Exploring Ethno-Reproductive Cultures Through Cuban/American Perspectives

A Division III Thesis
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For my grandmothers.
Introduction
Introduction

I’m thinking about my most recent trip to Planned Parenthood. I’d called before and scheduled an annual check up, pretty routine, but I felt a tension start to build as I walked into the waiting room within the anonymous, corporate brick building where the clinic was located in the Northern Seattle area. I picked up a magazine, looked at my phone. I was thinking about the other times I had been inside a Planned Parenthood, they had not been especially joyous visits. There was a person waiting to be received at the front desk, they were anxious and their voice was tight and high. They were very young, my guess would be 16 or 17, and at this point in their conversation with the receptionist they were almost in tears. I overheard them explaining to the woman assisting them that they couldn’t pay for their visit or that they didn’t have anyone to call to assist them financially. I wondered whether they could not call for fear of jeopardizing the nature of the care they received here, or because their potential phone call would not produce sufficient payment. I hurt for them, I shuddered to think how some family members would react to hearing the uncensored truths of my reproductive history. I quickly wiped that thought from my mind, it was too frightening.

I averted my eyes as this conversation unfolded. This patient reminded me too much of myself, I had been sobbing in a clinic like this not so long ago. My mother had been there to stroke my head and be present with me during one particularly difficult day at Planned Parenthood. I wished that this person I was now seeing in the clinic had someone non-judgmental and loving to go home and cry to as they gathered up their backpack and rushed to leave the waiting area. I hoped they could possibly regain their power, be able and informed to
proficiently make choices for their body, while being supported financially and emotionally by loved ones, even be adequately assisted by the medical system within which this event is enmeshed. Witnessing this, I connected the event back to my mother, to my grandmother, who have taught me most of what I knew about birth, abortion, and reproductive health before attending college. I’m thinking about what I bring into the clinic with my body.

How I am examined, offered counsel, or not given it? After leaving the clinic, when I am alone with my darkest fears and regrets, I think of my family. How has my grandmother and mother felt about their bodies when entering a medical setting? Have they mourned, have they struggled when in similar situations as I have been, as this individual at Planned Parenthood has been? What societal trends follow us into the systems of care in which we receive treatment? What stigmas are attached to our personal decision making in the hospital, the bedroom, or the outpatient center? I ask the reader to think of these questions for themselves and for their own realities. Throughout this essay, using ethnography, interviews, and literature review, we unpack the ways in which our identities dictate how we access reproductive healthcare. My relationship to Cuba through my mother grounds my body and my lineage across oceans. With my writing, I ask myself how artificial borders define nations and simultaneously hold experiences had by bodies. How do bodies who reside/have resided in multiple nations contain their own experiences? I pursue questions that give me clarity into the way my body, and the bodies that made my body, have related to their environment(s). Steps forward in the reproductive justice movement could pertain to introspective work; examining how ourselves, our windows to physical suffering+transformation+healing, are located on the spectrum of receiving care. I try to
make connections between State, individual, ideas, and policy in the United States and Cuba within this work.

I frame this event back in the Seattle Planned Parenthood in the context of the reproductive justice movement, which I use in this work to argue for more nuanced attention to the needs of each individual in regards to their health. In conversation about the future of the reproductive justice movement and how it is implemented, I look at all facets of society and how it affects the body, to envision a reality in which reproductive healthcare is equitable, affordable, compassionate, and shared without stigma or fear. While I stipulate that reproductive justice is fluidly defined on a personal level, work by scholars like Loretta Ross, Dorothy Roberts, and Michelle Murphy refer to “RJ” as a movement that should consciously integrate all aspects of society(ies) and their pasts in order to fully conceptualize how best to serve those whose bodily (and emotional) autonomies have been compromised. In the words of SisterSong\(^1\), reproductive justice is defined as “the human right to maintain personal bodily autonomy, have children, not have children, and parent the children we have in safe and sustainable communities.”\(^2\) In other words, this movement is intersectional. To fully examine the policies that act like barriers for marginalized groups in achieving equity in reproductive healthcare access, I stress the importance of using intersectionality. By taking into account the ways that histories of racism, sexism, homophobia and transphobia play into the institutions such as the prison industrial complex, the United States educarion system, and the medical industrial complex, we as part of

\(^1\) Founded in Atlanta in 1997, Sister Song Women of Color Reproductive Justice Collective was created to advance the voices and ideas of marginalized communities in the reproductive justice movement.

\(^2\) sistersong.net
the RJ movement can make change to dismantle the systems of oppression that affect different identities.

Michelle Murphy speaks on the hypocrisy of global capitalism’s deceptively antinatalist social justice campaigns in Asia in her essay “Distributed Reproductive”, wherein the author envisions implementations of reproductive justice which are not bound to the site of the body. By identifying where “reproduction” occurs, if it is no longer restricted to the body, we are able to begin a global conversation that lets us discuss what systematically inhibits “justice: “If reproduction is a distributed process of living being already transformed by birth control, biomedicine, biotechnology, infrastructures, pollution, housing, militarization, development, criminalization, nation-states, queer politics, labor relations, and so on, what is an ontological politics of reproduction that can render legible how life is constituted through the infrastructures and political economies that exceed sexed and raced bodies as such?” This sentence, although extremely dense, touches the many institutions that affect the body through reproduction. I use the sentiment of Murphy’s writing throughout this work, arguing for a multifaceted gaze to view how or why the individual is prevented from having children, or choosing to not do so. The vastness of this scope is incredibly far reaching, but the notion of opening up all institutions of life, society, labor etc, for discussions on this topic brings us more opportunities to prevent the further oppression of those who have been victims to the systems of white supremacy.

Sister Song co-founder Loretta Ross explains, “White supremacy not only defines the character of the debates on reproductive politics but it also explains and predicts the borders of the debate”, which is to say what American society thinks about women of color and population

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3 Murphy (2011).
control is determined and informed by their relationship to white supremacy as an ideology. These beliefs, in turn, affect this country’s politics.”

Therefore, government incentives for population control, exploitation, and “imposing the state’s will on human reproductive behavior” is carried out in order to meet development goals through reproductive policies. White, brown, and black women are/have been targeted by pro and anti-natalist initiatives which are dependent on their political and historical atmosphere(s). As white supremacy dictates, political elites decide who, when, where and how individuals can reproduce and care for their babies. For example, black women’s fertilities are constricted by forced sterilization, the prison industrial complex that incarceraes mothers and parents of color, and a foster care system that enforces stereotypes that claim that people of color are not capable of caring for their children without the help of the state.

Women of color, white women, transmen, and gender non-conforming individuals all face limited access to abortions, biased sexual education programs, and socio-economic barriers.

As a movement, Ross hypothesizes, reproductive justice has room to grow and expand into a global force where domestic issues can be connected to transnational human rights struggles, putting emphasis on the fluidity between family, home, and society. This is where I situate myself within this work. The bodies of my family members have been exploited by the state in different and similar ways than my own. My own body has experienced different suffering/grief/triumphs than my peers, than other bodies that are more at risk to be controlled by hegemonies of the multi-faceted-ness of white supremacy. Therefore, my interests in this field

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4 Ross (2016), pg. 2.
5 Roberts (1994).
rely on how cultural, spiritual, sacred, and biological aspects of the body interact with the spaces they inhabit. I’m also interested in vocalizations of the body. I want to see, feel and learn how others talk about their bodies. I want to document and validate stories about choice and constriction in relation to bodies. I want to use language that is inclusive and open. My goal is to utilize literature review (history, anthropology, written narratives, art) to supplement the realities of public policy and physical, emotional, even spiritual interactions with our healthcare providers and our healthcare systems.

I’m drawn to compare the circumstances of reproductive healthcare access in Cuba and the United States not only due to my personal connection with the island, but also firstly, to analyze the opportunities for equitable healthcare distribution provided by Cuba’s socialist government. Could the cultures of de-stigmatized access to contraceptives on the island, especially the abortion procedure, be a reference for the US to use to reframe our religion-based anti-abortion politics? Could Cuba’s approach to prenatal care be used as a model for achieving equality in care throughout the spectrum of pregnancy? In this paper I critique Cuba’s healthcare system to see where it can be used to envision the future of reproductive justice in the US, but where the healthcare system fails to serve Cubans; I cite previous ethnographic work on this subject, Cuban history, and interviews conducted in Havana in the Spring of 2017 to make this analysis.

Lastly, I’m expanding on anthropologist Robbie Davis-Floyd’s notion of “technocratic” cultures to become “ethno-reproductive cultures” suggesting that a more nuanced view of an


7 Such as the use of state-supplied rations for expecting and postpartum families and the provision of maternity homes for expecting mothers.
individual’s fears, connotations, and past experiences of and with reproduction can shape our understanding of how best to serve different identities with adequacy and empathy. I suggest that an individual can be situated in multiple ethno-reproductive cultures simultaneously. One’s racial, class, geographical, ethnic, and gender identity, etc, make up how they are treated within the hospital and clinic, by law enforcement, immigration polices, or social services; which, as I have explained, are all facets of reproduction. Using this new model, I can start to visualize how to implement the values of the reproductive justice movement in a more holistic, personalized manner, whether we are healthcare providers, or a loved one of someone who has had an abortion.

Chapter I shares the interviews I have conducted with Cuban-American women in 2018. These conversations took place in person, over the phone, through questionnaire answers, or over Skype video chats. In hopes for a reality where all identities, and their bodies, are treated with compassionate understanding, this work is my own starting place to find an all encompassing mode of reproductive healthcare and healing, learning through history, research, and storytelling. Chapter II is a discussion of how I construct my framework of ethno-reproductive cultures, and draws on ethnographic and anthropological literature, as well as my interviews from Havana in 2017 with Cuban women, to form a comprehensive understanding of contemporary Cuban


9 I am using Davis-Floyd’s word “technocratic” as it refers to the cultural valences of the pregnant body that transfer to the biomedical world within the institution of the hospital. Using the author’s term “technocracy” as a starting place for constructing ethno-reproductive cultures, this sentence, displays how this framework can be used to view the body, and its relative location and identity during pregnancy: “Fortunately, birth itself is an amazingly resilient natural process. Midwives can guide and nurture its natural course, or physicians can dissect and technocratically reconstruct it...The real issue is not what is “best” in any absolute sense, but what aspects of culture are expressed and perpetuated, what cultural lessons are taught and learned during the production of new social members.” Davis-Floyd, pg. 1138
ethno-reproductive cultures. In Chapter II we look at contraceptive use, nationalized healthcare plans, and State-rationed pre-natal subsidies in Cuba. Chapter III of this work provides context for the Cuban/American experience, unpacking and expanding upon the term *cubanía*\(^\text{10}\). It uses art, theory, sociological and anthropological work so I can better share my own bodily experiences, and link it to the experiences of the people I have interviewed.

\(^{10}\) The essence of being Cuban. Also referred to as *cubanidad*. 
Chapter I: 
La Noria Interior

“Conventional, traditional identities are stuck in binaries, trapped in jualas (cages) that limit the growth of our individual and collective lives. We need fresh terms and open-ended tags that portray us in all our complexities and potentialities. When I think of “moving” from a sexed, racialized body to a more expansive identity interconnected with its surroundings, I see in my mind’s eye trees with interconnected roots (subterranean webs). When I was a child I felt a kinship to a large mesquite.” - Gloria Anzaldúa, from Luz en lo Oscuro

Constructing Cuban/American Ethno-Reproductive Cultures through Qualitative Interview Analysis
Chapter I
Constructing Cuban-American Ethno-Reproductive Cultures through Qualitative Interview Analysis

My ongoing conversation between myself and other Cuban-Americans has taken the form of formal interviews in person, over Skype, or through a comprehensive questionnaire. I stress “ongoing” because this project has committed me to explore the idea of learning through multicultural perspectives of identity, where individuals with similar and different identities add to my notions of the Self, of what I can claim as my own, or as part of culture(s). In regards to my discussions of ethno-reproductive cultures, I was curious, and am still curious, about what a Cuban-American reproductive culture could look like, or if it actually exists. It is my understanding that one can inhabit these reproductive cultures simultaneously, can move/pass/be entangled with them with ease or difficulty. It is doubtful to me that two individuals who co-habitate a culture could have the exact same embodied, lived experience. Again, this study is an unlimited dialogue of the realities of people who have immigrated themselves, or have parents who have immigrated to this country from Cuba.

I invite my readers to think of how this study could apply to any and all immigrant groups; what do we leave behind when we cross national borders? What do we (ourselves, our grandparents and parents) take with us? Says Gloria Anzaldúa in Luz en lo Oscuro, “Struggling with a ‘story’ (a concept or theory) embracing personal and social identity, is a bodily activity. The narrative itself works itself through my physical, emotional and spiritual bodies, which emerge out of and are filtered through the natural, spiritual worlds around me…”¹¹ Immigrants, 

¹¹ Andzaldúa (2015), pg. 66.
children of immigrants, especially brown or black immigrants navigate the crevices between the worlds constructed by institutions or by the cultural.\textsuperscript{12} We are left to decide for ourselves what labels serve us in this new terrain; migrants can define the spaces they inhabit as a home, a foreign land, a combination of the two.

In Anzaldúa’s analysis of the nepantlera\textsuperscript{13}, or a Self that exists between cultures, she uses what she calls \textit{el cenote} (cave) “… \textit{la noria interior}, a subterranean reservoir of personal and collective knowledge. Its surge provides new clarity inspiring me to formulate ideas that may transform my daily existence.”\textsuperscript{14} In creating a more inclusive, expansive and brighter picture of our ethno-cultures, we rely on our reserves of personal and collective embodied knowledge to guide us through adapting, assimilating, or resisting the two.\textsuperscript{15} We might eat \textit{maduros}, \textit{empanadas} with fish and other dishes. We sort of know how to dance the \textit{merengue}, but not well at all. We might wake up in the morning to the sound of chatter in Spanish, we may grasp some words and phrases coming from the kitchen, but hold onto the soft, levels of the language as they comfort and soothe sonically. We might have family members who hang their picture of \textit{La Caridad del Cobre} in their living rooms alongside their daughter’s \textit{quinceñera} photos. We might ask or have our mothers our grandmothers tell us about their abortions and births in unfamiliar

\textsuperscript{12} Referring to institutionalized medicine and healthcare in the case of this study.

\textsuperscript{13} Note that Anzaldúa is using the \textit{nepantlera} to describe Chicanx culture. It is a Nahuatl word used by the Aztec peoples to describe the feeling of being in between cultures, under Spanish colonization. Because of the necessity for this concept to remain attached to Chicanx theory and culture, I suggest that we use Anzaldúa’s work with with term to think about expanding on ethno-reproductive cultures, while keeping in mind our own connections to colonization.

\textsuperscript{14} Anzaldúa (2015). pg. 66.

\textsuperscript{15} I suggest looking at Koshy (2006) for more detailed understanding of how Anzaldúa’s theories can be used in all types of transnational interactions under colonization.
American cities. We may think about what our mothers and grandmothers have told us about abortion and birth while we ourselves are in these situations. We might also have none of these instances of cubania to hold onto. Having none of these connections to cubanidad is valid in this research.

There were general guidelines to find participants for my study. I made advertisements to look for Cubans/Cuban-Americans over 18 years old. They were placed in social media forums for queer/latinx/students of color, free and for sale pages and school groups. I asked friends and relatives to think of participants who fit the description, and if they could give me their emails or phone numbers. After identifying a potential interviewee, I would send them the questions I might frame our conversation around, asked them to think about their answers beforehand and to tell me if they were made uncomfortable by any of the material. Some of the participants told me during the interview that they asked their families for information they did not know, so that their stories could be included in the project. I’m grateful to them for lending their stories and the stories of their families, to this work.

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16 Study was approved by the Institutional Review Board of Hampshire College in the Fall of 2017.
Interview Questions

Interview Questions:

Introductory:
- What is your name?
- How old are you?
- Where were you born?
- Where were your parents born? What are their names? How old are they?
- What about grandparents?

Identity:
- If you had to describe your identity to me, as many aspects as you’d like to include, what would you say? Is there a part of it that you embrace, or reject the most, and why?
- If at all, how do you relate to your Cuban-identity? How does your Cuban-ness relate to your environment? How does it influence your life in the United States? How does it change, conform to your surroundings, if it does?

