon hearing the news, it was her mother's boyfriend who convinced her mother that she needed to come to the hospital, warning her that Lorena may die. Here, Lorena perceived the men as the midwives of a miracle. Lorena understood that she was being prevented from progressing in childbirth BECAUSE she didn't get forgiveness from her mother. The men made it possible for her to receive the forgiveness as well as the physical help her mother offered to bring the baby through delivery.

Strength to Face an Abusive Nurse

Lorena continued to tell the story of Yana's birth saying,

L: My husband stayed away from work for two days while I was having the baby. I went to the hospital at 3pm one day and I had her at 5:17pm the next day. And the only other one who was there was my mother in the room with the doctor and my husband and me when she was born. Cause I didn't want the nurses to stay. Then they suspended her from work.

Lorena's understanding of the interaction included punitive action for the nurse. She perceived herself as having the power to affect the nurse's suspension from her job. She also had the power to remove the nurse from the site of her baby's birth.

A Daughter Defends her Mother: Intergenerational Loyalty

Lorena continued with the story of the things that happened while she was in the hospital after Yana's birth.

L: In Mexico, my mom took classes in Mexico to be a nurse. And I felt cold and my mom said I was hot and she took my temperature with a glass thermometer and it was 103.5 so when the nurse came I asked her, "Can you take my temperature again?" And she looked at me and said, "I'm not going to take your temperature everytime you ask me." So the supervisor came. Well, see I told her, "Can you take my temperature again, because I told her this and she told me that, and she yelled at my mom," and I got very, very mad.

Then she [the nurse] said, "I will take your temperature right now." So she put the thermometer in my mouth and I took it out and I threw the thermometer. I did throw it! Cause I was mad. Cause my mom told her I had a fever and she didn't want to check my temperature, and she is supposed to check it. So the supervisor came and when she came I was 105. So, she called the doctor to see what I was allergic to and I was allergic to penicillin so they couldn't start the medicine. So, they put me on intravenous for not to



have the fever more. But I started having convulsions.

I saw the nurse came and the doctor was there. And I hear that she was going to take my baby. And I tell the doctor I want her out of the room because she was going to take my baby. And I was scared. And the doctor got scared too. Cause I started talking, I don't know, my husband said I said, "If I get better, I'm going to hit her." Then the doctor said, "Take her [the nurse] out of there!" and they had to hold my hands down because I was so angry. And the fever and the anger was bad [a bad combination], the doctor said.

So my husband stayed there for two nights and my mom stayed in the days. He had to go to work in the morning which was hard for him. See that's why I say he is so different. When my sister-in-law had her baby, my brother just went to see her and went back to work, but my husband stayed there the whole night.

This is a story about intergenerational loyalty.

Lorena's mother showed her loyalty by staying with her the days she was in the hospital. Then, when a nurse failed to honor her mother's recognition that Lorena had a fever, Lorena became angry in defense of her mother's honor. Lorena described how this soon became a dangerous situation. Lorena's anger mixed with a very high fever and resulted in convulsions: a very serious physical situation.

Amidst the convulsions, Lorena perceived that the nurse was planning to take her baby away from her. Lorena became very angry and frightened. Undoubtedly, Lorena saw this nurse not only as disrespectful to her mother, but as an agent who was capable of doing serious harm to Lorena's world. At her own birth, Lorena feared that she had been given to the wrong mother only to grow up in an environment of pain and rejection. At the mere mention of moving the

baby, even if the nurse and doctor were only discussing the need to temporarily move the child to the nursery to be away from Lorena because of the unknown cause of her fever, Lorena became enraged. She had to be restrained while the nurse was ordered to leave.

Lorena continued the story, keeping count of the "bad" nurses she dealt with. I asked Lorena why that second nurse was so mean and she replied,

L: I don't know, that was two nurses. Then after my baby was born, the pediatrician said my baby was yellow. He said, "She's ok, she's fine, she just needed to stay one day under the light. You can go and watch the baby as many times as you like." So when my brother came to the hospital, I took him to show him the baby. And then two hours later, another brother came and my breast had a lot of milk. So, I took the milk and I put it in the bottle and I was going to breast feed my baby.

So, when I got there, this man, he was a substitute nurse, he looked at me. I think he got mad or something. He told me angrily, "If you come too often the baby is not going to get better." And I looked at him and I feel bad. The doctor lied to me! If he said I can come anytime I like, if it's only the light (that she needs to get better) why did he say the baby's not going to be better? So, I showed him the baby and we left. So, we went to the room and I started crying.

And the nursing supervisor came and she said, "What's wrong?" I said, "Tell me the truth. What is wrong with my baby?" And she said the baby was fine, just a little yellow, but she is fine. So, I told her what this male nurse said and they sent him home for two weeks without pay because they said you weren't supposed to say that. He was supposed to say, "Oh she is fine, she is doing better." So they sent him home.

So, it was THREE nurses. No, it was four. When they went to take blood out of here (arm), she took the tape off and I told her, "It hurts!" and she didn't care. And I told her, "It hurts, if you want to take it from somewhere else." But she didn't listen to me and she

took it from there anyhow. So, I told the doctor also and he said he was going to talk to her.

MS: Wow. Did you have any good nurses?

L: Yeah, the supervisor and the afternoon nurse and the lady who cleaned the rooms. She was good also.

MS: In each of these situations you weren't afraid to go to the supervisor?

L: No! (chuckles).

MS: How did you learn to do that?

L: The anger. The anger in me. Because even if I hadn't talked to my mom, and someone yelled at her, I would stand up for her, even if I didn't talk to her, cause I don't like anyone to yell at my mom. Even my uncles.

MS: Were these nurses white?

L: No, the one in labor was Latina, the one who wouldn't take my temperature was black, the man nurse was white, and the one who took my blood was Mexican, I think. I don't know, she looked Mexican.

Again, Lorena was not shy about going to the nursing supervisor or doctor when the well-being of her daughter was in jeopardy. Lorena broke any stereotype of a Mexican woman who was acquiescent in the face of authorities. Lorena was not the voice-less "La Sufrida," (the long-suffering Mexican mother who silently tolerates her physical plight without asking questions), a stereotype of Latinas that Adela De La Torre criticizes as incorrect and damaging (personal communication, 5/13/94).

Later, Lorena informed me that the first of the four "bad" nurses was Latina, the second was African American, the male nurse was white, and last nurse was probably Mexican although Lorena wasn't sure. In each case, Lorena

spoke to the nursing supervisor or doctor (whomever she perceived to be the supervisor of each nurse) to protect herself, her mother, or her daughter and affect disciplinary action.

Lorena remembered these events and took action a year later when she was readmitted a year later with her second pregnancy.

L: When I was six months pregnant with Aida, I had to be in the hospital and I had the same black nurse, I never forget a face. And I asked the supervisor, "If you had a bad experience with someone in the past, can you get it changed?"

When Lorena explained the situation to the supervisor, the nurse assigned to work with her was changed. Again, Lorena perceived herself to be "able" to protect herself, spoke up to the person with the power, and secured a "safe" hospital experience for herself. Quite possibly, the possibility that hospital workers once exchanged her with another baby at birth may have contributed to a serious distrust of hospital staff.

It is also interesting that when I asked Lorena if she had any "good" nurses, she listed the cleaning lady along with the nursing supervisor and the afternoon nurse. The supportive role of hospital cleaning personnel did not go unnoticed by Lorena.

This narrative revealed the powerful background tradition of family ties at a time of crisis. The events around this birth event were not mundane or routine for

Lorena. Indeed, this was a very special, high profile event in her family's life. Still it was wrought with tension and stress. Lorena, her husband, Magda, and Lorena's brother each participated in scenarios of tension and potential trouble with nurses, doctors, and supervisors. In these situations, Lorena's anger in the situations with the four nurses was a powerful motivator for action.

Conclusion

Just moments before the end of my last interview with Lorena, she returned to a discussion of how her husband encouraged her to say no to orders or requests from people she didn't want to obey. She added that his way of affirming that he would "be here" if a guy was bothering her taught her that he respected her. She said he affected her and she became a stronger person for it. I replied,

MS: So, you were strong but you got stronger with him.

L: Yeah.

MS: You are a strong woman.

L: I just hope we can make it.

MS: In the marriage?

L: In life.

Even in this last interchange, Lorena's awareness of the ways things can change in her world make her uncertain about some basic issues of survival. With all the abandonment and half truths she has had to sift through to make sense of her world, amidst changing cultural norms and clashing value codes, not to mention the daily anxiety of living in a country without citizenship, Lorena's sense of uncertainty applies to life in general. Despite Lorena's impressive

strength of character, the process of day to day living still shows itself to be a challenge.

Lorena: In Review

A Woman of the Borderlands

Lorena, who described herself as "a tree that already [grew] on its side," is a survivor. Between the city of her birth and early childhood (Mexico City) and the place of her cozy home with Alex and her two daughters (San Tomas, California) lies an actual and figurative expanse of changing emotional familial ties; her Borderlands. Here, place-based meaningful spaces set up an arena for continuing to grow from her position on her "side."

Starting from her contemplation that maybe she should have died in the fire at six months of age (although she was given another chance by God) and extending to her assumption that she was later helped by an angel when crossing the border, Lorena is a woman who survives through a constantly evolving sense of identity in a shifting arena of uncertainties as part of everyday life. Raised by a woman (grandmother) who allowed her biological mother reclaim her at age 11 only to be mistreated and then "marked" by the disclosure of an abandonment at birth, Lorena's understanding of her positionedness within her family is an open ended renegotiation. Meaningful events have temporal dimensions that complicate various aspects of her life (the possibility that she was not the daughter of Magda and

therefore not the granddaughter of Grandmother, the ever present future possibility of crossing back over the border to live in Mexico, the impermanent nature of marriage as an institution, and the open reality that divorces "sometimes happen"). Each of these issues call for a perspective that is flexible and tolerant, patient and ready. They suspend figurative ropes attached to anchors of meaning that may touch bottom in Lorena's world but are not so firmly set that they can't be relocated if need be. Meaning is open to change as is her place of living, her source of income, and the structure of her relationships. While this does not imply that Lorena is not "anchored" at all, it does imply that her perspective remains flexible. She is strongly bonded to her grandmother, her children, and her husband but she makes herself ready for the possibility of loss or change as a practice of daily living. Among these suspending would-be anchors, Lorena has developed a fulfilling partnership with a relatively untraditional partner and a vibrant mother-daughter relationship with her two children.

Taking Care

As a woman who finds a way to take care of herself and her children, Lorena relied on wisdom from her grandmother, help from doctors as well as curanderas, and the protection from her husband ("my back"). Her decision to partner with a man she trusted, who was willing to work with her to "make

it" in life, was one of Lorena's central acts of taking care. Alex's ways of everyday life open up possibilities for Lorena that enhance her ability to protect herself from her potentially hurtful mother and from the shame-based interpretations of women around her who herald the traditional, idealized gender norms.

Gender Identity

Lorena took up her gender identity as a woman who described herself as having "two cultures:" one offered by her biological mother in the U.S. and one that was nurtured by her grandmother in Mexico. The web of meanings that were connected with each have created layers of meanings about how a person "belongs" to another and how a girl grows into a woman. Lorena forged a position for herself in these spaces as a certain kind of displaced daughter to her mother (Magda), a beloved but geographically distant daughter to her grandmother, a nurturing mother to her daughters, and a devoted partner to her husband, Alex. She took up her gendered position with a relatively untraditional man who encouraged her to turn a deaf ear to other women who try to shame her into blaming herself for things outside of her control. Lorena invoked both traditional Mexican gender norms and evangelical Christian gender norms to support her own set of gender codes that created covert cultural norms (Del Castillo, 1993) of alternative gendered behavior (proven man who is more mutual and less demanding but not a

mandilón, a woman who is "good to have babies" but doesn't want anymore).

Lorena and Gloriana:

Similarities and Distinctions

Like Gloriana, Lorena was never taught about her period, pregnancy, or condoms by her mother or grandmother. Lorena learned through experience. Like Gloriana, Lorena made a pledge to teach her children about their bodies, sex, and condoms at the start of their adolescence. However, communication was not as central an issue for Lorena as it was for Gloriana.

Unlike Gloriana, Lorena had no interactions with U.S. born Mexican American men. So, rather than comparing men who grew up "here" with men who were born and grew up "over there," Lorena compared the men in her world according to a gender code system that set up covert cultural norms (Del Castillo, 1993) for men (e.g., the "proven man"). Additionally, she attributed her husband's participation in domestic chores to innate personal qualities rather than to where he was raised. This is in contrast with Gloriana who tried to use place of childhood as an explanation for the differences in men's communication styles.

Lorena also invoked an alternate code of gender norms for women in her world (women who all happened to be born in Mexico). While Lorena measured herself against the norm of Mexican women who were "good mothers" because they were

"good to have babies," Gloriana distanced herself from Mexican women altogether. Gloriana described Mexican women as subservient and passive. They were people she defended herself against; women she did not want to be compared to. She made no mention of the gender code system that Lorena described. Whereas the distinction for Gloriana where she was raised ("I was not brought up over there"), Lorena differentiated herself from Mexican women by the fact that she went through adolescence "over here." Notably, neither women focused on where they were born as a determining factor of culture.

Lorena saw marriage as a helpful strategy for self protection in life while Gloriana saw it as a situation that held her back. Lorena gained protection and self respect from her marriage with Alex. This was in contrast to Gloriana who felt "small" in her marriage to Blas and had more recently avoided making a marital commitment to her current boyfriend of eight years.

The partners of the two women differ in interesting ways. Gloriana, who actively carved out her gendered position by contrasting herself with "girls over there," partnered with a man who preferred to be with dependent, traditional woman. Lorena, whose peer group consists entirely of women from "over there," partnered with a man whose practices appeared excessively egalitarian in that peer group, such that he is called a "mandilón." Gloriana's

boyfriend resorted to violence against Gloriana after drinking, because she broke a traditional gender norm. While it is unclear what Alex would do if he and Lorena broke up and he saw her out with another man (as was the case for Gloriana and her boyfriend), Alex encouraged Lorena to "bend" the gendered rules for behavior. He himself did not follow the "rules" and did not require her to. Specifically, Alex did not prevent Lorena from working and earning an income, has never been violent with Lorena, did not usually go out drinking with friends, and assisted in domestic chores.

Another interesting difference between Gloriana and Lorena was the extent to which each sought the approval of their parents. When Gloriana was Lorena's age, she opted to leave her husband against her parents wishes because she was unhappy in the marriage. Ever since then she has been working out her marked stance in relationship to them as a divorced mother of two sons. While Lorena did not seek her mother's approval she has remained vitally connected to her Grandmother. She sought her grandmother's approval for marriage and regularly sought her out for advice through phone calls and letters to Mexico City.

Both women sought health care services outside of the Western medical system. Both women were satisfied with the services they received from sobadoras and curanderas.

Both Gloriana and Lorena were able to stand up to health care staff when they felt they had not received the services they deserved. The difference between them, however, was that Lorena's goal was to protect herself or her child and was most satisfied when the staff was punished by their supervisors for their mishandling of her needs. Gloriana's goal, on the other hand, was not only to be treated with respect but to be "heard" by the health professional in error. She was most satisfied when she felt that she was understood and respected by the staff person. Lorena valued a form of just reprimand for wrong doing while Gloriana valued communication.

In relation to the ways that each woman dealt with the intercultural clashes that occurred as part of the mundane practices of everyday life, both Gloriana and Lorena were invested in working through the mixing and clashing with other people in relationships. Gloriana was a path finder who was learning as she went along. She taught others in her world as she learned. Her boyfriend and her parents were the main people she negotiated with in relation to clashes of background meanings. Both her boyfriend and her parents probably benefited from their interactions with Gloriana because she was careful to nurture her relationships with them while she also forged ahead towards alternative strategies for living out her gendered identity. Lorena dealt primarily with her husband as well as her

mother and grandmother. However, her husband seemed to be as much a pathfinder as she was, navigating through the Borderlands with its mixing and clashing of assumed meanings. Indeed, Lorena's mother, Magda had been traversing the borderlands for a much longer period than Lorena. What was striking, however, was the lack of stories Lorena told that described positive experiences of learning from her mother about the mixing ways of U.S. life and Mexican realities.

Though the two women differed, both took up their situations, perpetuating that which helped them thrive. For Gloriana, that was the independence of being an unmarried, divorced woman with a boyfriend. For Lorena, that was being the wife of a "different" man. Notably, that Lorena's own metaphor for herself was that of a tree, typically known for its durability and strength. Although Lorena saw herself as a tree growing on its side, she did not see her position as one to try and "make straight." Rather, with a smile, she seemed to imply that a tree could grow quite well on its side.

Chapter 9

Alicia: "I'm Both" and "Inbetween"

In a renovated garage attached to a three bedroom house, lives a young family: Alicia, Raul, and their 2 year old daughter, Emmy. The intergenerational patterning in Alicia's family involves an interesting mix of demographics. Alicia's mother and her parents were all born in Los Angeles but her father and his parents were born in Mexico. Alicia was born in the U.S. but her husband and his parents were born in Mexico. Therefore Alicia and her daughter were both born in the U.S. to one U.S. born parent and one Mexico born parent. Furthermore, both Alicia and her mother married men who were born in Mexico but immigrated to the U.S. This then sets up Alicia's daughter Emmy with the possibility of partnering with a man from Mexico and perpetuating a demographic pattern of second generation-ness through offspring born in the U.S.

In describing the place of birth of her parents, Alicia stated that her dad was born in Mexico and all his relatives still lived there, but she wasn't sure where. She visited her maternal grandma once many years ago, but she didn't remember much about the trip. In describing the ethnic identity of her mother and her parents Alicia articulated her sense of their "Mexican" or "Hispanic" heritage. She said,

A: They were Mexican. My mom was Mexican. They also were born in Los Angeles. It was just mainly them. They just had the Hispanic in them.

The combination of the daily practices and background assumptions of a man from Mexico and a woman from the U.S. creates a mixture that is not easily categorized or understood by an outsider. Alicia's stories reveal recognition of the differences her parents dealt with on a daily basis as well as the differences between herself and her husband's family as she takes up her daily coping as a young mother, wife, and daughter-in-law. Probably similar to other U.S. born women who are partnered with an immigrant from another country, Alicia has found ways to deal with the mixtures - confronting conflicts in background meanings and inconsistencies of personal interpretations that are usually taken-for-granted.

Alicia understood that her mother, Lola, was an active participant in her husband's adaptation to the U.S. Lola was an important culture and language broker for her immigrant husband. In terms of language, Alicia described her mother, Lola, as being able to speak both Spanish and English. She spoke Spanish to her husband and English to her children. Alicia remembered that Lola taught Pedro how to understand English.

A: ...Since my mom spoke English -- She spoke both --

M: Oh, she did?

A: But she mainly spoke to us in English. And she would talk to my dad in Spanish. And then my dad would only

Speak to us in Spanish. But my dad -- Since my mom spoke English, she taught him how to understand it so he -- We can talk to him in either, and he'll understand what we're saying.

Following her mother's example, Alicia spoke English at home to her daughter, Emmy. Just as her father spoke Spanish to her, Alicia's husband and his family spoke Spanish to Emmy.

Alicia and her siblings were all born in the U.S. Alicia's parents raised their children in California. They taught them to speak both Spanish and English. Thus, Alicia gained a working knowledge of Spanish and is fluent in English. She attended English speaking public schools and spoke English with her mother. She spoke mostly Spanish with her father. Alicia's daughter, Emmy, is not in school yet at age two but she too speaks English with her mother and Spanish with her father as well as his family. She already has a budding vocabulary in both languages and moves easily between English and Spanish.

During her childhood years, Alicia was the favorite, as the youngest of her four siblings. She was accustomed to being treated special, especially by her mother. She was lovingly called "the baby." Alicia remembered that her mother gave her "anything" she wanted. Alicia described her mother as a fun-loving and gregarious woman who struggled with poor health: diabetes, hypertension, and obesity. Just two weeks after the first of her children's weddings,

Alicia's mother died. At the time, Alicia was only 12 years old.

Alicia's father, having "raised himself" apart from his parents in Mexico, took on the full responsibility of raising his five teenaged children as a widower here in California after his wife's death. He had strong rules for his children: his three daughters could not have boyfriends; they were to come home immediately after school; they were rarely allowed to go to a friend's house to visit; they were never allowed to attend school dances. His two sons, however, were allowed to go out, date, have girl friends, bring them to the house, and attend school functions as they desired.

Finding Autonomy

Soon Alicia realized that the only time she could experience the world outside her home was during school hours because that was the only time she was not at home, under her father's surveillance. So, she took the opportunity to skip classes when she could, thinking that her father would not find out. At about this time, when she was 16, Alicia began a relationship with Raul.

Raul and Alicia first met in junior high school. They became lovers during their high school years shortly after Alicia's 16th birthday. Raul had dropped out of school and was taking adult learning classes. Alicia began coming over to Raul's family's house to see Raul when she skipped out of

classes. Raul and Alicia became pregnant shortly after they began their relationship. At age 17, Alicia dropped out of school in October of her senior year, just months before she gave birth to Emmy. Alicia has since received her high school diploma and Raul is in night school working on his.

Communication about Bodily Happenings

Alicia did not experience intergenerational communication that led to learning about her body, health, or sexuality. Perhaps such communication would have occurred if her mother had not died just before Alicia entered adolescence. With the exception of one small interaction with an aunt, Alicia talked about issues related to her body with members of her own generation. Some types of communication occurred between Alicia and her mother-in-law, but discussions related to her body, health, or sexuality were limited to single comments about topics related to infant care, such as breast feeding.

