Fieldwork in Mexico

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Fieldwork team

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- Blanca Pelcastre, Ph.D.
- Brenda Thompson, MPH
- Estela Mata
- Lic. Alan Lujambio Garcia
**Photos** *(click on photos to enlarge and to view captions)*

My family in Mexico

Prevention Activities: COMUSIDA Degollado

Men's Social Spaces in Degollado

Getting Married in Degollado

Getting Married in Degollado A very different town than when I was there last time…
Summary of fieldwork activities

Fieldwork began in January of 2004. Sergio, Brenda and I spent most of the first six weeks settling in. I reacquainted myself with friends and contacts from my first period of fieldwork in 1995-6, introduced Sergio and Brenda to people I thought would be good contacts for them, and helped my children (ages 2 and 6 at the time) ease into life in Mexico, which was a big change for them from suburban Atlanta where we had been living. Frequent trips to the bakery and candy store – along with regular doses of hot chocolate – helped ease their culture shock. Sergio and I were delighted to have an office loaned to us in the local library, so that we had somewhere to go when we needed to talk; this also came in handy later in the fieldwork when we actually started doing interviews. We also spent some time in this initial period getting final research permissions from the National Institute of Public Health in Cuernavaca and beginning to reach out to state health authorities (in particular, the state Secretary of Health, Dr. Alfonso Peterson Farah, and the director of the State of Jalisco AIDS Council, COESIDA, Dra. Patricia Campos).

Participant observation also began right away, and in particular we focused on learning about family life (which was primarily my task) and men's socializing activities (Sergio's job). Brenda, who was doing her master's thesis research as an adjunct to the main study, concentrated on developing relationships with adolescents and unmarried women to explore changing norms about sexual initiation and HIV risk; she joined a local women's soccer team, which provided many good opportunities for participant observation. Over the six months of our main fieldwork, participant observation included:

- observing the planning and festivities around Valentine's Day, Mother's Day, Teacher's Day, and Children's Day, and birthdays, as well as around religious holidays (Lent and Holy Week);
- spending Saturday afternoons and Sundays with the families in our study as they engaged in typical weekend pursuits (going to the market, having picnics and outings in the country, fishing, visiting swimming pools);
- observing social activity at various night spots, including the town's cantinas, the disco, the terrazas, and at various venues for commercial sex both in town and in nearby towns;
- attending weddings, funerals, and other religious ceremonies (special Masses, etc.) and
- sharing many meals with the families in our study.

After we secured the final permissions from the INSP in mid-February, Sergio and I began immediately with the marital case study interviews. It was harder to get the men to schedule the interviews than it was for the women, but all told we did manage to do 22 case studies. Because one of the key things we are exploring in the study is how married women's HIV risk is shaped by broad social factors like labor migration and social inequality, it was critical to follow a sampling plan that would allow us to capture a sample that is sufficiently diverse (remember, it's not a variable if there's no variation!) and so we used a sampling matrix to keep ourselves on track as we selected couples to interview. Below is the final tally of how our sample is distributed:

### Marital Case Study Sampling Matrix

<table>
<thead>
<tr>
<th>Axis of Diversity Generation</th>
<th>Axis of Diversity: Migration Status</th>
<th>Axis of Diversity: Economic Status</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Lower Assets and Resources</td>
</tr>
<tr>
<td>Newlyweds to couples with first young child</td>
<td>NOT M&amp;M: neither migrant nor mobile after marriage</td>
<td>2 couples</td>
</tr>
<tr>
<td></td>
<td>M&amp;M: people whose work has regularly taken them away from home 1 night/wk or migrants for 6 months or more</td>
<td>1 woman</td>
</tr>
<tr>
<td>Couples w/Children (not yet grandparents)</td>
<td>NOT M&amp;M</td>
<td>1 couple</td>
</tr>
<tr>
<td></td>
<td>M&amp;M</td>
<td>3 couples</td>
</tr>
<tr>
<td>Grandparents/people with adult children</td>
<td>Not M&amp;M</td>
<td>3 couples</td>
</tr>
<tr>
<td></td>
<td>M&amp;M</td>
<td>2 couples (one w/bad sound quality)</td>
</tr>
</tbody>
</table>

As represented above, the sample was spread across three axes of variation: age (ranging from newlyweds to grandparents); migration status (either migrant/mobile or NOT migrant/mobile), and access to resources. Higher resource families had larger houses, cars, were professionals or small business owners; lower resource families worked in manual labor, did not have cars (or had very old ones), and had smaller houses, frequently without indoor plumbing.