Sexuality:
- Can you remember the first time you talked about sex with your family, what did they tell you? How’d it go? Did they bring it up or did you?
- Can you remember a time when your parents/extended family has talked to you about having children? Their plans for having children, or yours? Family planning?

Birth stories:
- Can you tell me the story of your birth? Can you tell me the story of your parents’ births?
- What are your parents’ dreams for your life? Do they have plans for your future, and do they coincide with your own? What about your grandparents?

Reproductive Health:
- Do you remember when you learned what contraception was? Can you describe that for me? Who or what influenced your ideas about different types of contraception?
- Do you use contraception? If so, which one and why? Who and what influenced your decision to use it?
- What does reproductive health mean to you? Who and/or what has influenced these ideas?
- Have you been pregnant? Given birth? Can you share the circumstances of your pregnancy(s)? Can you share any stories in which you were pregnant, in labor, postpartum?
- Have you had an abortion? Can you share the story of your abortion?
Discussion

I’ve struggled with choosing a format to discuss and share these interviews. Because they are lightly structured narratives, they flow: and I feel like I take away from the sharing process when I dissect the interviews for the sake of analysis. Every encounter, every connection I made through these interviews has been rich and refreshing. These narratives have led me to believe even more strongly in the multiplicity of experience and identity. I structure this analysis by detailing the circumstances of how each participant relates to their *cubanidad* in a way that can highlight the shifting and malleable forms that are the ethno-cultures they are a part of. Because each interviewee’s *cubania* manifests, or is silent in different spaces, places or identities, I’m organizing these recorded responses by topic, no matter what their answer contains. I make conjectures about these responses, or suggest patterns in the findings where they can be used to create more inclusive imagery of the Cuban-American experience(s).

To begin I reference the first two interviews I conducted for this project. I discuss them beside each other because these two women are drastically different and yet, similar. These particular interviewees happened to be the two first-generation Cuban-Americans that I spoke to. I reached out to both of these women after being introduced to them through a friend, and through my mother. June and K, ages 70 and 21 respectively, migrated to Miami in very different modalities.

\[\text{\textsuperscript{17}}\] Name has been changed. Participants were asked to choose an appellation other than their own. Interviewees who did not provide me with a pseudonym are identified by their first initial.
My conversation with June was an hour of Spanglish, talking about recipes, and going over the circumstances of June’s immigration to the US. June and her brother were a part of Operación Pedro Pan, an initiative led by the Catholic church from 1960-62 for Cubans to send their young children, unaccompanied, to the US in order to save them from “Marxist-Leninist indoctrination.”18 With their parents vehemently opposing the socialist tide of the Revolution, 14,000 minors immigrated to the United States, sponsored by the Catholic Welfare Bureau of Miami. Some of these children never saw their families again. June tells me during this time her father had “disappeared”, but her mother’s familial ties to the new socialist government afforded her protection. Says June about her migration,

“They put us on a plane. All these children…I was placed in a foster home in Albequerque NM, and my brother was placed with the Jesuit priests. We went to the same high school, so I got to see him there. I remember the food being different. There were 4 other kids and it was on a farm.”

June told me she identifies strongly with Cuban culture through Spanish language, food and music. She relates with the idea of liberation from labels of nationality, she explains this by referencing the political climate of her youth:

“I feel Latin because I lived in Mexico and El Salvador, traveled to all Spanish speaking countries. The more that I have grown spiritually, I see myself as a child of the Universe. I identify with the human race, in general…I grew up in the ‘60s, it was [about] liberation…very tumultuous time, it as all about liberation, about human rights, civil rights, the Vietnam war. I consider myself a child of the Universe.”

June feels connected to her Latinidad because of her relationship to her travels in Latin America. She is a traveler, a translator, and a writer so she says,

18 http://www.pedropan.org/
“I’m pretty acculturated. That’s our gift. To see what is different and what is the same. And that makes you grow.”

For June, her identity is more Latin than Cuban. The political turmoil surrounding her departure from Cuba might prevent her from accessing her cubanidad. I suggest that the children involved in Operación Pedro Pan might relate to their identities in a different manner than Cuban migrants who immigrated with their families. The religious backing of the program, as well as the separation of children from parents, many to never be reunited, forms a unique version of cubanidad in of itself. Because of June’s travels, her teenage years spent in a household different than that of her family’s, and her relationship to the liberal movements characteristic of the times of her youth, June identifies doesn’t seem to claim her cultural roots to Cuba as strongly as some of the other of my interviewees. She explained that for her, Cuba might be a “starting place”; she tells me about her teenage years very steeped in American counter-culture, which might have contrasted sharply to the values of June’s family, who were so opposed to the incoming Castro government that they would send their children abroad to escape its grasp.

K, age 21, tells me over Skype that she migrated with her family to Hialeah, a predominately Cuban suburb of Miami, when she was less than a year old. She explains that her paternal grandfather had a Puerto Rican passport, allowing her mother to join him in the States:

“My grandfather called my mom...at that point she had the choice to leave by herself or wait five years to leave with my sister and my dad. She decided to wait, and I was born. And after those five years, we could all come...My parents would describe themselves as [part of] the exile community...We left because of the political climate, educational purposes, lack of jobs... My mom had a degree...When she was 15 she studied in the Soviet Union for 3 years...She was just looking to do something else.”
K speaks about her childhood in Hialeah versus her time spent in her family’s apartment in the much more Anglo-cized neighborhood Miami Springs, and in college, how she’s redefined, or incorporated her Cuban-ness in each space that she occupies:

“I always say I’m Cuban, even though I guess I would be Cuban-American... I don’t know. I would probably never say Cuban-American, unless I was doing something political. Otherwise, if they ask me, I say I’m Cuban; I’m brown, Cuban and queer. That’s how I’d describe myself. I fully embrace my Cuban roots, definitely my brown skin... I think the parts I haven’t come to terms with are my Afro-latinidad. My parents never...I feel like there’s a lot of color-ism in Cuba, so I feel like my parents never embraced that part even though my great-grandmother from my mother’s side was African...I feel like racism is never talked about in Cuba, I feel like because of that, I never got to know my afro-latinidad, my roots that come from African cultures. I wish I knew more, I wish I could embrace that, because I’m dark skinned, more so than my white counterparts, white passing Cubans, which are the face of Cubans mostly. That’s a part I wish I could embrace. But I feel like I have not.”

K makes the distinction that she is not able to access her cubanidad as completely as she would hope. Her family’s aversion to acquainting K to her afro-latinidad could be an indicator of Pre and Post-Revolutionary Cuban attitudes towards racism, in which challengers to the supposed “color-blindness” of Cuban socialism are silenced or looked over, using social rhetoric from anthropologists like Fernando Ortiz.  K’s testimony references her inability to situated her Afro-latinidad with her cubanidad, we can connect this to racial politics and inequalities in both Havana and Miami. I might infer that K’s relationship to her identity has been restricted by these “post-racial” narratives of pre-revolutionary contemporary socialist Cuba. Therefore, we can situate K within her own experiences as a brown, queer, Miami-based, first generation Cuban.

Moving forward in this chapter, I let these stories speak for themselves, and only add analysis where I feel that context is warranted. The addition of background for these interviews will help the reader discern what I am trying to piece together. I suggest that the readers use this

19 De la Fuente, 77.
as a starting place to review the cultural valences that make them who they are, how these valences dictate/influence how they relate to their bodies. This is personal and interpretive. I try and hold off on doing too much explaining of these interviews, but rather appreciate and honor each experience, and share it through this study in order to open up discussions to connect our intersecting identities for a better viewing of what reproductive cultures could manifest as.

Identity

How would your identity change if you moved somewhere new? Where you didn’t speak the language? How would you introduce your identity to a new friend? What inhibits you from sharing what you want to share about yourself with others? Is there anything about yourself you’d prefer to hide, or to shelter from others to keep you safe? My participants discussed their relationships to the Spanish language, to their families, to afro-latinidad, among other components of themselves to explain to me how they value their different identities.

“I’m a woman, queer, and Cuban. But also, a big part of being Cuban to me is being half Cuban. Because I do relate to a lot of people who are half because…I don’t feel like there’s one part of me that I reject at this point in my life.” -Elena, age 20.

“I identify with my culture first… being Cuban-American was always very part of my identity, especially growing up in Miami…I also identify with my profession as well, being a psychologist, those two go hand in hand for me because of cultural factors when you see patients...knowing that the Cuban culture really doesn't go see psychologists...it was almost like a running joke in my family. Being a friend, a sister and a woman, those are all very much part of my identity as well. I think Cuban comes first, especially having lived in Connecticut, 9 years total and losing my roots, it reinforced that for me. It was very much part of my upbringing as well, my grandfather was very traditional, Cuban. I grew up with my grandparents and that was very much part of our makeup.” -M, age 45.

“I guess I identify mostly as mixed but even that I don’t identify as mixed because I am all of the parts and having to identify bits becomes very stressful because as mixed, I often don’t feel fully either one or the other. I feel mostly that I just am and continue to explore my likes and dislikes
by what feels good and brings me joy. That being said, I guess I would say my mom is Jewish and
dad is Cuban, I am Juban? I am second gen. Cuban-American. On standardized forms I often put
white & Latina.”-J, age 22.

“I identify as Cuban-American because I was born in the US but raised in Cuban culture. I
mostly identify with my Cuban heritage because I grew up speaking Spanish and spent many of
my formative years with my paternal grandparents, who I am very close to.”-E, age 21.

“Sometimes I’ll be like, I’m American. I went to parts of Europe, and I’d say I’m from America, I
didn’t feel safe being like, ‘I’m Cuban’, I don’t know if it’s ok to speak Spanish right now. As a
protective thing I’ll say I’m American and leave it at that. Sometimes you just don’t feel safe.
When I was at [the college that she attends] I’m like ‘I’m Cuban, I’m from Miami, I’m loud, I’m
here’... I took up that space. I felt comfortable enough to do that. When I went abroad, I went to
Spain, I said I’m Cuban, cause there wasn’t a problem with the language. It really differentiates
in Europe. [For example in] France... a place that doesn’t really like Americans, I would say I’m
Cuban. I have to feel it out, but it is like a routine.”-K, age 21.

“My first notion of being different, of being different in the United States, of not being of the
main culture, that is of Caucasian, was when I went to graduate school up in Connecticut. Up
until that point...I had never experienced anything but multiculturalism growing up in Miami. So
I say that all my friends were Cuban-American. That was, to me, the main culture. We were
Spanglish all the way. We would speak English and Spanish, switch between the two, very fluidly
without even realizing it, that was very much the norm until I went up to Connecticut. It was the
first time I experienced racism or prejudice... My Cuban identity made me feel more strongly
about my values and where I came from...I was very lucky to be bicultural, and embrace both,
and that has certainly changed through the years because I remember growing up there was a
time that I didn’t wanna speak Spanish...You kind of reject a little of that, ‘why do I have to speak
Spanish at home?’ My grandmother didn’t speak English, we weren’t allowed to speak English at
the dinner table because it was rude to speak in a language that someone couldn’t understand, so
my brother and I would often sit there, mute, would not speak a word during dinner [laughs] but
as you get old you realize how much of that is part of your identity...In Connecticut...at first it
made me realize that it was important for me to educate others that may not be familiar with my
culture...it led me to explain some of our customs, some of our values, some of our upbringing,
and how that could be different from other cultures, or could be very similar. It also made me
gravitate more toward people who were similar to me. I went to a graduate program where there
were only 3 Hispanics out of 28...I felt the need sometimes to speak Spanish, because I happened
to think of something that was perfectly expressed in that language, it made me more aware when
I started doing therapy...patients who were bilingual would switch between language...We
sometimes speak the more emotional content with the language we have preference for, it was
nice to be able to see individuals who knew they could switch between languages with me and,
and that I would understand where they were coming from, and that they would understand
where I was coming from. There were definitely places I would not speak a lick of Spanish,
because I knew I would be viewed very negatively. You know your role is sometimes to educate
other people in what your culture is like, but then there’s times when you know its not accepted, regardless of what is occurring... [Being Cuban] isn’t something I’ve flaunted or told everybody ‘hey, I’m Cuban-American’, but if it did come up in context I was willing to share it. I didn’t hide it and I didn’t flaunt it. I’m very proud of it, I’m never gonna hide it, but I know there’s certain places where it’s not safe to be Hispanic. I learned that through my experience in CT, believe it or not, where people were just, not accepting. It helped a lot to be in Miami, to be part of a very multicultural place that’s so energetic... My grandfather used to say that if you lived in Miami your whole life you didn’t live in the United States, and I agree”.-M, age 45.

“When I was little, because of the way I look and because I can’t speak Spanish, I kinda didn’t say I was Cuban... I think in 9th grade I started to do so because of some teachers I had and things like that... I could kind of think about it more and also express it more outwardly... it felt like people would be like ‘No you’re not’ and I’d be like, ‘yeah, I am.’ In the US, I can say I’m Cuban and people will relate to it a little but more but here [Mexico, where she was studying at the time] people don’t think of me as Cuban here....At school, or in places where I’m just meeting people, I feel like I want people to know who I am... even with my name... I don’t want people to think I’m trying to present in a way that I don’t act, but I feel like I want people to know who I am in little ways... and at home I feel like I don’t have to do that. Like if I’m just with my mom.” -Elena, age 20.

“There are lots of other Latinos where I live but not many Cubans, so it is exciting to meet other Cuban people. I feel like because I have experience living in a community of many cultures that are different than mine, I feel fairly comfortable navigating other cultures without feeling uncomfortable or out of place (because I am used to it). I feel like I conform to my surroundings in a few different ways. For example, when I am speaking English and I say a Spanish word I use an English accent rather than my Spanish one because it doesn’t interrupt the flow of the conversation and I feel like English-speaking people are more likely to understand me that way. I do the same thing when I use English words when speaking Spanish. I also tend to speak to people in the language they feel more comfortable speaking rather than the one I feel more comfortable speaking (if possible) out of habit.” -E, age 21.

Sexuality

When did you first talk about sex with your family? How’d it go? Who brought it up first? Was it a formal, structured conversation or did it come up naturally? Was it important for
your family to inform you about sex and sexuality alongside its (supposed) religious components? How did you feel? My interviewees shared with me some of the first times they talked about sex with their family members, usually their parents. They spoke about awkward encounters and conversations, values of Catholicism and its influence on “sex-ed” talks, and the subtleties of intra-familial homophobia. For example, during this section of my interview with June, we talked at length about her parents’ views on pre-marital sex, which they related to her as being sinful. June remembers hearing during her youth that men (she did not specify between friends and family members) held an aversion to wearing a condom during intercourse, “It wasn’t manly, it wasn’t macho...” she says to me.

I use this as an example of how personal narrative can indicate bigger cultural trends as we examine the components of ethno-reproductive cultures. By realizing the barriers and catalysts that dis/allow us to express our sexualities, we can make greater connections to the societal values that prevent or urge us to procreate. June’s upbringing in a strict Catholic household, her knowledge that men were reluctant to using a condom, or a device that would potentially not allow them to fully express their virility, gives us insight into the machista reproductive cultures that she is, and that others might be, subject to.\(^\text{20}\) Below, I share how my other interviewees relate to their sexuality in relationship to their cubanidad, and how and where they have learned to express or hide it. In this section, I also asked participants what their families want/wanted for their lives; do they want them to have children right away? Continue their schooling? Get married? I believe that the vision of my participant’s families for their

\(^{20}\) Smith & Padula (1996) stipulate that men actually preferred the abortion procedure to other kinds of contraception prior to/on the eve of the Revolution as a pregnancy (even unplanned) could confirm their sexual potency.
education or home life is correlated with how their families feel it is appropriate for my interviewees to express themselves, including sexual expression.

“'My mom says all the time, 'I can’t wait for you to get married, and have children, with a man...' I’m like 'ok, I get it'. They’re such nice people but so bigoted. It really has to do with faith, religion. I don’t want to peg everyone who is religious as a bigot but, for the most part...religion tends to bring out that. They’re very homophobic, transphobic, racist... to which I’m like 'why, you’re brown...’ they’re very prejudiced...So it’s like, ‘Marry a white man that has money, and have children, [focus on] your career,’. Also in a way, very contradictory, because they’ll be like ‘Don’t marry a man, marry a rich man’, ‘Follow faith’...When I was growing up it was like ‘Don’t even look at a man or a boy’, and then I guess they started getting scared. They would find things...like a queer magazine on my bed...or a Rocky Horror poster... and so they were like ‘why have you never had a boyfriend?’ They never knew about anything. So I was like ‘You told me to never have a boyfriend, that’s on you’...It’s been this contradictory, hilarious thing about sexuality, sexual expression, orientation, everything.”-K, age 21.