Alicia experienced menarche shortly after her mother's death. Her mother had previously prepared her for the event however by telling her, "When you start, don't be afraid. It's going to happen some time or another. It's normal." She in fact, wasn't afraid when the time came, even though her mother was not around. She stated that she had also learned about menstruation at school and from being around the women of her family. About her first period she said, "I wasn't scared, but I was kind of nervous, cause I had

been with my sisters, my two older sisters had already went through it, and my mom had went through it." She was, however, "embarrassed" to tell her sisters that she got her first period so instead, she talked about it with her sister-in-law and then her aunt. Alicia seemed to be more comfortable talking with someone outside of her immediate family about her period although she stated that they didn't tell her anything she didn't already know. Emotional connection with a trusted, but not too closely related person, at the time of the event, seemed to be important.

At the time of her first pregnancy, Alicia was again "uncomfortable" talking to her sisters about her body. They discovered Alicia was 3 months pregnant when one of her sisters found the ultrasound picture in Alicia's things. Alicia said she wanted them to find out that she was pregnant but she didn't want to be the one to tell them so she was glad that her sister went through her things and found the picture. Part of her reluctance to talk to them directly was due to her shame at acting in what she described as a "wrong" way, by getting pregnant as a teenager who wasn't married or graduated from high school. Part of her embarrassment, however, was also due to a taboo against discussing such things with her sisters.

To Alicia's surprise, once they got over the shock of the news, Alicia's sisters were very supportive. Her oldest sister was the most supportive: trying hard to understand

Alicia's frustrations during the pregnancy, attending birthing classes with Alicia, and acting as her coach during labor.

Alicia described her pregnancy as being a turning point in her relationship with her sister. Because of her sister's consistent support during the pregnancy, labor, and delivery Alicia began to trust her sister in a way similar to that between a mother and a daughter. This was a surprise to Alicia because she had previously rejected her sister's attempts to mother her. However, during the interviews Alicia referred to her sister nine times as "the one" she could trust or "the one" who was there for her.

After Alicia became pregnant, the things she learned in school about pregnancy and women's health did not seem to make any sense to her anymore. Despite the elaborate factual content of the information given at school, it lacked the intimacy of talking with someone she felt close to. Communicating with someone she was familiar with and trusted seemed to become an important requisite for the "information" to have any real meaning to Alicia.

Alicia expressed satisfaction that she learned most of what she needed to know at the time of her first pregnancy from her brother's wife, whom she felt very comfortable with.

After the birth of her first child (Emmy), Alicia breastfed her baby during the first week. She stated that

she decided to stop after one week because neither of her brothers' wives breastfed their babies. Additionally, Raul was uncomfortable visiting Alicia when she was breastfeeding. This added incentive to change to bottle feeding. The fact that Raul's mother encouraged Alicia to continue breastfeeding had no power to sway her decision.

Two years after Emmy's birth, when Alicia was 18, Alicia and Raul's second baby was born. Alicia realized she was pregnant just two weeks before her son, Ernesto, was born premature. She and Raul were living together at the time, but their relationship was not at a strong point. Raul was going out with friends several nights a week and sometimes did not come home at night. Alicia knew he was seeing other women, but she denied this painful reality because she wanted the relationship with Raul to work out. After his birth, Ernesto was in the hospital for two months before he was discharged. Raul stopped his nightly socializing with friends at this time in order to go to the hospital and be with his son. Alicia was very glad for this change in his behavior. Tragically, Ernesto died of SIDS at 3 months of age which was a very difficult event for Alicia and Raul to deal with.

At the time of the baby's death, Alicia remembered that her oldest sister was the first relative to the scene. This further reinforced her status as "the one" that Alicia could rely on.

Ernesto's death was a turning point in Alicia's life not only because her son died, but because Raul and Alicia split up for a few months at this point. The fear of losing Raul because of a pregnancy, a child, or the loss of a child was overwhelming for Alicia. She became quite fearful of having another pregnancy at this time.

Alicia saw her relationship with Raul as crucial to their survival as a family unit. Without Raul's presence in her life, Alicia didn't think she could have handled two children. The death of Ernesto almost took Raul from her. That was a chance she didn't want to gamble with again. For Alicia, her relationship with Raul was primary.

However, Alicia was well aware of how excited Raul became about having a son, once he got used to the idea of having a second child. Ernesto was both a tie that bound Raul and Alicia together, as well as a barrier that came up between them when he suddenly died.

A Family Shrine

On the walls of their home, Alicia and Raul have hung a picture of La Virgin de Guadalupe and Santo Nino and a plastic cross. Along with the photos of Alicia, Raul, Emmy, and Ernesto, they are the only wall decorations. Alicia said she drew strength from the familiarity of the sacred pictures (of the Lady and the Santo Nino) because her mother had them in her home when Alicia was growing up. Alicia didn't know who the Santo Nino was or what the meaning was

of the small drawings in the corners of the print of the Santo Nino. However, this didn't detract from the meaning of the pictures for her.

The sacred pictures were hung on either side of a metal rim for a car license plate. The top of the rim said, "Alicia and Raul." The bottom of the rim held the words, "Emmy and Ernesto." Thus, the license plate rim held the names of all four members of the family, engraved on the metal. The rim itself seemed to be a physical object that represented the "fourness" of them, reinforcing the existence of their unity or connectedness as a family unit. A collage of photos of the four hung directly below the license plate rim. The way Alicia positioned the Virgin and the Nino on either side of the photos of her family, as if to flank the family symbolically, created a shrine of sorts. Here, on the wall was a meaning marker of the family they once were physically, in life, and now are in memory. The shrine seemed to depict the family as Alicia wanted them to be. It seemed that even though Ernesto had died, she had created ways to make him present.

Alicia described Ernesto's death and thereby revealed that she understands the death of Ernesto via the belief that God "takes" people from earth when God wants to. She has struggled with anger at her mother, however, because she holds a belief that her mother, who is in heaven with God, had cosmic powers which she failed to exercise. Alicia

thinks Lola could have intercepted God's plan to "take" Ernesto, but for some reason failed to do so. Rather, her mom failed to "do her job" of watching over them, foreseeing the future, and actually CHANGING God's mind about "taking" Ernesto. More recently, however, Alicia consoled herself by reasoning that now her mom could take care of the baby in heaven for her. Alicia's anger at her mother for not being active BEFORE the fact has been transformed into a belief that her mother can be active AFTER the fact of Ernesto's death.

The grave of Ernesto is a practically useful place in addition to being a marker of the existence of Ernesto. It is useful as a communication place to connect with Ernesto. It also serves as a image retainer of sorts for Ernesto. That is, Alicia's two year old daughter, Emmy, can actually see Ernesto's picture (which is engraved on the gravestone) in a physical place that marks his remains. The picture serves as a physical artifact substantiating Ernesto's existence, materially. Alicia explained that when she has taken Emmy to the grave, Emmy is able to say hello to "him" and she is able to kiss "him" by kissing his picture on the gravestone. To Alicia, the grave of Ernesto held much meaning in relation to Ernesto's existence. Alicia explained that she does not want to move away from San Tomas because she needs to be near the physicality of Ernesto's grave just as she would need to be near the physicality of

his body were he alive. His grave was an anchor for her, one she could not foresee ever letting go of. She seemed to have no tolerance for suggestions "other" than this and had little patience for Raul if he didn't see it this way too.

"Here" vs. "Over there"

Place was also important as a way of referring to Mexico and the U.S. Alicia often used the phrase "over there" to refer to Mexico and "here" to refer to California. She perceived Mexico as a place to visit but not to live. She saw it as a place where "you can't have a life," a place that is too "open," without structure or police or safety for children. She stated that she both liked and didn't like Mexico. However, she preferred dealing with Mexican ways in the U.S. over dealing with Mexico directly. That is, moving in with Raul's family seemed to be a crossing back over the border towards Mexico while staying in the U.S. It was the kind of bordercrossing she preferred.

Taking Care

Alicia spoke of "taking care" in several ways throughout our interviews. She noted that parents who were able to "take care" of their children were people who were autonomous from their families, had graduated from high school, had jobs and money to pay for the baby's needs, and were married.

Alicia's notion of "taking care" seemed to be coupled with the notion of "grown up." For example, Alicia spoke

about "grown up's," such as single women in their mid-thirties, as people who should be able to "take care" of themselves "on their own." Alicia stated that a woman of this age should not expect someone else to take care of her.

It is noteworthy to point out that Alicia had a taken-for-granted vision for a woman who did not marry by the time she was in her mid-thirties. It involved independence and autonomy rather than a stereotype of an unpartnered "mujer sola." She admitted that she held a single woman as suspect if she was not "out on her own" living in her own apartment or home, "taking care of herself" by this age. When I asked Alicia what she thought about the Mexican stereotype of a single woman or a "mujer sola" she told me she had never heard of it and didn't know what it was. The fact that she did not have a taken-for-granted assumption of a woman of this type reveals Alicia's take on a spectrum of possibilities for women in her world that extends beyond mandatory protection by a father or male partner.

Alicia also talked about "taking care" in terms of using birth control to prevent pregnancies. In fact, she stated, "I'm trying to take care of myself so I don't get pregnant." To do this, Alicia negotiated with Raul so that they using both condoms and oral contraceptives. Eventually, however, she felt uncomfortable with the Pill and switched to depo provera although Raul continued to use condoms. In this case, Alicia referred to her use of

contraceptives as well as Raul's participation (by using condoms) as taking care of herself. While discussing this with me on an interview, Alicia seemed to take-for-granted the fact that Raul participated in her agenda for taking care. This showed up seamlessly in Alicia's story. She took for granted that he was involved.

Various ways that Alicia "takes care" were revealed in the stories Alicia told about her life and ways of coping. In order to understand the possibilities for coping that show up for Alicia in the context of her everyday living, I will present some background. The following are interpretations of Alicia's understandings of the pattern of interactions among Alicia's mother (Lola), her father (Pedro), and her father's mother (Grandma). Traditional gender norms and the contestation of these norms within the bounds of Lola and Pedro's relationship provided Alicia with an understanding of negotiation as a means of working out daily interaction patterns among partners.

"A wife in their way"

Alicia described her mother, Lola, as understanding "both" cultures. She grew up in the U.S. so she had to learn about Mexican ways from Pedro's mother on visits to Mexico. She also taught Lola how to be a "wife their way."

A: Because my grandmother never worked. My grandma was home. She kind of basically showed my mom mainly -- She was the one who showed my mom how to be a wife in their way, their way.

M: Which is like --

A: Cook, clean, have the house you know, set, keep the kids fed, just basically the house. That was it. And let the man work. That was about it. And my mom never really learned it from her parents. So she kind of mainly learned it either on her own or from my grandmother or just by doing it. That's about it.

M: So, do you feel like she learned how to be a wife "this way?" or

A: I think it was both.

M: Yeah?

A: It was both. Because I think she just -- They were together. They kind of did what she thought was best, and kind of seen the way other people did things. And then just like that. But they used to go so much over there to Mexico that she like adapted things that they used to do there. So she got both. I think she got both.

Alicia saw her mother as knowledgeable about her role as a wife in both cultures or in what she calls "this way" and "their way." However, Lola did not learn traditional Mexican ways from her parents. Rather, she learned about various practices by:

- 1) learning things directly from Grandma's teaching
- 2) observing the ways of other people in general
- 3) learning things on trips to Mexico
- 4) just doing what she thought was best/learn by doing

An intergenerational pattern of mother-in-laws teaching daughter-in-laws showed up in Lola's experience as well as in Alicia's. Alicia's mother-in-law was very responsive to Alicia's requests to learn how to cook certain dishes or for help in taking care of Emmy. However, Lola's mother-in-law

was a very different kind of mentor than Raul's mother was for Alicia.

Grandma: An Untraditional Traditional Woman

As a Mexican woman, Grandma was unlike the women Gloriana described as "girls over there." That is, in addition to teaching her traditional cooking techniques, Grandma taught Lola to speak up to Pedro if she didn't like what he was doing and to let him know how she felt. Alicia perceived this to be the reason why Pedro always respected Lola. She saw the success of their relationship and marriage as stemming from Grandma's mentoring of Lola. Through this, Alicia explained that her mother understood both "American culture" and "Mexican culture" very well.

A: I think she kind of understood both because living with my dad, she had to understand the way my dad was brought up, and they used to go to Mexico a lot when it was just my older brother and my younger brother. They used to go a lot. So she kind of learned from my grandmother. My grandmother would just tell her and tell her and tell her --

M: Meaning your dad's mom?

A: My dad's mom would just explain things to her. How to do things, how to cook. How to do this. What my dad liked. What my dad didn't like. So my mom learned basically from her.

M: What do you think were the important things that your grandma taught her?

A: Mainly how to control my dad because my dad when he was younger, he used to get mad really easy. He used to go out drink, get drunk, fight. I mean, just really bad, and my grandma would tell her, you know, "Don't let him do this. You know, ... If you think it's not right, you tell him. You make sure you let him know how you're feeling." And it was just like that through the whole time I think when my mom and my dad were married. I

mean, that's basically how it went. My dad never once hit her. My dad always respected her. So it was I think through that my grandmother showed her how exactly. I think if it wouldn't have been for that, my mom probably would have let him do whatever he wanted to do.

M: Oh, really?

A: Kind of, because I guess the way they were both different. They were so different from each other. Cuz my mom was showed here. My dad was showed over there. It was different.

M: Showed?

A: In Mexico. The way things -- The way he grew up harder. I mean, my mom grew up poor here, but I think the poor here was a lot different from theirs in Mexico.

Grandma's teaching aided Lola in being able to "control" her husband by being verbally assertive with him in relation to her concerns. Alicia grew up aware of the fact that Pedro respected Lola regardless of the differences in their early lives. Her use of the phrases "showed here" versus "showed over there" reveals her understanding of the power of modeling in childhood to affect practices in daily life. However, the example of a Mexican man who raised himself in Mexico partnering with a Mexican American woman who later became empowered by a Mexican mother-in-law who encouraged assertive communication from woman to man undoubtedly influenced Alicia. Because of the experiences of Lola and Pedro, the potential for negotiating relationships between borders of countries and between differing interpretations of gender norms was nothing

extraordinary for Alicia, from childhood on. It is the background within which Alicia took up her daily coping.

Alicia described her mother (Lola) as actively influencing Pedro to "calm down" by reminding him that he has children.

A: And then when he was with my mom, my mom made him calm down a lot. It was more like, "You can't be doing this. You have kids now. You can't be doing this." And he just kind of stopped for a long time.

Alicia used these same words when she described herself in relation to Raul. She used the same reason (parenthood) to try and "calm" Raul down at a time when he was going out with his friends a lot (just after baby Ernesto was born).

In his ethnography of machismo in Mexico City, Matt Gutmann (1996) found that an assumption about men who were still single (soltero) into their twenties, was that they needed to be tamed by women. In the case of Pedro, his mother seemed to guide Lola on how to "calm" him down. Alicia, remembering the lesson, applied it in relation to Raul. An intergenerational practice of 'calming' men when necessary seemed to be passed from woman to woman.

Alicia as "Inbetween"

Alicia described herself as "inbetween" when it came to "Mexican" ways and "her" ways. When I asked her how she fits in relation to the traditions in her family and Raul's family she replied in terms of the multiple generations of Raul's family who were living in the house. She said they were all "brought up" in Mexico which caused them to have

more Mexican traditions than she was used to. This included Raul, his parents, and his grandparents. She discussed this phenomena moving from the topic of food, to cooking and cleaning practices, to the traditional roles for men and women.

A: They were all brought up in Mexico. Even the great grandparents live here. So they were all -- So they got more Mexican ways. I mean, they cook exactly the way that they're supposed to cook. Mainly the way food was made there. And like here there's some food that it's Mexican food, but it's more -- They're more -- They add their own things to it here.

Then, Alicia moved the discussion from her surprise at Raul's family's traditional cooking practices to her amazement at their laundry practices.

A: Like with some foods here, you use tomato sauce? They don't. They use tomatoes. They make their own chili. They wash their clothes in the backyard with -- Well, they -- They're mainly clothes like their mom works at the Garden Place so you have to wear your white long sleeved T shirt. She gets out in the backyard with a -- It's like a little machine. It's not a machine, but it's like a board. And they just wash them with those. And I mean, it's just weird. I've never seen things like that.

Then, Alicia linked her discovery of the traditional cooking and cleaning practices of Raul's family to traditional gender norms, including gendered childcare responsibilities.

A: When I first moved into the house, I just kind of like tripped out. I mean, my mom used to make food, Mexican food, but different, and when I moved here, the way they made it was like totally different. I was like, "God!" But just I think they're more like the Mexican way. More in there it's like the man can do whatever he wants to do. And as long as the lady is here, there's food cooked, the house is cleaned, and the kids are taken care of. The man doesn't have nothing basically to do with it other than works and gives

money. That's about it, you know, and I'm not used to that. To me, it's more both.

Alicia met abruptly with the Mexican ways of Raul's family when she moved in. The practices of his first generation family were foreign to her, including the separation of responsibilities of men and women. Thus, moving into Raul's home set up a situation of clashing background meanings and practices for Alicia in terms of gender norms. That which was ready-to-hand for Alicia suddenly became unready-to-hand as she discovered that her coping patterns and daily activities were in conflict with those of Raul's family. For example, in terms of parenting, Alicia expected that "it goes both ways," meaning both the mother and the father work together to rear the children. She described the "Mexican way" as just being "one way." That is, the woman did the domestic work and childcare and the man was not engaged in these tasks unless he wanted to be. She distinguished what she was "used to" from their ways by describing them as "more like the Mexican way." Again, she used the inclusive word, "both" to describe what she was used to and she used more restrictive language to describe the "Mexican way" as one particular way.

She went on to note that once her father, who was born and raised in Mexico, attempted to get her to comply with the traditional pattern of men propagated in Raul's family.

A: It goes both ways, I told him (Raul). And with them (his family), it's more like it's just one way, and that's the way the man fills in, that's it. I don't --

I never grew up like that. Even my dad kind of says things like that, because he (Raul) went on a trip with my dad to Oregon, and when they came back, I wasn't home, and my dad yelled at me, "Why weren't you there? You should have had something ready for him to eat after a long day." (I replied,) "He knows how to cook. There's the stove. He can cook himself something to eat. He's not disabled."

Alicia's use of sarcasm functioned as a distancing tool for gaining space from the traditional model. Her stance derailed both a traditional standard for male behavior as autonomous without accountability to his family and a traditional norm for female behavior as subservient in domestic duties. She challenged her father to recognize her stance by refusing to be complicit in an agenda for her and Raul. By replying in this manner, Alicia reminded her dad that she was not going to comply with the traditional pattern and she was going to challenge the men to give it up as well.

Alicia described various conflicts related to agency that ultimately traced their power to an expectation of traditional gender performances. For example, Alicia stated that sometimes Raul tried to tell her what kinds of clothes to wear. Then she connected the discussion of clothing preferences to gender performance.

A: I don't like it. I don't like him telling me what to do. (laughs) But it's mainly because some of the clothes he picks out, I don't like them. And then it's like, like if I wear something, I want to be able to like it. I want to feel comfortable. And like if I don't -- I don't really just like him telling me, "I want you to wear this. Wear that." I go, "I don't like it, no." (laughs) I'll wear what I want to wear." It's kind of like -- I don't know how to

explain it. Just kind of like, um, I have my own way of dressing. And it's like when he tells me what to wear, it's like if I don't like it, I just get kind of frustrated. It's like, "No, I don't want to wear" -- I've told, like I've told him a couple of times, and it was like if he doesn't listen to me the first time, and he keeps saying it, keeps saying, it frustrates me more. It's just kind of like, "No, I'm not going to wear it. So just don't worry about it. Leave me alone."

And it's like after I had Emmy -- No, after I had Ernesto, I gained a lot more weight. And so it's like he's, "Oh, wear this. I like tight shirts." (laughs) (I told him,) "You like tight shirts? I don't." I have this (points to her flesh underarms on ribcage). "It doesn't look very good." (laughs) But he just kind of like -- He wants me to wear things where actually it makes me look all -- To him, he thinks it makes me look feminine if I wear a tight shirt, nice jeans, and it's like you know, I'll dress like that on the weekend, and that's about it. (laughs) If I'm not going anywhere, I'm not going to get all dressed up. And he's just kind of -- He doesn't like it. (laughs)

MS: What other things do you think he thinks are feminine?

A: He expects me to have makeup on every day. I have to have lipstick on, or else he doesn't like to kiss me. (laughs) [Really?] Yes. In the mornings for a while, like I would go to work, and I'd give him a kiss goodbye. He wouldn't kiss me if I didn't have lipstick on. "No, no, bye!" I'd get out of the car, and leave. But he likes it when I have makeup on. He likes it when my hair is combed. He likes it when I'm all dressed up, and just kind of like you know, if I don't say anything to him, just kind of let him do what he wants to do, he feels more in charge. [Oh.] He likes feeling he's in charge. (laughs)

In describing Raul's preferences, Alicia noted that he not only wanted her to "dress up" but he also wanted her to behave a certain way. He specifically wanted her to cook and clean and "not complain" and "let him do what he wants to do" because it made him feel more "in charge."



However, Alicia went on to explain that she did not want to act quiet and "feminine" just so that Raul could enjoy the feeling of being "in charge." In fact, she said sometimes she wanted to tell HIM what to do. Raul did not like this untraditional behavior nor Alicia's verbal requests for help. There seemed to be a code of silence that Raul wanted Alicia to respect in relation to his activities. He would rather that she just "not do" the housework she didn't want to do, than to request that he help her. Notably, in relation to housework, however, Raul was engaged in caring for Emmy during three out of the five times I visited Alicia.

Alicia stated that sometimes Raul completely disengaged when she asked him to do something. In these instances when Raul wished Alicia was silent, he would just sit there and do nothing.

A: Like if I tell him, "Help me clean up," he doesn't like it. He'd just rather me just not say nothing, just do what I'm doing. If I have to clean, clean. If I have to cook, cook. Don't complain about it. Just do it. If I don't want to do it, then don't do it. But it's like if I tell him, "Go do this," he doesn't like it. Or he'll do it sometimes, up to a certain point, and if he thinks that I'm asking him too much, then he'll stop. He just won't do anything. (laughs) He'll just sit here. And I mean, he just gets -- He's like that sometimes. Sometimes he'll do it, and like once in a great while, he'll do it on his own, but hardly, hardly ever. Hardly ever.