As planned in the protocol, the data collection via participant observation and marital case studies was complemented by two other methods: key informant interviews and archival data.
collection. In our fieldsite, the key informant interviews ended up focusing on people who had expertise in some key areas of sexuality and social context that was not going to be covered adequately via participant observation and the marital case studies; this meant focusing on two categories of local experts: official experts (priests and psychologists) and 'people with sexual reputations' (as we called them), which was a general term for people who were known locally in some way because of their sexual behavior. In practice, this included six MSM (which covered, intriguingly, an age range from late teens to early sixties); two lesbians ('marimachas', in local parlance); a reputed womanizer; and a number of women who had reputations as not conforming to local ideals for discretion in sexual behavior.

In the archival data collection, we collected a wide range of materials, including

- background on social, economic, and demographic changes in Degollado and in the surrounding region;
- notes on various media that were popular in the field during our visit (telenovelas, movies, and magazines) and examples of these print media;
- newspaper clippings of articles relevant to our topics (focused particularly on news about migration, gender and sexuality, and HIV);
- copies of some of the laws relevant to our topics (laws on marriage and divorce), and
- curricula and educational materials from the Movimiento Familiar Cristiano (a Catholic Church program) which has gained great popularity in Degollado.

**Preliminary findings**

The most salient factor shaping married women's risk of HIV infection in the Mexico fieldsite was men's extramarital sexual relations, which are quite widespread. The three most prominent forms of men's extramarital relations are 1) long term relationships with other women, characterized by considerable affective and economic exchanges (this arrangement is traditionally known in Mexico as *casa chica*); 2) short term (sometimes very short term) casual sex for money with a woman, and 3) MSM activity. Women also engage in extramarital sex (as we could tell since we not infrequently heard stories about women who became pregnant (by mail?) while their husbands were away in the US as labor migrants), but they are much more discreet about it and the social meaning of women's infidelity is quite distinct. Through participant observation as well as through reviewing the marital case histories, we learned that there are factors at multiple levels of social organization shaping men's extramarital sex; as we begin to write up our analyses and explore them further, we will continue to explore how economic, social, and cultural factors intertwine to make infidelity more common than fidelity in this fieldsite. The key conclusion here is that extramarital sex is not the result of individual moral failings or the breakdown of the social order; rather, it is every bit as much an element of the social order as marriage is — except that it is secret and that no one talks about it.

Given how common it is for men to engage in extramarital sex, we tried to turn our question around, exploring not why men are unfaithful but rather considering why a minority of men do seem to be faithful to their wives. Here we found a number of factors seemed to 'protect' men from infidelity. These included:

- [List of factors]

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*Note: The list of factors should be filled in with specific details from the text.*
Ideologies that emphasize the intertwining of sex and affect, which in this particular context meant either participation in the Christian Family Movement, with its ideology of *Sexo en el servicio de amor* (Sex in the service of love) or else class-based ideologies of modern masculinity;

- These ‘protective’ ideologies were related also to specific forms of socializing which seemed to reduce the risk of casual infidelity (that is, men who were very involved in the Church would spend more time with their wives and other like-minded couples);
- Access to other forms of masculine prestige — perhaps because men who are already impressive to their friends might not need to demonstrate their impressiveness through engaging in extramarital sex. Key forms of masculine prestige in this context included advanced education, family reputation, or money.

Other factors that seemed to make it less likely that men would engage in extramarital sex included not being labor migrants, and having deeply satisfying marriages (which, sadly, we must report was quite rare).

Returning back to one of the questions with which we began this study — what is the relationship between new ideals of marital love and women's risk for marital HIV infection, we would preliminarily suggest that ideologies of companionate marriage support women's investment in the fiction of fidelity. What we found in this project, thus far, is that the fiction of fidelity is not just a women's project; the silences around extramarital sex are a sort of collective fiction. In our early publications, we will further explore these themes of secrecy, social order order, and sexuality, as they relate to the organization of married women's HIV risk.