“I was not ok talking about it [sex]. With my mom it probably came up in conversations about my sisters and things that they were doing wrong, or about her own history. I think it came up in talking about things like abuse, bad things, bad experiences that she had or my sisters were having. The first time I heard about it from my sister was because my other sister got herpes, or something like that... she just told me ‘Ew, that’s what happens you do gross stuff’...”-Elena, age 20.

On talking to family about their plans for her future: “I don’t remember a specific conversation but I know that my parents would not be happy for me to have a child soon. The only other time I can think of is actually when I was in Cuba, my aunt also told me to use protection to prevent from [having] children and from diseases, reminding me of a commercial/PSA she saw about it and saying she didn’t know what conversations I’ve had about it with my family but she’s had this with hers and she just wants me to know. We talked about it with my cousin there too...”-J, age 22.

“I’ve always said that I didn’t want children from a young age so people don’t really ask me about it.”-E, age 21.

‘My mom was a teenage mom...my mom had my brother when she was 16, she had me when she was 19 and so I think that because she was such a young mother, you would think she’d be totally open to talking about sex all the time because she’s only about 19 years older than I am, we all kinda grew up together, but it became, I don’t know if it was a mixture between, raised Catholic, and sex being taboo before marriage and being raised very traditional that way, the fact that she was a teenage mom, the talk around sex was always very negative. It was always about ‘you don’t have sex until you get married, you’re going to hell if you’re having pre-marital sex’, the fear of god that you don’t get pregnant...Very early on the conversation around sex was never
positive or viewed as open, so I’d say that most of my conversations about sex were around friends, it was never with family. It don’t know if that has to do with Cuban culture per se, or having a teenage mom and her being petrified of us falling into the same pattern…because education was such a driving force, my family was like ‘you can’t deter from that goal’, these questions made me think, ‘did we ever talk about that?’ I don’t think so. You talked about your boyfriends but in a very indirect way…you never came out and said you were dating anybody…” -M, age 45.

“I know my grandpa’s really happy with what I’m doing because…all my siblings ended up having really…not good outcomes for lives that people wanted for them when they were young. My sister is in a pretty bad abusive relationship, she was an escort, and ended up addicted to cocaine…that made my mom really sad…and then my sister has never really been able to live alone, she’s also been with abusive guys…so my mom’s actually put a lot of pressure on me to actually do something different, like ‘You’re my last chance’..which was good, if I did anything she’d get insane, about little things. My mom’s a really good grandma, one of my nieces and one of my nephews lives with me, cause my sister and my brother live with me, the two youngest ones, my mom’s really close to her grandkids. I know that she wants me to have kids. I wanna have kids, too…” -Elena, age 20.

Birth Stories

In this section I asked participants to share their family birth stories with me. I specified that the stories they shared with me could be the story of their own birth, that of their children, their grandparents, or their parents. This prompted a number of my younger interviewees to ask their family members for their stories, as they had not given birth themselves. Through this set of questions I wanted to know what the interviewee’s previous connotations of birth were and/or how they, or other members of their Cuban family had experienced birth in Cuba or in the US. I stressed to my interviewees that if they chose to share with me in this section, that they tell me family stories that were most pertinent, interesting or intriguing for them to relate. Because I found my participants mostly through friends, my interview pool consisted mainly of
undergraduate students who had not given birth, so I heard more stories about sisters, mothers, and grandmothers than I did about personal stories of labor and pregnancy.

“The lights were off. Lights go off in Cuba sometimes. My mom was with my sister in the house and then she ate a really big plato of arroz amarillo. She was super full, and the lights go off. She gets really nervous, and she starts feeling really sick, she thinks ‘I think she’s coming.’ She drops my sister off with the neighbor, and she walks all the way to her brother’s house. Her brother, who is still in Cuba, had a car… He lives so nicely, he has a pool at his house. My dad was at work, she waddles all the way to her brother’s house, who gives her a ride to the hospital. She’s in labor… my dad never went. I think he just didn’t know until after I was born…She has the baby by herself. After 10 hours, I was born in the morning, en la madrugada. The sad part of the birth was that my grandma wasn’t there…my grandma had been at my sister’s birth but she had already gone to the US…I came out with asthma. I don’t have asthma anymore… it required a lot of hospitalization, they put me in NICU, they had me hooked up to a lot of IVs, that was a very scary part of my birth. My mom would sometimes have to rush me to the hospital, I would stop breathing…I was a very problematic child, a very sickly baby. [K’s mom] remembers a lot from my first months, being in and out of hospitals. She said it was very difficult to not be able to take your baby home.” - K, age 21.

“‘My mom told me my grandma didn’t talk to her about birth before, she learned everything from her aunts… My grandma’s only thing that she told her about birth was that in Cuba she didn’t feel any pain giving birth, but when she gave birth to my uncle, my mom’s younger brother, she felt so much pain…”-Elena, age 20.

“Back when [M’s mom] was pregnant, they didn’t have the sonograms and other wonderful things that they have now that they can tell what they’re having, so it was always a surprise what you gave birth to. My mom always said that if I was not a girl she would’ve pursued having another baby, cause my brother is older. She was thrilled I was a girl, and she didn’t have to have another baby. The thing that I commonly hear about my birth, or the pregnancy process was that [M's mom] threw up for the first 7 months, and that she ate cheetos all through her pregnancy…after she gave birth to me she never had another cheeto in her life. It was a happy time, I never heard anything different, she was young, and my grandparents were excited to have another grandchild. They only had my mom, so it was wonderful for them to have 2 grandchildren.”-M, age 45.

“I can’t tell your story of my parent’s birth. I vaguely asked my dad he just said he was born in a hospital that was big at the time somewhere behind the University of Havana in the Havana area.”-J, age 22.

‘My mom was born in her house. My grandmother gave birth to my mother in her home with a midwife… I don’t know if she was an actual midwife, but another woman…and then they later on went to the hospital. My grandma wanted a private birth, my mom says my grandma was a very
shy person... she got a hunchback because they were very poor so she couldn’t afford a bra. She spent all of her life hunched over, covering her breasts. Very shy, very modest. She would feel very exposed if she had gone to the hospital. Which, didn’t transfer over to my mom, my mom went to the hospital [with K].”-K, age 21.

“My mom’s [pregnancies] were all a little sad to me. I know she had a miscarriage, but she didn’t wanna have another kid... but my dad was so old and wanted to have a kid... she had a miscarriage first and then she had me. The night before everything was fine and she was gonna have me really soon, they were like ‘perfect, her head’s in the right spot’ but then I flipped, so she had to have a c-section at 5 in the morning. She told me ‘with my other kids, they always come out normal’. My sister was born in 1979 in Puerto Rico21 when my mom was 18. And that one’s just sad to me, I knew more about that one... her mom wasn’t allowed to come in the room with her, it seemed like a really horrible hospital. They left her out... they brought her out into the hallway and shaved her in front of everybody, really rough, she was alone... everyone left to go watch a baseball game and she was in a room with 4 other women, with curtains. She started yelling ‘it’s coming!’ and by the time the ladies came in... the baby came out. But they took [Elena’s sister] away from her for the whole night and she didn’t get to see her until the next morning... I don’t know if he [Elena’s mom’s husband at the time] got there on time but his mom ran a business... apparently the hospitals were so bad that everyone knew... they would go to someone like her husband’s mom and she could hire a nurse to go into the hospital and just sit with you, and try to help you. The next day, that woman came and helped her a little bit. I don’t know why she could go in and her mother [Elena’s grandmother] couldn’t. My sister was born in 1984, and my mom was 23, and she had just started college, and had made it through the second quarter [in Atlanta]. She moved to Atlanta because her husband got a job at an airport. My grandmother recommended some doctor that she had heard about who was in Atlanta because he was Puerto Rican, and he turned out to be horrible. My mom was like ‘why did I let her decide for me’. She gave birth ok, but afterwards he tried convincing her that she needed to have her uterus frozen and extra parts scraped out, some other weird procedures. He put a long string of gauze... shoved it inside her with a tool, to stop the bleeding. It was really unnecessary... With her first kid, she said her husband wouldn’t let her breastfeed after 2 months, and with [Elena’s sister], she got a kidney infection. I think my brother and me breastfed for very long. My brother was born in Atlanta in 1985. This one was really sad because my mom said that her husband was really abusive and had a lot of mental health problems... During that night when she gave birth, he started having an attack and she was really stressed out.”-Elena, age 20.

June, my first interviewee, told me about her pregnancy with twins. The father of her twin girls was the first person she was ever “intimate” with. She told me she had no previous concept of labor and pregnancy, “only pain”. June laughingly admitted that her partner

21 Elena’s mother moved to Puerto Rico when she was 2 years old, in 1962
suggested she make a vaginal wash from Coca Cola, and use that to prevent pregnancy. She skips years ahead to her twin daughters’ arrival at puberty; June’s job at a local health care center in New Mexico allowed her to access information on reproductive health in a way she had not been able to previously. She brought her twins to the Planned Parenthood across the street from her job so that they would be able to make informed, conscious choices for their futures.

Reproductive Health

I asked participants open ended questions about situations in which reproductive health was discussed with their families. I wanted to know what had influenced their ideas about contraceptive use, how they had heard it explained by peers, media, or family. In particular I was curious as to how they viewed abortion; I thought perhaps there was a connection between the current climate surrounding the procedure on the island and whether or not the trend would continue in the US. I made sure to reference the emotional components of the narratives my participants shared with me once I had asked them whether they were comfortable accessing those stories. Once or twice I caught myself asking a second time for a participant’s consent to continue onto this section, even when consent had already been given, which revealed to me somewhat my own cultural perceptions of abortion as an ultra-sensitive topic. I found it compelling to note how each participant talked about religion within their families, and how their relationships with spirituality and abortion differed from that of their relatives. This varied from conversations on this topic I had had in Cuba, where very little reference to religious aspects of abortion were made.
“My parents are very conservative. My sister was born; my dad was like ‘I don’t want any more kids.’ My sister is 4 years older than me. Two years before I was born my mom got pregnant. And my dad says ‘I don’t want it, get rid of it.’ So she got an abortion. Two years after that, she was pregnant again with me, and my dad is like ‘I don’t want her’ and my mom said ‘No, I’m never doing that again.’ And then she had me. I’m my dad’s favorite. She’s told me that he has felt really guilty ever since then because of that…Cause he wanted to get rid of me and then ended up loving me. But I feel like my mom has never gotten over the fact that she’s had an abortion. Religiously, she cannot think that she did that. Once she found God, she was like ‘oh my god, I killed someone’, is her mentality. She’s always asked for forgiveness from God, spiritual forgiveness, it’s really sad every time she talks about it. She’s talked about it maybe like 1 time. There’s a lot of guilt attributed to it. Contraception isn’t an option because premarital sex shouldn’t be an option. She thinks, ‘why would you use contraception if you’re in a relationship?’”-K, age 21.

“My grandma’s Catholic, I think she used to be way more religious when my mom was growing up and I actually I never talked to her that much because I couldn’t speak Spanish. I finally learned how to speak Spanish but she has Alzheimer’s so she can’t really talk to me that much… My mom has definitely had an abortion, and she’s not religious. She grew up Catholic but she’s not religious anymore. The few times my sister has gotten pregnant at horrible times with horrible people… My mom kind of convinced her to get an abortion… I think the second time my mom kind of convinced her to do it and it became a big thing that hurt my sister. My sister has also been with a lot of abusive partners, she ended up having a kid with the same guy later but my mom just didn’t want her to have it. My mom’s 100% ok with abortion but I don’t know about the rest of my family. I have the feeling that, at least one of them is ok with it.”-Elena, age 20.

“Interestingly enough, we talked about abortion in my family because my grandmother had a couple of abortions. She had been pregnant before. So that was a topic that was discussed, not openly, but it wasn’t a hidden topic either. It wasn't discussed in the sense that if you don't want a baby, that’s not your only choice. I think pregnancy was always discussed in a very responsible way, you tried to avoid getting pregnant because you really don't want to have an abortion. Abortion was discussed in the context of, that’s really your last resort. I think I have more discussions now with my mom, and I think its because I’m a psychologist and nothing really bothers me. I think I’ve heard it all, through the course of my career, and working with so many different patients, and I think I tend to make my family uncomfortable because I’ll bring up topics that make them feel uncomfortable but I think I always feel like its important to talk about certain things, I’m just open that way. I think my profession kind of opened me to many different dialogues and views of life, so my family sometimes are squirming and I’ll bring up like, incredibly uncomfortable topics, and try to discuss them at the most inopportune times…It wasn’t talked about… [not] knowing the full responsibility that abortion is. When I became a psychologist I had an even better understanding of the impact of abortion, and the impact on a woman's body, and how it’s really an area that is not researched enough. A lot of women struggle, even if it was the best decision that they made, they still struggle with that decision years later. Because it’s sometimes treated as so matter-of-factly, and it’s so quick, and it’s so…
that I find that it hasn't been given the appropriate context, for some women. Through my experiences working with women that have had abortions is that, although it was the right decision they still struggle with that end of life, and what that represents. I think I see it very differently now, than in the context of my family, or through the discussions that I’ve had with my family. I think it was just kinda factual. It was something that was more common, back then in Cuba, because you didn't have a lot of these technologies that you have now or, advances in reproduction, and contraceptives and all that, so I think that topic may have been a little more discussed because of that. That’s my take on it, and I might be completely wrong, I think that may have something to do with it.”-M, age 45.

“Reproductive health means not only feeling safe and protected but also knowing your options and being able to learn and try what is best for you and your partner/s. I feel like this has been informed by nurses but also by my friends who are on different forms of birth control and by own education and understanding of the lack of sexual education at large but especially when it comes to women and how to take care of our bodies. I feel like we’re not always told that we can change and see what works and feels best. We’re not told to be aware and in tune with our bodies. I feel like nurses have mostly reminded me that we can try certain things and evaluate later. My mom also reminds me that many contraceptives have hormones and that that can be dangerous or not good for women.”-J, age 22.

“I have always felt very strongly about reproductive health because deep down I have always believed that a person has the right to say what happens to her own body. My mother does not share my beliefs but ever since I was young I have disagreed with what she has told me. I think that being raised in the US allowed me to develop confidence in my own ideas and individuality and made it easier for me to formulate my own beliefs because I have always grown up believing that I have the right to believe and say whatever I want.”-E, age 21.

“I remember it was a car ride...we’re driving back to our house... I feel like there was something that triggered it...I asked her how [K’s parents] named me. She had talked to me about the meaning of my name. In Hebrew my name means ‘community’, I asked ‘how did you come up with my name?’ She says, ‘I was sitting on the sofa, really really pregnant, there was other people around, all of a sudden, I feel like the world stopped. I heard a whisper from God...’, or a whisper from something, ‘in my ear.’ She wasn’t always religious... My dad wanted to name me something else. Then she said, ‘that was such a beautiful moment, it was like God spoke to me... I really wanted to tell you-‘ and then she told me about her abortion. ‘Before you came, there was supposed to be another baby, but I got rid of it, I never want you to go through anything like that...it’s the most horrific thing that could ever happen to a woman, or in a relationship...’ things like that.”-K, age 21.

“I don’t remember having a conversation with my mom where she’s said ‘you should do this’... She told me that she had an abortion... it was very much like, if you’re not supposed to have a kid don’t have a kid, was how she said it...”
[When I asked Elena what kind of emotions she felt during that particular conversation]:

Practical, kind of emotionless about it. I think it really does come down to men and abusive relationships and my mom just doesn’t have time for it, which is sometimes hurtful to my sisters, because my mom has her own experience with abusive partners, she feels like she can say anything about it. It took her three kids to leave, and she’s like ‘Well I left and I told you about it so there,’ really practical. She feels like she can say that because she went through it...she talks about abortion because its related to her abuse, and not being ready, she’s just very practical and not emotional about it. I’m on birth control just for my skin...my mom just never told me about it... I’ve been with my girlfriend since tenth grade and we were like, it was super obvious but no one said anything. I don’t really know what they were thinking about it because it was so...but then I’d bring over a guy friend and they’d be like ‘oh my god’, it was just very confusing...or she didn’t tell me about because she felt I didn’t need to know.”-Elena, age 20.