Alicia didn't want to play into Raul's construction of femininity and the traditional norm for women to be docile and uncontesting. She rebelled against his desire for her

to perform in the gender specific ways his mother and grandmother have all their lives. Her success in persuading Raul to relinquish control of her behavior was due to her ability to remind Raul how his father had disappointed him. For example, Raul was very unhappy when his father, who lived by the traditional norms sanctioning a man to be "out" whenever and wherever he wanted, was not present to console Raul after the death of their son, Ernesto. She also reminded Raul on occasion that he was acting towards Emmy in the same way his own father acted towards him, i.e., his dad wasn't emotionally or physically present for him and his siblings when they were children.

By comparing Raul with his father, Alicia seemed to be attempting to motivate Raul through by threatening him with the possibility of repeating his own childhood with his child. She had a strong interpretation of what she perceived to be appropriate ways to parent. For Alicia, a father who wasn't around much was a man who didn't care about his children or a man who wanted to "run away" from his responsibilities. Alicia saw no place for the traditional norm modeled by Raul's family.

A: I think mainly the way his dad is is what influences him more, and his grandparents because his grandfather does whatever it goes, you know. I mean, he's an older man. He's really old. I mean, he goes to the next door neighbor. He'll go walking over here. He'll go wherever, and the grandmother's just here, you know, cooking, or cleaning, washing the clothes, or doing something in the house. It's never really, like really doing anything else. Or her to tell him, "Don't do

this," or "Don't go here." She won't tell him anything.

And with Raul's mom, it's the same thing. The dad goes to work, comes home, he'll go with his friends, and that's it. You know, it's like -- She'll tell him once in a great while, you know, but it's like she'll play around with him, and I'm not like that close to his dad to actually like -- You know, now I'm starting to like understand when he's in a good mood, or like when you can talk to him, or when he approves of something. I'm starting to barely learn because it was just like he always looked like he was mad. He would look like he was in a bad mood. But he just -- He does whatever he wants to do. You know, he'll go any time he pleases. Come home any time he pleases. You know, and it's like, he won't say nothing. And his mom doesn't say nothing. She won't tell him anything.

And I think that's what he (Raul) wants me to do, is to go ahead and work, clean, cook, watch Emmy. And if he wants to go somewhere, just shut up. (laughs) And I won't do it.

Alicia's short hand for what Raul wanted her to do, "just shut up," revealed her negative opinion of the behavior. Her blunt remark, "And I won't do it," revealed her unambiguous stance. She rejected the behavioral scheme outright.

Alicia was not afraid to regularly attempt to hold Raul accountable to his involvement in the family. For example, when discussing whether or not Raul would join the army, Alicia pointed out the importance of Raul's presence in San Tomas to help raise Emmy. This practice of voicing her opinion, while first taught by her maternal grandmother to her mother and on to Alicia, may have had it's practical beginning in her relationship with Raul when she first became pregnant with Emmy. At that time, Raul suggested

that Alicia abort the pregnancy. Alicia, however, let Raul know that she had no intention of aborting even if Raul wouldn't be there for her and the baby as a father and spouse. Later Raul realized he wanted to be involved in his daughter's life. Still, Alicia was unsure of whether he deserved the honor of Emmy carrying his name. Raul was infrequently physically present in Alicia's life at the time of Emmy's birth and afterward. This presented a dilemma for Alicia because her father, noting Raul's absence, voiced his desire that Emmy be given his family name. According to Alicia, her father wanted to withhold the honor from Raul because he was not acting in a manner that warranted it. However, despite pressure from her dad, Alicia decided that she wanted Emmy to have Raul's name even if that violated her father's wishes.

These actions revealed Alicia's ability to overcome what she perceived as the expectations of her father or those of traditionally sanctioned behaviors for women and men. She regularly evaluated the situations of her world, balancing what was expected and what she felt was the best approach.

Alicia also attempted to derail Raul's inclinations towards the traditional gender norms. By frequently reminding Raul of how he and his sisters complained about their father's history of detached, distant, and absent parenting, Alicia reinforced her rejection of the "Mexican

way" of Raul's family, especially in relation to parenting. She regularly encouraged Raul to give up idealistic notions of the 'traditional Mexican family,' that was based on traditional gender roles by reminding him that he had to "learn the way" that his dad was, as if it was something he consistently forgot. It was as if Alicia encouraged Raul to remember what he didn't want to become or what she didn't want him to become.

The taking care activities of Raul's father mainly included money. Taking care of the children meant providing money for their needs. Alicia understood that in their family system, the "lady" took care of the children while "the man doesn't have nothing basically to do with it other than works and gives money."

Alicia's family was considerably different from the pattern of Raul's family. Alicia's expectation of Raul was that he would join her in emulating HER parents who she described as "always there, whenever we needed them." Although Raul's mother was physically present, she did not communicate much with her children. Raul's father was rarely around to be with his children but he provided money for them.

A: ... with Raul, it's been more like money. You know, his dad would just -- They said, "Oh, I need this." He'd give them money. You know, and it's like my dad didn't have money to give us. So the only thing he could do was just talk to us, or just whatever he could do, you know. Like with money, we just -- We already knew that we didn't have the money, and it was like he never bought us real expensive things. We dealt with

what we had, and with Raul, I think they got used to the money thing. You know, they didn't ever really have somebody there to talk to them, to tell them what to do or anything. They just had their parents giving them money most of the time.

Within the traditional system modeled by Raul's family, it was Alicia's impression that neither his mother nor his grandmothers were openly communicative. According to Alicia, Raul's mother did not discuss his father's activities with him or tell him any of her thoughts or feelings about his behavior unless she did it within the context of teasing and playfulness, and then only rarely. This was quite different from Alicia's impression of her own mother and grandmother.

Alicia sought to emulate the patterning of her mother's behavior and in so doing acknowledged the qualitative distinctions between Raul's family and her own. Alicia described her father as always being available and in close proximity to his children and her mother as someone who, "talked to us a lot."

Alicia recognized Raul's father as the patriarch of his family but she rejected the patriarchal system for her own family. Thus, Raul's idealistic notions of a traditional Mexican family based on his parent's example were at odds with Alicia's expectations. Alicia's desires for Raul were for him to "see" Emmy at each stage of her development, to witness the things that she learned to do as she did them. She said that she expected Raul, "to help me watch her" as

she grew up. This activity of watching required presence. This was in contrast to her perception of Raul's family was that, because of the traditional norms, the father was physically absent and relationally uninvolved.

Interculturations

Alicia was constantly involved in interculturations. Sometimes Alicia and Raul's personal background meanings meshed smoothly and sometimes they clashed which led to an argument with Raul or misunderstandings between her and her dad. There didn't seem to be anything that wasn't influenced by interculturations. They seemed to show up all the time because Alicia seemed aware of many differences in background meanings, as well as practices, and attitudes. From birth control practices, to weaning practices, to cleaning or clothes washing practices, to cooking. Alicia sometimes embraced "their way" and other times did things "her" way.

Alicia creatively worked/ negotiated with Raul how they would handle things. For example, she said, "I can just kind of find my own way of getting him to see it my way. And then he understands, I think, a lot more the way I think."

Alicia noted that the gender norms in Raul's family set up what was supposed to be the behavior of "the lady" of the family. This logic was often applied to Alicia. For example, Raul's grandma told Alicia that she should not use

birth control. In discussing this issue, Alicia strung together her mother-in-law's laundry practices, her child feeding practices, and the family's view on birth control as if they were connected on a clothesline, one after another.

A: I think I'm kind of learning both because the same way my grandmother was with my mom is the way his mom is with me. She kind of --

M: The way your grandmother was with your mom, okay, is the way our mother-in-law is --

A: With me. She kind of -- She'll tell me, "Come here," or I'll tell her, "How do you make this?" And she'll say, "Come here," and she'll show me. She'll tell me what to do with my clothes. She says, "Put them to soak before you wash them. Don't just wash them like that. Put them to soak for like a day so they come out really clean." I mean, she just -- Just the way she is, she shows me different things.

M: How does that feel?

A: It feels good. I like it. I mean, I don't think I liked it when I first moved in because I thought like she just was saying that I wasn't doing it the right way, but now she's just trying to help me, and she helps me a lot more with my daughter so I just kind of appreciate it more, and it's like -- She just -- Basically I like it now. I more understand what she's doing, and then like with my mom, I didn't get to learn that much from my mom. I just kind of seen what she did and remember what she did. But just from the way that I feel myself, I'll just go by that. Like the way my mom brought up us. The way she showed us how to do things is the same way I expect to bring her up.

But at the same time they have a different way of bringing up their kids. And it's like I expect her to -- I expected her to be off the bottle by 1. They expected her to be off the bottle by the time she was ready. She could have been five years and still be drinking a bottle. To them, it didn't make a difference. I said, "no." When I first moved in, she was only three months. I wanted to give her baby food. I mean, I would come home, and they would be feeding her soup. They were feeding her regular food, and I was like -- It was just like a lot more -- I didn't like it. Now I just kind of -- I understand the way

they do things now, I guess, a lot better. Not everything. I'm still kind of confused about some things that they do. But -

M: Like what's confusing?

A: Just the way they are. The way they believe sometimes. The older people. More like the man can do whatever, you know? It's like the lady is automatically supposed to do this, and to me, it doesn't seem right. It's like automatically, "No, that's not right," you know. With us, it's like after I had my son, I didn't want to have another baby. I didn't want to have an accident. I didn't want to get pregnant, you know, just because we weren't using anything. Automatically I went on something. The grandmother said, "Don't worry. You're so young. You can have as many kids as you want. Don't use anything. Don't use any of that." I was like, "What do you mean, don't? No. I'm not going to do that!" And they think it's okay, and for us, it's like I don't think it's okay. I think you have to basically just do it how you feel, and they just, "No, that's fine. You can have as many kids as you want." No! (laughs)

The last section of this narrative, Alicia discussed what she saw as "automatic" for Raul's family which was different from what was "automatic" for herself. She noted that in Raul's family, the man's autonomy was assumed and the woman was "automatically supposed to do" certain things. Alicia described her immediate reaction to this norm as, "No, that's not right."

Various taken-for-granted practices for members of Raul's family (laundry, childcare, feeding the baby, weaning the baby to a cup, and birth control use) showed up as disruptions to Alicia's background meanings. Alicia was able to integrate her coping strategies with their practices. She was able to accept the ways that they were different from her without completely adopting their

practices. Some elements of her coping in the intercultural mixing of practices and spaces included the following:

1) Alicia was able to remain connected to and interdependent upon Raul's family in a socially integrated manner rather than in an all or nothing manner (i.e. she does not reject the traditional practices outright nor does she disassociate from them because of their traditional beliefs or practices, e.g., related to laundry or feeding the baby). Although she saw their practices for washing as "weird," Alicia was able to participate the intergenerational teaching passed from mother-in-law to daughter-in-law.

2) Alicia was aware of the family's traditional practices related to birth control as well as their expectation that she refrain from using birth control in order to have as many children as she wanted. Rather than becoming threatened by the norms in Raul's family, Alicia just relied on her belief that "you have to basically just do it how you feel," and maintained her practice of using birth control to limit conception despite the proscriptions set before her.

3) Drawing on the example of her mother who learned things by going to Mexico and seeing how people do things there, Alicia was able to learn from her mother-in-law. This not only taught her about traditional

Mexican ways, but it also afforded her the chance to enjoy learning from a mother figure since she, as she put it, "I didn't get to learn that much from my mom."

Despite Alicia's understanding that she learned from her mother-in-law in the same way that her mother learned from her mother-in-law, the similarities of their mentoring was limited to cooking and cleaning. Grandma, on the other hand, added to such task oriented teaching by giving Lola permission to express her feelings about her husband's unacceptable ways. In fact, Grandma encouraged Lola to speak her mind to Pedro. In contrast, Raul's mother did not mention such things.

However, Alicia seemed to have appropriated for herself, the teachings her mother received from Grandma. In fact, when Alicia described Lola's ability to navigate among "their way" and "this way" she seemed to be talking about herself. Alicia did not hold back from telling Raul what she thought about things or how she wanted to live.

On Parenting: "They have a different way"

The experience of weaning Emmy from the bottle revealed how Alicia navigated through the traditional Mexican practices and her untraditional practices to raise her daughter the way she wanted to without estranging Raul's family. During an interview, in the context of telling me about her attempts to wean Emmy from the bottle, Alicia acknowledged that "they (Raul's family) have a different way

of bringing up their kids." Alicia disagreed with the family's practice of allowing children to wean themselves from the bottle whenever they were ready. So, she took Emmy off the bottle when SHE wanted to, at age one. However, when Alicia began working, the family put Emmy back on the bottle. Consequently, Alicia allowed Emmy to have the bottle for two more months. Then she took the bottle away again, because, as she put it, "they just started rotting her teeth" by putting Emmy to sleep with the bottle in her mouth. Although Raul just wanted to let his family have his way, Alicia held her ground. She described their (Raul and Alicia's) process of working out their parenting as follows.

A: ...I've told him, "No. I want it like this." And then we'll let it go to a certain point. Usually I can talk him into it. Usually. (laughs) But most of the time like when we got off the bottle, he was like, "Just leave her. Just leave her." I was like, "Look at her teeth. Look at her teeth, and then tell me let it go." He just said okay. I can just kind of find my own way of getting him to see it my way. And then he understands, I think, a lot more the way I think. So, it's like he trusts me to say what to do with her. So he just kind of goes by anything -- If he doesn't like the way I say something, he'll say, "okay. We'll just do what you want." He won't fight me on it. Which is helpful.

Raul agreed with Alicia's plan to take the bottle away from Emmy one week end. When Emmy realized her parents kept giving her fluid with a cup she began to cry for the bottle. This continued "all night" until Emmy no longer wanted the bottle. Alicia and Raul packed away all of Emmy's bottles so that Raul's family members couldn't get to them and told Raul's mother of what they had done. Knowing that Emmy

cried all night, Raul's mother replied, "Okay, we might as well do it then," and she no longer gave the bottle to Emmy.

For Alicia, this was a successful working out of her preferences in raising Emmy in the midst of differing traditions of parenting. Alicia eventually asserted her desires about weaning Emmy from the bottle and, with Raul's help, received support from her mother-in-law even though the practice of cup feeding was against her mother-in-law's practices. It may appear as a small victory for Alicia, but in fact, it is a negotiation amidst changing practices.

A Both and Inbetween Wedding

Raul and Alicia were married in a completely bilingual ceremony in a neighborhood Catholic Church just before Alicia's 21st birthday. It was a beautiful, elaborate wedding with 14 bridesmaids and 14 groomsmen, three flower girls, three ring and coin bearers, and 28 godparents (padrinos). The following is from my fieldnotes from their wedding day.

5/11/96 Sacred Heart Catholic Church, San Tomas, CA

The mass and wedding was completely bilingual. The priest directed the order of the ceremony speaking in Spanish and English, switching every two or three sentences without interpreting what he said in either language. It was as if he expected everyone in the congregation to be bilingual in Spanish and English.

The priest acknowledged the commitment of "this family" before the vows were said and named each member: Raul, Alicia, Emmy, and Baby Ernesto. Then the priest recited the vows, to Raul in Spanish and to Alicia in English. Raul proceeded to repeat the priest's Spanish words, saying his vows with much seriousness as did Alicia in English. Then again, the priest recited and Raul repeated the prayer over

the rings in Spanish and Alicia did so in English. When the priest blessed them, he blessed her in English and him in Spanish. The guests and family assembled for the wedding were silent and solemn throughout the ceremony.

When Alicia was saying her vows after Raul had said his, she started to cry and hesitated long before she could speak. They stood there holding hands and looking at each other. Raul just smiled at her while she wiped her tears away. Many of us in the congregation wept at this point. From my pew, my mind swirled with thoughts about the meaning of this wedding. I thought about all that Alicia and Raul have been through in their 21 years of life (two unplanned pregnancies, Baby Ernesto's death, break ups and reunions, the weaving and mixing of two cultures).

During the mass, Mariachis sang in Spanish, song after song in Spanish. After the prayer over the bread and wine (the long preface to communion) the Mariachi's were to respond "Amen" to the priest. To my surprise, however, they sang it Southern Negro Spiritual style!

The padrinos (god parents) came up when directed to. One set gave coins (arras) to Alicia while the priest prayed that Alicia would receive and honor what Raul provided for the family, another pair gave a rosary and prayerbook to Raul while the priest prayed that they would each "receive the word of God." Then Raul's grandparents (who were in their 80's) came up each with a candle that they gave to the priest who lit them from a large 3 foot candle that stood to the left of the altar. The priest handed them back to the grandparents. Then the grandparents handed the lit candles to Alicia and Raul (male to male and female to female). Then Alicia and Raul lit the wedding candle on the altar while the priest explained the symbol of the candle and the light by which they would walk in their lives. Then the last pair of godparents put the wedding lasso (rope) over the shoulders of Raul and Alicia, as a symbol of their marriage, while he prayed for them.

At the end of the ceremony, as is traditional with Catholic weddings, Alicia and Raul took flowers as an offering to Mary the Mother of Jesus. They walked over to a large painting of Our Lady of Guadalupe while the Mariachis played a slow, melodic song. Emmy walked with them to the altar in front of the painting. They stopped, laid the flowers there, and returned to the front of the altar once more. The priest introduced them as man and wife and the large wedding party began their exit.

The wedding was marked by various symbols: the arras, the rosary and prayerbook, the candle and firelight, the lasso, the rings, the flowers to the Virgin. The traditional prayers, the traditional symbols all seemed to mix with the practical meaning of this young couple, making their way in their worlds. The language itself, served as a poignant symbol. Said half in English and half in Spanish, this wedding ceremony represented Alicia's reality: a world that was "both" and "inbetween".

Alicia: In Review

Alicia explained that she was the daughter of a woman whose grandparents immigrated from Mexico. Thus, her mother was vitally involved in negotiating the shifting cultural ways in the Borderlands of her world. Her example equipped Alicia for dealing with the negotiations of her current life. Like her mother, she married a man from Mexico. Living with his extended family who all immigrated from Mexico, Alicia dealt with intercultural mixing and clashing as part of the mundane practices of everyday life, just as her mother did. The negotiation skills for dealing with loved ones who took up daily chores in "weird" ways had been cultivated in Alicia since her childhood. With Raul's family, Alicia learned to give and take when it came to cultural practices of washing, cooking, cleaning, and childrearing.

Gender Identity

Alicia did not invoke the idealized gender norms as an attempt to sanction her gendered activities. The traditional norms for gendered behavior seemed to be just that to Alicia: traditions. She considered them to be normative for "over there" but she considered them to be "weird" when applied "here." However, she did participate in the intergenerational practice of "calming" her man through admonitions to change his behavior because he "has children" now as her mother did. She also reminded Raul that he must be careful to avoid replicating his father's (traditional) pattern. She substantiated her own ways of everyday living (ways that did not always adhere to the traditional idealized gender norms including her ways of dressing, raising Emmy, cooking and cleaning, working a job, and sharing her opinions), by invoking her mother's practice of "doing what she thought was best" and her paternal grandmother's way of communicating (i.e. "make sure you let him know how you are feeling"). Thus, Alicia's way of coping in relationship with Raul, who had some traditional expectations, is best expressed in the word, "negotiation." Alicia expressed her concerns to Raul through "talking" and attempted to reach a conclusion by discussion.

Taking Care

Alicia's central strategy for taking care was to integrate what she was able to glean from her mother and

grandmother, what she had learned from experience, and what were the expectations of Raul. The everyday work of integration and negotiation, balanced with an ability to value what "she thought was best" even when Raul disagreed, was the main way that Alicia took care of herself, her marriage, and her daughter.

Alicia, Lorena, Gloriana:

Similarities and Distinctions

Intergenerational Communication and Learning about the Body

While neither Gloriana nor Lorena were warned that they would experience vaginal bleeding with menarche, Alicia's mother did tell her to expect a period. She sanctioned the event as "normal" well before Alicia experienced her first period. Although communication was not a pressing topic among those that Alicia discussed in relation to "taking care," she did reveal a sense of embarrassment about her body in relation to talking with her sisters about her first period and her first pregnancy. While Gloriana and Lorena stated that they learned a lot about their bodies in school, Alicia noted that a feeling of intimacy without embarrassment in the presence of the person who taught her things about her body was a key element of feeling comfortable learning about personal, bodily issues. Although all three women admitted that they learned about condoms in school, none of the three women reported the ability to obtain and use condoms correctly to prevent a

pregnancy. The first pregnancies of all three women were unintentional (Alicia at age 16, Lorena at 20, and Gloriana at 17).

Mothers-in-law

Neither Lorena nor Gloriana mentioned their mother-in-laws in their narratives, perhaps because they did not live with them or because their own mothers were still alive (recall that Alicia's mother died when Alicia was 12 years old). The mother of Gloriana's husband (Blas) lived in San Tomas although she did not mention her. The mother of Gloriana's boyfriend lived in Mexico, consequently, Gloriana had never met her (since Gloriana never travels to Mexico). Alicia, on the other hand, spoke often of her mother-in-law. Although she did not have a sizable effect upon the decisions Alicia made in relation to birth control or breast feeding (indeed, Alicia did not follow her advice on either topic), her mother-in-law did have an important role in Alicia's life as a culture broker of Mexican ways which was not the case for Gloriana or Lorena. Alicia's mother-in-law taught her about some of the traditional skills of a wife: how to cook Mexican dishes and how to do laundry more effectively.

Divorce

The issue of a break in a marital relationship arose for all three women. However, the meaning of a divorce or separation had different connotations for the three women.

It opened up possibilities for Gloriana, closed many for Alicia, and loomed as a threat in Lorena's life.

Gloriana desired a divorce and left her husband three times before she finally insisted upon a divorce. She worked out a custody situation that she was comfortable with (her two sons live with her during the week and with their father on week ends). Although this disrupted the cultural norms, Gloriana was determined to get her divorce and become independent from a man.