**Descriptions of intervention activities**

One striking aspect of our fieldwork was the almost total lack of a public face of AIDS in our fieldsite. No billboards, no pamphlets, no campaigns — pretty much nothing. As we learned more about the local organization of health services, we found that the state of Jalisco — which actually has one of the strongest state-level AIDS prevention programs of any state in Mexico — has been working on project of decentralization, whereby they provide resources and technical support to municipios (the Mexican equivalent of counties) and the municipios develop locally-acceptable strategies for HIV prevention. The catch is that COESIDA only had funding for the highest priority municipios, and since Degollado did not fall into that category there was virtually nothing going on there.

We had planned to have some local HIV/AIDS education events as part of the community 'give-back' component of the project, and we decided to use these resources to support the trainings necessary to found a Municipio AIDS Committee in Degollado. To that end, we worked with COESIDA and FUNSALUD to support training and human resource development for the COMUSIDA Degollado. In late June of 2004 the Presidente Municipal, Juan Bravo, invited us to his office for a meeting at which the initial agreement was signed (see photo, below). The COMUSIDA was trained and equipped with educational materials during the summer and fall of 2004, and the first official events occurred on world AIDS Day, in December of 2004. We hosted a religious procession through the town and a special Mass (see photo) in memory of those who had died of AIDS and in honor of those who had cared for them. Participants in the
COMUSIDA also constructed an altar, placed in the main plaza of town and decorated with a host of fictitious names, to drive home the idea that we are all at risk of HIV/AIDS (see photos).

The idea behind the COMUSIDAs is that members of the local communities have the best ideas for how to capture community attention and raise awareness. This was certainly the case with the other strategy that we employed during December of 2004, which was to seek permission from the Sr. Cura, the head priest, to have members of the COMUSIDA read information sheets about HIV/AIDS after each Mass during the twelve days of the fiesta of the Virgin of Guadalupe. These Masses from December 1-12 are one of the most religiously and socially significant times of the year for local Catholics, and the churches are packed (standing room only for 2,000+) with local townspeople and returning migrants. Reading these information sheets after each Mass seemed to be a very effective strategy to disseminate information about HIV and to encourage people to consider their personal risk. We look forward to hearing from our friends and colleagues in Degollado as they continue to their important local efforts.

Recent presentations and forthcoming publications

- International Women’s Health Coalition, New York City, April 27, 2006
- Engender Health, New York City, April 18, 2006
- Latin American Studies Association
- National Institutes of Health, December 1, 2005
- American Anthropological Association, Washington, DC, December 2005
- American Public Health Association, December 14, 2005, Philadelphia
- Emory University, Department of International Health: Thursday, May 12, 2005
- New York City Department of Health, Thursday, March 3, 2005
- Alan Guttmacher Institute, Tuesday, March 14, 2005
- Mexican National Public Health Meeting, Friday March 4, 2005, Cuernavaca, Mexico
- Sociomedical Sciences Departmental Seminar, Tuesday, January 18, 2005
- Grand Rounds, HIV Center for Clinical and Behavioral Studies, Thursday, November 4, 2004

News items

Local collaborating agencies

- Instituto Nacional de Salud Publica (INSP)
  - http://www.insp.mx/
- Consejo Estatal para la Prevencion del VIH/SIDA (COESIDA JALISCO)
  Director: Dra. Patricia Campos López
  Dr. Baeza Alzaga 107
  Sector Hidalgo
  44100 Guadalajara, Jalisco
  Teléfono (3) 613-6646 y (3) 613-7456
  Fax: (3) 613-4503
  Sidatel (3) 613-7456 y 91-800-364-88
  Correo-e: jal-sida@hotmail.com
- Centro Nacional Para La Prevencion y el control del VIH/SIDA (CENSIDA)
  Director General: Dra. Patricia Uribe Zuñiga
  Calzada de Tlalpan 4585, piso 2, Colonia Toriello Guerra
  14050 Tlalpan, D. F.
  Teléfonos: (55) 5528-4084, 4848, 4637, 4856, 4865, 5811 y 4874
  Fax: (55) 5528-4220
  http://www.ssa.gob.mx/conasida

Degollado home page (to see more photos of local happenings in Degollado, click on 'eventos') http://www.midegollado.com

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