[On what has influenced her connotations of reproductive health]: I think mostly society. Like I said, I never had any pressure to reproduce, I wasn't getting that from my family...and again, some women in my family never had kids. On my mother’s side, a lot of aunts and uncles, even, didn’t have children of their own. My mom’s closest cousin, who was like a sister to her, had a horrible appendicitis, and lost the ability to reproduce when she was in her early twenties. Seeing her, seeing her life, and what a healthy and balanced life she had without even having children, kind of allowed me to think, like ‘if I don’t have kids, it’s ok too’. ...There was a point in my life where reproductive health was influenced by friends, in the sense that I think I got more pressure in terms of being healthy reproductively, or feeling like I can’t have children, when friends were getting married and all having kids. For a split second I think ‘Should that be me?’ ‘Should I be having kids too?’ ‘Am I losing my prime years to have children and being able to get pregnant if I wanted to?’ That lasted for like a split second for me. It was just not...That’s really my concept of it. It’s important but it wasn’t, but it didn't define me, and it wasn't my identity. I’m a very proud aunt right now, I have a niece that’s two years and she’s the apple of my eye, but I love giving her back to her father and her mother; I’m like ‘I’m good, you can come visit with me, with tía’ and all that good stuff, and I love her to pieces but I never had, I never felt like I needed to do that. Maybe I’m the most horrible Cuban you’re interviewing! [laughs]”-M, age 45.
Chapter II:
Defining Contemporary Cuban Ethno-Reproductive Cultures

“Tracking these stories led me to sites far beyond the medical clinic, pushing me to recognize the dilemmas in which to view the debates and anxieties over the reproduction of children and socialist citizens, as well as the role of the state in sustaining each. Such a focus necessarily expands the traditional understanding of reproduction as a primarily biological process: at the level of the family, the women with whom I spoke time and again framed reproductive difficulties not as the struggle to facilitate biological fertility, but in terms of the problems of nurturing children, and providing for them given shifting familial circumstances and embattled familial and national economies. At the same time, their choices and decisions about reproductive matters have ramifications for the future trajectory of Cuban society.”-Elise Andaya, from Conceiving Cuba: Reproduction, Women, and the State in the Post-Soviet Era.
At the commencement of the Post-Revolutionary era, the newly instated Castro government proclaimed the importance and necessity of providing free healthcare to citizens of the State. To eliminate disparities between quality and quantity of care between urban and rural populations, a series of reorganization projects in the early 60s and 70s were used to bridge the divisions in healthcare access. The 1974 Medicine in the Community Program began defining “health areas” within each municipality. Every 24,000 to 30,000 residents in an urban “health area” were served by a policlínico, which specialized in care for “high risk” citizens (the elderly and infants). Today there are policlínicos that service citizens needing care regarding their gastronomic, cardiovascular, or reproductive health, etc. Rural areas are serviced by hospitals for urgent care and health-upkeep.22

Now, this system is a set of urgency-based levels including a local family doctor for general evaluations and checkups. This is succeeded by specific policlínicos, and then hospitals for immediate emergency care. The current system was a transition from the barriers that characterized healthcare access before Castro’s M26 Movement triumphantly arrived in Havana, while Imperialist dictator Fulgencio Batista fled to the US. The new government was quick to establish norms for gender roles within the new socialist society with Che Guevara’s manifesto, El Hombre Nuevo.23 Castro “followed through” on his promise to end racial discrimination in

22 Brotherton (2012), p. 76.
23 Allahar (1994).
the new Cuba, and even declared racism to be “over” two months into his position. Using the nationalist rhetoric of Jose Martí, who fought for Cuba’s independence from Spain, the Castro administration advocated for the necessity of national unity. This meant new classifications of race and belonging in the new socialist society; no longer were there white, black, and mixed Cubans, but only Cubans. This in turn created a pattern of continuous silencing of dissenting Afro-Cuban voices however; who stated that racism still existed was counterrevolutionary. Writing by anthropologists like Fernando Ortiz and his theory of “transculturation”, a term that infers the new government used to explain that Cuba was a mestizo nation, and this “mixed” culture would be the glue to unite differently colored and gendered Cuban people. In contemporary Cuba, this is a significant factor to remember while analyzing the healthcare system.24

Elise Andaya explains the constant use of the language of “rates and risks” in reproductive health in Cuba, however, race is never included in statistics, or quantified data.25 For this reason, it has been extremely difficult to track the ways that racism from Pre-Revolutionary Cuba factor into discrimination practices within the healthcare system; racism simply doesn’t exist in state/medical/bureaucratic vocabularies.26 Therefore, it has been proven difficult to find literature to reference racial inequalities within the healthcare system in Cuba. P. Sean Brotheron refers to the Post-Soviet era to conceptualize racial inequality within healthcare.

The fall of the Soviet bloc in 1989 hindered the import of resources from Cuba’s allies in the

26 Brotherton (2012), pg. 32.
Soviet Union, notably food stuffs and oil. The Cuban State de-criminalized the use of foreign currency, creating the CUC (*peso cubano convertible*), opened up the tourist industry to the United States, and allowed remittances from Cuban-Americans to be sent to their families on the island. Official statistics show that remittances “increased from 50 million in 1990 to 900 million in 2005”, which in turn, re-stratified the social classes. The minority of Cubans who enjoyed the “fruit of the dollar economy” were mostly white, as white Cubans, more threatened by the social gains of the Revolution, had more family in the States to send them their profits. Existing racisms and prejudices lingering from Cuba’s colonial past prevented many Afro descendent Cubans from being hired in the tourist sector, i.e., businesses backed “by foreign investors,” as opposed to their white counterparts. Brotherton’s ethnographies use this development of the re-stratification of the classes as a focal point to study racial prejudices that would otherwise be overlooked within official Cuban rhetoric. This preface to my chapter on exploring the modern, Cuban ethno-reproductive cultures is meant to give clarification as to the limits of knowledge surrounding this topic, and the ways in which these prolific advancements in healthcare access can be improved upon; broadened to include the marginalized people of color in Cuba, who are not always taken into account within State literature. It is with this context of this gap in information that this chapter follows.

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27 Ibid.

28 Ibid. pg., 32-34.
Chapter II

“Defining Ethno-Reproductive Cultures in Cuba”

This chapter introduces the concept of ethno-reproductive cultures, which I derive from the work of anthropologist Robbie Davis-Floyd. I introduce this concept within the context of Western biomedicine, analyzing the medical industrial complex in which the lives of my interviewees are situated, with the aid of Michel Foucault. I use excerpts from my conversations in Cuba to add imagery to my discussion of reproductive healthcare within biomedicine. I turn to a quick analysis of healthcare and racial statistics in Cuba, commenting on the Pre and Post-Revolutionary initiatives to unite citizens of all races, and how the State regards citizens as being culturally mixed, but fully Cuban. I make note of the ways in which Afro-Cuban voices have been overlooked in the name of creating a nationally unified Cuban identity, and how the economic changes during the “Special Period” of the early 90s continue to re-stratify the social classes on the island. Through literature review, I begin to flesh out an idea of what the contemporary reproductive cultures of Cuba could be constituted as, arguing that the unique circumstances of Cuba’s own brand of socialism allow for peculiarities within reproductive healthcare access, which can be defined as part of these reproductive cultures. Destigmatized vocalizations of abortion, sanctioned prenatal rations, and the dichotomies between

29 Davis-Floyd (1994).
30 Foucault (1973).
the dollar economy and state salaries which create openings for community-based informal care networks are what I characterize as being part of modern, Cuban ethno-reproductive cultures. I argue that the socialist state is what enables these phenomena to occur, elaborated on throughout this chapter.

**Ethno-Reproductive Cultures**

I’m still beginning to conceptualize what an “ethno-reproductive culture” of a defined, specific region might entail. I think about an intersection of systems, or the places where “medicine” and “health” meet society, and interact with it. Ethnographer Elise Andaya foregrounds her introductory chapter to *Conceiving Cuba* with a definition of reproduction; using it as a lens to view the

“…interactions among state policies of population management, international geopolitics and economic processes, familial politics, and personal aspirations as they shape, and are shaped by, practices of bearing children and caring for dependents.”

31

To make this description a little more palatable for myself, I start with the Robbie Davis-Floyd’s “The Technocratic Body: American Childbirth as Cultural Expression”.32 Davis-Floyd’s piece seeks to articulate an “ethno-birth culture” of Western society, which she explains with the use of her word, “technocracy”: “a specific system of myth and ritual” that proceeded, and formulated the construction of Western biomedicine. She references classical literature on

31 Andaya (2014), pg. 5.

32 Davis-Floyd (1994).
obstetric procedures which deem the “female body” as diminutive, an “ineffective machine”, therefore, the “ethno-birth culture” that is technocratic Western medicine pathologizes childbirth. Davis-Floyd argues that a core value of the “technocracies” of medicine is the separation between nature and technology, i.e., breast from milk, “fetuses from pregnancies, sexual from procreation.” Davis-Floyd’s research was carried out with the use of interviews which documented the birth experiences of women electing to labor at home, or those who had given birth in the hospital. Although her work extended to the circumstances of labor, I can begin to imagine an expansion of using a break-down of cultural constructs that invoke, for example, technocracies, in order to create what could be ethno-reproductive cultures.

While studying in Cuba, I was constantly reminded by my mentor who worked in public health to remember how the “hegemonies of Western medicine” [strive to] standardize how the female body interacts with medicine. However, as I have found, and like Andaya hypothesizes in her text, is that Cuba’s cultural influencers of “reproduction” are highly unique. This uniqueness can be characterized as Cuban socialism. I venture that Cuba’s ethno-reproductive culture includes, among other practices, its de-stigmatized approach to contraceptive use, strong state support for the pregnant person and familial rights, but also the labor of informal kinship

33 Davis-Floyd states that the essay’s use of “bodies as machines” stems from philosopher René Descartes’ theory of mind-body separation, which provokes the notion of what is mental being not of physical form, and enforces the dualism of mind and matter.

34 Davis-Floyd (1993)

35 Barbara Katz Rothman, Plenary Address, Midwives' Alliance of North America Conference, New York City, November 1992

36 Andaya (2014).
networks to support the wellbeing of the family.\textsuperscript{37} I ask what are the characteristics of modern Cuban “ethno-reproductive culture”, what creates spaces for destigmatization, and why the necessity for informal care networks, etc? I have argued that there are many of these cultures that exist as sub-cultures within the defined region or nation. They can be teased out, combed through by examining the specifics of each said culture. Alternatively, this project uses testimonials, family stories, and personal history to inform these ethno-reproductive cultures, although I feel strongly that the stories that have been shared with me, and other individual histories are able to stand apart from simply being a statistic, or being indicative of trends. I hypothesize that Cuba’s contemporary (Post-Revolutionary) reproductive cultures as shaped, mostly, by Cuban Socialism.

I’m always trying to use the dualism of my embodied knowledge and the embodied knowledge of the individuals who have shared their stories with me, along with literature review to help myself conceptualize certain aspects of these “cultures”. Which is to say, the various reproductive cultures of the United States are vast, and defining any of these cultures is a task that would span many years of research. Each body in this country can be located, through their identity, to their corresponding reproductive cultures. Race, class, religion, sexuality, gender, and geographic location are some of the characteristics of each ethno-reproductive culture that bodies within the US and globally, inhabit. Through exploring my own, or by creating a space to open discussions about how I relate to reproduction, I’m hoping to construct an introduction to how I believe I can share and learn from others’ ideas about what reproductive justice looks like.

Writing about Cuba provides me with an interesting case study of what could be possible for

\textsuperscript{37} Ibid. pg. 49
equal access to reproductive care. Because it is isolated from the United States, both geographically and economically, and because of its alignment with socialist practice, the factors that shape Cuban ethno-reproductive cultures are highly unique. To analyze them is to both explore where Cuba’s healthcare system fail to meet the needs of some of its inhabitants, and to acknowledge where it excellently succeeds in ending stigma, and giving full and appropriate health coverage.

Referenced at the beginning of this chapter, both the US and Cuba exist within the ethno-reproductive culture that is Western biomedicine. Anyone receiving reproductive healthcare in these two countries is subject to the confines and benefits of the hegemonies of Western medicine. They are implemented differently in each location and adhere to each identity they serve differently, but I argue that most bodies experience similar feelings while their lives are embedded within the system. Michel Foucault’s work in *Birth of the Clinic* (1963) showed us the world of biomedicine is indeed separate from the world of the individual, who becomes subject to all of the modalities of “patient” rather than “person”, once they enter the hospital. Their body is accounted for in terms and languages that they are not accustomed to. They are touched and tested without full knowledge of what is being done to their body. They hear phrases they may be unfamiliar with, as they are being treated. Lines between patient and practitioner are drawn, with the subject acting as the submissive, the variable, which is malleable to the direction and expertise of the practitioner.\(^{38}\) Within the “technocracies” of Western medicine, says Davis-Floyd, the female body, is seen as more like to malfunction, and therefore in need of extra intervention and care. In the world of the clinic, male and female bodies are held to be different.

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\(^{38}\) Foucault (1963).
With the “male body” acting as the prototype of what should be a well-functioning machine, breasts, the uterus, and ovaries are more at risk, and more prone to repair, “biological processes such as menstruation, pregnancy, birth and menopause are seen as inherently subject to malfunction.\textsuperscript{39}

Here, I aim to say that ethno-reproductive cultures in which pregnancies are predominantly presided over by biomedical care, are cultures that create weighty divides between male and female, and therefore, male vs female bodies, which each come with a set of expectations and norms to fulfill. I can infer that a pregnant person, in Cuba, or the US, or anywhere else within a hospital setting is first fitted with all the characteristics attributed to having a female body. Their body may be intervened upon, or interventions may be made on their body because pregnancy is a glitch, or a problem to be controlled. Anthropologists José Manuel Hernández Garre and Paloma Echevarría Pérez’s “The Denied Part of Institutionalized Delivery: Exploring its Anthropological Bases” illustrates the struggle between the individual, pregnant person and the medical system to create fluid harmony. The implied political and iconic authority of Western medicine create a universal need for “technological control”, and “deviations” in said acts of control are what create birth cultures. Creating harmony, the authors hypothesize, comes from bridging gaps between what is personally lived and felt and what is medically relevant, within the system.\textsuperscript{40} I think about the Cuban women I spoke to in Spring of 2017, especially the women who had vocalized the inconsistencies between what they knew about their bodies, and the care they received:

\textsuperscript{39} Davis-Floyd (1993).

\textsuperscript{40} Hernández Garre & Echevarría Pérez (2014).
“Delivery was horrible with lots of pain and they hospitalized me—it was a weekend—when they took me to the delivery room I had a hemorrhage. They struggled hard and probed tubes down there and I was in and out, it was an ugly moment…I was never given an explanation. The hospital care was bad at the moment of delivery because they even didn’t bother to explain to me what was going on. I was so mad; no one explained anything to me.” -Case II

“...when you are having your first baby, you have no idea how you are going to deliver it...it’s your first time for everything...and I was terrified to have to spend so many hours in the hospital, but it wasn’t like that at all. I arrived early in the morning at about 5am, my water had broken and at 10 am I had given birth already...When they took me to the delivery room I was fully dilated and I needed only one push to get it out and it was painless. Once your baby is born—at least that’s my experience—when you see it, you forget about all the pain at all...you know more about your own body than doctors do ...” -Case VII.