Although Raul and Alicia were not legally married, Alicia had to deal with a separation after the death of their second child. Alicia actively worked to persuade Raul to return to her. She clearly wanted a reunion of their relationship. Within a few months, the two moved into the renovated garage of the home of Raul's parents. A year later, at the time of the interviews with me, Alicia spoke confidently about their relationship. She explained that she knew Raul wanted to be in the relationship, as she did, because he would have left by now if he was going to. Divorce was not something she feared.

Lorena, in contrast, spoke often about the ever-present possibility of divorce. Although she did not want to ever become a divorced woman, Lorena seemed to rehearse a prepared-ness for divorce just in case it happened (e.g., she and Alex had previously decided that neither of them should undergo sterilization in case they want to have other

children in the future with other partners). Lorena's preparation for the unfortunate event of a divorce caused her to devise a plan to deal with her fear of losing one of her children. For Lorena, the most salient aspect of the break up of a committed relationship meant was not separation from her husband (as it was to Alicia) or the attainment of independence (as it was to Gloriana). Rather, a divorce would bring with it the threat of babies being separated from their mother. This, in addition to separation from Alex, was the issue most pressing for Lorena. Her past history of being separated from her mother as a baby and from her grandmother at age 11 was something she did not want to have to deal with again. In the event of a divorce, she would not let Alex take either of her two daughters.

Women as Property

The ways that the three women dealt with the implications of the traditional, regulatory, Mexican gender norms differed. In particular, the tenet of women as property of husbands or parents was taken up in different ways by Lorena, Gloriana, and Alicia. Lorena seemed to assume that a man or parent had rights over a woman if he was providing her with food or clothing. She dealt with this tenet by marrying a man she trusted, thereby entrusting herself to a "owner" who would respect her.

Gloriana, on the other hand, resisted this tenet. The culmination of her resistance was played out in her violent fight with her boyfriend. Using first her voice and her fists and then her plan to get him into 'recovery,' Gloriana resisted his violent attempt to "take care of what was his."

While the issue of the 'rights' of a woman's provider was real to Lorena and Gloriana, Alicia did not seem to expect nor perceive that there was an element of ownership involved with the conjugal couple or parenthood. She expected that a father would financially provide for his children in a traditionally Mexican home, but she did not have that singular expectation of Raul. Likewise, Raul did not disapprove of the fact that she held a job and provided an income that complemented his. He was also supportive of her agenda to go to school in order to expand her employment opportunities and salary base.

"Taking Care" is Using Birth Control

All three women listed the use of birth control as a way of taking care of themselves but the way the three women understood their partners in relation to the use of birth control differed. Lorena noted Alex's cooperation while Alicia and Gloriana seemed to take for granted their partners' cooperation related to birth control. Lorena highlighted Alex's status as "a proven man" who did not expect to have sexual intercourse when they ran out of contraceptives. Lorena heralded his "difference" as unusual

for Mexican men. She noted that she felt very fortunate that she was partnered with a man who took on the responsibility to "take care" with her.

Gloriana and Alicia both noted their own choices to use birth control but they did not mention the participation of their partners in the process of choosing or using a contraceptive method. Alicia spoke assertively about her expectation that Raul would cooperate with her agenda to use two methods, at once in order to be sure that they would not become pregnant.

Gender Identity and Taking Care

A further elaboration of the similarities and distinctions of Alicia, Lorena, and Gloriana in relation to gender identity and taking care will be addressed at the end of Chapter 10.

Conclusion

Alicia was similar to Gloriana in that she distinguished herself from women "over there" and she was similar to Lorena in that she partnered with a man who was open to more egalitarian styles of everyday living. However, she was different from both women in that her main role model, her mother, was not an immigrant from Mexico. Thus, she took up negotiations as a daily practice in an immediate family wherein her mother had already negotiated before her. She was not the first woman to contest traditional practices with her parents, as was the case for

Gloriana and Lorena. She also had the skill for resisting interpellations to be a traditional subject of gendered roles (e.g., when her father scolded her for not having food ready for Raul, she retorted, "He can cook himself something to eat. He's not disabled.") This was unlike Gloriana for whom the resistance was met with violence, or Lorena for whom resistance never showed up as an option until she partnered with a man who did not require strict adherence to the norms. Alicia's way of negotiating was contingent upon her understanding of "both" Mexican and Mexican American cultural ways as well as a vantage point that was "inbetween" them.

Chapter 10

Ines: "I can protect all of them"

I first met Ines through her daughter who received prenatal care at the clinic where I was recruiting participants for my research. Ines was intrigued by the description of my research and readily agreed to meet with me. I first visited her on a hot Sunday afternoon at her home in south San Tomas. We sat in her family room, drinking coca-cola and talking about her life. She had a warm, sociable demeanor that conveyed a certain vulnerability and strength simultaneously.

Through Ines' stories and discussion I perceived that Ines learned to protect herself from others who might hurt her through a variety of defensive strategies during her childhood and adolescence. Later in life, she expanded her strategies in order to protect her children from the dangerous agendas of other people. Thus, Ines understood herself as a "protector." This self interpretation influenced the ways she defensively resisted interpellations from others in her relational matrix. Ines also invoked a system of covert cultural gender norms as resistance to the expectations of men in her world who drew on traditional idealized norms to regulate women's behavior. Finally, Ines also resisted the power of societal and familial expectations (as well as acts of domination) by interpreting herself as a woman with special abilities to know otherwise

unknowable things. By assuming the special status of a woman who may be a "witch," various possibilities for self interpretations outside of the regulatory gender norms opened up. The narratives and interpretations that follow will provide opportunities for considering Ines as a woman who takes care by defensive resistance, even as she takes up her gendered identity within context.

Personal History

Ines was born in Sapino, Texas, the 6th of 7 children. Ines' parents, Maya and Arturo, were both born in Mexico as were their first four of their seven children. Maya married Arturo when she was 14 years old. They moved to Texas where their youngest three children were born. While Maya was still pregnant with their youngest daughter, Arturo died of "an enlarged heart." Ines was only one and a half years of age at the time of Arturo's death. Maya worked as a motel room maid in Sapino while she raised her 7 children as a single mother. She and her children also worked by picking different crops locally to supplement Maya's earnings.

When Ines was 10 years old, her mother remarried a man, Nando, who was also a Texan. He was divorced from his first wife and his children lived with her. So when he came to live with Ines' family he brought no other children. Ines' stepfather Nando did not pick in the fields with Maya, Ines, and her siblings. His work involved repairing appliances. Ines soon became Nando's victim of sexual abuse. She hated

his fondling and abuse. He threatened to hurt her siblings if she told anyone what he was doing. Unfortunately, she lived with her mother and stepfather, and thus could not avoid seeing her stepfather daily.

Ines experienced her first period when she was ten years old but didn't tell anyone about it. She used toilet paper to soak up the blood in her panties. After a couple months, Ines asked a teacher at school about the bleeding that came every month. The teacher explained that it was her period. She told her how she needed to use pads and warned her against "letting anyone touch you" because it could lead to pregnancy. Ines then confided that she was menstruating to her older sister. She laughed at Ines because she was so young to have a period and to be developing breasts.

Ines was worried about what her teacher had said about "touching" leading to pregnancy because she knew that her stepfather had touched her. One day, when Ines was about 11 1/2 years of age, Ines was feeling particularly angry about her situation. She remembers being in the kitchen when she heard a voice that told her to "get something and hit him" when her stepfather came to abuse her again. She saw a rolling pin and grabbed it when her stepfather came to her in the kitchen. She hit him in the head and jumped on his back, continuing to hit him over and over and over again. He never abused her again after that. She however, noted

that this was a turning point of sorts for her. After this incident, Ines said she became very stubborn and "aggressive" and would not listen to anyone. She said, "no one could tell me what to do."

Ines told me the story like this,

I: After I hit him with the rolling pin, he was so scared of me, even up to date. [He's still scared of you?] I just look at him, and he just puts his head down because he knows. He knows, and I told him, "You're not ever, ever again going to hurt nobody."

And I told my mom I would kill him. If I would find out he would do something to one of my nieces or my granddaughter or my grandson, you know, like I said I wouldn't care if I end up in prison for the rest of my life. You know, they have to be stopped one way or another. They do. They do, and I -- You know, how sometimes they show on TV So and So molested, you know, kids, and stuff. It's, you know, I cry. [Yeah.] I cry because they're little, and I know they can't protect themselves because I went through it. [Uh huh.]

MS: And during those -- Before you hit him with the rolling pin, you didn't tell anybody?

I: No, I was scared. I was scared to tell anybody. And then he told my uncle, he did. He told my uncle that I was letting him do things to me. (quietly) And my uncle did it, too. I seen them talking, and when I seen them talking -- We were visiting my aunt. When I seen them talking, they just looked at me, and I knew what was going to happen to me. I knew it.

Ines explained that after the incident of abuse with her uncle, Ines never went back to his home for family get-together's of any sort. Then, when Ines was 12, she and her family moved to California. They picked tomatoes for an income in the Sacramento area. Soon they settled in San Tomas.

When Ines was 17, she became sexually active and became pregnant. She remembers the date of the conception because she said, "that was the only time I ever did anything with anyone." The father of the baby was another local teenager. She described the one-night-affair as, "one of them flings, (when) you want to get back at your parents." She recalls that she naively told her mom about "what she had done" not realizing this could mean she was pregnant. Her mom "kicked her out" of the house.

Ines then moved to Texas to live with her oldest brother and his wife although she didn't realize she was pregnant. Her sister-in-law noticed that Ines was looking "pregnant" and took her to the doctor. Ines then found out that she was six months along. It was through this experience that Ines learned about sex, pregnancy, and her body. Neither her mother nor his sisters had ever talked with her about these subjects and she received no formal sex education in school.

At the time of the pregnancy, Ines's mother insisted that the father of the baby marry Ines in order to "save the family name." Consequently, Ines and the baby's father had a "shotgun" wedding in Texas (because they wouldn't let 17 year olds marry in California). After the wedding, Ines' mother took her back to California. There Ines resumed living with her mother. Ines and her legal husband never actually lived together and did not continue a relationship.

They divorced one year after the baby was born. Ines' son has never known his father although he bears his name.

Mental Illness or the Curse of a Witch?

When her son was 2 months of age Ines met her "first love," Daniel, who was a Mexican man living in California. Ines lived with Daniel for nearly three years. He became the father of her second child, a daughter named Lori. When Lori was two years old, Daniel became "ill." Ines described his illness as something that made him act like a "wild animal." He was very dangerous, violent, uncontrollable, and he would hurt people if they got in his way. Daniel was evaluated at the local County Medical Center and was admitted for three weeks but Ines explained that the doctors couldn't find "anything wrong with him." Daniel wanted to be with his family at this time, so Ines left her son in the U.S. and went to Mexico with him, despite the fact that she did not have a passport. She and Lori stayed with Daniel and his family.

However, Daniel's parents determined that Daniel's illness must be due to the work of a witch because no doctor could even diagnose his problem. They accused Ines of being a witch who had put a spell on Daniel to make him "crazy."

Romanucci-Ross (1973) found that Mexicans in the rural village she analyzed believed that a woman who could cause a man to do her bidding could also destroy his perception or cause him to fall ill. A woman who was determined to have

accomplished this was considered a witch. In addition, Romanucci-Ross (1973) concluded that the invocation of witchcraft could be regarded as a form of violence, retaliation, or control on the part of the witch or the person who hired a witch to do witchcraft for them. It was also a form of conflict that expressed the struggle of women over men. Accusations of witchcraft occurred most often where family instability was greatest (Romanucci-Ross, 1973).

In this situation, Ines was being accused of having bad intentions in relation to Daniel, woman over man. Daniel's father demanded that Ines leave their home and never see Daniel again on the grounds that she was a witch who was doing harm to his son. Rather than fight the accusation and Daniel's family, Ines complied with his wishes, took her daughter, left Mexico, and came back to San Tomas. Ines thought that Daniel's father's actions were due to bad motives. She tried to understand why he would put together such a story. She wondered if Daniel's father did this because he was attracted to her and didn't want Daniel to be with her.

A few months after Ines left Mexico, Daniel's father sent Ines a letter stating that Daniel was dead. Ines assumed the news was true. However, a year later, Daniel came back to see her in San Tomas, California, proving that his father's letter was simply a lie. At that time, Daniel

and Ines got back together and lived together for a short while. However, they soon broke up because they "fought so much." Daniel was physically abusive with Ines and she responded to his violence by fighting back.

About seven years later, Daniel married a woman 12 years his senior in order "to fix his papers." Ines thought he did this so that he could eventually come back to her. But in fact, he never left his wife.

Two months after my first interview with Ines, Daniel committed suicide by hanging himself. Ines called me to tell me about the death. She explained that it occurred 20 years to the month after he had first gotten so ill while she was living with him. Ines was astounded and perplexed by these facts. She wondered aloud if his father had put a spell on him 20 years ago. She and I discussed the possibility that Daniel had a seasonal/cyclical mental illness.

When Daniel's brother called Ines to tell her of his death, Ines recalled his father's request that Ines stay away from Daniel, so many years ago. She pointed out how, despite the fact that she stayed away from him, he still committed suicide. She felt that this would prove that she did not "put a spell" on him. Because Daniel committed suicide shortly after a trip to see his parents in Mexico, Ines wondered if his father told Daniel something to make him particularly depressed and suicidal or if he had

disclosed to Daniel the reason for his illness. She told me she would never know the answer to that question.

Ines and Lori drove to Sacramento to attend the funeral where they were both welcomed by Daniel's family. They had not seen Lori, Daniel's daughter, since she was a toddler.

While standing in front of his open casket at the wake, Ines tenderly stroked Daniel's hair. His parents were standing nearby and saw her gesture of compassion. They came to Ines and embraced her. Their warmth towards her assured her that they no longer believed that she had any malintent in relation to Daniel. She said no one talked to her about any spells.

Other people in Ines' world have suggested that Ines was a witch because she "knows" otherwise unknowable things sometimes. This label doesn't seem to bother Ines. Ines explained that she "knew" that her first baby would be a son who would "give me my grandson," and that her second baby would be a daughter "who would give me my granddaughter." This in fact, Ines explained, did occur.

Ines' knowing revealed to her more recently that her son's relationship with his current girlfriend would be the cause of his arrest and jailing. Ines had a dream that tipped her off to this danger. Although she did caution her son, he refused to believe her. He thought that Ines was acting this way just because she didn't like his girlfriend.

The fact that he did end up in jail reinforced Ines' understanding of herself as especially gifted.

A "Breakdown"

Ines explained that when she was in her mid-twenties, she had a "nervous breakdown." She said that it was caused by "everything I'd been through." Shortly after the "breakdown," Ines walked in on her stepfather when he was sexually molesting her daughter who was 7 at the time. Enraged, Ines grabbed her stepfather by the neck, picked him up, and carried him to the other end of the living room. She told him if he ever touched her child again she would "kill him." She said she didn't care if she had "to be in prison for the rest" of her life.

After this incident, Ines called the Veteran's Administration and told them of her stepfather's tendency to abuse children. "They" admitted her stepfather in a hospital for a year and then discharged him. Ines remembers that "they" decided he was "ok" although she felt that he was not rehabilitated at all. She was angry with the VA staff because they told her that "raping defenseless girls and women" was a common practice during the war and that her stepfather was manifesting the behavior because of war memories. Ines thought this was a "crazy" excuse. She explained that she continued to "hate" her stepfather.

Determining Who Should Mother

At the time of Ines' physical confrontation with her stepfather when her daughter was seven years old, her mother called the police who came and took Ines to "a hospital" and put her children in foster care. Ines said her mom did this in part because she wanted to get custody of Ines's son and in part because she thought Ines was too physical in her discipline of her kids. Ines said her mom thought she was an "unfit mother." Ines however, met with her social worker and requested that her son and daughter be kept together in foster care. She also requested that custody not be granted to her mom for either or both of the children. She said this was because of her fear of her abusive stepfather. Thus, her son and daughter were placed in an outside foster home together.

Ines thought that her stepfather never touched her children again after her physical confrontation with him. Meanwhile, however, Ines was homeless for 10 days (at which time she was living under a bridge). She continued to work with her social worker, got a job, and saved money to get an apartment. Ten months after her children were removed from her custody, she was granted custody of them once more. She felt she had no choice at that time, but to go on welfare so that she could quit her job in order to provide daycare for her children. Provision for daycare was required before a

person could be granted custody of their children. Ines then spent her time as an unemployed, full time parent.

Strength and Protection: A Self-Interpretation

Ines told me multiple times that she was a "strong woman," during interviews and phone conversations. Her proclamations were indeed convincing: "I am a strong woman;" "I'm the toughest (sibling);" "I can protect all of them because I have;" "I'm the strongest one."

Indeed, many of Ines' stories uncovered instances of physical strength and aggression, even when she was a child. For example, as a child Ines would beat up other children who would make fun of her and her siblings by calling them "las solitas," (the children who are always alone). As an adult Ines was not afraid to fight back physically when Daniel and another boyfriend were physically abusive her.

Ines was also strong in character. For example, Ines brought the family to her mother's death bed at a time when her mother was "hanging on" for some unknown reason long after the doctors thought she would have died. After Ines decided that all of her mother's children needed to be present so that she would be able to "let-go," she drove to pick up the only absent sibling. Her mother died within 15 minutes of the last daughter's arrival in the hospital room. In addition, Ines kept one of her mother's dying wishes despite the personal difficulty of the action. That is, Ines promised her mom that she would apply makeup to her

face after she died for the wake, because she had always been the daughter who put her mom's make up on for important occasions or parties for years past. Their hope was that after her mother's death she would look more natural for the showing in the casket at the wake, the Rosary, and funeral. So, Ines went to the funeral home the day after her mom died and put on her make-up. She even changed the nail color that had been applied to her mother's fingernails, because the color wasn't one her mother typically used. Ines said, "This was the hardest thing I had ever done in my entire life." She said, "People told me I was the strongest one." Later she asserted, "You know, I was the strongest one."

Despite Ines' spoken reminders that she was a strong woman, her narratives reveal her self-interpretation as a "protector" was, in fact, a more central identity issue than that of a "strong woman." That is, embedded in Ines' stories were multiple examples of ways that Ines took up being a protector. Her concerns and intentions were often rooted in a goal of "protecting."

Ines understands herself as a protector of herself, her children, and her siblings. Her ways of taking up her identity as a protector included physically fighting with her stepfather first to protect herself as a child and her daughter when Ines was an adult. By calling the VA and confronting both her mother and her stepfather, Ines

attempted to protect all of her nieces and siblings. She also talked with all of them about the abuse.

Ines also took up her protector-identity by warning her son about her premonition that he would end up in jail. She actively protected her daughter and granddaughter through her provision of a place to live for an unlimited time period. Ines also saw her avoidance of marriage until her children were grown as an act of protection; Ines was protecting them from possible sexual abuse from a potentially abusive stepfather.

Three or four years ago, Ines found out that her stepfather began sexually abusing her other two sisters after she hit him with the rolling pin twenty years ago. Ines was deeply troubled by this reality and wept as she discussed it with me during the interview. Just talking about her realization that she was incapable of protecting her younger sister when she was a child was very upsetting to her.

This self-interpretation could be described as a concern to protect herself and her loved ones in everyday living. It is central to her sense of identity and has deep personal roots. The one and only time Ines described an experience of feeling protected herself, occurred when she hit her stepfather at age 11. She heard a voice inside, telling her to hit her stepfather with something to protect herself. The message that seemed to come out of nowhere,

inspired her to pick up the rolling pin which resulted in stopping the abuse she loathed. Ines understands this voice to have been that of her father. She takes up the occurrence as her father's act of protection on her behalf. She described it this way,

MS: Where did the strength come from as an 11 -- A little 11 year old girl to get up the gumption?

I: I don't know. Everybody thinks I'm crazy, but like I said, when I say things, they happen, right? [Yeah.] But I've always heard voices. [Uh huh.] I mean, not voices to where I'm, I'm crazy and stuff, to where they tell me how to protect myself. [Ahhh!] And that day, I don't know. It was just a voice, and I always tell my mom it's my dad protecting me, you know? [Uh huh.] And that voice told me, "Get something and hit him." And I did. I seen the rolling pin. I grabbed it, and smacked him right here (points to the back of the head). And then after I hit him, I jumped on his back, and I was hitting him.

MS: With the rolling pin? Or with your hand?

I: With the rolling pin. With the rolling pin, I hit him, and I, I told him not ever do you think you are going to touch me! and I was hitting him with the rolling pin. And ever since, I got like, -- My sister started laughing because I'd tell them, "I don't know. I felt like the devil went in me or something." (laughs) But that's how I felt, you know. [Uh huh.] And ever since that, ever since that day, that's how I became.

MS: So you became -- You called it stubborn.

I: It's stubborn, very aggressive. Very.

MS: Meaning?

I: To where I let nobody tell me nothing. Nobody. Not even my mother.

Ines perceived her mother to have been very strict with her throughout her growing up years. She acknowledged that her mother kicked her out of the house when she got pregnant

at age 17, rarely loaned her money, and even tried to remove her children from her custody at the time of her "breakdown." Still, Ines interpreted her mother's "strictness" as a strategy to make Ines strong. Ines explained that her mother understood that she was a "headstrong" person. Consequently, Ines stated, her mother was especially "strict" with her so that she would become a strong, single mother who could take care of herself. The result of her mother's "strictness" did seem to be that Ines learned how to take care of herself, i.e. how to protect herself. In this case, Ines need to learn how to protect herself from the effects of her mom's attempts to make her strong (e.g., the removal of her children).

At age 39, Ines was now grateful for her mother's strictness. In fact, Inez explained that before her mom died she thanked her for "being strict with me because she taught me how to be a woman." Learning "how to be a woman" who could take care of herself and protect herself were not lessons Ines learned in one day. Rather, these abilities evolved over time.