For the purpose of my own analysis of what a modern, Cuban ethno-reproductive culture could look like, I often return to what has been shared with me. What stands out most are the horror stories; deep discomfort, physical pain and frustrations that my interviews felt from being misunderstood. Which is not to say that I did not or do not hear happy tales about labor when I talk to/have talked to Cuban people about their pregnancies, but rather, highlighting the negatives to show that different ethno-reproductive cultures might be connected through pain. How a pregnant person in labor suffers in Cuba is akin to how their counterpart in the US might suffer because of the treatment they are receiving at the hands of the medical system which is to say, that we are not alone in our pain. A comforting thought, I’ve used this notion ease the discomfort I have felt when I have received reproductive healthcare, and have let the system, and the personnel who constitute this system, inform my decisions about my health. Subsequently I turn to concepts which I believe to be the uniquenesses of contemporary Cuban ethno-reproductive cultures. This will make up the following three sections, in which I’ll discuss how these uniquenesses are apparent to other researchers, and how they’ve been lived by Cubans.
Contraceptive Use in Cuba: A Prelude

I was drawn to study Cuba’s culture of reproductive care through previous observations I made through popular media, which either lauded or applauded the country’s low fertility rate, and it’s de-stigmatized approach to the abortion procedure. An article from the New York Times explained how Cuba’s low birth rate raises anxieties about an aging population, and a healthcare system that would not be able to provide fully for its citizens when the time comes.\footnote{Amhed (2015).}

It’s a dense and often unapproachable topic in the environments in which I’ve been a part of throughout my life. My close social circles support me, and continue to hear and care for me when I come to them with my personal history with reproductive health. Otherwise, I find myself feeling guarded, and wanting to keep this history private. Depending on who I’m speaking to, I tend to feel shameful. I tend to leave out details. I feel courageous and whole when I’m in spaces where I know it is safe to share entirely. Those who share their intimate or painful details with an audience of any size inspire me to reconsider the secrecy I associate with my experiences. I was curious to hear how Cubans talked about their abortions. I had some idea that the framework would be completely different.

Abortion Politics in the Context of Cuban Socialism

“No tenía condiciónes” (I didn’t have the conditions). Andaya references this phrase multiple times in her ethnographic work.\footnote{Andaya (2014).} Interviewees for her project vocalized that they were
not able to provide for a potential child, so they had an abortion. The acknowledgement of the absence of support for a new baby, is entangled in contrasting views of what is causing this failure to be able to sustain children. Andaya argues that this conversation is a very public, and complex one. Within a society that uses “foundational socialist political narratives”, the State is the omnipresent authority which must “lead, educate, and discipline the unruly, backwards population.”

By modernizing the population, progressing from tradition-bound pasts, the government creates an ideal of what modernization looks like, varying between individuals and official reproductive policy. Many of Andaya’s interviewees referred to their many abortions as a testament to being a “modern woman.” They held that their low fertility was the mark of a civilized, mature citizen, who knew the true conditions of their reality well enough to decide when they had a child. And although the legal status of abortions has remained uncontested among “officials and academics”, the abortion procedure is highly debated in medical literature as a “failure of the population” to responsibly use family planning methods.

According to this cannon, abortion, or the high abortion rates of contemporary Cuba is perceived as a public health problem, and mostly stems from contrasting definitions of modernity, economic sustainability and social development. It is recognized that although citizens frequently choose to end their pregnancies through the use of abortion for reasons like, “No tenía condiciones”, whether they be due to housing scarcity and concerns about low state-sanctioned salaries, the rate at which Cubans elect to “risk their health” by choosing the abortion

43 Andaya (2014). pg. 69-73

44Ibid. pg. 73

45 Ibid. pg 72-73
procedure over other contraceptive methods is labeled “concerning”. In Andaya’s work, the high abortion rates in Cuba indicate a setback on behalf of early Revolutionary ideology to transform gender roles and “reproductive ideologies”, i.e., the resounding culture of machismo that the island still falls prey to. From the perspective of the individual, says Andaya, high rates of abortion are caused by the state’s inability to carry through on its promises of material abundance, promised to them by “earlier versions of social modernity”. Cuban citizens therefore assert their bodily autonomy by using abortion to appropriately and adequately care for only the children they can provide for.

Prior to Batista’s re-write of the criminal code in 1938, Cuba was governed by the Penal Code of Spain. All forms of abortion were categorized as highly illegal, but allayed under the circumstances of pregnancy as the result of an assault, to save the life of the pregnant person, or to avoid birth defects. Until 1979, the law stated that an abortion needed the approval of two physicians but the requirement was rarely complied with. Pre-Revolutionary Cubans used a wide range of contraceptives, especially during the ‘50s. In the 1920s Cuban women had 6 children on average, compared to the 1950s under Fulgencio Batista, where the average dropped to just below 4.

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46 Ibid. pg. 69
47 Ibid. pg. 73.
48 Ibid. pg. 69.
49 Ibid. pg. 70.
50 Belanger & Flynn (2009).
52 Ibid. pg. 59-70.
Lois Smith and Alfred Padula begin their analysis of contraceptive use in Pre-revolutionary Cuba by discussing the obvious dichotomies in access to contraceptive methods between the social classes, and geographic location (urban vs rural) on the island. Urban dwellers had access to intrauterine devices, diaphragms, condoms and spermicide (although condom use became associated with sex work, specifically prostitution, during the early 1950s and briefly fell out of fashion). Cubans in the countryside, guajiros, used herbal remedies to prevent pregnancy, i.e., abortive rites, rituals and “potions”, usually conducted through a local healer. Conceptions surrounding pregnancy and menstruation were both mystical and outdated, sex education or any information about contraceptive use was not included in any program, educational or medical, until after the Revolution. Even when sexual education initiatives were implemented in schools under Castro, the 1979 criminal code still validated the “upheavals” brought about by pregnancy and PMS and their apparent associations with crime. Even with the existence of these antiquated circumstances through which Cubans with uteruses were forced to navigate, abortion was still widely practiced in private clinics in both urban and rural regions of the country. More remarkable is the argument of Danièle Bélanger and Andrea Flynn’s “The Persistence of Induced Abortion in Cuba: Exploring the Notion of an "Abortion Culture"," wherein the authors provide that prior to 1959 abortion was the most widely used form of birth

53 Ibid.
54 Ibid. pg. 73.
55 Ibid. 59.
57 Ibid.
control, as only Cuba’s elite classes could afford other forms of contraception. Smith and Padula also hypothesize that the popularity of abortion before the Revolution was influenced by men’s traditional preference of the procedure, as a pregnancy could confirm their potency, and women’s use of other methods of contraception “implied a lessening of men’s sexual control over them.”

The early years of the 1920s saw the rise of the Women’s Suffrage Movements, wherein activists, mostly white and from the upper classes, championed the rights of women workers, illegitimate children, single mothers, and sex workers. These issues were all addressed at the 1925 Congress of Cuban Women, while Cuban president Gerardo Machado “courted” the support of the suffragettes by adding fixed female hiring quotas to certain jobs (and ensured that women could breastfeed at work). However, topics of abortion and contraceptive use were not brushed up against. During the years of excess, imperialist exploitation and growing disparities between the rich and the poor that so characterized the eve of the Revolution, abortion skyrocketed within all social groups, leading back to Bélanger and Flynn’s comment on the popularity of the procedure right before Castro’s victory.

The US embargo of 1962 coincided with the great absence of medical professionals on the island during the early years of the Revolution, and caused a period of dire shortages in contraceptive devices, which had previously been imported from the States. Products from China

58 Belanger & Flynn (2009).
59 Smith & Padula (1996) pg. 73.
60 Ibid. 16-21.
61 Ibid.
62 Belanger & Flynn (2009), pg. 15.
or Russia, such as condoms and oral birth control, were either of poor quality or too pricey.\textsuperscript{63} Cuban manufacturers began to develop their own intrauterine devices, which cost very little to produce. The Federation of Cuban Women also distributed intrauterine rings made from fishing line, which were known to function better than those supplied by the government.\textsuperscript{64} Additionally, the state declared female sterilization free of charge, for anyone who requested it.\textsuperscript{65}

A 1970 study on neonatal care and obstetrical services, which exposed the negative outcomes of self induced abortions, catalyzed the promotion of contraceptive use. It also prompted public availability of information about abortions.\textsuperscript{66} Coinciding with the improvements made to the economy during the early 1970s, and with the support of funding from abroad, the state was able to purchase higher quality contraceptives in the hopes of curtailing the already high abortion rate.\textsuperscript{67} In 1974, the United Nations Population Fund (UNFPA) donated $4 million to the Cuban government to improve maternal and child health, and provide a higher caliber of supply of contraceptives to the island. The International Planned Parenthood Federation also made substantial financial contributions to Cuba’s endeavors in family planning between 1977 and 1979.\textsuperscript{68} However, the contraceptives that were promoted to Cubans at this time were not distributed with any information regarding their side effects. The abortion rate continued to rise (along with teenage pregnancy rates) throughout the 1970s, and then leveled. By 1979, 40

\begin{footnotesize}
\textsuperscript{63} Smith & Padula (1996), pg. 71.
\textsuperscript{64} Ibid.
\textsuperscript{65} Smith & Padula (1996), pg. 59.
\textsuperscript{66} Noble & Potts, (1996).
\textsuperscript{67} Noble & Potts (1996), pg. 213.
\textsuperscript{68} Ibid.
\end{footnotesize}
percent of all pregnancies on the island ended in an abortion.\textsuperscript{69} It was during that year that abortion was completely decriminalized, with the intent of making the procedure safer by penalizing those who performed abortions for profit, or outside of the healthcare system.\textsuperscript{70}

The late 1970s and 1980s in Cuba saw the creation of the National Center for Sex Education, which frequently teamed up with the Federation of Cuban Women to create programs to better inform the adolescent population on issues regarding sexual activity and pregnancy.\textsuperscript{71} In the 1980s, birth control pills were made available even without a prescription from a doctor, and the use of IUDs became more common place.\textsuperscript{72} According to Elise Andaya’s ethnographic work with modern Cuban women, personal relationships with different contraceptive methods are often characterized by their un/availability and disturbing side effects during the years of the embargo:

Reproductive histories were often rife with complaints about the quality of readily available contraceptives. The most commonly used contraceptive in the United States, the birth control pill, is still used relatively little in Cuba, and many women continue to view it with suspicion, remembering the high-dosage Soviet-made products that had reportedly led to many health problems among users. A number of women I interviewed-including, to my surprise, Sondra Cuno, a nurse- told me that the contraceptive pill should be avoided as it induced facial hair, weight gain, and secondary male characteristics. The unpopularity of the pill also reflects the difficulties of obtaining a constant supply given the US embargo that tightly constrains the Cuban state’s ability to purchase pharmaceuticals at affordable rates.\textsuperscript{73}

\textsuperscript{69} Smith & Padula (1996), pg. 74.
\textsuperscript{70} Ibid.
\textsuperscript{71} Noble & Potts (1996), pg. 216.
\textsuperscript{72} Ibid.
\textsuperscript{73} Andaya (2014), pg. 84.
In the excerpt above Andaya contributes a new perspective on the lasting effects of poor-quality contraceptive devices that were popularized during the 1970s and 1980s, and their correlation to the sanctions of the embargo. As the 80s finally came to a close, the “alarming” rise of the abortion rate held steady (with 160,000 abortions and 200,000 births in 1989), despite the years of public outreach and more widespread availability of contraceptives. It is important to note that from 1982 through 1987, pregnant teenagers under 18 were made to obtain the consent of their parents. Smith and Padula add that the sexual double standard between women and men can be most clearly recognized in this context; while parents were criticized for “failing” to “prepare” their children appropriately: “…some kept their daughters ignorant while encouraging a conquest mentality in sons; others calmly marched their daughters into abortion clinics as if to a dental appointment.”

Keeping this in mind, Bélanger and Flynn harken to the beginning of Cuba’s Special Period, as a result of the crumbling of the Soviet bloc, as the point on Cuba’s timeline in which “abortion culture” on the island was truly solidified. Both authors argue that it is important to familiarize oneself with the details of abortion culture in order to understand the realties of contraceptive use, family planning, as well as the commonality of abortion in Cuba as it exists in present day:

“The term “abortion culture” refers to an environment in which abortion is seen as comparable to contraceptive use. In such an environment, the distinction between limiting one’s fertility prior to, and after conception is often irrelevant; that is, abortion is not necessarily viewed as a last resort, but is considered a legitimate means of avoiding and spacing births. This view of abortion

74 Smith & Padula (1996), pg. 77.
75 Ibid.
76 Belanger & Flynn (2009), pg. 14.
and contraceptives as comparative alternatives contradicts prevailing assumptions within the field of demography that contraceptives of are the more desirable way of limiting fertility, whereas abortion is inherently undesirable and problematic.”77

This scholarship by Bélanger and Flynn can be added to the explanations for the destigmatization of abortion, chronicled in more personal ethnographic work done in more recent years during the 21st century. Going further, the authors claim that it does no good to view “abortion culture” without taking into account the “complex historical and political” factors that have shaped it, and brought it forth into the process of the “modernization” of Cuban fertility, which Elise Andaya often speaks to in Conceiving Cuba.78 Andaya identifies common patterns within her interviews with women in Havana, who address the blame-game that is often played between the state and its citizens: The government places the fault on families who fail to “disavow” the ideologies of Republic-Era machismo, with parents who remain reluctant to talk to their daughters about topics like pregnancy prevention, while simultaneously valuing their son’s sexual activity as proof of their manhood.79 Women in Andaya’s ethnographic piece continued to point to the shortcomings of the state as to why they felt the need to resort to an abortion, instead of using other methods of contraception before conception:

“…women’s narratives inverted the presumed hierarchy between the modern state and traditional women by pointing to abortion as a consequence of the state’s inability to fulfill its part in an implicit social contract: the provision of the modern conditions necessary for the reproduction of children and future socialist citizens”80

77 Ibid. pg. 14.

78 Andaya (2014), pg. 69-70.

79 Ibid. pg. 72-73.

80 Ibid. pg. 74.
Referring to my own research, and the conversations that took place during my time in Havana, I struggle to come up with firm conclusions to solidify the results from Andaya or Belanger and Flynn’s work. I let each conversation and the data extracted from the conversation stand alone in its ability to tell a personal story of the interviewee’s reproductive health. Because my previous connotations of contraception and abortion derive from an American upbringing, the fact that I do treat these topics with care and caution relates to my position within my work, as in, I have not heard of a way to react to these stories in a method which is completely culturally relative. What follows are excerpts of my interviews from Spring 2017 wherein the interviewee is describing their relationship(s) with contraception:

“...condoms were always on hand...there were diaphragms, but there were problems, I was using an IUD but got pregnant anyway. It seems it was not correctly placed and I did not know what to do. It became an issue. (About abortion): It did not have it in the town of San Antonio...it happened after the Revolution, I can’t tell you but it was a risk and we decided to do it...yes, an abortion.” -Case I.

(About her first abortion): “... It was performed by a doctor under anesthesia and with all the necessary conditions. It was back in 1974...it happened at the beginning of my marriage. I didn’t want to have a child so quickly...I was using contraceptives but I got pregnant anyway. I was using the vaginal ring...people say that I have had lots of abortions, they don’t say it to my face, of course, but you are asking me now and I am telling you.” -Case III.

“I was scared of IUDs, I was afraid of having an alien device inside my body and the pill...I took the pill for a week but for a medical treatment, for a lump I had in one of my breasts...and I didn’t like the feeling, I felt weird. I was afraid because I was in College at the time and I friend who had had lots of problems for using what we know here as ‘the ring’ and I thought to myself: ‘there should be something that’s not as aggressive...’”-Case VI.

“...I had two abortions...I always said that I would have my children when I could give them whatever they needed regardless of the help you can get from your family...I also know that there are many ways to provoke an abortion. I am neither in favor nor against it, but I do think that the right of woman to decide when she wants to have her child should be respected. Abortion
shouldn’t be considered as a contraceptive method, though because it hurts the woman’s body and prevents her to become a mother when she decides it’s the right time.” -Case VII.

“...my first pregnancy terminated in abortion. I wasn’t ready...My mother accompanied me to have a menstrual regulation procedure and there was an older woman having one and she was screaming and it made me nervous. I had to drink papaya to dilate because my uterus was tense. I came out crying. I didn’t want to have a baby and my mother asked me to calm down and told me: ‘easy, I am going to speak to the doctor’ because they authorize parents...” -Case VIII.

Disciplining the “Undisciplined Body” & Informal Networks of Care

In Conceiving Cuba, Andaya speaks to the “gendered burdens of prenatal care”, describing an interaction between her and a patient at the local policlínico which she was actively observing.81 This particular patient, Mari, had been labeled by the personnel of the clinic as La Perdida, The Lost One, as she was consistently late to appointments and even missed one of her check ups. Mari was talked about by doctors and nurses as showing little interest in hearing about the details of her health and pregnancy, a rare sentiment, says Andaya, in the highly “medicalized” population of the island. Mari’s apparent lack of investment in her pregnancy was perceived as a sign of mental or domestic problems, and Andaya goes further to say that Mari’s temperament fits into the notion of the “undisciplined body” within Cuban socialism, meaning, bodies that are positioned as a threat to the productivity of the State: Mothers-to-be that do not exhibit the excitement or commitment to their unborn children deemed

81 Andaya (2014), pg. 57-59.
as adequate by the professionals who care for them have their status as a proper parent questioned and debated.\textsuperscript{82}

Andaya further evidences this notion through describing the relationship between Yurielis, an “undisciplined” patient, and her doctor Tatiana.\textsuperscript{83} Tatiana often chastises Yurielis for missing appointments, or lacking commitment to her health, evidenced in Yurielis’ nonchalant attitudes towards screenings and checkups. Tatiana refers to Yurielis’ lack of concern for her pregnancy as “disturbing”, says Andaya, because the official Cuban assumption remains that a good mother must be valued through her efforts to practice self-sacrificing love, and to “prioritize medical compliance above all else.”\textsuperscript{84} On the other hand, when questioned about their tardiness and apparent lack of interest in meeting the standards of compliance, patients of the policlínico, like Mari “La Perdida” cited their limited time and stretched schedules as the reasons for their streak of late appointments. Mari speaks to Andaya about the gendered labor required to fulfill the standards of the medical system, placing the socialist citizen as the locus of vigilant productivity in reproducing the new Cuban generations. “Too much work…” says Mari, “…And I live alone too. Well, I live with my husband but you know how men are, they don’t cook or clean. So my mother comes everyday from her house, with the transportation problems and everything, and helps out making food and cleaning. And I told her I’d be quick this time [at her appointment], and here I am, it’s a quarter to twelve. So much work!”\textsuperscript{85} Mari’s exasperation at

\textsuperscript{82} Ibid.

\textsuperscript{83} Ibid. pg. 56-57.

\textsuperscript{84} Ibid. pg. 57

\textsuperscript{85} Ibid. pg. 59.
the labor she is left to complete at her home, as well as with coming to her many prenatal appointments, alludes to two common occurrences within the reproductive cultures of modern Cuba. Mari’s husband’s lack of participation within their household implies the failure of revolutionary initiatives to restructure gender roles within the family, namely, Che Guevara’s concepts of the New Man and the New Woman. Simultaneously, Mari’s mother’s assistance with the upkeep of the household is indicative of the entrenched obligation of labor that falls upon female family members to sustain the domestic sphere. Although Mari’s “undisciplined” attitudes towards her new baby can be viewed as a violation of traditional Cuban valences of motherhood, which I frequently heard discussed as being the epitome of femininity during my Havana interviews, she is caught in a web of balance. Her domestic, personal chores, conflict the requirements placed upon her by a state that frames its reproductive outcomes within the terms of risks and rates, and intervenes on the pregnant body proficiently in order to meet international standards of “modernity”.86 Andaya expounds,

In practice, as the lives of my informants showed, while women assumed many new roles outside the home, the connection between women and reproduction remained largely intact; women’s supposed natural affinity for nurturance and reproductive labor was often tacitly reaffirmed at both the level of the state and in familiar gender relations. Thus, socialism’s new woman has been produced not simply through explicit policies around labor or childcare, but also indirectly through women’s double and triple burdens as mothers, workers, and revolutionaries.”87

In a final vignette from Andaya’s Conceiving Cuba, I discuss her encounter with a young patient to the policlínico, Gisela, who expressed to the ethnographer that her and her husband

87 Ibid. pg. 93.
could not afford to provide for their existing daughter with their minimal government salaries, as opposed to families with connections to the informal entrepreneurial economy, with access to foreign dollars.\textsuperscript{88} Gisela was watched carefully, she was not gaining weight proportionally to the demands of her pregnancy. After being given special prenatal rations, including milk and yogurt, her doctors suspected that she was given away her extra supplies to her older daughter. In this instance, Gisela chooses to care for her daughter by redistributing the extra food she receives from the state to her offspring, a strategy not necessary for Cubans who are connected to the expanding tourist industry.\textsuperscript{89} This is to say that these exposures into the daily “dramas” in which the pregnant body exists in Cuba are a lens through which I like to view the intricacies of ethno-reproductive cultures. I argue that a more in-depth consideration of the political, economic and gendered encounters Cuban people have with their medical system can raise discussions of what hinders or promotes Cubans from achieving reproductive justice.

I think about the sixth interview I conducted last spring in Havana. I met with my interviewee on a very humid day in April, at the room rented for classes out by \textit{La Fundación Alejo Carpentier}, the Havana-based institute partnered with Hampshire. I had met this woman before, she had a long-standing relationship with the college’s program; she taught Spanish classes for English speakers, and worked as a for-hire translator. She is 70 in this moment. She is full of energy and snappy comebacks. She directs her Spanish classes with wit and ease, she doesn’t let a mistake slip by, she calmly correctives the misplaced preposition, a “\textit{les}” instead of a “\textit{le}”, and moves on. I’m excited to talk to her outside of the classroom setting. When we’ve met

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\textsuperscript{88} Ibid. pg. 2-3.
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\textsuperscript{89} Ibid. pg. 2.
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before in her home for class. She has her students help prepare *tambor de papas*, a meaty, cheesy casserole, and she serves her coconut flan as we drink coffee and look at the pictures of her son and her granddaughter. Sometimes her son is asleep in the bedroom adjacent to us as we have class. She tells us he’s resting at her place because he works nearby in a boutique. Now, back at her interview, I’m nervous to begin. “Don’t push it…” I think to myself. There is so much I want to ask, but I remind myself to let her have the space of the conversation to herself, letting her stories bloom from the interview guide naturally.

-“How did you feel when you knew you were going to be a mother?”

-“I felt very happy… I started to feel joyful when I knew I was pregnant because I was already 34 years old and thought I was not going to get pregnant… I was the happiest woman… a friend of mine who also had the same problem as me because she had to wait many years to get pregnant but became pregnant after me… she and I love each other like sisters and it was joy for the both of us… it was the following year when she became pregnant and we both had boys… mine is called Abel Alejandro and hers is called Graciel Alejandro… it was very beautiful, in the midst of many jobs because in my case I was a single mother… anywhere in the world [being a single mother] is difficult but in Cuba much more… [This was] in ’81 and my son struggled in the childcare circle because it was not a fit [for him]… I had to pay a lady to look after him… I paid her a third of my salary for caring for him, nothing else… I spent a lot of time working… like I say: ‘everything works out.’”

My interviewee recalls the birth of her son, remembering the joy she felt that her and her friend were simultaneously pregnant when she previous thought she would not conceive. Although my interviewee spared many details, her voice conveyed the difficult labor of single motherhood, which she believes is considerably more burdensome to shoulder in Cuba. With her salary from being a teacher, she knows that a third of her entire salary would go to her son’s caretaker since the state-provided childcare programs were not a good fit.

-“... [Speaking about being pregnant with her son] I started bleeding... it had already made me sad because I thought I could not [get pregnant] at that age... I rested, I forgot about work, I forgot everything, I rested, my friends helped me a lot and a neighbor who I love like a mother
helped me too...[the first month of postpartum] was a month of complete rest, they did everything for me...”

-“Was that your first pregnancy?”

-“Not that was the second, I had already lost one...I was in college and had many activities and had a spontaneous abortion and so when I became pregnant for the second time with the threat of abortion I thought it was going to happen the same way...and now I have a wonderful son.”

-“Did you use contraceptives after your son’s birth?”

-“No, never before or since then.”

-“Why?”

-“I’ll confess something I have not told anyone, I was afraid of the intrauterine devices, I was afraid of having something strange inside of me and the pills ... I took them for a week, I was prescribed a treatment with birth control pills...and the feeling was very bad, doctor told me ‘you have to go a week taking this treatment because you have to, these are birth control pills that you take throughout your life... I told the doctor, ‘I feel weird since I’ve been taking these pills’ and she said ‘no, that’s just how the first day goes.’...I did my treatment for a week...I was afraid because I was in college and good a friend of mine had many problems with what we call the ring [el anillo]. many problems with bleeding and I thought, well, there must be another way that is not as aggressive...she had to take it out, take it off forever, and did not use any [contraceptives] because it affected her so, you can imagine that hearing that ...”

-“How did you learn to be a mother?”

-“With feeding your baby, at night, at dawn, one says, ‘I couldn’t,’ but when that time comes you can, you can... you wake up in the middle of the night to see how your baby is because he woke up and wants you to breastfeed, you give him your milk so he can continue sleeping and then you have to face the day and do it all...”

I locate this interviewee’s experience within the economic, social and political worlds in which her realities are positioned. I hear her confusion about her body and how it reacts to contraceptives, calculated through information she has felt somatically, and through her friend’s bodies. Her acknowledgement of her care network, her neighbors and friends, demonstrates her willingness to gather up community resources for the sake of her child, and in turn, her community’s active response to her needs as a single mother. After we finish the interview I walk
her to where we will part ways so she can get the bus back to her apartment in Centro Habana. She lives on the 8th floor, she walks up all those flights steadily, even after she had abdominal surgery that spring. Later that month I will meet her granddaughter and interview her daughter-in-law. My interviewee’s son lives with his wife, their 3-year-old daughter, and his wife’s teenage daughter from her previous marriage. I arrive at my interviewee’s son’s home, where his mother in law, his mother, his wife and two daughters watch TV, dry their hair after a shower, and play quietly on the floor with toys (in the case of the youngest granddaughter). My heart feels full—I’m lucky to know the past of one branch of this family. La Lucha, the daily maternal struggles that my interviewee have experienced are rewarded through the growth of her family, symbiotic, reciprocating in love. Back at my first interview with her, walking her to the bus, she stops at a fence where the boughs of an orange tree poke through, she tells me she brews its soft and sticky leaves for a soothing tea.

I interviewed these women as a complete stranger, and consider that maybe their candid disclosures were a favor to Dr. Díaz-Bernal, my mentor from the National School of Public Health, or to the friends and teachers whom I had gotten some interviewees’ contact information from. Keeping in mind my positionality in these conversations, I think about the straightforwardness through which these stories were recounted to me and remember the year I attended an Abortion Speak Out during the annual Civil Liberties and Public Policy conference held at Hampshire College, held in the main gymnasium. Whether sharing our stories in front of 500+ attendees at the Speak Out, or through a formal or informal interview, I believe that vocalizing our abortion stories is a means of empowerment. In an American context, the CLPP Abortion Speak Out is a rare opportunity to connect. Harkening back to the concept of an
Abortion Culture in Cuba, made possible by the absence of religion on the island, what can we learn from this reproductive culture that does not regard abortion as a last-resort method of contraception? How would we in the States use this framework to keep on normalizing abortion by radically sharing our stories of the procedure? What if this notion to share these stories is no longer radical, but commonplace?

In Cuba, achieving justice could look like the State’s acknowledgment of the circumstances that cause women, like Andaya’s informants, to terminate their pregnancies. Additionally, a government-led reconsideration of the Revolution’s commitment to empowering women through equal work opportunities may be useful to better squash machismo outside and inside of the household. By examining the manifestations of the domestic sphere in Cuba I can see the trajectory of the values of the “New Man” and “New Woman”, and how they enforce Pre-Revolutionary gender roles, and therefore create the necessity for women to work double time as caregivers and workers, much like Mari “La Perdida”. More detailed analyses of how to remedy the disparities caused by the dual economy system might pave the way to a truly equitable Cuba. This could mean providing adequate prenatal rations so mothers like Gisela, who do not have access to foreign remittances or tourist money, would not have to give their state-provided food to their already existing children. I do not mean to say here that these informal networks of care are unique to Cuba. The causes behind them, arguably created by a mix of socialism and lingering machismo attitudes, create the necessity for women to organize outside of the public sector to build their own support systems, location or family-based, in order to support the new lives being birthed into their communities. I argue that all these factors are only but a few key aspects that are embedded in/make up the ethno-reproductive cultures of contemporary Cuba.
“...I felt like my destiny was not my own, that men who had nothing to do with me had the power to rupture my dreams, to separate me from my grandmother.”-Cristina García, from Dreaming in Cuban

Chapter III: “Straddling Borders”: Forging a Personal Definition of Cuban-American Identity
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“Straddling Borders”: Forging a Personal Definition of Cuban-American Identity

Opening a discussion of ethno-reproductive cultures, I find it necessary to undergo the introspective task that is to embark on an exploration of cubanidad, or what it means to be Cuban. In the process of discovering where personal narratives can be indicators of cultural or political trends, I sought out literature from the academy and from outside of it. My advisors, family, and friends in Cuba and in the States recommended. I compiled my resources and found that I had an assortment of sociological text, fiction, theoretical writing, and intra-familial testimony to build upon. This section of my work is introspective and comparative as it situates myself within cubanidad as I attempt to understand the bodily circumstances, fears, hopes, and stories of my interviewees both Cuban and Cuban American. In this chapter I cite Cristina García’s fictional analysis of female Cuban/American experiences in Dreaming in Cuban, María Cristina Garcia’s narrative of Cuban migration to Miami in Havana, USA, theorist Jose Muñoz’ look at performance art to contextualize “guilt” in “disparate Cuba”, and Flavio Risech’s interpretation of queer expressions of identity in Latin-American communities in the United States in “Political and Cultural Cross Dressing: Negotiating a Second Generation Cuban-American Identity”.

Maria Cristina Garcia’s chronicling of the Cuban-American version of cubanidad in exile, in Havana, USA, alongside Cristina Garcia’s novel Dreaming in Cuban has juxtaposed the imaginary with socio-political realities of Cuban-American families for me. In Dreaming in Cuban, García depicts decades old tension held tightly between the different branches of the del
Pino family tree. While Celia, the current matriarch of the del Pinos, commits herself fully to the Revolution, her daughters deal with the anxieties of work and marriage in the New York and Havana. Celia’s granddaughter Pilar longs for a Cuba she knew briefly as a child; she acutely describes feeling trapped by her mother’s longings for her to retain her *cubanidad* while growing up in the United States. She is not allowed to go to art school or listen to Jimi Hendrix. Pilar's grandmother in Cuba laments Pilar's “tourist” level Spanish. Meanwhile, Celia’s daughter who still remains in Havana visits a *santera*, a priestess of *Santería*, to release her late father’s soul from this world, preformed with the sacrifice of a goat. These differentiations weave themselves through my head when I consider my own family on both sides of the Florida Straits. I want to ask them what actively remains of their versions of Cuba in their fantasies? How great was their need to become “American”? To properly assimilate, what would they need to leave behind?

I pair my reading of “Dreaming in Cuban” with Maria Cristina García’s sociological examination of the city of Miami as the “golden enclave” of immigration destinations, and its transformation into a center of global commerce caused by the influx of Cubans starting in the 1960s, later to be joined by other Latin-American ethnic groups. García explains the different waves of Cuban migrants, starting with the first arrivals of Havana’s elite (the most negatively affected by the implementation of socialism) to the *Marielistas*, to the Cubans seeking

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92 About 125,000 Cubans left for the United States by boat from April-October of 1980. Put under pressure by a demonstration at the Peruvian Embassy in Havana, Castro agreed to allow “whoever” wanted to desert the Revolution to do so, while sending political prisoners, and other social deviants, along with them. From adst.org.
“asylum”/economic relief from the Special Period of the early 90s; the so-called balseros. I read both these texts and think of my family members as these characters, real or fictional. Each one of my relatives situates themselves differently in relation to the Revolution. Each one of these relatives, including myself, thinks differently about their Cuban American identities. Maybe we all remember which parts of ourselves are from Cuba and which are truly American. Going back to my own identity, and how/where I have learned about my own body, how do ethno-reproductive cultures evolve once they come into contact with other cultures? Are they simply made up of layered ideologies? Religion? Patriarchy? Does my grandmother openly talk to me about her abortions in Cuba and the US because I’m her granddaughter? Is it because of the high availability of abortions and lack of stigma that existed when my grandmother lived in Cuba?93 I think of the word “assimilate” as a reaction, a transformation. I cling to my roots, unexplored. I know they are there to ground me, and provide the foundations for this work. Through this chapter, as I have been trying to do for a large part of my life, I reference what others have written on what it means to be Cuban. I make note of pre-existing notions of cubanidad, and what serves me and what doesn’t. I reference writings on the symbolisms of a possible “disparate Cuba”, on cubanidad and queerness, and on Cuban-American cultural values, in order to aid me when receiving testimonies from the participants in this study, confronting their own cubanidad through their reproductive histories.