Ines described a time in her life when she was going through tremendous difficulty as the time when she learned how to protect herself in a way that was a turning point for her life. The experience had important ramifications for Ines in relation to her self-interpretation as well as her gender identity and will be explored next.

Looking in the Mirror

After Ines regained custody of her children when she was 29, she became involved with another Mexican man, Luis. She lived with him for 3 years. She described him as physically, verbally, and emotionally abusive. He tried to keep her "lower than him" because he felt "already low." Luis would sometimes physically abuse Ines in front of his friends as a display of his masculinity.

One day, when Ines was 31, she looked in the mirror and saw how "ugly" she had become because "he made me like that." Bruised and swollen, Ines looked at the reflection of her face and realized she would no longer take his treatment. She hit the mirror with her fist and vowed things would change. Ines confronted Luis about the violence and demanded that it stop. She described the confrontation saying,

I: It was one day when I see myself in the mirror (weeping, quietly, pensively).

MS: Oh, yeah? And what did you see?

I: (lets out a big breath, says sadly, still crying) Somebody that was ugly because that's how he had me.

MS: Oh, because of his beatings. [Yeah.] And you saw that.

I: (continues to weep). Yeah. I saw somebody ugly, and I went and even hit that mirror. [You did?] And I said, "No more." And it stopped (sniffs).

MS: And that was '86?

I: Well, actually, '88. The last time was in 1988 (quietly, with dignity).

MS: And you kicked him out, or you moved?

I: No. I just told him, and I stood right in his face, and I pointed at him, and I told him, "That's the last time." (sniffs)

MS: And it was, huh?

I: And he got scared because his friends weren't around. Nobody was around. It was just him ... and me. [Huh.] And I told him, "It's the last time." I told him, "If I would have done what I did to you in front of your friends, you would have killed me because" -- Huh?! [Lori called her] I go, "If I would have done to you what I did in front of your friends, you would have killed me cause they would have laughed at you for the rest of your life." [Huh.] Yeah. Because I told him a lot of things privately, you know, things that you're not supposed to tell a man in front of people. [Like?] See, I was getting abused for nothing, and he was no good. And nothing. And I told him, you know, "You think you're a man? You're not. You don't even know how to satisfy a woman." [Huh.] Because that's the way it was.

MS: And he wasn't satisfying you.

I: No way. A nothing. A nothing. [Really.] Nothing.

Here Ines confided that she threatened to tell his friends what she told him in private: that he didn't satisfy her sexually. Ines described Luis as a "macho Mexican" who would be humiliated if his friends heard what she said.

In his study on machismo in Mexico, Gutmann (1996) found that women were particularly critical of men who fit a particular definition of macho; i.e. men who sought to hide deep fears of physical inadequacy and losing male prerogative behind the guise of personal belligerence (p.239). He found that women disdained, ridiculed, and even pitied these men. Sometimes, he noted, they talked about the inability of these men to sexually satisfy their wives.

Accordingly, Ines perceived Luis as disdainful, at best. She perceived her threat of ridiculing his sexual inadequacy in the presence of his friends as an effective act because the violence stopped. This event was a turning point for Ines. She said that she was never the victim of violence again.

Shortly after this confrontation, while Ines was still living with Luis, he won a settlement of \$25,000. He took \$3000 and went to visit his family in Mexico. Meanwhile, Ines received an ATM card in the mail and began withdrawing money from his account without his permission or knowledge. She withdrew about \$25,000 while he was in Mexico and spent it on herself and her children. When he returned from Mexico, Ines was living elsewhere and informed him that she was "out" of the relationship. She said he didn't seek revenge for the spending of the money because she let him know that she incurred far more than \$25,000 worth of physical, emotional, and mental injuries in this relationship.

Thriving in a Space of Mutuality

After her relationship with Luis, Ines stayed out of relationships. She described what she was waiting for in a relationship saying, "I wanted someone just like me. Someone that wouldn't let me tell him what to do and someone that wouldn't tell me what to do" 2710. After experiencing the pain of two abusive relationships, Ines said that she "was

looking for somebody that was going to care for me" 2741. Years later, she found a man, Reuben, who was also looking for the same thing. Ines married Reuben two years ago. She described their wedding day as one of the happiest days of her life.

Reuben was born in Texas but was living in Nevada when they met. He was divorced but had no children. Reuben moved to San Tomas when they got married. He got along well with her children and family. They both worked as drivers for patients with cancer, transporting the patients to the chemotherapy center.

Gendered Positions in Relationships: Men

Ines had a refined understanding of Mexico-born men and U.S. born Mexican American men. As a U.S. born Mexican American woman, Ines talked about various gendered expectations she had experienced with men born in both countries. Ines negotiated her own position within this gendered milieu by invoking a system of gender codes that did not uphold the traditional, regulatory, gender norms. Ines invoked this lexicon of covert cultural norms (Del Castillo, 1993) as a way of naming, ridiculing, and negotiating expectations of different men and women in her world. Ines' system includes the following:

"Real men"

I: To me, a real man is uh -- Knows how to take care of his own. [Uh huh.] He don't have to prove to someone else, "Look it, I can beat her up. I'm the man." [Uh huh.] "I can do this. I can go to bed with another

woman and still have another woman." To me, that's not a man. [Uh huh. Uh huh.] I don't consider that a man. To me, a man, a man is someone that knows how to take care of his family. [Uh huh.] Uh have a roof over the family's head [Uh huh.] and not go spend it with another woman or his friends. [Okay.] You know? And my mom always say, "You expect a miracle or what?"

Ines described her husband as a 'real man,' saying, "He was a man who's got them (his balls) right where they belong." She stated that because he was "man enough" to marry her and provide a home for her, she expected him to be "man enough" to have an honest relationship with her. By that she meant that she expected him to maintain a monogamous relationship with her. Ines acknowledged that he may one day desire another woman, but if that should occur she expected her husband to be honest with her about that. She explained that a "real man" will talk to a woman directly if there is another woman, rather than going behind her back.

Ines also noted that a "real man" won't hit a woman, control a woman, or yell at a woman. Rather, a "real man" will acknowledge and value a "good woman." Reuben proved himself to be a "real man" in relation to this issue. For example, on one occasion, Ines was irritated with Reuben so she hit him. In response, he just walked away. Ines said that this demonstrated that her husband as a "real man."

Ines also noted that "real men," like her husband had mutual goals of caring for their partners in relationship. That is, they wanted to take care of and be cared for by their partner. Finally, Ines noted that a "real man" was

also able to satisfy a woman sexually. Again, her husband fit this category.

"Machos": Men Who Are "Not Men"

Ines' understanding of "machos" or men who were "not men" came from experience with them. She explained,

I: Because I was one of them. Now that I see things, I was an abused woman, right? And I used to always get beat up and stuff, and I always used to think of myself as being less, but then I come to realize that we weren't less. The only thing is that they wanted us to feel the same way they did. That's how I feel.

MS: They wanted us to feel that they were -- ?

I: Low just like them. That they were nothing. That's how I see it.

MS: Because they felt low?

I: They felt low, and they wanted us to feel lower than they were.

MS: And the reason they felt low was because?

I: That's the way they were.

"Men who are not men" fit Ines' description of "macho." They were who thought of themselves as the "king." They were men who would hit their partners if they "talked back." They would go out with other women and they would believe their male friends over their partner if there was a disagreement. A man who was "macho" was also the kind of man who felt righteous about being abusive to a woman if they had provided food for her. She described them as men who would play mind games to try and control a woman.

I: They felt like, well, you know, "If I buy you something to eat, I've got a right to do whatever I want to with you."

MS: Sexually or physically?

I: Sexually, physically, mentally. Cause the one I lived with for over three years, he was all three of them. Sexually, mentally, and physically, and verbally.

MS: Verbally and mentally, what did he do?

I: Mentally like, like say you put that cup there, right?

MS: Yeah, I did.

I: And I turn around, I grab it from you, and put it somewhere else, and you're like, "Didn't I just put my cup there?" "No, I didn't see you put the cup there." Like that.

MS: He would do that?

I: Yeah.

MS: Why, just to --

I: Yeah, with my mind.

MS: Just play with it.

I: And then I would -- Because there was a lot of times when I would put something somewhere, and I would see him, and then he would move it. And I was like, "Didn't you see me" -- "No, I didn't. Maybe there's something wrong with you. You know, you think about it, and maybe there's something wrong with you."

Ines explained that "macho" men try to "mess with your head" to get a woman to obey them or to make a woman feel "crazy." She felt that they would abuse a woman's body (sometimes in the presence of their friends) and were verbally abusive because they were attempting to lower the woman's self esteem/dignity.

To these men, the community of male peers was important because they were the people who could deem the man to be dominant or subordinant. Recall Ines' threat to tell Luis'

friends that he wasn't satisfying her sexually. In that case, the power of the man's friends appeared to be so crucial that Ines' threat of disclosure was the issue that stopped the Luis from continuing to abuse her.

"Good-for-nothing" Men

Ines described another kind of man, the "good-for-nothing." This man was neither a "real man" nor a "macho." Ines described her brother-in-law as a "good-for-nothing" because he was unable to provide for his wife. He did not have a job, did not bring in an income, and had not acquired sufficient belongings to furnish her sister's home. The fact that her sister and brother-in-law were using Ines' mother's money to live on, without telling her mother where the money was being spent, made the brother-in-law a pitiful man at best. When addressing her brother-in-law during a recent argument about her mother's money, Ines said,

I: I don't need a pair of balls to help me out because my husband provides for me. My mom felt sorry for you, that's why she helped you all the time. And I feel sorry for my sister, because she not only had two balls but she still needed my mom to help her.

Ines' system of covert cultural norms resembles that which was described by Gutmann (1996). He found that there were four male gender groups in Mexico City. The first category, the macho fits Ines' description of men who were "not men" or machos. The second category, the mandilon could fit Ines' description of "good-for-nothing-men." The third group of "neither-macho-nor-mandilon" is loosely

similar to Ines' category of "real men" although Gutmann notes that "consensus will rarely be found as to whether a particular man deserves a label such as neither-macho-not-mandilon" (p.238) since the views of the man, his family, and his friends are likely to differ and change. Finally, Ines did not mention men who would fit Gutmann's fourth category. That is the broad category of men who have sex with other men.

Insight into Ines' perspective is interesting however, as Gutmann (1996) warns, all typologizing obscures salient differences which are so numerous that they can hardly be considered exceptions. The fact that these covert cultural norms, as well as those discussed in the chapter on Lorena, exist is an important disruption to the assumption that all Mexican American men and women understand machismos in the same way.

Gendered Positions in Relationships: Women

A "Strong Woman" is a Survivor

Ines described the qualities of a strong woman who could "stand on her own two feet" (recall similar words used by Gloriana). Ines invoked this descriptor by comparing herself to her sisters and her mother. According to Ines, a strong woman was not the same as a traditional woman. A traditional woman was submissive and silent. Ines described a strong woman as someone like herself who stood up to the kind of men who wanted women to feel "low" in order to

manipulate them. She saw a strong woman as one who searched for a better life and along the way heeded the discovery that she was a human being who deserved to be treated accordingly AND who demanded to be treated accordingly. Referring to herself, Ines said that a strong woman knew how to protect herself and how to take care of herself. When it came to speaking one's mind, Ines explained that a strong woman could voice her opinion. About her own ability to stand up to others and speak her mind, she said, "Well, I'm woman enough that I may not have my balls hanging, but I still have my ovaries, I don't have my uterus, but I have my ovaries, so I have my balls, they're in there."

As a strong woman, Ines expected certain things from a "real man." Ines' mother suggested that Ines was asking for a miracle because she expected her husband to provide a home for his family, to be monogamous, and to limit his time out with his friends. Perhaps the difference between Ines and her mother was not a belief in miracles, but the will to voice and uphold an expectation with a man.

Acquiring these abilities, if not present in a woman from childhood on, were major accomplishments. A woman who was partnered with a traditional man but did not demand to be treated in an egalitarian manner did not challenge the norms that operated transparently to set the man over the woman.

"Weak" women

Ines saw her sisters as "weak" women in comparison to herself. She also recognized that she was once a weak woman. Ines made movement from the position of a weak woman to that of a strong woman when she learned to challenge the traditional gender norms that positioned men over women. For example, Ines talked back to Luis even though the regulatory norms called for a woman who "kept her mouth shut." Additionally, Ines physically fought when Luis and Daniel hit her, disrupting the norm for a woman to tolerate the abuse.

According to Ines, "weak" women, like Ines' youngest sister, tolerated abusive relationships. A "weak" woman might tolerate various types of abuse in a relationship because she was afraid that she didn't know how to survive on her own. She was a woman who "only knows how to depend on someone else." A weak woman was not aware of her own value. For example, Ines was "weak" when she believed that she was "less" than Luis.

"Machas"

Ines described women as "machas" focusing on the negative aspects of the term. She saw machas as women who were almost as abusive to men as the worst "macho" was to women. This was in complete contrast to Romanucci-Ross's (1973) definition of the "macha" as the ideal woman. Ines explained that her son's girlfriend was a macha because she

fit the description of a "woman who can play men however they want. They think that they're God's gift to them (men)."

Ines also described her sister's sister-in-law as a macha because "she used to tell everybody off and everything." When Ines met the sister-in-law, she described the attitude that came over her as, "like somebody's grasping for my hair and pulls it." Ines explained that the feeling is mutual between her and her sister's sister-in-law. I asked Ines if the sister-in-law would call Ines "macha" because of how she acted in a particular situation and she replied, "No she just thinks I'm just a stubborn old bitch." To Ines, the difference between a "macha" and a "stubborn old bitch" seemed to be that the former dominates other people whereas the latter does not.

Working Out Issues in Gendered Relationships

To Ines, the meaning of a girl's transition to that of a young woman growing into a mature female body involves suffering. Reflecting back, Ines told me that she cried the day her daughter got her first period. She cried because the first period was a symbol of the pain her daughter would go through as an adult woman. In her words, Ines cried "because you don't want your babies to grow up. You don't want them to go through what you went through" 2803. She explained she was referring to the relational difficulties that people experience as adults. She added that she was

more worried for her son than she was for her daughter, however, because her daughter was more like herself, i.e. unafraid to defend herself physically. But, she explained that her son was more like a "pussycat." An exploration of Ines' perception of her son and daughter in relation to her mother will be explored next.

A Variation of the "Uterine Family"

The pattern of ties between grandmothers and grandsons in Ines' family is unique. In the case of Ines, her mother (Maya) invested significant energy in her grandson (i.e. Ines' son, Patricio). This bonding between grandma and grandson pitted Ines against Maya for Patricio's loyalty. Indeed, Maya attempted to gain custody of Patricio when he was nine years old but she did not succeed at that time. However, when Ines was 33, and Patricio was 15, he decided he would rather live with his grandmother "because he loved her." So, he moved all of his belongings to his grandmother's home and lived there. After that Patricio still stayed at Ines' home occasionally, but his primary home was with Maya.

When Maya attempted to get custody of Patricio, it was because she doubted the quality of Ines' mothering and accused her of being an "unfit mother." In turn, Ines did not trust the mother of her four year old grandson and expressed her wishes that she could gain custody of him.

I: He (Patricio) lives with my mother.

MS: So she did get him. When did he move in with her?

I: When he got old enough to decide that he wanted to be with her.

MS: How old was he then?

I: 15.

MS: You're kidding? Why would he want to be with her?

I: Because he loves my mom.

MS: And she loves him, I know.

I: He's like my grandson with me. That's where I know what uh my mom used to go through when I would take him cause I go through it when he goes home, when my grandson ...

MS: So you would love to have your grandson here?

I: Oh, yes. I would get him with me, I mean, I would be the happiest woman. I would. I would.

MS: Because?

I: I don't like the way his mother is.

Wolf's (1974) description of the "uterine family" which was elaborated upon in relation to Mexican families by Del Castillo (in press), is a useful comparison here. However, Wolf's original configuration and that of Ines' family are not congruent. Wolf's hypothesis is that a woman builds a "uterine family" that is based on ties with her children, favoring her son, and excluding her husband while she is living among foreign in-laws after marriage. The motive for the creation of a uterine family is to counteract the woman's isolation and to establish security for her old age through her children, especially her son.

However, as was previously mentioned, the living out of this pattern in Ines' world is unlike the uterine family originally described among Chinese women (Wolf, 1974) because Ines is not a young wife living with in-laws who is strengthening ties with her own children. Rather, the pattern here is that of grandmothers seeking ties with sons born to their own daughters.

Like the pattern of the uterine family, this pattern has been transferred from generation to generation and involves the loyalty of the son. When Ines was 35, she became a grandmother because Patricio's son was born. She described this day as a turning point in her life. In her own words, Ines said,

I: Cause I used to go out. I was a -- I didn't care.

MS: Party?

I: Just party, party, party, party, party, party.

MS: Coke and alcohol, or just mostly alcohol?

I: Alcohol.

MS: Just drink and dance and drink.

I: And then one day I got up. One day I took a shower, and everything and my friend ask me, "Let's go drink." "Nope." She goes, "What do you mean, no?" "No. I'm getting old. I'm a grandmother." That's when I realized when my grandson was born. [Huh. Huh.] And now what I was looking for was somebody that was going to make me happy, somebody that was going to take care of me now and stuff. And I stayed by myself for about what? Three years until I met -- (points to a picture of her husband).

Soon after her grandson's birth, Ines decided that she wanted to stop partying and that she wanted to look for a

husband who would be able to respect her in ways that her past partners could not. Regardless of whether or not she intended to favor her grandson from that day onward or to hope for custody of him, the birth of her grandson was pivotal in Ines' life.

The bonding relationship was not, however, only unidirectional. Her grandson was very attached to Ines too. Ines described him as jealous of anyone who came near her when they were visiting each other. Her grandson was very fond of Ines and Ines was very proud of his fondness for her.

This is not to suggest that Patricio was less important to Ines than his son. Indeed, Patricio was also very important to Ines. She described the closeness of their relationship in the context of a conversation about Patricio's tendency to neglect Ines when he is on good terms with his girlfriend (the mother of her grandson).

I: He'll come visit me every day, and he'll call me every day. But it's already been, what? Three days since I've seen him. And when I know I don't -- When I don't see him, I know he's with her. He doesn't call me. I page him. He doesn't call me. [Huh.] And that's how I know he's back with her.

Del Castillo (in press) found that matriarchs retain power by reinstating their maternal position with their sons by reiterating the strategy of machismo, indulging their sons, and thereby reducing men to boys who need mothers. By preventing their sons from breaking away from their mothers, women invoke the cultural gender norms in order to sustain

their power. Ines is critical of Maya for this very reason. Ines explained that Maya has spoiled Patricio by lavishing him with attention. Ines perceived that her son was unable to get out of the unhealthy relationship with his girlfriend because Maya's ways have made him "soft." Additionally, she blamed her mother for the fact that Patricio never finished high school. She explained that Maya's pampering of Patricio has held him back and kept him from being strong. Again, this is unlike the way her mother raised her, to be strong. Ines stated that says she has no intention of doing that to her grandson.

Ines: In Review

Ines, whose central identity concern was to protect herself and her family, prioritized strength of character above all other qualities. Through a series of difficult life events (a sexually abusive stepfather, two physically abusive partners, loss of custody of her two children, homelessness) Ines took many steps to enhance her well being (confronted her stepfather and mother about the sexual abuse, regained custody of her children by getting a job and an apartment, stood up to a physically abusive partner). In the process, Ines perceived that she had special powers. She wondered how it was that she knew things before they happened. Others claimed that she was a "witch" capable of driving men "crazy." Ines entertained this possibility and

left the issue unresolved, suspending the possibility that she was indeed gifted in a special way.

Ines talked about three major turning points in her life: when she hit her stepfather with the rolling pin and caused him to stop his sexual abuse of her; when she stood up to an abusive partner and stopped his physical, emotional, and mental abuse of her; and when she made the transition to grandmotherhood four years ago. The latter transition opened up the possibility to live without alcohol. Ines, in fact, successfully stopped drinking and adopted an agenda to take better care of herself. Another central issue of taking care emerged when Ines became a grandmother. It involved choosing to be cautious about what kind of a man she would partner with. Ines was able to honor her own pledge to remain out of relationships with men until she met a man who shared her agenda for taking care of herself. Three years after making her pledge, she acted on her own plan by marrying a man with whom she felt she could have a non-violent, mutually caring relationship. Through all of these experiences, Ines discovered multiple ways to protect herself and her loved ones in relationships and nurtured her own agency to 'make good' on her own commitments to herself.

Ines worked out her gender identity by rejecting the idealized norms for traditional gendered behavior and invoking covert cultural norms as was described by Del

Castillo (1993). The covert norms for men and women allowed Ines to negotiate between traditional and alternative normative behavior based on principles of behavior not formally acknowledged but informally utilized as a practical guide to gendered behavior at Ines' local level (Del Castillo, 1993). Within this alternate system of gender codes, Ines maintained her personal position as a "strong woman" who contested the traditional gender norms and protected her ways of conducting relationships (with her son, her grandson, daughter, siblings, and husband). Positioned in this way, each of the transitions and turning points of her life then built upon the next, further carving out her gendered position of strength as a woman who resists submission to other's expectations. Woven into these transitions was a self-interpretation as a woman with special abilities to know (as a potential witch) and to protect others. This identity issue gave Ines other grounds upon which she could resist the expectations of others.

Ines, Gloriana, Lorena, and Alicia:

Similarities and Distinctions

Gender Identity

Both Ines and Lorena articulated a system of covert cultural norms, although the two systems did not resemble each other. Still, both women utilized the same strategy, the invocation of covert cultural norms (Del Castillo,

1993), to substantiate their gendered identities and to resist the gendered expectations of those around them.