I remember hearing stories about my great-grandparents running a small dry cleaners in Havana, how everyone in the family would work with textiles. Most of my female relatives are proficient in sewing, knitting, and crochet. They embroider tablecloths and made my Halloween

costumes. At the end of her life, my great-grandmother made *natilla* (creamy custard), knit all her great-grandchildren hats, and conversed with her dead relatives. I’ve been told many times about her gift of clairvoyance, and how it shaped her relationship to the Church. Like her, other family members have different connections to religion, whether it is Catholicism, Santería, or spiritism. I think about my grandfather and his machete slicing open coconuts for me and my cousins to eat on fishing trips. I also think about Cubans and the sea, and I feel almost positive that through my mother I am indelibly attracted to water, and being near the rhythm of the ocean. I explore my *cubanidad* through my senses, through colors, tastes and sounds. My education has allowed me to locate the circumstances of my family’s migration and processes of assimilation using a critical historical and political perspective. My immediate family began to the process to leave Cuba after their dry cleaning business was absorbed by the state during the Revolutionary Offensive of 1968. With the goal to eliminate any existing bourgeois sentiments in Cuba’s public and private spheres, the Castro government began to incorporate small businesses (restaurants, laundry mats, small bodegas, etc) into the socialist state. Along with crackdowns of what was deemed as flamboyant, the arts and homosexuality, my family’s small dry cleaners was included in this purge. When prompted, my relatives will cite this as the event that cemented their decision to leave Cuba on Lyndon Johnson’s Freedom Flights, after applying for visas.

I grew up in rural Washington State, with the only connection to Cuba being my mother. As I have aged and developed my own hobbies and tastes I have found Cuba personally through cooking, art, and how I relate to my body. My concept of femininity, as it has been shown to me through my mother’s family, I find to also be very Cuban. “Beauty is pain”, my grandmother said.

to me as she showed me how to pluck my eyebrows. I see “femininity” expressed in my Abuela’s position within the household. It seems to me that machista culture, like all patriarchal hegemonic systems, requires that “femininity” consist of patience, dutifulness, and general good natured-ness. When I create something (art, writing, food etc) I always think of my mother and grandmother and great-grandmother sewing, knitting, cooking, applying makeup, making something beautiful for the sake of themselves, and their family, as an extension of the Self.

Throughout the years I have witnessed the women in my family performing traditionally feminine tasks, and I now honor my mother and my ancestors through describing their specific connotations of the labor they are required to perform in order to be perceived as “feminine”. For me, this includes labor placed upon women to be totally responsible for their reproductive choices. How cubanidad constructs femininity directly includes attitudes about reproduction; pregnancy, child rearing, family planning. I have learned about these concepts from my “feminine” family members who are Cuban-American, therefore, how much do my ideas about safer sex, having children and caring for them safely and adequately differ from my Cuban peers? From my other American peers? I look at completing a more whole understanding of “ethno-reproductive cultures”, specifically, one that has been cultivated in Cuba before and after the Revolution.

In Havana, USA María Cristina García regards the study of how the arrivals of different migrant groups have created and performed the Cuban-American identity, acting like a door through which to explore greater concepts of cultural assimilation. García argues for centering

95 Building on Robbie Davis-Floyd’s “Ethno-birth cultures” from “The Technocratic Body: American Childbirth as Cultural Expression” (1994).
Miami as a starting point to document interactions between various Latinx cultures and being “American”.96 I enjoy reading about the first experiences of American culture that newly immigrated families are subjected to, most frequently taking place inside of a Publix super market somewhere in South Florida. I pay attention to how the narrator relates their new location to the one they have left behind. Cristina García’s character Pilar from *Dreaming in Cuban*, the headstrong teenage artist of the del Pino family, feels stuck within conservative American culture, and longs for the Cuba of her childhood. The climax of *Dreaming in Cuban* depicts Pilar’s return to Cuba, and to her grandmother Celia. Pilar takes part in the joyful small rituals of family that she did not experience with her parents in New York; meals are shared, secrets are exchanged and altruistic sacrifices are made for other family members. At the end of her stay in Cuba, Pilar and her Abuela look out at the sea. Pilar notes her guilt of feeling torn between the country where she was born and the city she grew up in. She expresses that she does not feel at home in either location: “I’m afraid I’ll lose all this, to lose Abuela Celia again. But sooner or later I’d have to return to New York. I know it’s where I belong- not instead of here, but more than here. How can I tell my grandmother this?”97 Meanwhile, Celia, the matriarch of the del Pinos, looks out at the Caribbean ponders why it brings her peace, and why it makes her children restless and filled with longing for another life. Celia and Pilar voice their misery at being caught in between the ideological battles of the “men with power”, who create the national borders and immigration policies that separate them from the ones they love: “Don’t you see how they're

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carving up our world? How they’re stealing our geography? Our fates? The arbitrary is no longer in our hands. To survive is an act of hope.”

While researching in Cuba, I had the opportunity to meet with my second cousins who lived in the Havana suburb of La Vibora. They opened their home to me and made me a three course meal. The matriarch of that branch of the family, Ada, nearing 75, asked me about my mother and brother, aunts and uncles. She hadn’t seen my immediate family since the ‘80s. They had questions for me, I had many questions for them, including whether they were happy living in Cuba, or could they see themselves trying to immigrate. The room went silent. A cousin tentatively answered for the table that they weren’t necessarily happy, but they were content. They had no intention of uprooting their stable, beautiful, but sometimes not-easily sustained operations of the family to a different country. They referenced the feeling of separation from the rest of the family as a shadow of the Cuban experience. They thought of what a life elsewhere would look like, but remained committed to family being the mainstay of the kinship’s consciousness.

I viscerally remember cringing from the shame I felt. I was here in Havana for 3 months studying at my leisure, leaving the country as I so pleased, while my family across the Florida Straits participated in La Lucha (the struggle of daily life) to find the shrimp and cheese for the dish they prepared for me. My body can exist both in America and in Cuba, with little restrictions on my transnational activities. I feel guilt, shame and gratefulness for the ease with which I can migrate, which is a completely different experience than my family has had, or that even my mother has had.

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98 Ibid. page 99.
I use the work of queer theorist José Muñoz as he speaks to “guilt” as an aspect of cubanidad, and even alludes to imagining the idea of cubanía as being separate from physical location. This concept of what Muñoz calls “Greater Cuba” extends beyond national borders to include the entirety of the Cuban experience. Muñoz uses the work of Cuban visual and performance artist Tania Bruguera to show how Cuba’s history becomes fragmented and transformed depending on the perspective of the narrator. Muñoz cites one of Bruguera’s performance El Peso de la Culpa in which she is seated in front of her home in Havana, inviting visitors to crowed around to watch. She wears a lamb carcass on top a white dress and sits in front of a tapestry made from her own hair. Bruguera begins to eat from a jar of dirt placed before her, symbolizing the internalized guilt of the collective Cuban consciousness. While the lamb alludes to a sacrificial offering in ceremonies of Santería, the tapestry of the artist’s hair and jar of dirt represent the constitution of cubanidad, meaning, the body exists as a transient object through which to experience Cuban history:

“In this piece I specifically refer to the collective suicides of the indigenous Cuban people during the Spanish occupation. The only way that some of them could rebel – as they didn’t have any weapons and they weren’t warriors by nature – was to eat dirt until they died. This gesture, which has remained with us more as a historical rumor, struck me as hugely poetic. In a way, it speaks to our individuality both as a nation and as individuals. Eating earth, which is sacred and a symbol of permanence, is like swallowing one’s own traditions, one’s own heritage, it’s like erasing oneself. It’s electing suicide. What I did was take this historical anecdote and update it to the present.”


100 First performed during the Fifth Havana Biennial, 1992.

Bruguera’s performance shows how Cubans are unified in the violent colonialist beginnings of a country so divided by migration and ideology. The artist’s use of popular symbols to demonstrate how “guilt” is internalized through by eating the salty earth, refuses to play into the “Othering” of both the exiles and of islanders; while Castro’s Other is the *gusanos* (literally meaning worms, referring to the exiles), conservative Cuban-Americans see Castro’s socialism as their Other.\(^\text{102}\) Muñoz uses Bruguera’s performance to theorize that Cubans on or off the island are united by our common history of colonization, genocide, and slavery. Bickering between revolutionaries and the exile community gives way to the greater reality of who/what is to blame for Cuba’s misfortunes. A more fitting solution would be to continue the process of de-colonization, that can allow Cubans to be better able to internalize our guilt, and remedy the issues that need our attention the most, i.e., racism, sexism as a result of white supremacy, brought to the island by its colonizers.\(^\text{103}\) As Muñoz adds, “Bruguera’s work dramatically renders the challenge and political imperative to resist the urge to project guilt out on the Other and instead understand its incorporation into the Greater Cuba’s disparate body.”\(^\text{104}\)

Bruguera’s art, along with Cristina García’s novel, clarifies to me that the Cuban-American lived-experience plays out in relation to where each Cuban-American or Cuban is located. In this way, we are each individually linked to Cuba and *cubanidad* uniquely, intricately. Like Pilar in *Dreaming in Cuban*, I feel the obligation to blame someone or something for the division of families through exile, and to feel guilty when I think about my Cuban-American-

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\(^\text{102}\) Muñoz (2000), pg. 252.

\(^\text{103}\) Ibid. pg. 256.

\(^\text{104}\) Ibid.
ness, or lack thereof. I think of authoritative figures engaged in a battle of political ideologies, creating embargoes and migration restrictions that “carve up the world”, and Cuban kinship networks. While Bruguera’s ingesting of the earth asks me to think why the act of “othering” must exist within the discourse of cubanidad, I also I think to the character Pilar, wherein she exclaims, exasperated: “…I felt like my destiny was not my own, that men who had nothing to do with me had the power to rupture my dreams, to separate me from my grandmother.”

When I locate myself within this ”Greater Cuba”, I am often overwhelmed by my contrasting ideas of not only what it means to be Cuban, meaning, how to talk about my family’s migration; why it occurred and even, who to blame for it. I try to keep my mind open to the heavily multi-faceted realities of the Cuba of today, especially while relating my travels to the island to my family members. During family gatherings I am interrupted with many “Yes, but…”s, followed by a negative statistic or fact about the Cuban government and its many human rights abuses that I am somehow forgetting when I speak positively of Cuba. Recently, however, I have had many fulfilling and lovely conversations with my mother and my grandmother about their roles as Cuban-Americans, and the many nuances they are subject to while inhabiting this identity.

Tania Bruguera’s piece reminds me to take the meaning of my cubanidad into my own hands. Cuba’s isolation in relation to the US is a placement that keeps me separated from my roots, from my family, and hinders them and the rest of the Cuban people from prospering economically. Bruguera’s piece reminds me to channel the anger, guilt, and blame I feel in

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105 García (1993), pg. 200.

regards to my *cubania* (what has been lost to cultural assimilation, and what is geographically inaccessible to me) into the perspective of social justice. Bruguera’s literal eating of dirt is symbolic ingestion of Greater Cuba’s use of blame. Until Cuban-Americans can swallow our own guilt and discontinue our use of scapegoats, we may realize there is no one to blame but ourselves. I focus my critiques of Cuba on how they are attached to white supremacy, which still pervades concepts of race, gender and sexuality in the entirely of Muñoz’s Greater Cuba. Much like Pilar from *Dreaming in Cuban*, I am angered by the “powerful men” who have “carved up our geographies” and have created physical and ideological chasms between Cubans and Cuban-Americans.

Reading Flavio Risech’s “*Political and Cultural Cross-Dressing*”, an assessment of second generation Cuban-American identity, has greatly informed my grasp on what it means to create a transnational understanding of where Cuban-American queers fit into the greater, disparate Cuba that Muñoz advocates for.\(^\text{107}\)\(^\text{108}\) Risech relies on the importance of his journeys back to Cuba, and the emotional attachments and vacancies felt while traveling to his birthplace. He realizes while there that his previous conceptions of Cuba have been formed by his family who vehemently oppose the Cuban State and communism, and who have revealed to him the connection between political and sexual deviancy. He references the *gusano* stereotypes of Raul Castro, portrayed in Cuban exile communities as a *maricon*; a queer, the antithesis to the construct of appropriate masculinity. Flavio remembers that this was his first encounter with depictions of homosexuality. He recalls a cartoon depiction of Raul Castro in a satirical exile

\[^{107}\text{Risech, (2015).}\]

\[^{108}\text{Muñoz, (2000).}\]
publication, in which he is dressed in high heels, and has styled hair. Flavio uses this experience to discuss the hypocrisy on both sides of the Florida Straits: While exile leaders point fingers at the Castro’s persecution of queer Cubans during the early years of the Revolution, “traditional” values of cubanidad, including, outdated expectations of embodied masculinity, are used to shame or silence Cuban-American queers. Hence, expressing your queerness in Miami or Havana is inherently linked to the histories of how each community has respected or disrespected its LGBTQIA citizens. Queer Cuban-Americans are challenged with the task of carving out spaces of acceptance within exile communities whose leaders are “ring wing, straight, white and male”, and who decry homophobia in Cuba post-Revolution, without acknowledging that it has existed on the island before 1959. The fact remains that homophobia is not a product of socialism, as right-leaning exile communities would have the world believe.

Inversely, Flavio discusses the discrimination that queer Cubans suffered at the hands of Castro, and this section of his piece reminds me of Reinaldo Arenas’ autobiography Before Night Falls, which I read while living in la Habana. Arenas’ text depicts his struggle to survive as a queer artist during the early years of the Revolution. His writing is censored, he is outed as a queer man by his colleagues, and is sentenced to serve time in El Moro, a colonial-era Spanish fortress used by the new Revolutionary government as prison for political prisoners. Escaping to the United States during the Mariel boat lift, Arenas lives out the rest of his life in New York

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110 Ibid.
111 Ibid.
until dying of HIV/AIDS in 1990. His work is often canonized by the right-wing exile communities, or by any opponents of communism, who use Arenas to exemplify the violations of human rights so frequently referenced while talking about Cuban socialism. Arenas’ struggle against censorship, the backlash against his openness about his sexuality, and the circumstances of his death, for me, serve as hinderances from discussing my own queerness with my family. Instead of portraying Arenas as a martyr, and using his art to sharpen the discourse about the Cuban State and queerness, exile communities could use Arenas’ story to explore the circumstances of Latinx queers living in the United States. I think about Arenas’ writing in connection with Flavio’s discussion of renegotiating a queer, Cuban or Cuban-American identity. I have seen older relatives struggle to embody their queer identities, but I have no idea how they think of their *cubanía* and its relationship to their sexuality.

For this reason among many others, I avoid the topic at all costs with my family. I make the assumption that because my ideas of femininity have been shaped by my relationship with *cubanía*, my encounters with *cubanidad* have left me feeling like my queerness is in conflict with what makes me feminine. As untrue as I find this statement to be for myself, I’m finding that unlearning this concept has started with being in contact with other queer Latinx people, family and friends alike. Flavio Risech points out the “deafening silence” in the golden enclave of Cuban Miami, when addressing (or not addressing) the HIV/AIDS epidemic in the city, which was reported to have the fourth-largest amount of cases in the country. He argues that Cuban

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113 Ibid.
115 Risech (2015), pg. 536.
Miami’s encounters with the HIV epidemic have recalculated Cuban-American homophobia. As many queer Cuban-Americans were “outed” once they contracted the virus, Miami was made to reconsider what “queer” truly looks like, now that they are aware of the many varieties of queerness other than effeminate mariconería. Flavio adds that the trend for Latinx-Americans to incorporate American queerness into their identity is profoundly changing the circumstances of queer individuals in not only Miami, but Cuba, and the rest of Latin-America. By integrating queer identity with Latinx identity, we are thrown into the “homogenized” categories of globalized queerness, which Flavio says “simultaneously denies our differences and tokenizes us as examples of its colorful diversity.”

This chapter in Flavio’s piece makes me consider what I have refused to acknowledge or explain to my family about my sexuality, or what I have left out of the full picture of myself, in order to preserve my cubanidad. This process of reflection on how I have constructed what it means to be Cuban, feminine, and queer have defined more clearly how these facets of myself can exist in harmony with one another, instead of canceling each other out, as I have been lead to believe. I decided to look at anthropological explanations for what I have associated with being the values of first-wave Cuban-American cubanidad, in which I situate my own family.