Although both Gloriana and Ines were sexually abused as children, each reacted differently to the abuse. Gloriana's way of reacting to the situation was to stay away from her uncle, which meant staying away from the Texas-Mexico border region. She did not tell anyone about the abuse until adulthood. Although Ines didn't verbally confront her stepfather or her mother until she was an adult, she reacted to the abuse by attacking her abuser with a rolling pin as an 11 year old child. Because Ines had to live with her abuser, she was the victim of multiple episodes of abuse, whereas Gloriana stayed away from the uncle that abused her for the rest of her life. Nonetheless, the abuse significantly affected both women's lives.

Ines and Gloriana both confronted physically abusive partners although the contexts of the violence differed. Ines suffered through multiple episodes of abuse with two different sexual partners and Gloriana only reported one episode of violence with one lover. Historically, Ines did not say that her siblings ever hit her whereas Gloriana was the victim of an abusive brother for a period of years.

Neither Ines nor Gloriana submitted to others' expectations based on the ideal gender norms and both were involved in contestations. However, at age 32, Gloriana still chose to stay in a relationship with a man who had

traditional values related to gender whereas at age 35, Ines made a vow to only be involved with men who were able to care for her and respect her without traditional expectations. Consequently, Ines partnered with a man who could be described as 'neither-macho-nor-mandilon' (Gutmann, 1996), a "real man" by her own standards.

Like Alicia, Ines valued her ability to voice her own opinion. Neither held back their concerns from their husbands. However, Alicia did not have to defend herself from attack when she spoke up. She simply stated, without defensive emotion, that she thought Raul wanted her to "just shut up. (laughs) And I won't do it." Ines, on the other hand, had to learn how to protect herself from physical and mental punishment incurred when she refused to "shut up" as was expected according to the traditional Mexican gender norms. This baseline experience differed for the women. Both women voiced their opinions as a matter of taking care, but each paid a different price for the action. Ines was beaten. Alicia was negotiated with or ignored.

Alicia, Gloriana, and Ines each voiced an understanding that the place where a man was raised had an effect upon his expectations and his way of taking up gendered behaviors. Alicia perceived that the place where a man was "showed" (raised) mattered. She did not say one was better than the other; she simply noted the difference. Gloriana noted that she had always thought men who were raised in the U.S. would

be better communicators but then changed her mind when she compared her ex-husband and her current boyfriend (because the man raised in Mexico turned out to be a better communicator in the long run). Ines spoke of a difference between "Mexican men" (who had a tendency towards a traditionally "macho" gendered identity) and "men from here" (who were less inclined to the "macho" behavioral code). She did note, however, that men from either the U.S. or Mexico can be "macho" in the most negative sense. Lorena did not compare men who were raised in the U.S. to those raised in Mexico at all.

Women of the Borderlands

Ines understood herself to be a strong woman who was capable of protecting herself and her loved ones. Lorena perceived herself to be a woman of adaptation. Alicia took up her self-interpretation as a person who negotiated among "different" cultural ways as a part of daily life. Gloriana perceived herself as evolving through her developing ability to stand on her own two feet.

Each woman took care of herself by nurturing this primary "for-the-sake-of" or sense of identity. Each woman took up this activity from within a matrix of gendered relationships. Each woman, to different degrees, carved out a place for themselves in relation to others' expectations based on traditional, Mexican, regulatory gender norms. Various people invoked the traditional norms to interpellate

the women in different ways. Indeed, each woman employed different strategies to deal with the power of the interpellation. Again, interculturations (mixing and clashing of background meanings) influenced how interpellations became visible from that which had always been taken-for-granted in everyday coping. As background assumptions began to clash in ways that showed up to the women, strategies for contesting, resisting, negotiating, or invoking norms showed up as ways to work out shifting expectations within relationships.

Identity and Interpellations: Ines. Ines, who understood herself to be a strong woman who was capable of protecting herself, invoked covert cultural norms to defensively resist interpellations, made by men who were "not men," that would have hailed her as "less" or as "crazy" or a servant of "the king." By matching interpellations with resistances and confrontations, she subverted the power of the interpellation to dominate her. Through this she nurtured a self understanding that she was "a human being" who "deserved" to be treated like one and protected herself from further abuse. Ines' self interpretation as a woman who protects fueled her way of defending and resisting gendered expectations.

Identity and Interpellations: Lorena. Lorena's primary identity concern was to adapt and survive within changing, shifting socio-cultural expectations. As was discussed at

the end of the previous case study, Lorena invoked both the traditional gender norms and the evangelical Christian gender norms to sanction covert cultural gender norms (Del Castillo, 1993). Her experience as a woman in the borderlands involved an uncovering of an alternative gender code. Then, interpellations of Alex as a "mandilon" or of Lorena as a "bad" mother were resisted through the invocation of an alternate code such as "different" or "proven man" for Alex and "good to have babies" for Lorena.

Identity and Interpellations: Alicia. Alicia's self-interpretation was as a person who negotiated among "different," even "weird" cultural ways, as a part of daily life. In this way she found a position for herself that was "inbetween" cultural patterns and "both" Mexican and American. Alicia dealt with Raul's occasional attempts to interpellate her as a traditional wife "their way" by negotiating, discussing, and talking with him about expectations. In the process she would take up some traditional practices and mix them with less traditional ways.

Alicia appeared less vulnerable to attempts to make her subject to a set of gendered behavior norms (e.g. when her father attempted to scold her for not cooking for Raul). Perhaps because her mother and grandmother embraced a value for "voicing your opinion" and because her mother modeled a style for mixing cultural ways (being a third generation

Mexican American married to a immigrant man), Alicia's narratives did not reveal crises of gendered identity but an everyday pattern of negotiation amidst differing expectations.

Identity and Interpellations: Gloriana. Gloriana, who perceived herself as evolving through an ability to "stand on her own two feet," contested interpellations that would have made her subject to taboo status as a "mujer sola," a divorced woman with children, and a woman whose life was "ruined." Through contestation within relationships (note: Gloriana did not run away or reject relationships with those who attempted to interpellate her) Gloriana regularly "stood up" to the expectations of her boyfriend and her parents, "proving" to them that she could "make it" independently (e.g., holding a job, having an apartment, providing for her sons, etc.). By withholding information about her past and avoiding the commitment of marriage, Gloriana held onto the ground she gained as an autonomous woman, even though she maintained a relationship with a man with traditional expectations. In a sense, Gloriana maintained her opportunity to be a untraditional woman in relationship with a traditional man within a context of both contested and revered traditional patterns.

Conclusion

The cases of Gloriana, Lorena, Alicia, and Ines are paradigmatic in that they reveal four distinct styles for

working out gendered identities within the greater agenda of "taking care" amidst changing cultural understandings and expectations. Their stories, one building upon the other, catalyze deeper and deeper understandings of the ways each woman takes up their ways of being in their worlds. Indeed, how each woman forged her way within her particular matrix of relationships differed. The ways that each woman dealt with impending or actual interpellations amidst other interculturations reflected aspects of her primary identity concern (Gloriana-independence, Lorena-adaptation, Alicia-balancing "both" from a place that is "inbetween," and Ines-protection). Through a detailed investigation of the border zones of incongruities, puzzles, conflicts, and inconsistencies in their lives, greater understanding of the nuanced dimensions of everyday coping amidst changing cultural milieus can be grasped.

Although health care providers, researchers, and policy makers may not be able to access such a deep analysis of the lives of the people that they serve or study, this analysis can act as a bridge to open up the spectrum of positionings of Mexican American women. Although particularities will differ from woman to woman, these paradigm cases reveal that these Mexican American women were involved in complex, ongoing coping strategies that involve gendered expectations as a mundane practice of everyday life.

Chapter 11

Dimensions of Interculturations

The narratives of the women of this research present multiple episodes involving processes of interculturations. In everyday happenings in the lives of the participants of this research, mixings or clashings of meanings occurred. Stories that revealed skills, values, or practices in everyday happenings often included interculturations which showed up in various ways when the smooth everyday functioning of the background meanings for a woman were disrupted. Here, that which was previously "unnoticed" became noticeable and revealed meaning for the person.

Dimensions of interculturations can be described through concepts of interpretive phenomenology. To illustrate these dimensions, I will use portions of Gloriana's narratives. The dimensions I have identified to be part of interculturations include meaningful spaces or clearings (Dreyfus in Magee, 1988), place-based attributes of meaning, and the temporal significance of interculturations.

Meaningful "Spaces" Within Clearings

In his description of the phenomenological concept of "clearings," Dreyfus (in Magee, 1988) explained that clearings are part of the lived experience of people. Everyday "understanding" occurs as a result of "clearings" which are created by language, cultural conventions, social

practices, and historical understandings (Benner, 1994). Understandings that are non-cognitive and taken-for-granted open a clearing in which everyday practices and everyday, taken-for-granted awareness takes place.

Personal background meanings are shared by (understood by) groups of people but are taken up in individual ways (Wrubel, 1985). This shared background familiarity allows people to have both shared and individual interpretations of our world. These shared interpretations evolve from understandings and show up in clearings (Plager on Heidegger, 1994).

I am suggesting that interculturations show up in clearings where personal background meanings clash. Because particular background meanings in clearings are usually taken-for-granted, they are often implicit and remain undescribed and unarticulated. However, interculturations can be explored when there is a disruption, conflict, or discontinuity in background meanings within a clearing.

Temporality

Another dimension of intercultural meanings is temporality. Disruptions in background meanings are not only markers of intercultural spaces of meaning in clearings but they are marked by understandings of temporality as it is lived. For example, clashes of background meanings as interculturations may show up in the context of present day living while being simultaneously influenced by both past

experiences and future expectations. For example, intercultural spaces may show up (may be 'located' in a clearing) within a person's taken-for-granted, historical understanding of their family history. Consequently, a present retelling of family history through stories may reveal that some background meanings are derived from meaningful events of the past or conditions of the past.

Temporal discontinuities that show up in relation to background meanings may illuminate dimensions of intercultural spaces. For example, elements of past understandings that are perceived differently in the present at a time of conflict or disruption of meaning may be likely to suggest different projections about the future. A conflict in background meanings may illuminate aspects of intercultural spaces that are a mixture of understandings of meaningful past experiences, present coping, and projections of future possibilities - all related to the same theme. For example, a person may discuss the meaning of a memory of an event that occurred in the past in Texas (e.g., in this research, Gloriana's memory of being sexually molested and overpowered by her uncle as a child in the border area), which is currently influencing what is happening now in a relationship in California (e.g. her perception of her boyfriend's current understanding of her needs, feelings, or gendered identity), because of what is expected to occur next month when the person makes a visit to Mexico (e.g.,

her anticipation of a change in her boyfriend's behavior towards her when he is expected to return from a visit with his relatives - relatives who uphold traditional gender norms and expectations for gendered behavior).

Thus, interculturations are processes in a person's background that may be imbued with temporality. They involve positionings in the present which are made meaningful by past experiences and by anticipations of the future. Events of the past or present show up for a person because meaning emerged in the event, in anticipation of the event, or after the event. The memory of the event holds meaning which may become taken-for-granted. It then contributes to background meanings but it may be occasionally brought to the fore by the person and made explicit well after the event. It may also emerge as an expectation or impression of what will be, as the person presses into future possibilities.

Geographic Places

Dimensions of interculturations as clashing background meanings may be connected with particular geographic places. For example, Gloriana spoke through narratives about events of importance to her that occurred in different places. The events she told me about held much meaning in relation to her sense of her family's 'past' as well as her 'present' while they were simultaneously attached to the geographic locations or places where they occurred. Gloriana traced

her roots to the geographic location of the Mexico-Texas border region. In her stories, meaningful intercultural spaces (where mixing and clashing occurred) became connected to the actual geographic location of the border region. Thus, the place of location (e.g., the Texas-Mexico border region) and the meaningful intercultural spaces (e.g., situated understandings related to her aunt's murderer who went unpunished) became reflexively enmeshed with each other, deepening and complicating the meaning of gendered relations in society (i.e., the relationship, power dynamic, and rights of "jealous Mexican men" versus those of "light skinned" Mexican American women in the U.S.).

For Gloriana, Mexico, Texas, and California showed up in stories that held meaning for what has been, what is, and what is yet expected to be. It appeared that there were connections between the influence of "what has been" in her childhood in Texas and her present experiences of coping in situations in California and the ways that she is looking ahead in expectation of her future. Thus, spaces of meaning emerged in 'geographic places' where events 'took place' influencing the ways Gloriana understood her daily happenings and the ways she participated in daily living, past-present-and-future.

Although interculturations link meaningful spaces with geographic places, the definition of 'geography' needs to be addressed. The notion of 'place' as a geographic location

(for example, with Gloriana) does imply a 'where' in terms of land areas, but it is not limited to the ways that maps are drawn by cartographers. Gloriana did perceive Mexico and Texas as physical locations, but her understanding of their locations was not equivalent to that which has been drawn by e.g., Rand McNally on a paper road map with finely calculated lines of latitude and longitude. In fact, when Gloriana described her travel to Mexico, her sense of the location of landmarks, cities, and borders did not correspond to a 'graphically correct' paper map.

Intentionality, Meaning,
and Interculturations

The phenomenological method that I employed in this research allowed me to see that meaningful spaces as interculturations are not created only because a person chooses to make meaning happen. Although a person may occasionally and intentionally analyze or construct meaning while reflecting and 'thinking' about something (e.g., in the present-at-hand mode of being), other meanings develop despite the volition of the person.

Moreover, meaningful events may claim space within a person's world (within a clearing as background meaning) without the intention of the person. That is, this research showed that people could not always 'control' the ways that events would matter to them (e.g., the Gloriana's experience of sexual abuse in childhood affected her life today).

Likewise, meanings may show up as attached to geographic places despite intentional attempts to "erase" such connections. The production of meaning is not a cognitive function of volition. Furthermore, contradictions in understandings (or interpretations) may arise in relation to temporality or geography because meaning is usually not worked out through formulas based on modern logic as understood in Western, Cartesian philosophy.

Rather systems of logic are personal and particular (Norma Alarcon, personal communication, 11/94) and contingent on a person's context. Consequently, the meaning attached to places, people, and events may not fit a neat set of principles. Meanings are often complex, involving conflicts and contradictions. Just as Mexico or Texas are not places that are fully defined by a graphically-correct map of lines, meanings as experienced by e.g., a Mexican American woman, are not adequately described with a neat, logical formula or schematic diagram.

Conclusion

As articulated by Dreyfus (in Magee, 1988), clearings are possible because people are always already attuned in the world such that things matter to them. Likewise, interculturations occur because things matter to them, whether they want things to matter to them or not. The future extension of this discussion of interculturations based on the experiences of the women of this study, as

demonstrated with *Gloriana*, holds promise for further development of this new concept.

Chapter 12

Implications of this Research

This research directly addresses the articulated need for research on the intersections of cultural identity and gender (Felix-Ortiz, Newcomb, & Myers, 1994) and how Latino families negotiate sexuality (Hurtado, 1995). Although the phenomena of declining health for subsequent generations of Mexican American women as compared to immigrants remains a poorly understood trend, this research offers an alternative to past acculturation research that addressed how Latinas become more like Anglo-American populations and facilitates an expanded perspective on the various ways that second generation Mexican American women take up gendered identities as crucial to their strategies for "taking care." New perspectives, such as those presented in this research, can influence the design and implementation of clinical care, research, theory building and scholarship, as well as nursing education. This work can be used as a tool for expanding the perspectives of clinicians, program planners, researchers, scholars, and educators in relation to the lived experience of women of color as well as the affects of power dynamics in relationships. This work can increase awareness of the multiplicity of ways that Mexican American women deal with gendered expectations and gender identity as a strategy for taking care amidst interculturations and interpellations.

Limitations

A limitation of this study is that all twelve women of the study self-identified as heterosexual. Although homosexuality as a topic did come up during interviews, there were no lesbian participants in the research. Consequently, the perspectives of lesbians are not explored.

In addition the study was limited, by design, to include only Mexican American women with low income. While this was key to the plan of the study, it makes no contribution to the dearth of studies on Latinas who are not of low income (Massey, 1993).

Much of the research that was done with Latinos during the 1980's was implemented within the "underclass" paradigm which was originally conceptualized in relation to African Americans (Massey, 1993). Consequently, Latino researchers are now calling for decoupling of Latinos from the larger underclass debate (Massey, Zambrana, & Bell, 1995). They endorse a "new Hispanic research agenda governed by its own theoretical models and analytic methods" (Massey, Zambrana, & Bell, 1995, p.192). They note that different analytic models may be required to understand the effects of poverty and family issues in each Latino group (Massey, Zambrana, & Bell, 1995) because cultural practices and within group social dynamics differ.

Thus, the results of this study with predominantly employed women who are still of low income will be less

relevant to addressing the same phenomena of gendered interculturations with women of other class groups (women living in extreme poverty, middle class, and upper class women). Although the research does inform readers about women's experiences in particular, broad generalizations made based on this work would be inappropriate. This would defeat the overall purpose of this research to expand understandings of the diverse spectrum of Mexican American women (rather than stereotyping them). Indeed, caution should be exercised to avoid projecting the stories of the Mexican American women of this research to women outside of this particular sample, especially onto Latinas of other classes, other sexual orientations, and other Latino ethnic groups.

Despite the fact that I conducted this research among women of only one income level (that of low income), the exploratory, descriptive nature of the project provides a rare and rich data base of experience about a particular group of Mexican American women. The data gathered from the contexts and narratives of the twelve heterosexual Mexican American women of this study can be used to aid in further development of theoretical models, other research, and clinical care with Mexican American women. The results of this study will complement work that has already been done with immigrant women, offering information that challenges taken-for-granted tendencies of clinicians and other

professionals to assume that the concerns of second and third generation Latinas are congruent with those of immigrant women. Future research, however, could be done with Mexican American women of middle or upper income groups. This would advance understandings of the effects of class on perceptions of taking care, interculturalizations, interpellations, and gender identity.

In addition, it should be noted that policy that is influenced by this research, should be aimed primarily at Mexican American women and not Latinas in general because this research did not include women of other Latino/a groups. As stated by Aida Hurtado (1995) for example, social policies that are effective for Mexican descendants in the Southwest may be disastrous for Puerto Ricans in the Northeast. Still, this research may offer some insight for considering how women of any ethnicity and their families, in general, change in response to changing social situations, shifting cultural influences, and mixing gendered expectations.

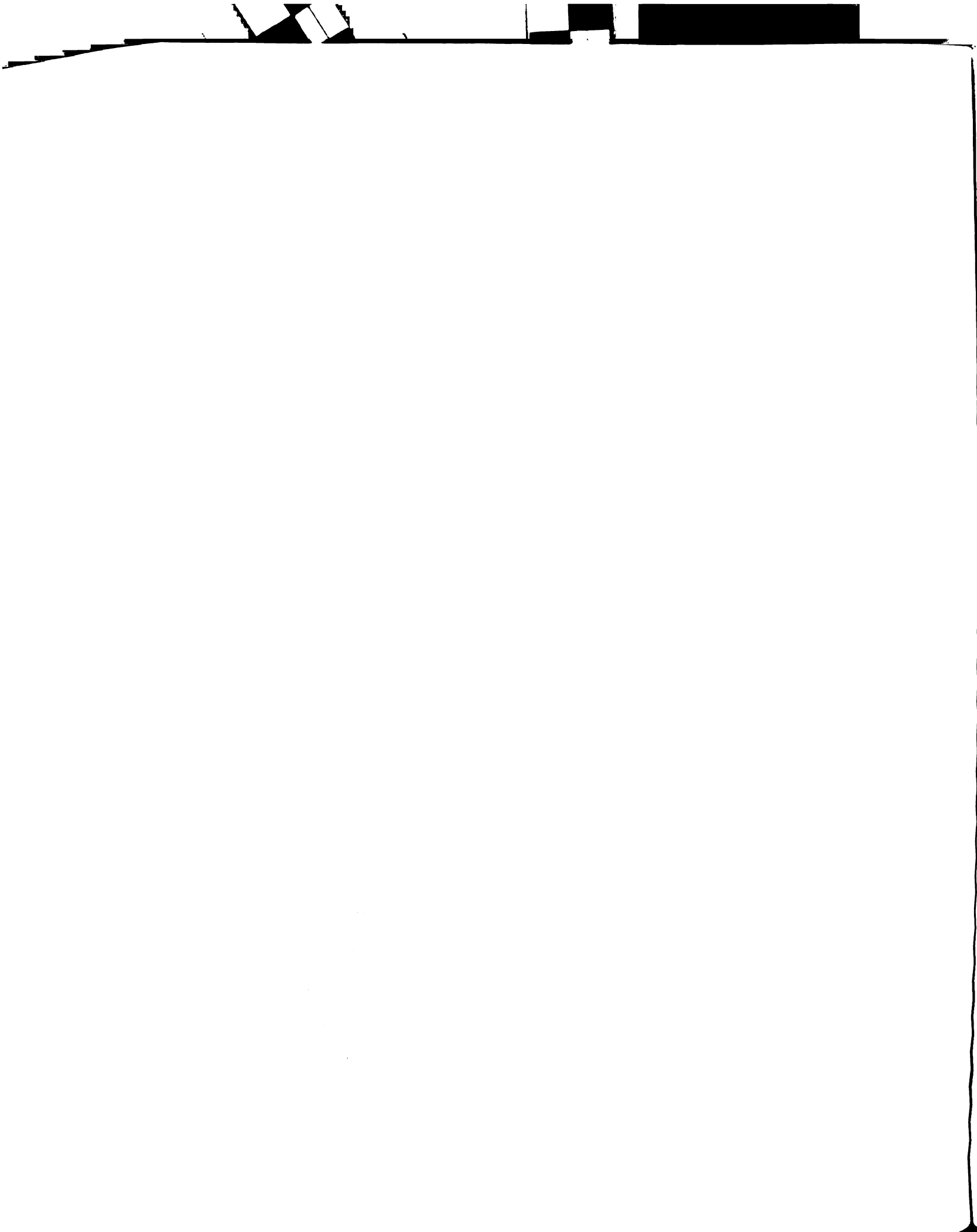
General Implications for Theory Building and Further Research

The absence of research about second generation Mexican American women in the literature limits understandings of women in general because studies with women from the largest Latino group in the U.S. are absent (according to the 1990 census, Bureau of the Census, 1993). Ultimately, such

exclusion will limit understandings of the processes of cultural adaptations for women today and the daughters of immigrants who are currently children growing into adulthood.

Furthermore, inclusion of research that targets the adult children of immigrants, rather than only immigrants and their young children, will add to a more expansive analysis of gender, family, and social relationships in a multicultural society. However, in order for research results to be accessible to other scholars and researchers, theoretical developments must be developed alongside research. Psychologists Hector Betancourt and Steven Lopez (1993) noted that a theoretical focus is necessary for cross cultural research, in general, to be understood by and connected to practitioners of the various disciplines or branches of health services, such as mainstream psychology. This research will address some of the theoretical gaps in the literature about Mexican American women and gender.

This research may advance understandings of cultural sensitivity for health care to Mexican American women, in part, because the theoretical formulations developed from the data of this research evolved from a serious commitment to the study of how culture is lived. Rogler (1989) listed this commitment as crucial for researchers who hope to do cross cultural research that is culturally sensitive. That is, the theoretical contributions of this work (gendered



identity, interculturations, and interpellations) were developed through a process of study, critique, and input from various Chicano/a, Latino/a researchers, scholars, and clinicians.

In addition, the description of my process of research will allow other cross cultural researchers to analyze and critique both my process and their own. My decision to integrate new ethnographic techniques with and interpretive phenomenology was based on the goal of making culture central to method through new ethnographic techniques, making women's self-interpretations key through interpretive phenomenology, and maintaining a self-reflexive tenet to identify my own blindspots throughout the research process by employing postmodern self-critique (as is characteristic of new ethnography and feminist research) and the constant reflection on the hermeneutic circle (as is part of interpretive phenomenology). My work in the research process was guided by what psychologist and cultural researcher Lloyd Rogler (1989) described as an "incessant, basic, and active preoccupation with the culture of the group being studied throughout the process of research," (p.296). Because the awareness of the potential spectrum of cultural components in Mexican American women's lives was integrated into all phases of the research process, cultural awareness actually became an organic part of the process of

research, no less important than any other methodological consideration (as was discussed in Chapter 3).

Thus, this research holds promise for culturally sensitive contributions to the literature in relation to research, theory building, nursing education, and clinical practice. The implications for contributions in the area of gender, culture as interculturalizations, and power dynamics through interpellations will each be explored next.

Gender

By building on Del Castillo's (1993) study of gender among Mexican women and Hondagneu-Sotelo's (1994) exploration of the "gendered transitions" of immigrant women in California, I have extended analysis to the adult daughters of immigrants from Mexico living in California. Further theory development can be built upon this work to facilitate understanding of gender in ways that can be operationalized for clinicians, researchers, educators, and policy makers.

Implications for Clinical Practice

Clinicians can benefit from understanding the variety of ways that Mexican American women cope with gendered expectations. The strategies explored in detail here (contestation, invocation of norms, negotiation, and defensive resistance) open up awareness of the spectrum of ways women cope within matrices of relationships and how these women took care of themselves.

Implications for Nursing Education

The results of this research can complement information taught in women's health curricula for nurses. A wider perspective of the ways that women take up their gender identities will be useful to professors and instructors who are teaching nurses and researchers about working with members of the diverse Latino/a groups in the U.S. Information from this study will facilitate a more incisive analysis of the worlds of second generation Mexican American women as different from immigrant women.

Implications for Research

The implications of the findings of this research related to Mexican American women's ways of taking up gendered identities are manifold. The relation of gender to culture is an area that requires more research in order to dispel misunderstandings. Segura and Pierce (1993) argue that in Chicano/a families, the blending of gender identity and ethnic identity creates forms of masculine and feminine personality distinct from that of the European-American middle class. This study did not directly address Chicano/Latino gender identity for men, although some issues were raised by women about men in relation to women (see Gutmann, 1996; and Del Castillo, in press; for a discussion of machismo and Mexican Manhoods, respectively).

This research was developed within a history of a greater agenda for research related to gender and

Latinos/as. A brief overview of the historical trend will help situate this research so that the future implications can be discussed. Much of the past research on gender in Latino communities was "pejorative" (Ybarra, 1982 cited in Segura and Pierce, 1993) emphasizing the patriarchal structure, male domination, male sexual obsessions, female submissiveness, and maternal self sacrifice. Segura and Pierce (1993) explained that "reactive" research agendas followed the "pejorative" studies. These studies revealed that a variety of Chicano/a family structures existed, ranging from the egalitarian to the patriarchal. Then, "revisionist" research was done to correct past distortions by offering empirical evidence that pointed to the heterogeneity among Chicana/o families which portrayed them in more realistic and less evaluative terms. Revisionist research showed that gender was a basic organizing principle of society that shapes families in historically specific ways and that Mexican American families exhibited many different patterns of marital decision making, including a patriarchal, role-segregated patterns and egalitarian patterns, with many combinations in between (Baca Zinn, 1995). However, the second wave of feminism added to revisionist research because it shifted the focus from the study of sex roles to the study of gendered institutions. Studies influenced by the second wave of feminism investigated how women's family lives were bound up with a

broader system of gender inequality that constrained women in particular ways. Gender inequalities were viewed as intersecting with race, ethnicity, and social class to shape family life (Baca Zinn, 1995).

As research that followed the work affected by the second wave of feminism, this research did reveal that women's ways of taking care involved working out gender in the context of relationships with men and issues of gender equality/inequality. The data revealed how expectations of the women's families and partners were gendered and how women responded to those expectations socially, emotionally, and physically. Again, future research could be extended to explore the same phenomena with other groups of Mexican American women such as those of the middle or upper classes, lesbians, or women of a different age group.

Further research could also be built upon this work to explore the ways that men take up gendered identities in relation to women. Informed by the history of pejorative, reactive, revisionist, and feminist research done with Latinos/as, future research could be designed to expand upon this study in ways that are generative FOR Latinos/as by asking Latinos/as what they want to know more about through research in relation to gender in general, gendered interculturations specifically, or other topics such as traditional expectations for gendered behavior. Areas to explore could include how gendered expectations influence

aspects of health, health seeking strategies, and the gendered ways that both women and men cope with illness.

Other Issues Related to Gender

Gender and Violence

This research draws attention to the tension that comes up for men and women dealing with changing patterns of interdependence and sexuality. Psychologist Oliva Espin (UCSF Grand Rounds on video, 1995) has suggested that when immigrant women in the U.S. begin to exhibit more autonomy and when daughters of immigrants begin to experiment with less traditional dating practices, husbands or fathers may feel that control is slipping from their hands and may resort to violence as an attempt to maintain control. In his study of Mexican men, Gutmann (1996) found that as women enter the work force and begin to want more independence, husbands feel that they are losing control over their wives in general and over their wives' sexualities in particular. He found that this sometimes leads to violence.

This research provides a detailed account of the kinds of violence that some Mexican American women have dealt with in relation to becoming more and more autonomous, how they dealt with it, and what the experience meant to them in relation to their gender identity and strategies for taking care. Consequently, this work can help clinicians to become more aware of the complex cultural issues involved with a woman's growth towards increased independence.

Espin (UCSF Psychiatric Grand Rounds video, 1995) acknowledged that health care providers must be careful to avoid becoming complicit with what they may perceive as "traditional customs" in relation to violence because of an assumption that tolerance is part of cultural competence. She noted that providers must critically analyze the meaning of cultural sensitivity in a case by case fashion in order to avoid such complicity in damaging practices. She called for practitioners to investigate contradictory readings of a patient/client so that one can be sure of the cultural elements that may be harmful to a patient/client. She added that providers must keep abreast of the literature in order to continue to learn about different cultures. She also advocated for supervision of clinicians and therapists working cross culturally so that they are held accountable to appropriate delivery of care across cultures. Finally, clinicians can benefit from gaining clarity about their own values related to violence.

Child Sexual Abuse

The women's stories revealed insight into particular experiences of the global phenomena of child sexual abuse. Exemplars from this research could be useful for the education of nursing students or clinicians. Rarely, during busy clinical visits, does a clinician have the opportunity to hear the story of a patient/client who has been sexually abused. The stories of Gloriana and Ines will be useful for

advancing understandings of past experiences of child sexual abuse in the lives of adult women.

Interculturations

This work offers an alternative to acculturation models through the concept of interculturations. Although the concept of acculturation has been extensively used in studies with Latinos to gain important information about the ways Latinos/as change, it has often been used as a proxy indicator for socioeconomic status, generational status, and place of birth (Massey, Zambrana, & Bell, 1995). Since acculturation is most accurately defined as a measure of how immigrants change to be like members of the host culture (Rogler, Cortes, & Malgady, 1991) other uses for the concept are problematic. Thus, without relying on acculturation models, the careful examination of women's ways of taking up gendered identity amidst interculturations presents an opportunity to advance understandings of the lived experiences of women living in multiple simultaneous cultural arenas.

Implications for Clinical Practice

Understandings of women's experiences with interculturations related to gendered identity, such as those discussed in this research, can enhance the ability of clinicians of women's health, maternal-child health, and perinatal health to understand the lived realities of their Mexican American patients/clients. Assumptions that women's

decisions about their health are solely issues of agency and self esteem can be refocused to take into account the complex processes of intercultural conflicts that constrain women's ways of making decisions. Because agency, self esteem, and intercultural conflict are most probably interrelated, the awareness of interculturalizations may add depth to a clinician's assessment of a woman's ways of coping, making decisions, and obtaining health services.

In addition, when a patient/client exhibits indecision related to a decision having to do with e.g., family planning, an awareness of interculturalizations may decrease taken-for-granted tendencies to counsel women in ways that reflect the clinician's values and attitudes more than those of the patient/client. To some extent, this phenomena cannot be avoided. However, the awareness of the processes of interculturalizations may increase the quality and specificity of understanding between a clinician and the patient/client. This research reveals that agency is contingent on, among other things, the matrix of relations in a woman's world and the intercultural conflicts that arise when expectations clash.

In sum, awareness of the phenomena of interculturalizations in the lives of patients and participants, may facilitate more accurate assessments of clients who are seeking health care services. In addition, self reflection about the ways that intercultural clashes of meaning occur between a

clinician and a patient/client may enhance both the clinician's and the patient/client's ability to communicate.

Implications for Nursing Education

The issue of interculturalizations can enhance understandings for educators who are teaching students from cultures that are unlike their own. Combined with self-reflexive critique, the concept of interculturalizations may improve professors and instructors abilities to understand their students in general.

In addition, the concept of interculturalizations could be taught within curriculum that explores the intersections of health and cultures, acculturation, migration, and immigration. Interculturalizations can add to understandings gained through acculturation models and studies of the various cultures represented in the U.S.

Implications for Further Research

Future research that involves interculturalizations can be implemented with any ethnic group. It is possible that clashes of background meaning also occur for people who live amidst multiple simultaneous diverse social arenas in addition to diverse and mixing cultural arenas (i.e. future research may explore clashes of meaning that occurs between people of differing social groups, those with differing sexual preferences, differing races, differing classes, etc.). Because the concept has just been developed, a variety of research could be done to explore the dimensions

of the concept in people's lived realities. To begin, this research could be particularly advanced if research on interculturalizations was implemented with Mexican American women of other socio-economic groups.

Interpellations

The theoretical discussion of interpellations based on the work of Louis Althusser (1971), has implications for future work. However, the complexity of the concept must continue to be worked out in order for it to be useful for clinicians, educators, and researchers. Interpellations may occur whenever there is a power dynamic. This could include, among other things, differences in positions related to class distinctions, sexual orientations, race, ethnicity, age, education, etc. For the purposes of this discussion, I will focus on dynamics related to gender and ethnicity.

Implications For Clinical Practice

Beliefs and ideology related to gender shows up for researchers and clinicians dealing with issues of women's health as it does for all people. Indeed, non-Latino health professionals often interact with Latina patient/clients at the level of ideological norms for gender and researchers rely on certain generalized notions to categorize Latinos. Challenges to gender stereotypes of Latinos in research (Andrade, 1982; Gibson, 1983) have expanded awareness of the ways that assumptions about gender ideology are often

incongruous with lived experiences of people. However, the data analysis chapters of this study offer indepth explorations of the meaning of gender norms in the lives of the women in the study as well as the ways that they work out significant issues related to gender and culture.

This work could act to catalyze a form of consciousness raising through the discussion of interpellations. By becoming aware of the phenomena of interpellations as they are operationalized clinicians can become more aware of their own participation in their deployment. By examining one's involvement in interpellations, in one's own personal lives and as clinicians, health care providers can make themselves vulnerable to growing in perspective and changes in practice to decrease domination and oppression even in their own relationships and clinical practice.

Implications For Nursing Education

The concept of interpellations will be useful for professors and instructors in schools of nursing (as it was for interculturations discussed previously) in order to reduce their deployment of the acts as part of teacher-student relationships. In addition, the concept could be taught to students as part of a curriculum that addresses racism, sexism, and other forms of oppression. Understanding of the concept may help people to be able to articulate phenomena that would otherwise be difficult to describe and discuss.

Implications For Further Research

The implications of the concept of interpellations for further research will primarily benefit researchers who are seeking to decrease oppression and power imbalances in the research process. However, researchers may find the concept useful for understanding patient/clients experiences related to being interpellated in a additional ways as addressed in Chapter IV (e.g., as a "cancer patient") in order to improve health service delivery, sensitivity, and efficacy of clients health care regimes.

Implications for Public Policy

Through the methods of interpretive phenomenology and new ethnography, this research involved a rigorous process of self reflexive data analysis and interpretation. The results may be useful to public policy because they reveal the concerns, voice, habits, and practices of the people who participated in the research (Benner, 1994). Because the participants of this study were of low income and of a non-dominant ethnic group, the voices of this research are those who are outside of the mainstream. Thus, this research makes the practical knowledge of the women visible and recognizes them in their particularity (not as a stereotype).

Interculturations and Interpellations
as Catalysts for Raising Consciousness in Relation
To White Privilege

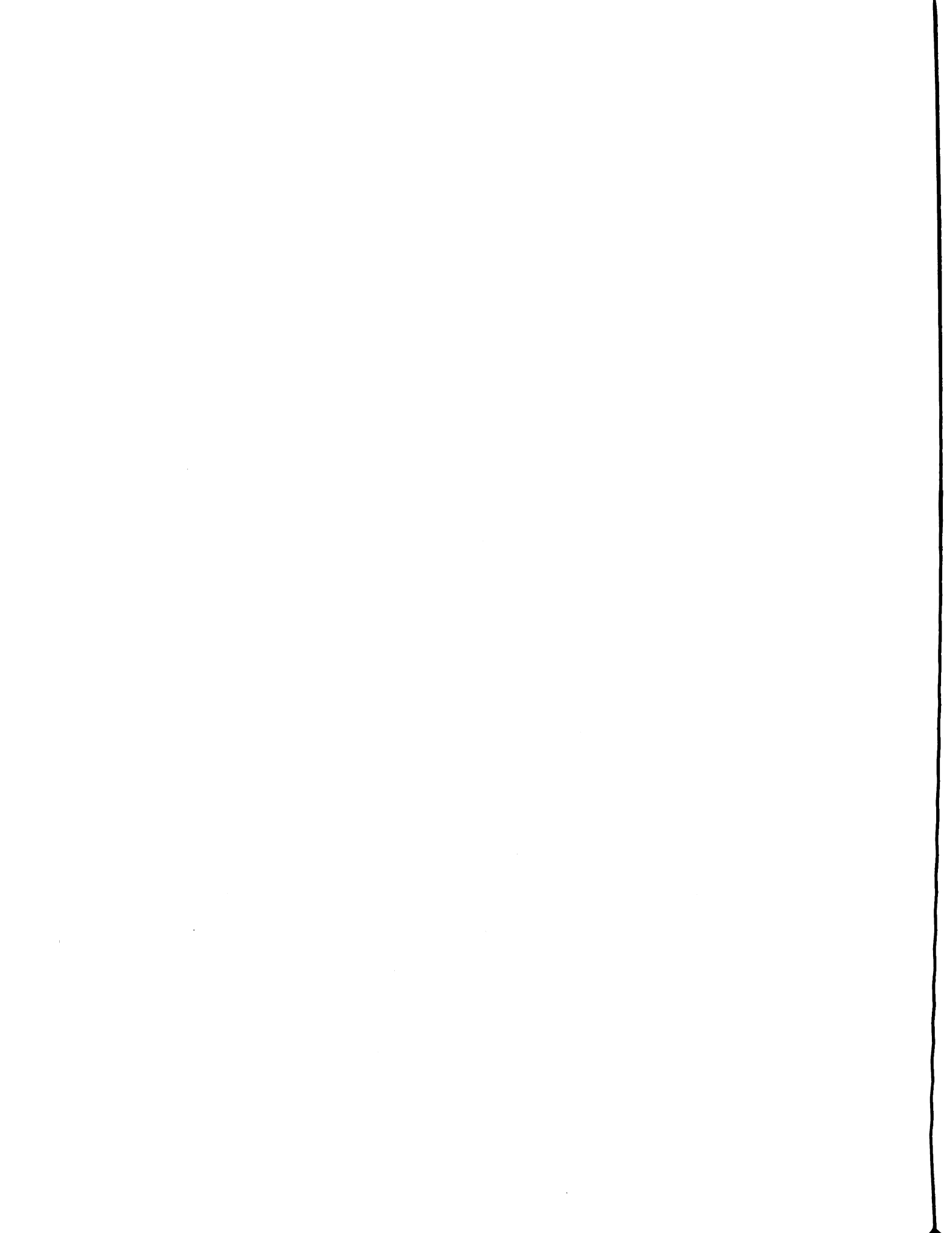
Finally, the implications of this research are also tied to the issue of white privilege. No doubt I embarked upon this research as a form of social action in relation to unequal racial and ethnic conditions. My goal included the disruption of hidden, taken-for-granted systems of advantage for those who are in dominant groups, i.e. white health care professionals like myself. Indeed, white privilege sets up power dynamics that operate invisibly. As much as any white clinician, researcher, or policy maker (including myself) works to remain aware of the ways that racism puts others at a disadvantage, as white people of privilege we are regularly oblivious to, over and again, how racism also puts us at an advantage in multiple ways everyday (McIntosh, 1989). The insidiousness of this phenomena is part of the reason that the study of interpellations and interculturations as consciousness raising are useful.

As stated by Peggy McIntosh (1989), the Associate Director of the Wellesley College Center for Research for Women,

I have come to see white privilege as an invisible package of unearned assets which I can count on cashing in each day, but about which I was 'meant' to remain oblivious. White privilege is like an invisible weightless knapsack of special provisions, maps, passports, codebooks, visas, clothes, tools, and blank checks (p.10).

Although many whites would approach a discussion on whiteness with a "Yeah, I know, I know" attitude, the work of recognizing white privilege remains an important topic because its obviousness is regularly overlooked. This is especially important at a time when forces in society are working to reverse federal civil rights gains, as they have in the recent overturning of the affirmative action mandate in California.

McIntosh (1989) shared her realization that many of the elements that she once assumed to be "just" part of being a human being in the U.S., turned out to be privileges afforded to whites through unearned advantage and conferred dominance that are not also conferred to people of color. Among the obvious conditions of daily living that she noted to be due to white privilege were: the ability to utilize shopping malls and specialty stores without being followed or harassed; the ability to use checks, credit cards, or cash without her skin color working against the appearance of her financial reliability; the privilege of criticizing our government without being seen as a cultural outsider; the ability to arrange to protect her children most of the time from people who might not like them; the ability to turn on the television or open to the front page of the newspaper and see people of her race widely represented; and the ability to swear, or dress in second hand clothes, or not answer letters without having people attribute these



choices to the bad morals or poverty or illiteracy of her race. She cautions that although some of the privileges granted to whites do not affect the lives of other people, some privileges confer dominance to those of the majority group in ways that whites are taught not to see (McIntosh, 1989).

The data from this research study and the theoretical development of the concept of interpellations can be used to address issues of the taken-for-granted tendencies for whites who are positioned in strategic health care roles to interpellate women of Latino groups through conferred dominance. With this work, I hope to challenge white readers in particular (but readers of all ethnicities as well), as I myself am challenged, to acknowledge our own silent denials around the privilege of power we possess not only as white, educated agents but also as clinicians, researchers, and policy makers. Acknowledging this phenomena is an important strategy for micro-political action on the part of white health professionals. By exposing how we are complicit with systems of dominance that work in a way so obvious that many of us as participants are oblivious to the effects, we are creating the opportunity for change in the future: change in the institutions of health care delivery and change in our communities and society as well. The work of self-analysis is a first step

towards a weakening of the hidden system of dominance and its sequelae.

Indeed, ethnic, racial, and gendered domination are not the only normalized effects of taken-for-granted systems of power, such as health care institutions. Oppression due to sexual orientation, age, income level, and religion are just a few of the many areas for which regularizing norms function. Recognizing our position and potential for dominance helps to dislodge relational dynamics that protect white privilege as well as heterosexual privilege for people of all races and ethnicities, male privilege, and the privileges that are conferred due to position or status. It is my hope that this work will assist in this difficult and yet very important process.

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Appendix A

The Evolution of the Focus of this Research

Equipped with many hunches, I proposed research in my second year of doctoral studies that would be a pilot study for my dissertation. I envisioned the research as an opportunity for Mexican American women to describe themselves and their lives from their own perspectives, within the contexts of their own worlds. I would be the researcher who would then communicate what I learned from the women to other nurses and health care providers in a way that they could "hear." The goal of this research proposal (which became the foundation of my National Research Service Award) was to improve health care delivery to Latinas by challenging questionable assumptions of the persons with the power /money /education /position who made health care policy.

My nursing research proposal involved four concepts that would be explored through interviews with women recruited at a community clinic to come to a better understanding of their social identities and health care needs, desires, or wants. The concepts to be explored included femininity, sexuality, pregnancy, and motherhood. I had chosen the four concepts because they seemed foundational and basic to me, although I was unaware of why I felt this way when I wrote the proposal in 1992.