Javier Fernández’ dissertation for the University of Georgia, “‘The Girl is Born to be a Mother, the Boy is Born to be a Gentleman’: Gender and National Identity in a Cuban Exile Cultural Organization, 1962-1974” was founded on extensive research on Cuban-American

116 Ibid.
117 Ibid. pg. 537.
118 Ibid. pg. 538.
attempts to recreate the conservative values of white, upper middle class Cuba in exile, during the early waves of migration after the Revolution. Fernández looks at the efforts of the Cruzada Educativa Cubana, formed by members of the now “disgraced” bourgeoisie families that had been some of the first to flee Socialist Cuba, with the goal to disseminate traditional cultural values of cubania.\textsuperscript{119} Operating on the promise to maintain proper values of Christianity and devotion to the family within these newly formed exile communities in Miami and New York, the CEC sponsored cultural pageants, youth groups and seminars designed to empower young Cuban-Americans to remember the norms of their homeland.\textsuperscript{120}

In order to guard against the threat of Americanization, and the Castro government’s re-definition of gender roles, the CEC was an attempt for the exile communities to recreate the values of Cuban high society. Their version of cubanidad was one convinced that the role of the mother was a title that was being slowly eroded by the Revolution in Cuba, as well as the increase in Cuban-American women going into the workforce after arriving in the United States.\textsuperscript{121} In Cuba, says Fernández, women were encouraged to participate more fully in the Revolution through shifting ideologies, and the logistical need for a greater work force.\textsuperscript{122} Women were trained in combat and to cut sugar cane alongside men; a concept that was previously “unheard of” for white women. The implementation of the social responsibilities of Che Guevara’s “New Man” and “New Woman” of the Revolution, regarded that “la casa” was no

\textsuperscript{119} Fernández, (2004).
\textsuperscript{120} Ibid.
\textsuperscript{121} Ibid.
\textsuperscript{122} Ibid. pg. 21.
longer simply a woman’s domain. The role of the home and the private sphere in Cuban society was now seen as a “symbol of an old bourgeoisie order, now displayed by an egalitarian ethos demanding of both men and women a public commitment to a new way of life.”

However, historian Louis Perez argues that this demand did little to change men’s patriarchal attitudes, which in turn did little to hold men accountable to the duties of the home. His critique remains that this determination for social change fell “considerably short” of eliminating “sexual discrimination and patriarchal values”. Women were still greatly underrepresented in traditionally masculine jobs. The Family Code of 1975 was passed with the idea to mandate equal participation of both husband and wife to assist with domestic chores and child rearing. Fernández argues that this development was greatly accepted by the public, but was not enough to completely change the attitudes of men to more fully accountable to lend a hand with matters within the private sphere. A survey conducted in the mid 1970s which asked women why they “avoided leadership positions in state run enterprises” found that 80 of respondents cited housework and childcare as to why they were unable to take up active roles in the State department(s).

Across the Florida Straits, anti-Castro exile publications from Miami like El Habanero, frequently wrote about the threats to dissolve the sanctity of the family, seen in Castro’s apparent lack of distinction between the sexes. Dr. María Gómez Carbonell, one of the founding members of the CEC, and a contributor to El Habanero, often addressed this erosion in values, brought on

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123 Ibid, pg. 23.
by the “destruction of the country [Cuba] and the subjection of its people to the most infamous, grotesque, insolent regime known to history.”

In order to return to the *Cuba de Ayer*, or at least, to create a version of it in the United States, Carbonell emphasized the protection of Cuban-American children from Castro-ization, and Americanization. Her version of *cubanidad* placed the nuclear family at the center of replicating her Cuba of yesterday. In an episode of her 1966 radio broadcast, *La Escuelita Cubana*, Carbonell still had hopes of one day recapturing the island from communism, in order to rebuild the traditional, white, roles of gender and race that had become undone with *fidelista* policies. Her hope was to do so with proper education for the newer generations of young Cuban-Americans, who would one day be better equipped to take back the country for the upper classes; their families being the most scandalized by the social and economic transformations happening on the island, as they had the most to lose from these changes. Says Carbonell, “The family, dear child, is and always shall be the most beautiful institution of a civilized society.” She goes on, “The most heinous crime perpetuated by the communist regime in Cuba has been upon the family, poisoned by evil doctrine, tortured by terror…hungry, naked, dispersed or dead. You, the only hope for resurrection, had better base the decisive force with which you will rehabilitate the new republic upon the love of parents, grandparents, brothers and sisters, and diverse family members.”

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127 Fernández (2004), pg. 6.

128 Ibid. pg. 31.

129 Ibid.

130 May 7, 1966 broadcast, Box 4, Folder 53, Cruzada Educativa Collection (CHC 302) University of Miami Cuban Heritage Collection
I see this rhetoric used by ultra-conservative Cuban-American legislators like Ted Cruz and Marco Rubio. Their “crusade” against Cuban communism could be seen as a continuation of the work of the CEC. Using cloaked language to disguise their racism, sexism and homophobia, they set out on two very successful presidential campaigns that ran on platforms of religious fervency, outright hatred of reproductive rights, and the rights of the poor.\textsuperscript{131,132}

Ideologies, like those of “old Cuba”, which the Cruzada Educativa Cubana sought to revive in America, have created political figures like Cruz and Rubio. The benefits their families received from white supremacy in Cuba were some of the same benefits which they had to lose with the Revolution. In the United States, they are champions of the capitalist work-ethic. They frequently talk about their families’ immigrant struggles, and the possibilities that capitalism can afford migrants to this country, without acknowledging the privileges they are inherently positioned to receive as white Cubans, and as men.\textsuperscript{133} They also do not speak on the United States’ relationship to Cuban immigrants, which takes a drastically different approach than in its policies regarding any other ethnic, immigrant group.\textsuperscript{134} Their version of \textit{cubania} would be interesting to discuss. I would guess that Rubio’s and Cruz’ ideas of what it means to be Cuban have fit precisely with the Alt-right movement’s push for a return to racial segregation, constricted gender roles, and permanent hegemonic Christianity. As politicians, they have gained momentum and popularity within the American Right because their attachment to white

\begin{footnotes}
\footnote{\textsuperscript{131} Heching (2016).}
\footnote{\textsuperscript{132} Edsall (2016).}
\footnote{\textsuperscript{133} Alvarez & Fernández (2016)}
\footnote{\textsuperscript{134} See Molina (2008) for further history on the Cold-War-informed US foreign policies regarding Cuban immigration.}
\end{footnotes}
supremacy is a value that they place at the center of their cubanidad, and translates to fit the values of US conservatism. Their version of cubania, a branch off the tree that the CEC has tried to make grow in America, is highly dangerous.

I argue that these supposed leaders of the Miami Cuban-American community, especially true of Florida Senator Marco Rubio, are aligning themselves more with white, Anglo-America than that of a more modern sense of what it means to be Cuban. I’m disheartened that these two figures have been representative of Cuban-Miami, when they are simply products of the culture of the first wave of immigrants to flee socialist Cuba. The families of both Cruz and Rubio had the most to gain from American Imperialist influence pre-Castro, and stood to lose the most after their holdings were dissolved, and their ideologies smashed. The forms of white supremacy that white, racist, sexist and homophobic members of Cuban-American Miami cling to, is the same white supremacy that is so appealing to white America, as they see their ideals eroded by progressivism of any kind.

I commit myself to continue to explore my cubanidad, if it truly does exist. I connect with my cubania through my femininity, and try to remind myself to mold what is “feminine” into what works best for me, and all the aspects of my identity, how I live in my body. It does not serve me, or the rest of the bodies that inhabit the Greater, disparate Cuba to deepen the chasm between us and them, those on the island versus those off the island, communism versus capitalism. More often than not, the Cuban people are caught in the middle of the US’ restrictive, anti-Castro policies that divide families indefinitely through immigration quotas, and the US’ embargo that continues to limit the economic growth of the island. There are wrongs to be righted on both sides of this dispute. Abuses by the Cuban government to erase our collective
colonialist history, of silencing queers, Afro Cubans and dissenters of Revolutionary values, are matched with homophobic, racist and sexist reactions to socialism from Cubans in America. Going back to Tania Bruguera’s performance piece, in which she ceremoniously eats dirt in the likeness of indigenous Cubans who once committed suicide in this manner to escape a life of slavery, I try to incorporate her non-partisan approach into my understanding of cubanidad.\textsuperscript{135} I try to sit with the weight of this guilt that I feel, especially after having worked and lived in Cuba. I feel strongly about remembering Flavio Risech’s closing remarks in his piece, wherein he advocates for second generation Cuban-Americans to continue to carve out what it means to “straddle borders”, living ambiguously in bodies that are neither “meant” to be here nor there.\textsuperscript{136}

In crafting a broader sense of what has developed many, intersecting ethno-reproductive cultures in both Cuba and Cuban-Miami, I’m left even more puzzled, but curious to find out how I fit into these cultures. I hear whispers of the teachings promoted by the Cruzada Educativa when I notice family members subverting conversations on queerness and sexuality by changing subjects, or promising to finish the discussion in private. When I talk to my mother or my grandmother about their connections to the spirit world, about family members who were said to be clairvoyant, and about family members who practiced forms of spiritualism, that’s when the conversation becomes more fluid. As I grow older and become more knowledgeable about the different pieces of my sense of how I relate to my Cuban-ness, I’ve found it easiest to not force open the barriers created by my relatives’ cubanidad that prevent them from being candid with me about our family histories. I think of how easily my grandmother opened up to me,

\textsuperscript{135} Muñoz, (2000).

\textsuperscript{136} Risech (2015), pg. 539.
unprompted, about her abortions in Cuba and Miami. The more I become knowledgable about
the specifics of Cuban migration, Cuban interactions with American society, and how we each
relate to Cuba itself, the stronger I feel that I will need to make this definition of *cubanía* as
personal as possible. I commit myself to uncovering experiences of *cubanidad* without forcing
conclusions, confessions, or categories of information. I commit myself to identify the structures
in the Greater Cuba that enforce it upon Afro-descendent Cubans, queer Cubans, and Cuban
women. I commit myself to understanding why I talk about my body, my health, my sexuality in
the ways that I do, and the ways my mother has talked about her body, and so on.
Conclusion
Conclusion

To conclude, this piece only feels like the beginning of an opportunity to fully investigate what it means to exist within the cultures that define us. I’m caught up in the sincerity of the voices of my interviewees. A long pause, a catch in the throat brings forth remembrance, meaning. Does the silence convey pain, remembrance, or rage? Full disclosures, or parts that are left out of these narratives, what is said and shared, and why? What continues to be left out of the story? I’m struck with the abilities I’ve gained through this process to heal, by exploring realities that are not my own. Confronted by the histories of our bodies and the bodies that have come before us, how do we take into account just how tangibly trauma resides within, and is carried across oceans? I use Cuba as a starting place for this form of analysis, because of my accessibility to the island as not only a place but as an identity. I suggest that the implementation of socialism in the nation of Cuba is perfect for study; drastic shifts in social structures, like the creation of nationalized healthcare, advocating for new gender roles and norms, and the shifting economies of the State and private sectors help me to imagine what could be while we struggle for achieving reproductive justice within the States. What do these stories tell us about our collective and individual pasts? How, in each country, do these stories take place within, and relate to, reproductive policy through religion, via white supremacy?

With our voices, we create imagery for the realities of the spaces we inhabit. In order to make a space feel like a home, we need to feel comfortable. Will we feel at ease, and able to develop a learning and growing relationship with our body in these spaces? Moving forward, what if we used this type of gaze, personal narratives that fluidly influence understandings of socio-political histories, to conceptualize what the many ethno-reproductive cultures of the
United States take form as? I argue that we will have to consider the globalization of Christianity, spread through white supremacist structures, into any account of how reproductive healthcare is distributed in this country. I also suggest that all we have to do is simply listen, record, and take action. Who are the most vulnerable populations under the Trump administration? How do we care for them using the lens of ethno-reproductive examination to achieve justice?

During the revamping of deportations and the escalation of xenophobia from our current government, families are torn apart. Ethno-reproductive cultures rearrange and format themselves around past and present legislation. Taking into account the United States’ imperialist relationship with Latin-America and its initiatives to stop socialist movements in the region at all costs, I note that policies like Wet Foot Dry Foot allow Cubans to find “asylum” in this country, faster than most other migrant groups. As Cuban-Americans, with our privileged status in mind, we must advocate for the inclusion for other immigrant communities from Latin America, Syria, or those who seek a better life for themselves or their families for any reason. It is in our best interests to continue to use a reproductive rights framework to work for equal healthcare access. Deconstructing public policies that stem from racist, xenophobic and homophobic attitudes within this country is a fine starting place to reach “equity” in reproductive healthcare, while creating the bigger picture of American ethno-reproductive cultures.


138 Under the Cuban Adjustment Act of 1966

139 Huddleston & Pascual (2010).

140 I use Masters, Lindhorst, & Meyers (2014) study as one example for beginning to define United States-based ethno-reproductive cultures. The authors look at stereotypes about sexuality and parenthood used by social workers to negatively label African American women receiving welfare, and its embedded effect on welfare legislation.
From current legislation, to the US’ histories of policing those who are deemed unfit to reproduce, I nudge the reader to look into investigating ethno-reproductive cultures in this country, or wherever they call home, further. Carrie Buck, sterilized by her doctor in 1927,\textsuperscript{141} deemed too “feeble-minded” to bear children, harkens to the complicity of the State to use eugenics to develop a more pure, sanitized population.\textsuperscript{142} This is also demonstrated with the thousands of instances wherein women of color were unknowingly sterilized by care providers, most recently with allegations against the state of California, who recommended sterilizing thousands institutionalized and incarcerated Latinx women, as a form of birth control.\textsuperscript{143}

Another example of state sanctioned coercion that directly influences how US ethno-reproductive cultures are shaped is seen in the passing of the bill known as FOSTA/SESTA into law. As the bill reverses Section 23 of the 1996 Communications Decency Act, this ruling now holds websites and publishers accountable for instances of sex trafficking conducted on their platforms. However, the bill does not distinguish between consensual sex work and sex trafficking. As more and more platforms scramble to comply with the new legislation, sites like Backpage and Craig’s List no longer serve as a tool for entrepreneurial sex workers to screen potential clients and network with other sex workers, creating the necessity for high-risk street work, in which there is more room for whore-phobic violence, and even death.\textsuperscript{144} By furthering the criminalization of sex work, this legislation prohibits sex workers from achieving economic

\begin{footnotes}
\item[141] This references the subsequent Supreme Court case \textit{Buck v. Bell}, which permitted compulsory sterilization of the “intellectually disabled”.
\item[142] Hahn (2018)
\item[143] Novak & Lira (2018)
\item[144] Romano (2018)
\end{footnotes}
prosperity, and creates new barriers of stigma in order for workers to attain proper reproductive healthcare coverage. Under the analysis of ethno-reproductive cultures, the US’ ties to eugenics and its erasure of consensual sex work are just a few examples of what entry points we are able to use to look at the realities of reproduction. I remind the reader that this area of study is vast as it is dense, but the product is indicative of what is possible for the reproductive justice movement when we leave no one’s economic, social, racial and embodied stories out of the picture.

If we keep in mind how reproduction takes place not only in the body, but in the institutions that prevent or coerce the individual into reproducing (or not reproducing), we take our activism to new heights of effectiveness. Investing to learn how each student or patient we meet, in the classroom or clinic, as educators or medical personnel, can contribute to how we can better serve each of these individuals. Keeping in mind how each friend, family member or coworker has been molded by cultural attitudes about safety, sex, and following faith, we allow them the vastness of emotional space to be heard. In this way, we can also better support our loved ones who are struggling with the psycho-somatic aftermath of an abortion or stressful/traumatic labor experiences or pregnancies. I ask the reader to think about when they first talked about sex with their families, when they became familiar with abortion and pregnancy. I stress that the reader pay attention to nuance, what was portrayed as hard to talk about, easy assumptions, obvious positives or negatives. Perhaps, there is a lot to unpack there. And perhaps, when we try to tackle how we have fit into our own ethno-reproductive cultures, we can use this framework to be more compassionate, knowledgable advocates for the lives, bodies and stories of our different community members.
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