Because of my position as a nurse, I have been privy to the discussion of countless "assessments" made by the staff of various medical centers and hospitals. I have also reviewed hundreds of charts in which assessments were written. With this experience in the forefront of my mind, I set out to ask questions of my clients, well aware that I was part of the dominant group with power. My clients included women of subordinate and marginalized groups often of low income, second or third generation Mexican American, receiving AFDC, pregnant, with or without a high school education, with possible histories of teenaged pregnancy.

After reading the ethnography Contested Lives (Ginsburg, 1989), which described feminist activists in North Dakota who were either pro-life or pro-choice, I had a significant realization about myself, my context, and the agenda I had set for my research. The women in Ginsburg's account were activists for whom the definition of female gender identity and the constitution of a social identity for women was of intense concern. For these women, the abortion debate was as much about which interpretation of "woman" (gender) was going to prevail as it was about abortion. Ginsburg reported that the meaning of reproduction and nurturance emerged as important to women on both sides of the debate as well as the relationship of these concepts to sexuality and motherhood.

At the time of discussion of this work in my Cultural Studies 251 seminar at Stanford University with Renato Rosaldo, I felt critical of Ginsburg's work, noting that no women of color entered the dialogue of the book. I remember remarking in class as we discussed Ginsburg's account, "This book gives me a lot of information about a group of white women in North Dakota, but I can't really see how it will practically influence the problems faced in a multicultural context such as mine in a migrant and community health center in California."

Later, I reflected on Frankenberg's (1993) ethnographic work in White Women, Race Matters. Frankenberg pointed out that white women live racially structured lives wherein whiteness is a location of race privilege and structural advantage. As practitioners of white culture, whiteness remains difficult for white people to name although it continually shapes white women's experiences, practices, and views of self and other (this will be covered in more detail later). In rereading Frankenberg's work, I realized that it was not just Ginsburg or the women of her study who were blind to the influence of whiteness on their perspectives on women and reproduction. I too was blind to how my research agenda was racially structured. My proposal reflected the concerns argued in the physician's conference room (the voices of mainly white staff members) more than those discussed with Latinas "at the bedside" or in their homes.

The key concepts I had chosen to explore with Latinas in "my" research included femininity, sexuality, pregnancy, and motherhood. They indeed had a striking resemblance to those Ginsburg (1989) identified as key issues for the white activists of her research (nurturance, sexuality, reproduction, and motherhood).

Despite all the years of reflection upon myself as a "positioned subject" of privilege, I had failed to see my own false unmarkedness, and how my whiteness and that of others had informed the research agenda I had set. I had a hunch the definitions of the general terms I had chosen were most commonly operationalized in the clinic as concepts defined by white, middle class, educated people (men and women). However, it did not occur to me that those terms may not be foundational to Latinas, even though the terms were foundational to the largely white staff who were serving the Latinas in clinics.

In short, it became clear that my quest to hear Latinas describe the constitution of their social identities had everything to do with what I (and other staff members) considered to be foundational in terms of the constitution of self. I was clear on what I heard debated and where the ruptures of meanings showed up for health care professionals. In turning to the Latinas, however, I now realize that it is not "my" or "our" categories as health professionals that will best set the stage for interviews.

To employ these would, in fact, merely lay in place again the hegemonic agendas of those in power (e.g. me, "us nurses," or both doctors and nurses). Rather, the study will be most generative if it is open to what the women themselves say about identity and how they describe self constitution.

This process of identifying my unmarkedness does not threaten the value of this descriptive study. Rather, it further substantiates the need for a challenging of assumptions about what is constitutive for "women." Norma Alarcon (personal communication, 9/29/94) affirmed the importance of this study by pointing out that it foregrounded the voices of Latinas in terms of identity and acknowledges the prevalence of the overdetermination of the concepts of femininity, sexuality, womanhood, and motherhood.

Overdetermination refers to Althusser's (1969) interpretation of the forces at work making or defining what certain definitions mean in societies. For example, institutionalized meanings of the concept of "feminine" are the result of "years and years of practice" of institutions (such as the cosmetic industry or corporations like "Woman's Day" magazine) proving its definition (Alarcon, personal communication, 8/24/94).

Simultaneous to my self discoveries, I analyzed the data from my pilot study. The concept of "taking care" in

relation to issues of women's health emerged as a salient theme. Thus, I proposed my dissertation research with the goal of exploring second generation Mexican American women's understandings of "taking care" in relation to issues of reproductive health. As described in Chapter 6, I planned to ask the participants about how they thought and felt about themselves, their lives, their health as women, their culture, growing up, and being a mother. These were areas that the women of my pilot study addressed most often. So, having learned from the pilot study, I was now interested in understanding how they approached "taking care" in their current daily lives in the context of the issues listed above.

The progression of my understandings of the women of this dissertation research has involved a process not unlike that described in this essay. Each phase of data analysis brought with it more insight into the women and more insight into myself and my assumptions as well.

Appendix B

My Gendered Identity

Undoubtedly, my own personal interest in the ways that gender expectations have influenced my life have influenced my inquiry in this research. Over the years, I was aware of the struggle related to gendered positions in the lives of my Mexican American friends and patients/clients and that it was somehow related to my own. However, I have never been more clear about that than I am today.

The process of this research has called for significant reflection into my own relationships of the present and the past. Clarity about my own self understanding has indeed been a goal because of the influence of my own experiences and assumptions on my work.

I recall that multiple observations during childhood of, for example, the ways my oldest sister and brother argued over gendered privileges that benefited my brother more than my sister, as well as teachings I encountered in young adulthood through evangelical Christianity, affected my perceptions of "standards" for gendered behavior. In my late teens, the evangelical teaching of male headship was presented to me through church groups as a "Truth" based on Biblical texts. As the daughter of a Catholic mother and a Protestant father, I was very interested in learning about Protestant teachings in the late 70's. However, I struggled

with the rhetoric of "Truth" being taught to me related to gender.

Years later, a seminar taught by theologian Joel Green, PhD in 1987 revolutionized my way of understanding texts. He introduced me to the notion of hermeneutics and a contextual, historical analysis of Biblical interpretations. It was then, at age 27, that I began to question in a different way, the assumptions of people in the world around me and the "Truths" I 'believed' to be foundational to my life as a woman and a devout Christian.

Despite traditional evangelical Christian teaching at the Protestant churches I attended throughout my twenties, I could not reject my own ways of being in the world as a strong, assertive woman with leadership tendencies that showed up in almost every group I became a part of. Consequently, I presented numerous challenges for male and female evangelical Christian friends who based their gendered expectations on the precepts of "headship." I confronted male and female opposition to my strength, intelligence, boldness, and creativity. These confrontations involved friends, pastors, family members, and boyfriends. The clashing of background meanings between us caused crises of relational dynamics, a severing of particular relationships (including a break with the man I had intended to marry), and a paradigmatic shift in my understanding of gender as I lived it out. I realized that

Protestant ideological claims just simply did not match my habits and practices. In addition, interpellations that hailed me as a subservient woman catalyzed inutterable moments of perceived injustice and violation deep inside of me. Most importantly, I lost the trust I once assumed, in the "universal" interpretation of the Bible and its power to name the "essential" elements of maleness and femaleness.

My work in Latino communities introduced me to the idealized Mexican gender norms in a personal way beginning at age 23 in Boston, MA. Later, my friendships with Mexican Americans in California gave me insight into struggles of women, whose friends and families had expectations based on the traditional norms. Eventually, I met with others' expectations for me based on the traditional Mexican idealized norms, as well. To some, I primarily appeared as a woman in her thirties who had never married and had no children. I was a "mujer sola." Their interpretations of me presented personal conflicts of my own to work out.

The expectations of other Anglo-American friends and my own family members (for my gendered position as a single woman) paralleled some aspects of the traditional Mexican norms. Unmarried and unpartnered, I encountered recommendations from others on how I should "cope" with my "singleness." Granted, this was a theme of interest for them probably because my status as a single woman was an issue for me (i.e. it mattered to me). However, a crucial

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 "singleness." Granted, this was a theme of interest for
 them probably because my status as a single woman was an
 issue for me (i.e. it mattered to me). However, a crucial

element of HOW it mattered to me involved how I believed I was letting others down because I was not "like" them or because I was not doing what they expected me to do (I was graduate student who was getting a PhD rather than getting married and having children). In a sense, we were caught in a contingent tautology of relational expectations. I constituted and was constituted by my relationships related to gendered expectations.

Indeed, these tensions and conflicts influenced my inquiry in this research. As Appendix A reveals, my original pilot study revealed my own struggle to understand issues of gender including the gendered meanings of motherhood and pregnancy, sexuality and femininity.

Challenged by the input from the women of my pilot study, however, I refocused this research on "taking care" in terms of reproductive health. The interviews led the participants and me to discussions that, in fact, involved the ways women worked out gender identity as a central strategy for "taking care."

Like the participants, my ability to "take care" has been affected by my ways of working out my gender identity. In addition, my "for-the-sake-of" or central identity concern most probably affects the way I take up gendered identity. Though, as stated by philosopher Herbert Dreyfus (personal communication 6/12/96), this is the "last thing [I] know because [I] am caught up in it." I can offer my

best interpretation, but just as in this dissertation, an interpretation is all that I can offer. As stated in Chapter 3, to stay as clear as possible about my processes (so as to be as clear as possible about what I am interpreting and how my own experiences influence my interpretations), I have maintained memos of feelings catalyzed by the dissertation and I have been in ongoing therapy with a psychologist throughout the dissertation process.

The writing of this dissertation has been generative and exciting for me both personally and professionally. It is my hope that the understanding of the varied ways that women, including myself, take up gender within our matrices of relationships as expressed in this research will be helpful to researchers, clinicians, and scholars.

Appendix C

The Ethics of Interpretation
and Presentation

As part of the design of this research, I held myself accountable to consulting numerous scholars, health care providers, and Latino consultants for their perspectives on the data. In addition, I received input from professors on my committee and other doctoral students or colleagues. However, I was stunned when I realized the multiple ways that people understood the data of my research. The reading of Margery Wolf's A Thrice Told Tale (1992) advanced my understanding of how even one person can interpret her own research data in multiple ways. However, because this was happening to me, not someone who had published an article or book on the phenomena, I was surprised - even shocked - at the diversity of responses to my data.

The wide spectrum of responses was made poignantly clear when I shared the stories of Gloriana, Francisca, Juana, and Ines with a group of Latino health care professionals and graduate students at an informal gathering at a friend's home. Each person had a different reaction to my presentation of the data. Some perceived the work to be revealing, others saw it as insulting. Some heard emancipation in the women's stories, others perceived neuroses and even psychoses. Some feared that my work would only lead readers to stereotype Latinas in harmful ways.

Others recognized my work as a tool for empowerment that revealed the ways women learn and grow. None of Latino (or Anglo American) consultants and scholars who looked at the data questioned the value of this research but each had a slightly different interpretation of the participants. Basically, no one saw any one woman the same way.

Through these experiences, I learned that my interpretations of the data mattered in an important way. This was not only because I was ultimately responsible for the design of the research, but because I was the person who did the interviews. I had met the women personally and spoke with the women face-to-face. I offered interpretations that no one else COULD make.

In relation to my race and class, gender, age, and sexual preference, I learned that while these affected the dynamic of our interviews (what the women talked about, how the women told their stories) they affected it no less than those of any other researcher's demographics would. Furthermore, while it was just as likely that my demographics influenced what the women did and did not tell me, a different set of demographics would influence the women just as much although probably in different ways. The fact that I was an Anglo American nurse researcher and not a Latina nurse, for example, could have caused the women to trust me less because I did not belong to a Latino

community, but it could have caused them to trust me more for the same reason.

Indeed, trust is earned due to a variety of factors. I will never know for sure exactly why the women shared with me what they did. The reality is, the women told me what they told me. For better or for worse, the stories in this dissertation are the stories that the women told me. And, for better or for worse, I interpreted them as I did.

Through this process, however, I learned several lessons. I learned to let my anxiety about wanting to do ethical, appropriate interpretations WORK FOR the benefit of the project. That is, although my anxiety about getting the women's stories "right," caused me to consult with a large number of scholars and researchers and "experts," I realized it was only MY interpretations that I could own. I also learned that there was no "right" interpretation. There was just my best "take" on what I understood. I do not regret the work I did to examine multiple perspectives with multiple experts. Taxing as it was, the process bore fruit.

In the midst of this research, I realized that the task of interpretation was hard work. It involved parts of me that I needed to get clear about over and over and over again. All in all, I agree with psychologist Ruthellen Josselson who said, "I would worry most if I ever stopped worrying, stopped suffering for the disjunction that occurs when we try to tell an Other's story. To be uncomfortable

with this work, I think, protects us from going too far" (1996, p.70).

I also learned that in order to prevent the women's stories from collapsing into stereotypes by the readers, whether the readers are Latino/a or not, I need to present as much of the contexts of their lives as possible. Even well-meaning readers will react in ways I won't expect. This work reveals personal struggles. Therefore it strikes personal chords with readers. I cannot control that. But, I can try to present as much information as I can to enable the reader the chance to understand the women in context. Still, I have become aware that language can never contain a whole person, so every act of writing a person's life is inevitably a violation (Josselson, 1996).

Because the content of the twelve women's stories are moving, frightening, beautiful, and/or violent there is the risk that readers may miss the proverbial "forest for the trees." The constant challenge for me in terms of presentation, has been to share stories and interpretations in such a way that readers will focus on the woman, how she told the story, and what her concerns were in context rather than on the events themselves (Ochberg, 1996). I agree with Ochberg (1996) who noted that informants do not intend to be heard as narrators who are simply describing what happened. When they agree to participate in qualitative research, people embark on a journey of self-exploration that holds

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 Ochsberg (1996) who noted that informants do not intend to be
 heard as narrators who are simply describing what happened.
 When they agree to participate in qualitative research, they
 people embark on a journey of self-exploration that holds

potential for increased self awareness. Indeed, I watched this happen with many of the participants of this research. I agree that the researcher has an ethical responsibility to try to understand how they find meaning through the events they talk about - whether the event involves things such as a murder, a child's birth, or a conversation with their mother (Miller, 1996). The goal is to understand the participant as the participant understands himself or herself (Miller, 1996). Accordingly, I am learning that presenting the data so that readers can grasp the women's self-understandings must highlight the women, not the events.

Finally, this research is specifically about twelve Mexican American women with low income. Whenever this work is presented, I need to try and make class visible. This work is not about Latinas in general and readers who make generalizations of this sort would be mistaken. Although this work did not include a radical exploration and analysis of class, I feel an ethical responsibility to mention that my exploration of interculturations, interpellations, and gendered identity in this research was limited to a discussion of the lives of women with low income.

Appendix D

Crafting Women

A painting of a Mexican woman, designed in the style similar to that of Diego Rivera, hangs in my office. Rich hues of red and yellow, green, and brown present an image of a woman kneeling in an open marketplace in Mexico, arranging her vegetables for sale.

When I put the painting on the wall two months ago, I didn't think much about where it would go. I just hung it on the wall that had the most space. Ironically, I happened to place it over the table in my office that holds the multiple papers, books, files, and notes of my developing dissertation very much in progress.

I realized today that the woman who kneels over my table from her place in the painting, is looking down, as if to be reviewing my notes; as if to be reading the pages and pages of stories and dialogue that nestle in the folders arranged on my table. Twelve messy piles with numerous tags and notes, extraneous scribbles and sheets.

What would the woman think of the stories my folders hold? - the stories of Alicia, Beatriz, Delia, Elena, Francisca, Gloriana, Queta, Inez, Juana, Katiana, Lorena, and Magdalena? - stories about their lives? my questions? my interpretations? our talks? our understandings? I wrote the following poem to address my feelings and ideas.

Thirteen Craftswomen, Nonetheless

The woman in the painting reflects a traditional style.

Essentialized: La Mexicana.

The women of my dissertation resist essentializing. They move between traditional styles and non-traditional ones and back again. Their stories tell of living in the midst of changing, shifting cultural ways.

The women I interviewed --

unlike La Mexicana, whose image has been captured in paint, elegant but still, frozen in time and action, arranging her maize in the marketplace in some Mexican village,

are women of movement, women of change, women with flexible perspectives, and flexible lives. Bordercrossers. They are bridge-women. Connectors. Linking worlds and cultures and ways, in movement, all the at the same time.

But what about "Annette", the person who applied paint to canvas in depicting La Mexicana? She signed her name in the lower right corner of the painting. The man who sold me the painting described her as, "Annette. A Bay Area woman, a white woman, a painter." ... "Annette," the white painter-woman, painted a portrait of a Mexican woman in Mexico.

It hangs above my notes.

I, a white-searcher woman, crafted interpretations of Mexican American women in California.

They hang over my understandings.

They hang over my perceptions.

They hang over me.

Neither Annette nor I crafted alone.

Neither Annette nor I crafted without bias.

Just as Annette's depiction reveals how Annette saw the woman she painted, these interpretations reveal how I perceived the twelve women I interviewed. Whether the reds seem too red, or the browns seem too brown or not brown enough -- they are my interpretations, nonetheless.

Incomplete and rich, I interpret these stories.

Many stories.

Twelve women.

One searcher-woman.

Thirteen craftswomen,
I trust,
none, the less.

Appendix E

Demographic Information (to be done with Interview #1)
Participant Code _____

What languages do you speak?
What languages do you write?
Do you have MediCal? yes / no
How many years did you go to school?
Do you work outside the home?

Where were you born?
What is your birth order?
Place of childhood?
Place of adolescence?
Places lived after adolescence?

Where was your mother born? urban / rural
size of town?
How old is she now?
language spoken
education level
occupation

Where was your father born? urban / rural
size of town
year of birth/ current age
language spoken
education level
occupation

Who lives in your home with you now?
Are you single / common law / married / separated / widow
Any comments about partner

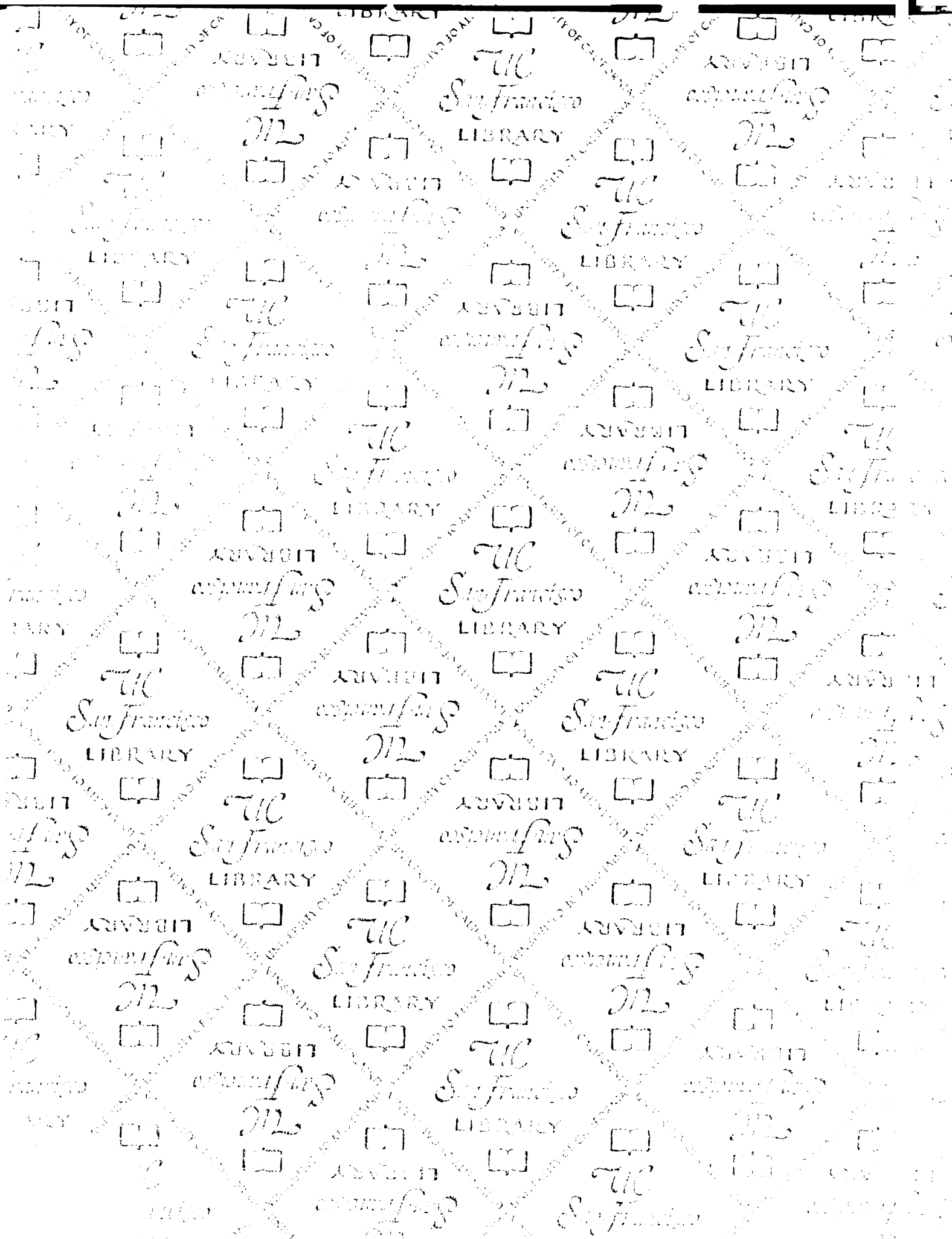
How old are you?
Gravida _____ Term _____ Premie _____ TAB _____ SAB _____ Losses _____

What was your age at your first period?

What methods of birth control have you used?

Any important medical events or diagnoses

In general, how healthy do you think you are?
poor fair good excellent _____



For reference

Not to be taken from the room.

